

Tips for Safer Medication Administration*



1. Medicine should be given in a **quiet environment** free from distractions and interruptions



2. Greet the resident, checking they can **hear you** ok



3. **Speak clearly** at a normal volume and explain what you are doing



4. Ensure the resident is **sitting upright**, where possible, to take their medicine



5. Approach the resident from the diagonal and at their **eye level**



6. **Administer** the medicine in a manner that is most appropriate to the resident's individual needs



7. Check the medication has been **correctly swallowed** and is not 'left behind' in the mouth



8. Ensure that all medicines given are **documented** in the person's medication chart



9. If the resident has **difficulty swallowing*** their medicine, alert the Clinical Care Manager, and record it in the resident's chart

*Refer to page 2 (PTO) for more detailed explanations

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Tips for Safer Medication Administration

Before administering medicine:

- Check the resident's chart to see if they can swallow their medicines whole or whether they usually have their medicines split or crushed:
 - Warning: Some medicines are NOT safe to split or crush, posing a problem to the resident and also to you.
 - Check the product information sheet or speak with a pharmacist before splitting or crushing medicine.
 - Tip: 'Don't Rush to Crush' or eMIMS are useful Australian resources for medicines that can be safely split or crushed, with guidance on how to give them.

What to administer the medicine with:

- Swallowing safety:
 - Check to see if the resident is allowed to have regular drinks (e.g. water) OR if they are given thick drinks or texture modified food at mealtimes for swallowing safety issues (dysphagia).
- For residents who can safely swallow normal drinks (e.g. water):
 - Have water, food (e.g. puree, yoghurt) or a medication lubricant ready to assist them to swallow their medicine.
- For residents who need thick drinks or texture modified food:
 - Sometimes, people with swallowing safety problems (dysphagia) are given their medicine with a spoonful of food (e.g. puree, yoghurt) or a medication lubricant.*However, first seek advice from the speech pathologist, as each person's needs are different.

When it's time to administer the medicine:

- Medicine should be given in a quiet environment free of distractions and interruptions. *Distractions and interruptions can lead to errors.
- Greet the resident, checking they can hear you ok, or need to use a hearing aid.
- Speak clearly, at a normal volume and explain what you are doing.
- Ensure the resident is sitting upright, where possible, to take their medicine:
 - This is the best position for safe swallowing and helps gravity to assist the medicine to reach the stomach.
- Approach the resident from the diagonal and at their eye level. Standing directly in front of a resident can feel threatening for them.
- Provide the medicine using the information you gathered in 'what to give the medicine with'.
- Ask the resident to open their mouth and check that all the medicine has been swallowed. Sometimes it can become caught in the cheeks.
 - Check the medication has been correctly swallowed with nothing 'left behind'.
 - Ensure that all medicines given are documented in the person's medication chart.
 - If the person has trouble swallowing their medicine, alert the Clinical Care Manager, and record it in the resident's chart.

Common signs of Dysphagia:

- Coughing, wet gurgly voice after swallowing, rattly breathing after a meal or medication, increased breath rate, recurrent chest infection, weight loss, gaging and refusing medication or food.