



Ark[®]
People
Housing
Care

Support with Medication Policy

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Owner:	Colin Phillips	Job Title:	Assistant Director - Care & Support
To be issued to:	Board of Management ARK management Care & Support staff		
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Version Control

Date	Owner	Version	Reason for Change
Sept.2020	Lesley McDonough	6.0	Cyclical review New policy template

Summary of Changes

Section	Change
All	New policy template
All	Update terminology and removal of outdated information
5	Update to current best practice and most relevant current law
8	Update to current suite of policies and procedures



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1.0 ARKs Values

Our organisational values are the basis for everything that we do; from providing housing, care and support to tenants and service users, to ensuring that all our employees have clear standards of performance set. ARK believes that everyone should have the opportunity to lead a happy, healthy and safe life. We value:

- The worth of each person
- Trusting relationships
- Understanding difference
- Challenging oppression
- Personal and organisational accountability
- Caring for our physical environment
- Enjoyment

2.0 Purpose

This policy and associated procedure explains how ARK will support individuals with medication. This includes assessing the level of support required, providing that support, and ensuring the accurate recording and storage of medication.

3.0 Policy Statement

ARK will provide support with medication while ensuring that individuals are able to exercise their right to make choices and live independently as far as they are able. This means that providing the minimum amount of staff involvement according to the individual's needs and level of understanding.

ARK Care & Support services will seek to provide the maximum amount of choice and control to the individual, while minimising the risks to the individual, their staff and the organisation by using robust Good Life documentation and accurately assessing risk; see **CS02 Good Life planning** and **CS04 Risk & Vulnerability**.

ARK Care & Support staff may only be involved in the management of medication, including any invasive procedure or administration of controlled drugs, with the consent of the individual or their legal representative.

4.0 Scope

This policy and associated procedure applies to all Care & Support teams. It includes agency staff, volunteers and students undertaking direct practice with supported people on behalf of ARK.

5.0 Legal/Regulatory Framework

This policy and associated procedures are written with regard to the following:

- Adults with Incapacity (Scotland) Act 2000
- Mental Health (Care & Treatment)(Scotland) Act 2003
- Adult Support and Protection (Scotland) Act 2007
- Human Rights Act 1998
- Equality Act 2000
- Duty of Candour Procedure (Scotland) Regulations 2018
- Health and Social Care Standards (Scottish Government, 2017)
- Codes of Practice for Social Services Workers and Employers (SSSC, 2016)

This policy and associated procedure also complies with current best practice as defined in:

- ‘Prompting, assisting and administration of medication in a care setting: guidance for professionals’ (Care Inspectorate, 2015)
- ‘Professional guidance on the safe and secure handling of medicines’ (Royal Pharmaceutical Society, 2018)

6.0 Responsibilities

6.1 Board of Management

ARK’s Board of Management is responsible for consideration and approval of this policy, and for ensuring that its decisions are taken in accordance with relevant legislation, regulatory expectations, training and guidance.

6.2 Executive Team

ARK’s Executive Team is responsible for ensuring that this policy is reviewed in accordance with ARK’s schedule for review of policies, or sooner if required. The Executive Team is responsible for ensuring that its decisions, and that the decision of officers, are taken in accordance with relevant legislation, regulatory expectations, training and guidance.

6.3 Senior Leadership Team

ARK's Senior Leadership Team is responsible for review of the policy, and for ensuring that its decisions, and that the decision of officers, are taken in accordance with relevant legislation, regulatory expectations, training and guidance.

6.4 Managers

ARK Care & Support Managers, Registered Operations Managers and Area Managers will be responsible for the effective implementation of this policy within their area of responsibility. They must also ensure that all Care & Support staff are made aware of this policy and participate in relevant training.

6.5 All Staff

All ARK Care & Support staff are required to familiarise themselves with this policy and comply with its provisions as well as undertake any training required as part of this policy or associated procedures.

All Care & Support staff must report immediately any medication discrepancies to the Care & Support Manager/Registered Operations Manager.

6.6 Third Parties

All agency staff, volunteers and students undertaking Care & Support duties are required to familiarise themselves with this policy and comply with its provisions.

ARK will ensure that the Public Sector Equality Duty is complied with when third parties, such as contractors, are carrying out functions on behalf of ARK.

7.0 Medication

Support with medication can range from limited involvement where the individual is able to manage their own medication and had chosen to do so, to full support and management of medication where the individual has been assessed as lacking capacity to do so (see: **Adults with Incapacity (Scotland) Act 2000**).

Any risks involved in the management of an individual's medication must be identified in their Risk & Vulnerability Assessment, with the resultant support required documented in

their Good Life documentation. These documents are subject to regular review to ensure accuracy with the supported person's current abilities and needs.

All records relating to medication will be kept for the duration of the service, and for at least 3 years after the service ends. See: **G17 Retention of Documents**.

ARK will provide training and learning to Care & Support staff to undertake these assessments and plans, provide the level of support required, and support the individual to develop their skills, ability and confidence in handling their medication.

Care & Support staff will only support people with medication or any invasive procedure after successful completion of appropriate training.

When Care & Support staff members are involved in assisting with medication, ARK will ensure that:

- only medication prescribed by the individual's GP or certified medical professional is used, and is administered as prescribed
- any 'household remedies' used for the immediate relief of symptoms have been selected by the individual's GP or pharmacist and are recorded in Good Life documentation
- clear and comprehensive procedures are implemented for ordering and administering of regular and 'as required' medication
- accurate records are maintained for ordering, counting, administering and disposal of all medication
- clear procedures are in place for dealing with medical emergencies involving supported people
- individuals are supported to access advice about their medication if required

8.0 Related Policies & Procedures

- CS02 Good Life Planning
- CS04 Risk & Vulnerability
- CS06 Reducing Restrictive Practice
- G13 Openness & Confidentiality
- G24 Privacy & Data Protection
- G34 Equality
- G36 Keeping People Safe
- HR15 Whistleblowing

9.0 Equality Impact Assessment (EIA)

Please see relevant Equality Impact Assessment.

10.0 Data Protection Impact Assessment (DPIA)

Please see Care & Support Data Protection Impact Assessment.

11.0 Stakeholder Consultation

- ARK Board of Management
- ARK Policy & Procedure Review Group
- ARK Area Managers' group
- ARK Working Group
- Short-life working group (Learning & Development dept., and Care & Support managers and staff)

12.0 Monitoring and Review

12.1 Monitoring

ARK's Executive and Senior Leadership Teams will monitor implementation of this policy on an ongoing basis and ensure that relevant decisions within ARK are taken in line with the obligations and expectations set out in this policy.

12.2 Review

This policy will be reviewed within 3 years from the date of approval by our Board of Management, in accordance with ARK's policy review framework.