SECTION 1 - DO I NEED AN EIA?

DO I NEED AN EIA?

Name of policy/activity: **Medication Management Policy & Procedure**
Please choose one of the following: Is this a: • New policy/activity? • **Existing policy/activity** √ • Budget proposal/change for this policy/activity? • Pilot programme or project?

Decision Set out the rationale for deciding whether or not to proceed to an Equality Impact Assessment (EIA) This is an update to the previous version and as such includes new and edited/updated content and more specific guidance and procedures. It sets out policy and procedure on both; ● Assessment of a service user's medicine management support needs, and ● What medication management support (practical support, encouragement, reminders to take medication) Health & Social Care Moray staff can or cannot provide and when The policy & procedure also sets out the difference between medication management support and administration of medications (which staff can provide depending on the level of support required and the level of medication management training) and prescribing (which social care staff cannot do). The policy & procedure also sets out requirements for recording the support provided and medication administered. It also sets out the relationship (and process) between HSCM staff, the initial medication management assessment for the service user and the link with NHS Grampian colleagues such as the service user's GP and Pharmacies (including for prescribing). Given the importance of the policy and procedure, the direct support offered in some cases to administer medication (and recording this) and the direct impact of the policy & procedure on the health of service users it is necessary to complete an Equality & Diversity Impact Assessment.

Date of Decision: 21/01/2021	

If undertaking an EIA please continue onto the Section 2. If not, pass this signed form to the Equalities Officer.

Assessment undertaken by: Garry Macdonald, Commissioning & Performance Officer, Policies & Procedures (Health and Social Care)

Director or Head of Service	Jane Mackie
Lead Officer for developing the policy/activity	Garry Macdonald
Other people involved in the screening (this may be council staff, partners or others i.e contractor or community)	Medication Management Project Group (including Service Manager – Provider Services, Care at Home Managers and staff, Specialist Housing (LD) Provider Managers and staff, NHS staff including lead nurse and lead pharmacist), Consultant Practitioners, Adult Care Practice Governance Board

SECTION 2: EQUALITY IMPACT ASSESSMENT

Brief description of the affected service

1. Describe what the service does:

This policy & procedures contain information for care providers, team and service managers, social work staff, care at home officers and service users about the safe handling of medicines in Health and Social Care.

The overall aim is to establish standards of work which protect the safety and wellbeing of service users and provides safeguards for staff.

The policy and procedures describe the available levels of assistance for service users who may be physically or mentally unable to self-administer their required medication and other 'treatments'.

They also describe the roles and responsibilities of health and social care staff who will be involved in assessing need and providing the appropriate level of care in relation to medication.

This is an update to the previous guidelines and is now policy and procedure. It aims to support and provide direction on;

- HSCM staff carrying out initial medication management assessments with service users to determine what support (if any) they require and the level of medication management/administration support (level 1 to 4 with 4 being the most support)
- The link between the initial assessment/recommendation for medication management support for that service user and the decision to then prescribe medication (not a social care staff role) and agree the support and level of support that will be provided to the service user
- Sets out clear roles and responsibilities for all staff (both social care and health/NHS) in the process/procedures for; agreeing medication management support required with and for service users, prescribing medication, administering medication and providing support and, recording the medication and medication management support provided
- Monitoring and reviewing service users medication management support

2. Who are your main stakeholders?

- Service users who may/do require medication management/administration support
- Service users families, representatives and unpaid carers
- Social work/social care managers and staff including Care at Home Officers
- NHS Grampian colleagues such as GPs and Pharmacists
- External, contracted service providers providing support for service users

3. What changes as a result of the proposals? Is the service reduced or removed?

The service is neither reduced nor removed. This is an update of medication management and administration processes. The policy & procedure replaces the previous 'guidance' and has been updated, edited and clarifies relevant guidance, roles/responsibilities and processes.

4. How will this affect your customers?

It is a continuation of the process/service for assessing and supporting service users who are assessed as needing support (practical, reminders etc.) with managing and administering their medication (prescribed medication set out on a MAR Sheet provided by the pharmacist/prescriber). It also covers PRN ('as required') medication. Other 'treatments' which are not necessarily prescribed and may be relevant to the service user are also included – however these sit outside the MAR Sheet and the item/how it should be administered/how often/what for etc. may be described in the service user's Support Plan/Care, Support & Treatment Plan instead.

Monitoring:

There are various ways that the assessment and medication management/administration support for service users will be monitored;

- Initial discussion between the assessor, social work staff/managers and NHS staff with regards to the initial medication management assessment and

recommendation and agreement on the level and type of support required by the service user

- A medication review (by a doctor or pharmacist – specific to the medications and frequency etc.) is carried out concurrently with the initial medication management assessment (by the worker identifying the need for medicine management support)
- The GP has to be involved before medication management can be provided by workers/care at home staff
- A record is made of any changes to the service user's medication on the Medicines Administration Record Sheet (MAR SHEET) by the pharmacist/prescriber (not by care staff as that would amount to 'prescribing')
- Level 3 assistance (which involves support to administer medication) will only be provided with agreement and consent of the service user (if they have the capacity to agree) or their family/legal representatives who has Welfare POA/Guardianship
- Only appropriately trained workers (formal qualification such as SVQ or on the job training by the SW Training Team or a formally trained person such as a line manager – i.e. train the trainer) who have undertaken training in medicines management and have been deemed competent by a formally trained person may provide level 3 or Section 47 (covert medication) assistance. Advice can be sought from a GP/Pharmacist if required
- Competency of care workers in relation to medicines management is monitored on an ongoing basis by their line manager/formally trained person
- Workers are not expected to make judgements on medication where directions are not explicit. The MAR sheet should contain clear instructions (and must only be amended by the prescriber/pharmacist) on administration of medication and clear directions MUST be available on the persons Support Plan/Care, Support & Treatment Pan
- MAR Sheet information (medication administration and support) accuracy is continuously monitored
- Staff are required to report incidents (including errors and refusal of medication) to line managers (and where necessary seek professional health advice)
- Error reporting is also recorded and monitored in Datix (NHS) as is responses to Medication errors
- Medication management support is reviewed when changes occur or yearly at least If there are no changes before then – reviews can be requested by service users or their representatives at any time there is a concern or change of circumstances
- Social work/Care at Home teams auditing their own medication management support/records
- Complaints to social work and Duty of Candour processes will be monitored for medication-related concerns/issues
- All registered providers are inspected by the Care Inspectorate and/or Healthcare Improvement Scotland

5. **Please indicate if these apply to any of the protected characteristics**		
Protected groups	**Positive impact**	**Negative impact**
Race		
Disability	√	√
Carers (for elderly, disabled or minors)	√	
Sex		
Pregnancy and maternity (including breastfeeding)		
Sexual orientation		
Age (include children, young people, midlife and older people)	√	√
Religion, and or belief		
Gender reassignment		
Inequalities arising from socio-economic differences		
Human Rights	There are some human rights that may, in individual cases, be engaged; Article 2 – Right to Life (with regard to any dangers inherent in medication management, support and administration) Article 3 – Freedom from Torture & Inhuman or Degrading Treatment (with reference to medication management, support and administration) Article 5 – Right to Liberty & Security (relating to Deprivation of Liberty – with particular reference to interventions such as the use of medications that can be seen as physical interventions) Article 6 - Right to a Fair Trial (linked to the right to appeal a decision/make a complaint and receive an explanation/decision) https://www.equalityhumanrights.com/en/human-rights/human-rights-act Whether and when human rights are engaged or breached would be decided on a case by case basis depending on the circumstances of each individual case.	

6. Evidence. What information have you used to make your assessment?

Performance data	√
Internal consultation	√
Consultation with affected groups	
Local statistics	
National statistics	
Other	√

7. Evidence gaps

Do you need additional information in order to complete the information in the previous questions?

No

This is an update that also takes into account established or up-to-date standards, guidance and legislation such as;

- The Health and Social Care Standards "My support, my life" (Care Inspectorate)
- Good Practice in Prescribing & Managing Medicines & Devices (GMC)
- Prompting, Assisting & Administration of Medication in a Care Setting (Care Inspectorate
- Royal Pharmaceutical Society – Good Practice Guidance
- NHS Grampian Covert Medicine Policy

    NHS Grampian Infection Prevention & Control in the Community

8. Mitigating action

Can the impact of the proposed policy/activity be mitigated? Yes

Please explain

There are likely to be both positive and actual or perceived negative impacts from the administration of medication. Negative aspects, for example, could include;
- The use of Section 47 Covert Medication (when assessed as required and agreed the relevant authorities/Court).

As such it is important that there are processes, procedures and protocols that provide checks and balances in the service provision and ensure that all actions taken and support provided is lawful, has been assessed, risk assessed and agreed by the relevant professionals (both health and social work) and the service user (or their representative) and reviewed where necessary.

As such there are a number of mitigating factors in this case that support and protect the

safety and wellbeing of service users and provide safeguards for staff – thus mitigating any potential or actual negative impacts. These were set out previously (please see Section 4 on 'Monitoring').

9. Justification

If nothing can be done to reduce the negative impact(s) but the proposed policy/activity must go ahead, what justification is there to continue with the change?

Please see Sections 4 and 8 re: mitigating factors that are in place and that will mitigate negative impacts.

What is the aim of the proposal?
To provide a medication management/administration and support service for service users who may be/are unable to physically and mentally self-administer any prescribed medications and other 'treatments' that they have been assessed as requiring.

The policy/procedure sets out the process of initial assessment of the need for medication management support/administration, the process for agreeing the level and type of support to be provided, the process of providing the agreed level of support and medication management/administration (based on the MAR Sheet and instructions provided by the prescriber) and the process of ongoing audit and review of the medication management support.

Have you considered alternatives?
Yes. The alternative was to continue with the existing 'guidelines' but that may have been more likely to lead to errors, confusion and duplication. The new policy/procedure makes it clear that it is not general guidance, there are clear procedures to follow, sets out more clearly the roles of those involved and the processes and includes reference to the most up-to-date guidance from organisations such as the Care Inspectorate, the GMC and the Royal Pharmaceutical Society. It also seeks to standardise forms/tools used within the processes i.e. the form for signing medication out and in with service users who leave accommodation on a temporary basis, for example, leaving specialist housing for a day out.

SECTION 3 CONCLUDING THE EIA

Concluding the EIA

1. No negative impacts on any of the protected groups were found.	
2. Some negative impacts have been identified but these can be mitigated as outlined in question 8.	√
3. Negative impacts cannot be fully mitigated the proposals are thought to be justified as outlined in question 9.	
4. It is advised not to go ahead with the proposals.	

Decision
Set out the rationale for deciding whether or not to proceed with the proposed actions:

This policy/procedure updates and replaces previous 'guidance' to provide more direction and clear processes and roles. Medication management/administration and support whilst being essential for service users who are unable physically or mentally to self-administer, by its very nature, has the potential to be directly impactful on the health and wellbeing of service users (the administration of and support with medication and potentially engaging human rights articles as outlined in Section 5) and it is vital that the policy/procedures go ahead but with clear protocols and procedures and the required level of mitigation and monitoring set out in sections 4 and 8.

Date of Decision: 21/01/2021

Sign off and authorisation:

Service	Education and Social Care
Department	Health and Social Care
Policy/activity subject to EIA	Medication Management Policy & Procedure
We have completed the equality impact assessment for this policy/activity.	Name: Garry Macdonald Position: Commissioning & Performance Officer, Policies and Procedures Date: 21/01/2021
Authorisation by head of service or director.	Name: Jane Mackie Position: Chief SW Officer Date:
Please return this form to the Equal Opportunities Officer, Chief Executive's Office.	