



Care Homes Advisory Team

Guidance Offered on the use of Covert Medication within Doncaster Care Homes

Background

- Each care home will have its own policies and procedures for this area of administering medication.
- Guidance offered is to support appropriate use of covert medication and access support from mental health staff.
- The Mental Capacity Act 2005 made it a criminal offence to wilfully neglect care, under section 44.
- So, for patients/residents lacking capacity to accept or refuse medication, covert medication must be considered.

Covert medication refers to medication that is hidden in food or beverages. The covert administration of medication is the practice of hiding medication in food or beverages so that it will be undetected by the person receiving the medication. Pills may be crushed or medication in liquid form may be used. This practice exclusively applies to individuals who are not capable of consenting to treatment. It is intended to ensure that individuals refusing treatment as a result of their illness will have access to effective medical treatment.

Process

Detail of the process must be managed within each care home's policies and procedures.

Content of the process should include the following stages:

Capacity: The person must have an assessment of whether they can accept or refuse medication, by care home staff, using the framework of the Mental Capacity Act 2005. If they have capacity, covert medication can not be used. If they lack capacity, the following stages need to be considered.

Representation: Is their care, such as use of medication, decided by a Donee, Deputy or Advance Decision?

Collaboration: Refer to the Older Peoples' Liaison Service for joint decision making/evidencing rational practice.

Alternatives: Jointly explore alternatives to covert medication.

Necessity: A doctor, Older Peoples' Liaison Service nurse or pharmacist consider the necessity of the medication.

Advocacy: Any family or carer or advocate is consulted.

Evidence: Care Plans show assessment of capacity and assessment of need, with who was involved in these.

Administration: The method of giving the medication covertly is checked with a pharmacist

MARS: Using of covert medication, and how, is documented on the Medicine Administration Record Sheet (MARS)

Safety: Systems are in place for safe, optimal practice with a clear audit trail of events.

Review: Review by the care home Manager, with the Older Peoples' Liaison Service, on a planned and regular basis.

Supervision: Care home staff giving covert medication have ongoing training/clinical supervision.

Support

The Older Peoples' Liaison Service offers support to all care homes within the Doncaster area, giving advice on management with covert medication. The Older Peoples' Liaison Service can be contacted on 01302 798467.
Covert Medication and the Care Quality Commission

The Care Quality Commission have documented that when they inspect a care home that they will look on inspection for:

- What instructions are written on MAR charts
- Evidence of medicines being crushed such as tablet crushers, metal spoons, mortar and pestle
- Food e.g. pots of jam, kept with medication
- What people say about how they are given their medicines
- What policy and procedures are in place
- Does the care plan carry an assessment of the person's capacity and identifies who carried out the assessment and when
- That the care plan reflects the person's assessed needs and any agreements to administer medicines in food or drink are clearly documented
- There are agreed review dates and reviews take place