

# Medication Assistance Compliance Checklist

Topic	Self-assessment questions	Section of this guideline to refer to for information
	Do you have residents who have requested medication assistance?	
<b>Written consent</b>	Is there written consent on file for each resident who has requested assistance with medication?	1.3, 1.5, Appendix 1
<b>Privacy and confidentiality</b>	Does the service maintain privacy and confidentiality of each resident's medication information?	1.4
<b>Documentation</b>	Have internal policies and procedures for medication assistance been developed?	1
	Is medication information documented for each resident?	1.5, Appendix 2, 4, 6
	Are forms used to record medication doses taken for all regular and 'when required' (PRN) medications?	1.5
	Are Medication Distribution Records checked regularly to ensure that doses have not been missed?	1.5
	Is the required documentation kept for the period of time specified in the Regulation? (at least three years after the day the resident leaves the service)	1.5
	Is there a written procedure in place for assisting with medication which complies with this Guideline?	1.5, 1.7, 1.8, 1.11, 1.12
<b>Staff training</b>	Are all staff who are involved with medication assistance appropriately trained? (e.g. <a href="http://www.myskills.gov.au">www.myskills.gov.au</a> – Assist clients with medication)	1.6
	Is training completed prior to commencing with responsibilities for assisting with medication?	1.6
	Are staff trained in first aid and CPR, and do they maintain a current certificate in first aid and CPR?	1.6
	Is ongoing education about medication available to staff to update their knowledge?	3.1
	Is a record of staff training maintained?	1.6, Appendix 3

<b>Medication storage, handling and labelling</b>	Are medications stored in a secure, lockable location, in original packaging or dispensed medications repackaged in a Dose Administration Aid (DAA) and in accordance with pharmaceutical storage requirements?	1.8, 1.9, 2.1
	Are the keys to the storage in the possession of staff at all times?	1.8
	Are medications that may be needed urgently able to be accessed in a timely manner?	1.8
	Are all medications individually labelled by a pharmacist for each resident?	1, 2.1, 2.6, 2.7
	Are all non-prescription medications ordered by a medical practitioner?	2.7
	Is there a procedure for making medication doses available for a resident to use if they are temporarily off-site?	2.10, Appendix 6
<b>Safe disposal of medications</b>	Is there a procedure for disposal of ceased, expired or unwanted medications?	1.10
	Are medications for disposal stored separately to medications in use, and returned promptly to the pharmacy?	1.10
<b>Medication incidents</b>	Is there a written incident reporting procedure for staff to follow?	1.12, Appendix 4
	Are Medication Incident Reports reviewed to identify potential areas that need to be addressed?	1.12
	Is there a procedure for managing refusal by a resident and missed doses?	1.7, 1.11
	Is there a procedure for managing a suspected adverse reaction to medication?	2.9, Appendix 4
<b>Quality use of medicines activities</b>	<p>Have any quality use of medicines activities been implemented?</p> <ul style="list-style-type: none"> <li>• written service agreement with pharmacy</li> <li>• medication review</li> <li>• self-assessment</li> <li>• medication audit</li> </ul>	<p>3.1 3.2 3.3, Appendix 7 3.4</p>