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Protocol in relation to self administering of medication by a resident administered by a nurse					

Protocol in relation to self administering of medication by a resident administered						
by a nurse						
Developed by: Little Sisters of the Poor.	Date Developed: November 2011, Sept					
	2023					
Developed By: Nursing Department.	Date Approved: November 2011, Sept					
	2023					
Implementation Date: April 2009	Review Date: Sept 2026					
Policy Reference Number: Self	No. of Pages: 3					
administering of medicines						
Status of the Policy: Final						

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1.0. Self administration of medicines by residents.

2.0. Aims:

- For the resident to be able to safely administer his or her own medication
- To understand the purpose, dose and side effects of their medication
- 3.0. Medication management activities performed by nurses may vary, depending upon the individual resident situation, the care setting and the scope of practice of each individual nurse. In relation to key factors to be considered within the scope of practice for nurses, they must ensure that they are competent, are accountable and autonomous, continually develop themselves in relation to medication management, are aware of their delegation duties and know what to do in emergency situations.
- 4.0. There are situations where residents may not wish to be supervised by a nurse when their medications have been administered to them by a nurse. Residents do have a right to refuse, to with hold or with draw care provided and this does include medication management. A resident does have the right to refuse to take medicines at the times prescribed, and at the times that the nurse administers the medicines. Under their competence framework, their scope of practice and their delegation duties, a nurse must satisfy themselves that the resident is competent to undertake that decision having due regards to that residents rights. However within this service, we must be satisfied that the practice of self administration is safe and does not harm the resident or any other resident in any way and that nursing staff are protected in their role as medication administrators.
- 5.0. This protocol has been developed to assist nurses in this function.
- 6.0. It is recommended that nurses communicate with all residents who self administer medicines

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and explain to residents what their role is in relation to medicines administration. Nurses are advised to use the self administration explanation sheet with residents in order to do that. (Appendix One)

It should be explained that; the self-administration scheme is designed to help the resident understand why they are taking their medicines.

That the nurse will give as much information, help and support as the resident needs.

Before starting, the nurse will explain:

- What self-administration of medicines is about
- The dose and how and when to take the medicines
- Any side-effects that the resident should know about

Self-administration is not compulsory, and the resident must not feel that they have to take part,

If they wish to participate, the nurse will ask them to sign to say that they wish to self administer, but they can change their mind at any time.

Their medicine will continue to be stored by the nursing staff.

The medicine will be given to the resident at the correct times for the resident to select and take according to the instructions of the nurse.

The nurse should remind the resident of the time they should take the medicine

The nurse should monitor the progress at which the medicines are being taken

The nurse must ensure that no other resident or visitor takes the medicines.

6.0. It is advisable for the nurse to complete the risk assessment shown in **Appendix Two**. If the nurse is not happy with any aspect of the risk assessment and that there is a risk to the resident or other residents, then the self administration protocol should cease.

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Appendix One

Self administration explanation sheet.

	Resident Name:			
	DOB:			
	The self-administration s and understand the resid	cheme has been fully explained to me and I lent information sheet.	have read	
	I wish to take part in self-	administration scheme.		
	I understand that I can w	ithdraw from it at any time.		
		e withdrawn from the scheme by a nurse or of for this will be explained to me.	loctor at	
+			-	
	Resident Signature:			l
	Date:			
	Nurse:			

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Appendix Two.

Residents name	 Date
DOB	

	Question	Yes/ No	Action to be taken	Comments and issues raised and action to be taken/ interdisciplinary team involvement
1	Is the medicine regime relatively stable?		Should not self- administer rapidly changing regime until more stable. Discuss with medical practitioner	
2	Has the resident been given the Resident Information Leaflet and had it explained?			
3	Does the resident understand what is involved and their responsibilities?		Explain again using the Resident Information Leaflet	
4	Is the resident willing and motivated to self-administer?		Aim to improve motivation	
5	Does the resident understand the dosage instructions and how to take the medicine?		Discuss with resident using a Medicines Information sheet and other aids if necessary	
6	Are there any other reasons why the resident is unable to self-administer?		Please state reasons and actions to be taken. Refer to interdisciplinary team	
7	Is the resident confused, or disoriented to time and place?		Resident may need to self-administer if need to take own medicines on discharge. Refer to interdisciplinary team	



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Que	estion	Yes/ No	Action to be taken	Comments and issues raised and action to be taken/ interdisciplinary team involvement
8	Is the resident depressed, suicidal or have cognitive impairment?		Need to assess benefits of self- administration against the risk. Refer to interdisciplinary team	
9	Does the resident have history of drug abuse or alcoholism?		Need to assess benefits of self- administration against the risk. Refer to interdisciplinary team	
10	Would the resident self-administering their medicines present any foreseeable risk to other residents in the residential care unit?		Steps need to be taken to resolve risk and reassess. Refer to interdisciplinary team	

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Assessed By :	Date	
•		
Review Date		

Daily assessment of self-administering residents must be recorded on the Ongoing Assessment Record within the Residents Care Plan.