



## STRATEGIES FOR SUCCESS with Lorraine Poulos

# Managing medicines safely in the home



Lorraine Poulos

In my discussions with providers I am often asked about medication management in community care. As a registered nurse I consider this to be very important, and if not managed well, can have adverse outcomes for all.

With the changes brought about by the National Disability Insurance Scheme and home care package reforms, consumers are often requesting medication management as part of their suite of services.

This is often expensive and there is a chronic shortage of registered and endorsed enrolled nurses working in the community. It is therefore timely to consider what is contemporary and safe practice in medication management.

Drugs and poisons legislation in each state and territory regulates the use, distribution, prescription and administration of medicines.

In community care settings organisations need to have policy and guidelines in place that align with contemporary best practice and follow the *Guiding Principles for Medication Management in the Community* developed by the Australian Pharmaceutical Advisory Council for home and community settings. The document is available on the Department of Health's website.

The Nursing and Midwifery Board of Australia via the Australian Health Practitioner Regulation Agency provides guidance for registered nurses, however the legislation does not clearly define the role of direct care workers or non-qualified workers in each setting, apart from the need to have appropriate policy, guidelines and competency training in place.

Wherever possible, consumers of community services should be encouraged

and supported to manage their own medications. If a service is asked to be involved in medications there are some processes that need to be in place.

It is important to consider the following questions:

- Are you going to be providing medication support seven days a week? If not, then it may be unsafe and risky for the provider to take responsibility as you have no control over what happens in your absence. If

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there is an unpaid carer such as family involved you can work together to set up a system that provides safe management.

- Are you prompting, checking or administering the medication? There are very important differences and your policies need to reflect this.
- Is all medication packed by a pharmacist in a dose administration aid such as a Webster-pak?
- What documentation do you have in place? Who checks this and how

often, for example signing sheets and care plans?

- Have staff been trained and undergone competency testing in medication management?
- Do you provide annual refresher training in medication management?
- Do you have a system for reporting errors and incidents?
- What is written on the client's care plan regarding medications?
- Has the person's doctor reviewed their medications to ensure they are still necessary?
- Have you suggested a Home Medicines Review so that the doctor and pharmacist can review the medications that are being taken?

Ideally, there should be a registered nurse who is reviewing all documentation regarding medication support. However, if this is not possible, then the pharmacist is the best resource. Untrained or unqualified staff should not be working outside their scope of practice.

The environment of a person's home is quite different to a healthcare setting, such as a residential aged care facility, group home or hospital and as such there needs to be a reasonable and sensible approach to medication management.

However, medications are considered a poison and the management of them needs to be given careful consideration and managed according to relevant legislation and regulation so that both staff and consumers are protected. ■

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