Covert administration of oral medication

Please note: use the <u>difficult to swallow and covert administration pathway</u> to determine the most appropriate solution for the resident

This plan must be used in conjunction with the care home's own covert administration policy.

Residents Name		Date of Birth				
Mental capacity assessment in relation to this decision (must be done by a registered health care professional including a physician, nurse practitioner, a registered nurse or a registered pharmacist suitably competent to complete assessment). The capacity assessment must be discussed with a physician if the medicines include antipsychotics.						
Evidence supporting lack of capacity:						
Assessors name, signature and date of assessment:						

Medication Review

The resident's medication has been fully reviewed and the following medicines are considered essential by the health care professional (a pharmacist, GP or Practitioner). Medication should be reviewed every 12 months or before if there is a significant change of medication.

Health care			
professional	Signature	Date	
role			

Best Interest Decision

The decision to covertly administer medication has been discussed and agreed by the following people - the GP, appropriate member of care home staff, an informal person (relative) or an Independent Mental Capacity Associate (IMCA) if there are no family/friends available. This must be taken to the GP surgery for signing.

GP	Signature	Date	
Care home	Signature	Date	

ı	Name of	relative	or IMCA	that de	cision ha	as been	discussed	with and	l date:	

All Wales Medicines Strategy Group

Covert medication administration plan

For each medicine to be administered covertly, a plan for administration must be in place. The pharmacist can provide information about whether the medicine can be crushed or if liquids are available. This should be reviewed annually unless the resident's condition changes. Only the medicine(s) listed below can be given covertly, any new medicine(s) must be considered separately to see if it is in the resident's best interests for covert administration.

Medication to be administered covertly with plan (e.g. offer to resident first, if refuses wait 30 mins then try again)	Method of administration e.g crushed/sprinkle
1.	
2.	
3.	
4.	
5.	