

TEMPORARILY AMENDED FOR COVID PANDEMIC:

Valid until April 2021

Standard Operating Procedures (SOPs) and competency assessment tool for the administration of medication by inhalation using a metered dose inhaler (MDI) 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 / director:	Executive Director of Nursing Pharmacy and Medicines Management Local Authorities				
Approved by:	MPPP, DTG, Care and Social Services Inspectorate Wales (CSSIW), Domiciliary Care Forum and Care Forum Wales Area Nurse Directors Deputy Executive Director of Nursing				
Date approved:	November 2015 / April 2020				
Date activated (live):	November 2015				
Documents to be read alongside this document:	<ul style="list-style-type: none"> Standards of best practice and standard operating procedures for medicines management for all care settings final April 2020 Standard Operating Procedures (SOP's) for Domiciliary setting in North Wales Standard Operating Procedures SOP's) for Care Home setting in North Wales Dougherty L. & Lister S. (2011) The Royal Marsden Hospital Manual of Clinical Nursing Royal Pharmaceutical Society Professional Guidance on the 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 completed:	Nov 15 (Overarching Policy MM01)				
First operational:	November 2015				
Previously reviewed:	Dec 2016	Feb 2019	April 2020		
Changes made yes/no:	yes	yes	yes		

Standard Operating Procedure for administration by inhalation using a metered dose inhaler (MDI) 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 an 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: Correct use of inhalers is essential (see manufacturer's information leaflet) and will be achieved only if this is carefully explained and demonstrated to the citizen. If further advice is required, contact the community pharmacist

	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	Sit the patient/citizen/resident in an upright position if possible in the bed or a chair	

3	<p>Before administering any prescribed inhalers, look at the patient/citizen/ resident's MAR or equivalent chart and check the following.</p> <ul style="list-style-type: none"> • 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 style="list-style-type: none"> • To minimise harm • Establish patient/citizen/residents identity • Ensure all products are fit for use with valid expiry date and not damaged (don't use if damaged) • ensure patient/citizen/ resident is not allergic to the particular medicine
4	Wash hands with bactericidal soap and water or bactericidal alcohol hand rub apply apron and well fitted gloves.	To ensure the procedure is as clean as possible and minimise cross infection.
5	Remove mouthpiece cover from inhaler Shake inhaler well for 2–5 seconds	
6	<p>Without Spacer device - ask patient/citizen/resident to take a deep breath and exhale completely, open lips and place inhaler mouthpiece in mouth with opening toward back of throat, closing lips tightly around it</p> <p>With Spacer device - insert MDI (metered dose inhaler) into end of the spacer device. Ask the patient/citizen/resident to exhale and then grasp spacer mouthpiece with teeth and lips while holding inhaler</p>	
7	Ask the patient/citizen/resident to tip head back slightly, inhale slowly and deeply through the mouth whilst depressing canister fully	
8	Instruct the patient/citizen/resident to breathe in slowly for 2–3 seconds and hold their breath for approximately 10 seconds, then remove MDI from mouth (if not using spacer) before exhaling slowly through pursed lips	
9	Instruct the patient/citizen/resident to wait 20–30 seconds between inhalations (if same medication) or 2–5 minutes between inhalations (if different medication).	Always administer bronchodilators before steroids
10	If steroid medication is administered, ask the patient/ citizen/resident to rinse their mouth with water approximately 2 minutes after inhaling the dose	
11	Clean any equipment used and discard all disposable equipment in appropriate containers	
12	Record the administration on appropriate charts and in patient/citizen/residents care plan	

Competence document for Care Workers, Healthcare Support Workers/Assistants for the administration of medication by inhalation using a metered dose inhaler (MDI) in community settings.

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

Name:

Date:

Signature: Base:

PRACTICAL ASSESSMENT

To be completed on at least 3 occasions with assessor

A signature MUST be obtained by the assessor for each element 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. Date	2. Date	3. Date	
1	Delegation of this task must be given by the nurse or manager caring for the patient/citizen/ resident				
2	Explain and discuss the procedure with the patient/citizen/ resident and obtain verbal consent				
3	Before administering any prescribed medication, look at the citizen's MAR or equivalent chart and check the following. <ul style="list-style-type: none"> • 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 				
4	Ensure candidate washes hands with bactericidal soap and water or bactericidal alcohol hand rub applies apron and well fitted gloves.				
5	Removes mouthpiece cover from inhaler Shakes inhaler well for 2–5 seconds				
6	Without Spacer device - asks patient to take a deep breath and exhale completely, open lips and place inhaler				

	mouthpiece in mouth with opening toward back of throat, closing lips tightly around it With Spacer device - insert MDI (metered dose inhaler) into end of the spacer device. Asks the patient/citizen/ resident to exhale and then grasp spacer mouthpiece with teeth and lips while holding inhaler				
7	Asks the patient/citizen/ resident to tip head back slightly, inhale slowly and deeply through the mouth whilst depressing canister fully				
8	Instructs the patient/citizen/ resident to breathe in slowly for 2–3 seconds and hold their breath for approximately 10 seconds, then remove MDI from mouth (if not using spacer) before exhaling slowly through pursed lips				
9	Instructs the patient/citizen/ resident to wait 20–30 seconds between inhalations (if same medication) or 2–5 minutes between inhalations (if different medication).				
10	If steroid medication is administered, asks the patient/citizen/ resident to rinse their mouth with water approximately 2 minutes after inhaling the dose				
11	Cleans any equipment used and discard all disposable equipment in appropriate containers				
12	Records the administration on appropriate charts and documents in patient/citizen/ resident's care plan				

Assessor's name : Designation:

Signature Date:

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