

Hummingbird Community Activities

Medication Administration in the Community Policy

Owner: Joanna Kusnierek

Organisation: Hummingbird Community Activities

Version: 1.0

Date: June 2026



1. Policy Statement

Hummingbird Community Activities is committed to ensuring that all medication support provided to individuals with additional needs is carried out safely, lawfully, respectfully, and in line with best practice.

This policy sets out the procedures for the safe handling, administration, storage, recording, and disposal of medication when supporting individuals in community-based settings.

All staff must adhere to this policy to protect the health, dignity, and rights of service users.

2. Scope

This policy applies to:

- All employees, volunteers, and agency staff
- All service users supported by Hummingbird Community Activities
- All community-based activities, outings, and one-to-one support sessions

3. Legal Framework and Guidance

This policy is informed by:

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Mental Capacity Act 2005
- Care Act 2014
- Misuse of Drugs Act 1971 (where applicable)
- NICE Guidelines on Managing Medicines in Care Settings

4. Principles of Medication Support

Staff must ensure:

- Medication is only administered with valid consent or best interest decision
- Service users are supported to be as independent as possible
- Dignity, privacy, and confidentiality are maintained at all times
- Medication is administered safely, correctly, and at the right time
- Errors or incidents are reported immediately and transparently

5. Consent and Mental Capacity

- Consent must be obtained before any medication support is provided
- Where capacity is in question, a Mental Capacity Assessment must be completed
- Any best-interest decisions must be clearly documented
- Family/carers may be involved where appropriate, but the service user's rights remain central

6. Staff Competency and Training

Only trained and competent staff may administer medication.

Staff must complete:

- Medication awareness training
- Practical competency assessments (observed administration)
- Annual refresher training
- Training in safeguarding and infection control

The registered manager (or delegated senior) is responsible for authorising staff to administer medication.

7. Types of Medication Support Provided

Staff may support with:

- Prompting medication
- Administering prescribed medication
- Assisting with self-administration
- Supporting PRN (as required) medication
- Emergency medication (where specifically trained, e.g., epilepsy rescue medication)

Staff must NOT:

- Administer medication not prescribed to the individual
- Alter dosage or timing unless authorised by a prescriber

- Crush or disguise medication unless written instruction is provided

8. Prescription and Authorisation

All medication must:

- Be prescribed by a qualified healthcare professional
- Be supported by a current Medication Administration Record (MAR)
- Include clear dosage, timing, and instructions

No medication will be administered without valid written authorisation.

9. Storage of Medication

Medication must be:

- Stored securely in a locked container or medication cabinet
- Kept at correct temperature conditions (e.g., refrigeration where required)
- Separated per individual service user
- Checked regularly for expiry dates

Controlled drugs (if applicable) must be stored in a compliant controlled drugs cabinet with stricter recording procedures.

10. Administration Procedure

Staff must follow the “6 Rights”:

- Right person
- Right medication
- Right dose
- Right time
- Right route
- Right documentation

Additional steps:

- Wash hands and follow infection control procedures
- Check MAR chart before administration
- Explain the medication to the service user
- Observe the individual taking medication where required
- Record immediately after administration

11. Recording and Documentation

All medication must be recorded on MAR charts including:

- Date and time
- Medication name and dose
- Signature/initials of staff member
- Any refusal or omission with reason

Records must be:

- Accurate
- Legible
- Completed immediately after administration

12. PRN (As Required) Medication

PRN medication must have:

- A clear written protocol
- Maximum daily dosage instructions
- Clear indication of when it should be given
- Recording of effectiveness after administration

13. Medication Errors and Incidents

In the event of an error:

- Ensure immediate safety of the service user
- Inform senior staff/manager immediately
- Contact healthcare professionals or emergency services if required
- Complete incident report form
- Inform family/carers where appropriate
- Undertake a full review and learning process

All errors are treated as safeguarding and quality concerns.

14. Refusal of Medication

If a service user refuses medication:

- Their decision must be respected (if they have capacity)
- The refusal must be recorded on MAR chart
- Staff should encourage but not coerce

- A manager or healthcare professional must be informed if refusal is repeated or high risk

15. Infection Control and Hygiene

Staff must:

- Wash hands before and after medication administration
- Use gloves where appropriate
- Avoid cross-contamination
- Dispose of waste safely and in accordance with guidance

16. Disposal of Medication

Unused or expired medication must be:

- Returned to pharmacy where possible
- Recorded appropriately
- Never disposed of in general waste unless instructed

17. Risk Assessment

Individual medication risk assessments must be completed for each service user, including:

- Ability to self-medicate
- Risks of omission or overdose
- Environmental risks during community outings
- Safeguarding considerations

18. Safeguarding

Any concerns regarding medication misuse, neglect, or coercion must be reported immediately under safeguarding procedures.

19. Monitoring and Review

This policy will be:

- Reviewed annually or sooner if legislation changes
- Audited regularly through MAR chart checks and incident reviews

- Updated by management in consultation with staff feedback and regulatory guidance

20. Responsibility

Overall responsibility for implementation lies with:

- Registered Manager (or equivalent role)
- Senior staff delegated for medication oversight

Ultimate accountability sits with the service provider, Hummingbird Community Activities, under the leadership of Joanna Kusnierek.