

POLICY

POLICY SCOPE: BC Women's Hospital.

Patients may self-administer medications prescribed in BC Women's Hospital. Patient self-administration of medication is approved on a nursing unit which has the capacity to support a self-administration program, at the discretion of Nursing and Pharmacy.

RESPONSIBILITIES:

Prescriber:

Assesses patient's capacity for medication self-administration, indicates on prescriber's orders that the patient may self administer medications, and specifies which medications may be self-administered.

Nurse and/or Pharmacist:

1. Assesses patient's capacity for medication self-administration in accordance with self-medication program criteria.
2. Instructs patient on the self-administration of medications, provides drug information on the medications, and assesses the patient for behaviour appropriate for self-administration of medications.
3. Removes medications from the patient when irresponsible behaviour is demonstrated and reports it to the most responsible prescriber.

Patient:

1. Self-administers the medications provided and documents the medications using the medication calendar as instructed by the nurse and/or pharmacist.
2. Stores the medications as instructed.

PROCEDURE

Prescriber:

1. Conducts and assesses the patient's capacity for self-administration of medications.
2. Documents on the prescriber's orders that the patient is eligible or ineligible for self-administration of medications.
3. Specifies which medications may be self-administered.

Nurse:

1. If the patient is eligible for the self-medication program, assesses patient's capacity for self-administration of medications according to the program's criteria.
2. Notifies the most responsible prescriber if the patient does not meet the criteria to allow self-administration of medications.
3. Instructs patient on how to administer, securely store and document medications to be self-administered.
4. Selects appropriate self-medication calendar, applies patient label onto it, writes in the patient allergy information, revises the medication information to reconcile prescriber's orders and self-medication packages.
5. Sends prescriber's orders to Pharmacy according to current Pharmacy procedures.
6. Obtains self-medication packages from the automated dispensing cabinet (ADC) and places them in a child-resistant medication container.

7. Provides the patient with medication calendar, self-medication program information, and the medications.
8. Monitors the patient receiving self-medications, verifying that the doses are appropriately taken and documented on the self-medication calendar.
9. Maintains the RN signature log on the self-medication calendar daily and at the time of patient discharge.
10. According to usual charting procedures, assesses and documents the patient's management of self-medications and any difficulties with her medication therapy.
11. Provides further drug information to patient, as needed.
12. Removes medications if the patient demonstrates irresponsible behaviour and reports it to the most responsible prescriber.
13. At discharge, receives the documentation and puts it into the patient's chart.
14. Reviews remaining medications and removes the medications not to be continued. Returns the medications to the child-resistant medication container for the patient to take home.
15. Unused remaining self-medication is returned to Pharmacy as per current Pharmacy procedures.

Pharmacist:

1. Verifies medication orders and determines if appropriate for self-administration by the patient.
2. Verifies that each self-medication package has an affixed prescription label along with appropriate auxiliary labels and the label information is completed / corrected by the nurse before it is provided to the patient.
3. Provides drug information to the nurse and/or patient as needed.

Patient:

1. Documents doses taken on the medication calendar and initials calendar daily.
2. Reports to the nurse if additional medications are required.
3. Securely stores the medications as directed.
4. At discharge, returns all documentation and unused medications to the nurse for the final review of medications.

CRITERIA FOR CAPACITY TO SELF-ADMINISTER MEDICATIONS

1. Patient has understanding of English or of another language as set out in the patient medication teaching package.
2. Patient demonstrates understanding and the ability to administer and document medication doses.
3. Patient demonstrates how to safely use and store medications.

EXCLUSION CRITERIA FROM THE MEDICATION SELF-ADMINISTRATION PROGRAM

1. Patients in the first 48 hours following a Caesarean section with regional anesthesia.
2. Patients who cannot safely self-administer as determined by prescriber.
3. Where there's a risk of misuse or diversion of self-medication.