## **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 nebuliser 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

BCUHB Medicine Management Nurses         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 / June 2020         Date activated (live):       November 2015         Documents to be read alongside this document:       • Standard op 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)         • National Guiding Principles for Medicines Support in the Domiciliary Care Sector (ADSS Cymru 2019)         • COVID- 19 Medication administration training (HEIW 2020)         • National Guiding Principles for Medicines Support in the Domiciliary Care Sector (A	Author & Title	Assistant Director for Dharmony and Madiginas Management					
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# Standard Operating Procedure for administration of medication by inhalation using a nebuliser 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:

Administer only one medication at a time unless specifically instructed to the contrary

	Action	Rationale			
	Delegation of this task must be given by the nurse or manager caring for the patient/ citizen/ resident	Manager/ registered nurse remains responsible or the delegation			
1	Explain and discuss the procedure with the patient/citizen/ resident and obtain verbal consent	To ensure that the 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.	<ul> <li>Before administering any prescribed medication, look at the patient/citizen/residents MAR or equivalent chart and check the following:-</li> <li>The correct patient/citizen/resident and DOB</li> <li>Correct medication is selected –name of medicine, dose and frequency</li> </ul>	<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</li> </ul>			

	<ul> <li>Date and time of administration</li> <li>Expiry date</li> <li>Allergy status</li> </ul>	<ul> <li>damaged (don't use if damaged)</li> <li>Ensure patient/citizen/ resident is not allergic to the particular medicine</li> </ul>
4	Wash hands thoroughly with soap and water and/or bactericidal alcohol hand rub, and apply well-fitting gloves and put on a plastic apron,	To ensure the procedure is as clean as possible and minimise cross infection.
5.	Assemble the nebuliser equipment as per manufacturer's instructions	
4.	Assemble the nebuliser equipment as per manufacturer's instructions	
6.	Attach the mouthpiece or facemask via the tubing to medial piped air or oxygen as prescribed	If a patient/citizen/ resident has clinical need for supplementary oxygen therapy, this must <i>not</i> be discontinued whilst the nebuliser is in progress. In this situation the medication should be nebulised with oxygen therapy.
7	Ask the patient/citizen/ resident to hold the mouthpiece between the lips or apply the facemask and take a slow deep breath	
8	After inspiration, the patient/citizen/ resident should pause briefly and then exhale	
9	Turn on the nebuliser ensure sufficient mist is formed. A minimum flow rate of 6–8 litres per minute is required	
10	The patient/citizen/ resident should continue to breathe as above until all the nebulised medication is completed (0.5 mL will remain in chamber).	Optimal nebulisation of 4 mL takes approximately 10 minutes
11	Clean any equipment used and/or discard all single use disposable equipment in appropriate containers	
12	Record the administration on MAR cart or equivalent and in the patient/citizen/ resident care plan	To maintain accurate records

### <u>Competence document for Care Workers Healthcare Support</u> <u>Workers/Assistants for the administration of medication by inhalation using</u> <u>a nebulizer in a Community Settings</u>

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

HCSW Name & Signature: .....

Base/ Area :.....Date ......Date

#### PRACTICAL ASSES

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	Delegation of this task must be given by the Nurse or manager caring for the patient/citizen/resident				
3	Assists the patient/citizen/resident to sit in an upright position if possible in the bed or a chair				
4	<ul> <li>Before administering any prescribed medication, checks the patient/citizen/resident's Medication</li> <li>Administration record (MAR) or equivalent chart for the following.</li> <li>The correct patient/citizen/resident and DOB</li> <li>Correct medication is selected –name of medicine, dose and frequency</li> <li>Date and time of administration</li> <li>Expiry date</li> <li>Allergies</li> </ul>				
5	Ensure candidate washes hands with bactericidal soap and water or bactericidal alcohol hand rub, apply apron and well-fitted gloves				
6	Assembles the nebulizer equipment as per manufacturer's instructions				
7	Attaches the mouthpiece or facemask via the tubing to medical piped air or oxygen as				

	prescribed		
8	Asks the patient/citizen/resident to hold the mouthpiece between the lips or position the facemask and take a slow deep breath		
9	Explains to the patient/citizen/resident that after inspiration, the patient should pause briefly and then exhale		
10	Turns on the nebulizer ensures sufficient mist is formed. A minimum flow rate of 6–8 litres per minute is required		
11	Is aware that the patient/citizen/resident should continue to breathe as above until all the nebulized medication is completed (0.5 mL will remain in chamber).		
12	Cleans any equipment used and/or discard all single use disposable equipment in appropriate containers		
13	Record the administration on MAR cart or equivalent and in the patient/citizen/ resident care plan		

Assessor's name ...... signature : .....

Designation: .....

Date: .....

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