## **TEMPORARILY AMENDED FOR COVID PANDEMIC:**

## Valid until April 2021

Standard Operating Procedures (SOPs) and competency assessment tool for the administration of eye ointment or gel in community settings

\*All Staff required to use these Standard Operating Procedures MUST have received QCF level 2 or above training and been assessed as competent in each relevant procedure.

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Responsible dept /	Executive Director of Nursing				
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director:	Local Authorities				
Approved by:	MPPP, DTG,	MPPP, DTG, Care and Social Services Inspectorate Wales			
	(CSSIW), Don	(CSSIW), Domiciliary Care Forum and Care Forum Wales			
	Area Nurse D	Area Nurse Directors			
	Deputy Execu	Deputy Executive Director of Nursing			
Date approved:	November 2015 / June 2020				
Date activated (live):	November 2015				
Documents to be	Standards of best practice and standard operating procedures for				
	medicines management for all care settings final April 2020				
read alongside this	Standard Operating Procedures (SOP's) for Domiciliary setting in				
document:	North Wales				
	Standard Operating Procedures SOP's) for Care Home setting in North Wales				
	<ul> <li>North Wales</li> <li>Dougherty L. &amp; Lister S. (2011) The Royal Marsden Hospital</li> </ul>				
	Manual of Clinical Nursing				
	g .				
	Royal Pharmaceutical Society Professional Guidance on the  Administration of Madinings in Healthcare Settings (Japaner)				
	Administration of Medicines in Healthcare Settings. (January				
	2019)				
	The All Wales Guidelines for Delegation Health Education and				
	Improvement Wales for Health and Social care (HEIW 2020)				
	National Guiding Principles for Medicines Support in the				
	Domiciliary Care Sector (ADSS Cymru 2019)				
	COVID- 19 Medication administration training (HEIW 2020)				
Date of next review:	April 2021				
Date EqIA	Nov 15 (Overarching Policy MM01)				
completed:					
completed:					
First operational:	November 2015				
Previously reviewed:	Dec 2016	Feb 2019	April 2020		
Changes made yes/no:	anges made yes/no: yes yes yes				

## Standard Operating Procedure for the administration of eye Ointment or Gel in community settings.

This SOP **must only** be used for citizens / patient's / resident's who have capacity to consent to treatment. If the citizen/ patient / resident deem to lack capacity at the time of treatment the carer **must** refer back to the GP/ Practice Nurse or District Nurse team and **must not** proceed with the treatment.

Definition of consent, capacity and refusal (Medication administration HEIW 2020)

Consent – this is when and individual gives their permission to receive care from another person. For consent to be valid, it must be voluntary, informed and the individual consenting must have the capacity to make a decision.

Capacity – for an individual to have the capacity to give consent, they must be able to understand the information given to them and use this information to make a choice.

Refusal – an individual who has the capacity to make a decision, can refuse treatment and that decision must be respected

Care must be given in the best interest of the citizens / patient's / resident's. The primary motivation for delegation is to meet the health and social care need of the individual. Each organisation will have a consent policy in place and this should be complied with (All Wales Guidelines for delegation (HEIW) 2020)

**Advice:** - If administering both drops and ointment, administer drops first. Ointment will leave a film in the eye which may hamper the absorption of medication in drop form

	Action	Rationale		
1	Explain and discuss the procedure with the patient /citizen/resident and gains consent.	To ensure that patient/citizen/resident understands the procedure and gives their valid consent		
2	Before administering any prescribed inhalers, look at the patient/citizen/ resident's MAR or equivalent chart and check the following.  • The correct patient/citizen/resident and DOB  • Correct medication is selected –name of medicine, dose and frequency  • Date and time of administration  • Expiry date  • Allergy status	<ul> <li>To minimise harm</li> <li>Establish patient/citizen/residents identity</li> <li>Ensure all products are fit for use with valid expiry date and not damaged (don't use if damaged)</li> <li>ensure patient/citizen/ resident is not allergic to the particular medicine</li> </ul>		
3	Wash hands thoroughly with soap and water and/or bactericidal alcohol hand rub, and apply apron and well-fitting gloves.	To ensure the procedure is as clean as possible and minimise cross infection		

4	Check expiry date / if new tube is opened record date and time on side of box  Take off the top/lid	Eye ointment should only be used for 28 days once opened
5	Ask the to sit patient /citizen/resident back with neck slightly hyperextended (tilt)	To ensure a position that allows easy access for medication instillation
	Ask the patient /citizen/resident to look up at the ceiling and then below the affected eye, gently pull the lower eyelid down	Correct positioning minimizes drainage of eye medication into the tear duct
6	Hold the tube between your forefinger and thumb and place it as near to the affected eye as possible without touching the eye. The ointment and tip of the tube must be kept clean	In order to keep the tip of the ointment tube clean and prevent cross infection
	Without touching the eye squeeze a thin stream of ointment or gel evenly along the inner edge into the pocket made by the lower eyelid from the nasal corner outwards	
7	Asks the patient /citizen/resident to blink eye gently then close eye for 1-2 minutes after lettings go of the eyelid	To help distribute medication
8	If there is excess medication on the eyelid, gently wipe it from the nasal corner outwards	To prevent cross infection
9	Explain to the patient /citizen/resident that they may have blurred vision for a few minutes after application	To ensure the patient /citizen/resident understands why they have blurred vision and to refrain from driving or operating machinery until their vision returns to normal
10	Remove gloves and dispose of them appropriately Wash hands thoroughly with soap and water and/or bactericidal alcohol hand rub,	To reduce the risk of cross-infection
11	Record the administration on the MAR charts and document in the patient /citizen/resident's care plan	To maintain accurate records

## Competence document for Care Workers Healthcare Support Workers/Assistants for the administration of eye ointment or gel in Community Settings

NB. Only staff nominated by manager may undertake this competence.

HCSW Name & Signature:

Base/ Area :	Date			
PRACTICAL ASSESSMENT				
To be completed on at least 3 occasions with asses	ssor			
A signature MUST be obtained by the assessor	or for eac	ch eleme	nt of the	competence
The Healthcare Support Workers/Assistants/ Care Worker must achieve ALL outcomes before he / she can be deemed competent				
	Witnessed practice		Assessors signature & Date	
	1.	2.	3.	
	Date	Date	Date	
Delegation of this task must be given by the Nurse or manager caring for the patient/citizen/resident				
Explain and discuss the procedures with the patient/citizen/ resident.				
Gains verbal consent.				
Before administering any prescribed medication, checks the patient's Medication Administration record (MAR) or equivalent chart for the following.  • The correct patient/citizen/resident  • Correct medicine and dosage is selected  • Date and time of administration  • Expiry date  • Allergies  Ensure candidate washes hands thoroughly with soap				
and water and/or bactericidal alcohol hand rub, and appliy apron and well-fitting gloves.				

date and time on box

Checks expiry date on the tube / if new tube record

1

2

3

4

5

	Take off the top/lid		
6	Assists the patient/citizen/resident into appropriate position for administration		
7	Hold the tube between your forefinger and thumb and place it as near to the affected eye as possible without touching the eye. The ointment and tip of the tube must be kept clean		
8	Ask the patient/citizen/resident to look up at the ceiling and then below the affected eye, gently pull the lower eyelid down Without touching the eye squeeze a thin stream of ointment or gel evenly along the inner edge into the pocket made by the lower eyelid from the nasal corner outwards		
9	Asks the patient/citizen/resident to blink eye gently then close eye for 1-2 minutes after lettings go of the eyelid		
10	Explains to the patient/citizen/resident that they may have blurred vision for a few minutes after application		
11	Removes gloves and disposes of them appropriately Washes hands thoroughly with soap and water and/or bactericidal alcohol hand rub		
12	Records the administration on the MAR or equivalent chart and document in the patient/citizen/resident's care plan		

Assessor's name:	Designation:
Signature	Date:

Copy of completed competence document to be given to manager to file in personal file

