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MEDICATION MANAGEMENT POLICY

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1 Purpose

This policy describes the method by which Bethanie will safely and appropriately manage medications. The Medication Management Policy addresses the roles and responsibilities of health professionals and customers in compliance with relevant legislation, codes of practice, regulatory requirements and existing policy.

It supports Bethanie's commitment to maintaining the optimum health and wellbeing of all customers by ensuring medications are managed safely and correctly. Bethanie has a culture of inclusion, acceptance and respect for consumers and supports consumers to exercise choice and independence.

2 Scope and Applicability

This policy applies to all Bethanie aged care homes and home care services where medications are managed by Bethanie. In addition, this policy supports the principles outlined in Bethanie's Antimicrobial Stewardship Policy, and the requirement to monitor and manage psychotropic use within Bethanie aged care homes.

Bethanie acknowledges that whilst staff do not prescribe medicines, they have an active role to play in customer advocacy and clinical assessment to ensure the safe and appropriate use of medicines.

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3 Definitions

Term	Definition
Administration of medicine	The process of giving a dose of medicine to a customer or a customer taking a medicine.
Adverse drug reaction	A response to a drug that is unintended.
Adverse medicine event	A particular type of adverse event where a medicine is identified as a causal factor.
Authorised prescriber	A Medical Practitioner, Nurse Practitioner, Dentist or other authorised prescribers, who are responsible for the prescription. of all medication.
Care or support worker	An unregistered health worker providing direct care in the aged care environment. Some workers may have completed. vocational training.
Customer	A term referring to patient, customer or customer who receives care or services from Bethanie.
Complementary and Alternative Medicines (CAMs)	CAMs includes herbal, vitamin and mineral products, nutritional supplements, homeopathic medicines, traditional Chinese medicines, Ayurvedic medicines, Australian Indigenous medicines, and aromatherapy products regulated under the Therapeutic Goods Act 1989. Other terms include 'natural medicines' and 'holistic medicines'.
Consent	The procedure whereby a customer consents to, or refuses, an intervention.
Dose Administration Aid (DAA)	A device or packaging system, such as blister packs, bubble packs or sachets, for organising doses of medicines.
Medication Competent Enrolled Nurse (Division 2)	A person who has completed a Nursing and Midwifery Board of Australia (Board) approved educational program including medication administration, and demonstrated competence for practice. They must have unrestricted registration under the Health Practitioner Regulation National Law Act (WA) 2010 and its Regulations.
High risk medicines	High risk medicines have an increased risk of injury or harm, even when used as intended. Examples of high risk medicines include anti-coagulants, digoxin, chemotherapy and cytotoxic agents, insulin, potassium and other electrolytes, narcotics and other sedatives.
Imprest Medication	Imprest medication is approved medication stock held at Aged Care Homes for emergency use only under the requirements of the Poisons Licence.
Organisational Medication Advisory Committee (OMAC)	The committee provides medication management leadership and governance.
Poisons Permit	Bethanie will hold a valid Poison permit, under the Medicines and Poison's Act 2014, for each home that stores Imprest Medicines. The permits have conditions based on registered nurse cover at the home Level 1 facilities: RN cover 24 hours per day, 7 days per week. Level 2 facilities: Intermittent RN cover only.
Medication chart	Provides a record of the prescriber's clinical intention for a customer's treatment, an order for the pharmacy to supply a customer's medicine, and a record of the administration of the medicine to the customer.

Medication incident	A medication incident is any event where the expected course of events in the management or administration of medications is not followed as per Bethanie policy and procedure. A Customer Incident (CRI) report must be recorded for each of these events.
Medication management	Medication management occurs at both individual and services levels. It includes: How medicines are selected, ordered and supplied? How people take medicines or are assisted to take them? How medicine use is recorded and reviewed? How medicines are stored and disposed of safely; and How medicine use is supported, monitored and evaluated?
Medication reconciliation	The formal process of obtaining and verifying a complete and accurate list of each customer's current medicines and the reason for the medication.
Medication review	A structured and collaborative examination of a customer's medicines.
Medicine	A substance given with the intention of preventing, diagnosing, curing, controlling or alleviating disease or otherwise enhancing the physical or mental welfare of people.
Non-prescription or 'Over-the-Counter' (OTC) medicines	Medicines available without prescription. Examples are cough mixtures, simple analgesics and antacids.
Nurse-initiated medicine	Involves the selection and administration of medicine/s by a Registered Nurse from a list of approved non-prescription medicines, as per Bethanie policy.
Nurse Practitioner	A Registered Nurse endorsed by the Nursing and Midwifery Board of Australia.
Pharmacist	A person registered by the Pharmacy Board of Australia to practice as a pharmacist, under the Health Practitioner Regulation National Law Act (WA) 2010.
Accredited Pharmacist	A registered pharmacist, who has completed specified education programs or examinations approved by the Australian Association of Consultant Pharmacy or the Society of Hospital Pharmacists Australia. Bethanie will contract an accredited pharmacist for purpose of external medication reviews, medication advisory services and education.
Polypharmacy	The concurrent use of five or more medicines.
Quality Use of Medicines (QUM)	QUM involves selecting management options wisely, including non-medicine alternatives, and using medicines safely and effectively to get the best possible results.
Registered Nurse	A person who has completed the prescribed educational preparation, demonstrated competence for practice, and is registered under the Health Practitioner Regulation National Law Act (WA) 2010, and its Regulations.

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4   Policy

4.1   Principles

This policy relates to the following:	
Aged Care Quality Standard 2: Ongoing assessment and planning with consumers	<u>Consumer Outcomes</u>: I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being <u>Organisational Statement</u>: Bethanie undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimizing health and well-being in accordance with the consumer's needs, goals and preferences.
Aged Care *Quality* Standard 3: Personal and Clinical Care	<u>Consumer Outcomes</u> I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me. <u>Organisation statement</u> Bethanie delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer's needs, goals and preferences to optimise health and well-being.
NDIS Practice Standard: Core Module – Management of Medication	<u>Participant Outcome:</u> Each participant requiring medication is confident their provider administers, stores and monitors the effects of their medication and works to prevent errors or incidents. Quality Indicators demonstrated: • Records clearly identify the medication and dosage required by each participant, including all information required to correctly identify the participant and to safely administer the medication • All workers responsible for administering medication understand the effects and side-effects of the medication and the steps to take in the event of an incident involving medication • All medications are stored safely and securely, can be easily identified and differentiated, and are only accessed by appropriately trained workers
NDIS Practice Standard: Module 1 – Subcutaneous Injections	<u>Participant Outcome:</u> Each participant requiring subcutaneous injections receives appropriate support relevant and proportionate to their individual needs and specific subcutaneous injections and medication administered. Quality Indicators demonstrated: • Each participant is involved in the assessment and development of the plan for their subcutaneous injections which includes dosage measurement and calculation. With their consent, each participant's health status is

	subject to regular and timely review by an appropriately qualifed health practitioner. The plan identifies how risks, incidents and emergencies will be managed, including required actions and escalation to ensure participant wellbeing.
	• There are documented written or phone orders by the health practitioner prescribing the medication that trained workers may administer by subcutaneous injection.
	• Appropriate policies and procedures are in place, including a training plan for workers, that relate to the support provided to participants requiring subcutaneous injections and related medication.
	• All workers have completed training, relating specifically to the participant's injection and medication needs and high intensity support skills descriptor for subcutaneous injections, delivered by an appropriately qualifed health practitioner or person that meets the high intensity support skills descriptor for subcutaneous injections. Workers must also have a basic understanding of the participant's related health condition.

In accordance with the Aged Care Quality and Safety Commission (ACQSC) Std. 3 (3)(b), Bethanie understands that customers can have multiple medical conditions and use several drugs together. This means that they are at high risk of medication mistakes. These mistakes can result in hospital visits that could have been avoided, illness and death. This risk can be minimised through effective policies and procedures that support the safe use of medicines.

5   Consequences of Policy Breach

- This policy is binding on Bethanie staff, as per Section 2: Scope and Applicability.
- Roles and Responsibilities in relation to this policy are set out in Section 6 below.
- Failure to comply with the policy may constitute a breach of the Bethanie Code of Conduct and business practices. [Edit as required]

6   Roles and Responsibilities

Role	Responsibilities
Organisational Medication Advisory Committee (OMAC)	The Bethanie Group has an established Organisational Medication Advisory Committee (OMAC). All medication related policies and procedures are reviewed by the OMAC and the Clinical Governance Committee (CGC). The Medication Policy is endorsed by the OMAC and the Medication Procedures are endorsed at the CGC.

	The Bethanie OMAC is responsible for supporting the safe and effective management and quality use of medicines across Bethanie.
Clinical Governance Committee (CGC)	The Bethanie Clinical Governance Committee is responsible for ensuring that adequate and appropriate governance structures, processes and controls are in place across the organisation.
Authorised Prescriber	A medical practitioner, nurse practitioner, dentist or other authorised prescribers, are responsible for legibly writing the prescription of all medication. The order must include full details for the safe administration of that medication. The authorised prescriber is accountable for gaining informed consent prior to any new or changed medication orders.
Pharmacist	The pharmacist's role is to dispense all prescribed medications according to the prescriber's orders. This includes the following: • Appropriate packaging and all information and instructions regarding medication administration. • Provision of a medication profile and signing sheet for each customer. • Provision of a risk mitigation function and will liaise with the prescriber to ensure the clarity of prescribing data.
Registered Nurse/Enrolled Nurse/Medication Competent Careworker/Support Worker Role	The role of the medication competent staff member is to: • Ensure that all medications are managed safely and correctly, as per legislation and policy. For common side effects of administered medications please refer to https://www.nps.org.au/medicine-finder • All Nurses practice within the legislation governing their practice, Nurse and Midwifery Board Australia, as well as the Poisons Act 1964 and the Poisons Regulations 1965. • All Enrolled Nurses and medication competent care/support workers practice under the supervision (direct or indirect) of the Registered Nurse. The Registered Nurse remains accountable for the practice of Enrolled Nurses and medication competent care/support workers.
Student Nurses	The Registered Nurse will retain the accountability in regard to all aspects of student participation in medication administration. Students with no formal nursing/midwifery qualification are not permitted to be involved in the checking of drugs, and in accordance with legislation, students are not permitted to be the signatory in the Register of Schedule 8 (S8) medicines.

7   Committees and Working Groups

Committee / Working Group	Contribution
Clinical Governance Committee	•

8   Related Documents

Legislation
Medicines and Poisons Act 2014
Governance frameworks & policies
Bethanie Medication Management Procedure
Bethanie Antimicrobial Stewardship Policy
Standards and References
National Safety and Quality Health Service Standard 4: Medication Safety (2012)
Guiding Principles for Medication Management in Residential Aged Care (2012).
NDIS Practice Standards and Quality Indicators (2021)
NDIS Quality and Safeguards Commission – Practice Alert for Polypharmacy (2020)
Bethanie Medication Management Procedure (Residential and Community)
Bethanie Antimicrobial Stewardship Policy
Australian Commission on Safety and Quality in Health Care (2012). Standard 4- Medication Safety (p. 34-39). Retrieved from: National quality and safety health service standards.
Guidelines for Medication Management in Residential Aged Care Facilities (2012). Retrieved from Dept. of Health and Ageing
Nursing Practice Decision Flowchart. Retrieved from: Nursing and Midwifery Board Australia
Quality Use of Medicines to Optimise Ageing in Older Australians: Recommendations for a National Strategic Action Plan to Reduce Inappropriate Polypharmacy (2018). NHMRC
Cognitive Decline Partnership Centre, University of Sydney, in Collaboration with the Australian Deprescribing Network and NPS MedicineWise. Sydney, NSW, Australia. ISBN: 978-0-6482658-6-3. Available from: http://sydney.edu.au/medicine/cdpc/resources/quality-use-of-medicines.pdf

9   Document Control

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