I really want to carry on taking my medication independently. How can I stay independent? How do I understand what my medication is for if someone else is supporting me with it? What kinds of medication support can be provided by home care providers?

Will my support plan include all the information so that the care staff can keep me safe?

> I don't want to be rushed taking my medication, will the care staff have enough to support me correctly?



Can the care staff support me with other kinds of medication like creams, ointments and my inhalers? I still want to do as much as I can for myself...what level of support do I need?

What needs to be recorded on my support plan?

Would advice from a GP or Pharmacist be helpful?

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### Why This Guidance Has Been Developed

Local consultations with Assessors and Providers have suggested that information on assessment and support plans can sometimes be too brief or a little ambiguous. Assessors are not trained Health Care Professionals and medication can be a complex area. This guide has been developed to help assessors think about what needs to be considered to ensure service users get the right level of support with medication and how this can be communicated in the support plan.

#### What the Guidance Aims to Do

This guide aims to provide a set of tools to assist assessors to:

- help service users to remain independent with their medications
- help service users to overcome barriers to independence (e.g. large print labels)
- help assessors to adopt a personalised approach wherever possible to medication management
- capture and record the appropriate level of detail on the support plan.

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### Contents

NB Use of the word Provider(s) mentioned throughout this document refers specifically to Home Care Providers

1. Service User Ability or Understanding

It is important to assess a service user's ability to take their medications safely. The following questions may help determine this:

- Do you know what your medication is for?
- Do you understand how to take your medication? (right medication, right route, right time, right dose)
- Do you know what to do if you miss a dose\take too much medication?
- How do you store your medication?
- Do you ever forget to take you medication? If yes, how often?
- Do you use a system to help you to remember to take your medication?

#### 2. GP or Pharmacy Referral

Answers to some questions may prompt the assessor to advise the service user or informal carer to approach their GP and\or Pharmacist for information and advice. See Section 5.

- Would you like more information about your medication?
- Do you think your medication is working for you?
- Do you have any concerns about taking your medication?
- Has your medication been reviewed by your GP in the last 12 months?
- Could your medication be prescribed less frequently to fit in with your home care visits?

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### 3. Dispensing Methods for Medication Support

Service users will be supported with medication in a personalised way, balancing their wishes, needs and risks. Original packaging is the preferred method of dispensing according to the Royal Pharmaceutical Society (RPS) Providers- <u>http://www.rpharms.com/support-pdfs/rps-mca-july-2013.pdf</u> However, an MDS is often a useful tool to aid self-management of medication.

The method chosen should ensure that the following '6 R's' of medication support, which are promoted by CQC, can be demonstrated:



The 6 R's ensure that medication is managed as safely as possible.

**NB: for recording** – Care workers need to demonstrate the '6 Rs' when they record that they have supported with medication. This can be more challenging if the support is from a Monitored Dosage Systems (MDS). For example, it is difficult to differentiate one medication from another when using an MDS.

### 4. Levels of Medication Support

A description of the support needed for service users must be written on the support plan. However, it is also helpful to determine the **LEVEL** of support required with medication. This helps everyone involved (including health and social care professionals) to understand the service user's level of independence with medication as well any support they require (be it via a care worker or an informal carer). Guidance can be found in the following table:

Service User capacity/capability at time of assessment by the	Assessor Recording Guidance
Kirklees Council Assessor:	
LEVEL 0: THE SERVICE USER RETAINS TOTAL RESPONSIBILITY FOR THE MANA	GEMENT OF THEIR MEDICATION
The service user has the mental capacity and physical capability to manage all aspects of their own medication including in relation to creams, drops, liquid medication, patches, inhalers etc. <b>NB Independence may have been</b> facilitated by utilising Assistive Technology or pharmacy support methods (Large print labels for example) as referred to in the table in section 5.	<ul> <li>Record on the support plan that the service user is LEVEL 0 in relation to medication support.</li> <li>Record on the support plan, what (if any) Assistive Technology and/or pharmacy support methods have been used to facilitate this independence.</li> <li>NB It is an expectation that care workers maintain general observation and report to their line manager if they suspect the service users LEVEL is becoming LEVEL 1 OR 2.</li> </ul>
LEVEL 1: THE SERVICE USER RETAINS OVERALL RESPONSIBILITY FOR MAKING	
THEY REQUIRE PHYSICAL ASSISTANCE OR A REMINDER FROM A PROVIDER O	
<ul> <li>Level 1 A - Provider Support – The service user has the mental capacity to make decisions about their medication and understands what they need to take, how and at what time etc.</li> <li>However: They lack physical capability to take/apply/instil etc. the medication and require support from the provider to do this OR they require a reminder</li> <li>Level 1 B - Informal Carer Support – As above but the service user's informal carer manages all aspects of the service users medication</li> </ul>	<ul> <li>Record on the support plan that the service user is LEVEL 1 A- <i>Provider Support</i> or LEVEL 1B -<i>Informal Carer Support</i>, in relation to medication support.</li> <li>If the level is LEVEL 1A - <i>Provider Support</i>, clearly describe on the support plan, the support required with each medication. For example, to remind, to unscrew a medicine bottle, pour out and measure liquid medication from a medicine bottle, to support with an MDS, to press a tablet from a blister pack, to place a tablet in the mouth, to apply ointments, or a medication patch, to instil eye/ear/nose drops, to hold and activate an inhaler.</li> </ul>

LEVEL 2: THE SERVICE USER LACKS CAPACITY FOR MAKING DECISIONS ABOUT THE MANAGEMENT OF THEIR MEDICATION. THE PROVIDER OR AN INFORMAL CARER ASSUMES FULL RESPONSIBILITY FOR THE MANAGEMENT OF THE SERVICE USER'S MEDICATION AND NEEDS TO CHECK THAT						
<ul> <li>MEDICATION IS TAKEN CORRECTLY.</li> <li>Level 2 A- Provider Support</li> <li>The service user does not have the mental capacity to make decisions about their medication or their capacity to do so fluctuates. For example, the service user doesn't understand/always understand what they need to take, how and at what time etc.</li> <li>They may also lack the physical capability to take/apply/instil the medication.</li> <li>Level 2 B - Informal Carer Support - As above but the service user's informal carer manages all aspects of the service users medication.</li> </ul>	<ul> <li>Record on the support plan that the service user is <i>LEVEL 2 A- Provider</i> <i>Support or LEVEL 2 B- Informal Carer Support,</i> in relation to medication support.</li> <li>If the level is LEVEL 2A - <i>Provider Support,</i> clearly describe on the support plan, the support required with each medication. For example, verbally instructing/reminding the service user to take their medication and observing that it has been swallowed and describing any physical assistance required. For example, to unscrew a medicine bottle, pour out and measure liquid medication from a medicine bottle, to support with an MDS, to press a tablet from a blister pack, to place a tablet in the mouth, to apply ointments, or a medication patch, to instil eye/ear/nose drops, to hold and activate an inhaler. Ensure Capacity Assessment has been recorded and a Best Interest Decision documented.</li> </ul>					

It is acknowledged that service users may need different LEVELS of support for different sorts of medication. For example, they may be at LEVEL 0 for support with tablets but at LEVEL 1 A - provider support for support to measure out a liquid. These differences will be described on the support plan.

### **5. Medication Support - Assessment Tool**

The assessor can utilise the table below to assist them to determine the support required with medication for the service user:

Service User Ability Is the service user:	Yes	Νο	Informal carer carries out the task	If answerer is No and informal carers cannot provide support – consider pharmacy/Assistive Technology options which aim to maintain independence. WHEREVER POSSIBLE SERVICE USER OR INFORMAL CARER TO ARRANGE	If answer is no and pharmacy options are not available or not appropriate, refer for Support to Providers (Care Worker)
Able to collect prescriptions/medication from GP/Pharmacy?				If not already in place, arrange for informal carer or pharmacy to collect prescriptions and deliver medication to service user's home.	Providers will not perform this role except in emergency situations
Able to obtain/organise repeat prescriptions?				If not already in place, arrange for informal carer/ pharmacy/ GP to organise	Providers will not perform this role except in emergency situations
Able to return unused/out of date medications to pharmacy?				If not already in place, arrange for informal carer/ pharmacy/ GP to organise	Providers will not perform this role except in emergency situations

Service User Ability Is the service user:	Yes	Νο	Informal carer carries out the task	If answerer is No and informal carers cannot provide support – consider pharmacy/Assistive Technology options which aim to maintain independence. WHEREVER POSSIBLE SERVICE USER OR INFORMAL CARER TO ARRANGE	If answer is no and pharmacy options are not available or not appropriate, refer for Support to Providers (Care Worker)
Able to read labels & directions on medication containers? Able to physically open and remove a tablet from its original container and put the tablet in their mouth?				Arrange for pharmacy to provide large print labels. Arrange for pharmacy to provide screw top lids or larger, easier to grip containers.	If pharmacy option is not appropriate, describe on the support plan as in section 4 above, the support that needs to be given by the care worker, including the estimated time it will take to perform the task/s. If pharmacy option is not appropriate, describe on the support plan as in section 4 above, the support that needs to be given by the care worker including the estimated time it will take to perform the task/s.

Service User Ability Is the service user:	Yes	Νο	Informal carer carries out the task	If answerer is No and informal carers cannot provide support – consider pharmacy/Assistive Technology options which aim to maintain independence. WHEREVER POSSIBLE SERVICE USER OR INFORMAL CARER TO ARRANGE	If answer is no and pharmacy options are not available or not appropriate, refer for Support to Providers (Care Worker)
Able to remember when to take multiple medications?				Refer to pharmacy for possible MDS and/or Pharmacy to print out a simple reminder chart to help the Service User to manage their medication routines. or Refer for Assistive Technology (If a medication carousel is used, record on the support plan, who has responsibility for changing the batteries etc.).	If pharmacy or Assistive Technology options are not appropriate, describe on the support plan, the support that needs to be given by the care worker including the estimated time it will take to perform the task/s.
Able to understand labels & directions on medication containers?				Refer to pharmacy for possible MDS so that the service user can be self-medicating. or Refer for Assistive Technology (for example, medication carousel)	If pharmacy or Assistive Technology options are not appropriate, describe on the support plan as in section 4 above, the support that needs to be given by the care worker including the estimated time it will take to perform the task/s.

Service User Ability Is the service user:	Yes	Νο	Informal carer carries out the task	If answerer is No and informal carers cannot provide support – consider pharmacy/Assistive Technology options which aim to maintain independence. WHEREVER POSSIBLE SERVICE USER OR INFORMAL CARER TO ARRANGE	If answer is no and pharmacy options are not available or not appropriate, refer for Support to Providers (Care Worker)
*Able to pour out and				Explore with the Pharmacist, to	If no alternatives are available/appropriate, describe on
measure liquid medication from a bottle if applicable?				find out if there any alternative methods of dispensing.	the support plan as in section 4 above, the support that needs to be given by the care worker including the estimated time it will take to perform the task.
* Able to correctly instil/use:					Describe on the support plan as in section 4 above, the
<ul> <li>eye drops if applicable?</li> <li>ear drops if applicable?</li> </ul>					support that needs to be given by the care worker including the estimated time it will take to perform the
<ul> <li>nasal drops/spray if applicable?</li> </ul>					task/s.
*Able to correctly use an					Describe on the support plan as in section 4 above, the
inhalation device or oxygen if applicable?					support that needs to be given by the care worker including the estimated time it will take to perform the task/s.
*Able to correctly apply					Describe on the support plan as in section 4 above, the
external preparations (Creams/ointments) if					support that needs to be given by the care worker including the estimated time it will take to perform the
applicable?					task/s.

Service User Ability Is the service user:	Yes	Νο	Informal carer carries out the task	If answerer is No and informal carers cannot provide support – consider pharmacy/Assistive Technology options which aim to maintain independence. WHEREVER POSSIBLE SERVICE USER OR INFORMAL CARER TO ARRANGE	If answer is no and pharmacy options are not available or not appropriate, refer for Support to Providers (Care Worker)
*Able to correctly apply and dispose of medication patches if applicable?					Describe on the support plan, as in section 4 above the support that needs to be given by the care worker including the estimated time it will take to perform the task.
*Able to appropriately and safely store medication if applicable?					Describe on the support plan, the support that needs to be given by the care worker including the estimated time it will take to perform the task.
Other:					

\*Please be aware that care workers may require training to support with some tasks which could result in a delay in the support being provided.

### 6. Summary Medications Checklist for Assessors

The following can be used to check that all the relevant information has been provided and all relevant actions have been taken:

Information/ Actions Required	Tick when completed
Name and contact details of GP, Pharmacist and any other relevant healthcare professional	
Relevant health details and any medication allergies	
Highlighting if known any homeopathic and 'over the counter' medications. Assessor to be aware that the Providers may not be able to support with these due to possible risks of contraindications with prescribed medications. The service user or informal carer will need to check with their GP or pharmacist before a care worker can support with these.	
Highlighting any 'as required medication' (PRN) such as pain relief and details such as how often this can be taken.	
The service user or informal carer will need to check with their GP or pharmacist if their medication can be prescribed less frequently to reduce the number of visits required by a care worker or health care professional	
Details of any time specific medication instructions such as medications to be taken half an hour before food or other special instructions such as those needed to be taken with food etc.	
Highlighting (if known) any controlled drugs (Providers have best practice guidance to follow for support with controlled drugs)	
Highlighting (if known) any special arrangements for disposal of controlled drugs supplied in patch form	
Level of medication support required (Refer to section 4) and description of the support required with each medication (Refer to sections 4 and 5)	
If service user is assessed as Level 2A– Provider Support, Capacity Assessment has been recorded and a Best Interest Decision documented.	
Where medication is stored and if it is (or needs to be) stored in a secure way or alternative method of storage e.g. refrigeration	
How medication is delivered/collected/reordered. This is not routinely the responsibility of the Providers.	
Providers' medication risk assessment (if appropriate for the Assessor to be involved in producing a joint risk assessment with the Providers)	
Time allocated for medication support (the amount of different medications that require support and the different methods of support such as application of cream, instillation of eye drops etc. will help to determine this.)	

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# Locala Medicines Optimisation Support Team



### Who are the Medicines Optimisation Support team?

They are a team of Pharmacists and Pharmacy technicians based in the community across Kirklees.

The team make home visits to support people to understand their medication. This includes what it is for, when to take it and side effects. The team can carry out a review of prescribed medication, as well as helping to maximise a persons' independence by explaining about techniques (e.g. inhalers) or providing various medication aids (e.g. eye drop aids).

### Who can refer for support?

Referrals can be from anyone who has concerns that someone is struggling with their medication or needs additional support e.g. Community Matrons, District Nurses, GPs, Community Pharmacists, Social Care Workers.

#### What is the criteria for referral?

- Someone who is over 18years old, in need of managing medications and unable to attend their GP or local pharmacy for review.
- Someone taking four or more medicines.
- Someone taking high risk medicines such as medication to thin the blood, strong painkillers such as opioids (e.g. codeine, tramadol, morphine).
- Someone taking medications for the heart such as digoxin, diuretics (e.g. water tablets).
- Someone taking medication to reduce blood pressure, medication for Parkinson's disease, epilepsy or diabetes (e.g. insulin).

# Locala Medicines Optimisation Support Team

- Someone who has recently been in hospital or are recurrent A&E attendees
- Someone requiring a medication review to prevent falls.
- Someone with general issues/ concerns with medication (e.g. non-adherence, changes to medication, issues with inhaler use etc.).

### How can I make a referral?

Locala Medicines Optimisation Team can be contacted on **03030 034541** to discuss referrals.

### <u>Please remember to obtain consent from the person you are referring before making a</u> <u>referral to the Medicines Optimisation Team</u>

### Further information about the team can be found using the following link:

https://www.locala.org.uk/your-healthcare/medicines-optimisation/medicines-optimisation-supportteam/