TEMPORARILY AMENDED FOR COVID PANDEMIC:

Valid until April 2021

Standard Operating Procedures (SOPs) and competency assessment tool for the instillation of ear drops 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

Author & Title	Assistant Director for Pharmacy and Medicines Management BCUHB Medicine Management Nurses					
Responsible dept / director: Approved by:	Executive Director of Nursing Pharmacy and Medicines Management Local Authorities 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:	 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	November 2015				
Previously reviewed:	Dec 2016	Feb 2019	April 2020			
Changes made yes/no:	yes	yes	yes			

Standard Operating Procedure for the instillation of ear drops 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)

	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 citizen understands the procedure and gives their valid consent.
2	 Before administering any prescribed medication, look at the patient/citizen/residents 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 	 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
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	Warm the drops to near body temperature by holding the container in the palm of the hand for a few minutes	To prevent trauma to the patient/ citizen/ resident

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5	Ask the service to either lie on their side with the ear to be treated uppermost or tilt the affected ear up	To ensure the best position for insertion of the drops
6	Pull the ear backward and upward to open the ear canal	To prepare the ear canal for instillation of the drops
7	Place the correct number of drops into the affected ear. Allow the drop(s) to fall in direction of the external canal.	To ensure that the medication reaches the area requiring therapy
	Then gently press on the small skin flap over the ear to help the drops to run into the ear canal.	To aid the passage of medication into the ear and prevent escape of medication
	The dropper should not touch the ear	To reduce the risk of cross infection
8	It may be necessary to temporarily place a gauze swab over the ear canal	To prevent escape of the medication
9	Ask the citizen to remain with ear tilted up in this position for 2–3 minutes	To allow the medication to reach the eardrum and be absorbed. To prevent escape of the medication
10	Remove gloves and dispose of them appropriately Wash hands thoroughly with soap and water and/or bactericidal alcohol hand rub	Infection prevention and control
11	Record the administration on the MAR chart and document in the 's car patient/ citizen/ resident care plan	To maintain accurate records

<u>Competence document for Care Workers Healthcare Support</u> <u>Workers/Assistants for the instillation of ear drops in Community Settings</u>

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

HCSW Name & Signature:

Base/ Area :.....Date

Assessor Name:

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.	2.	3.	
		Date	Date	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 procedures with the patient/citizen/ resident. Gains verbal consent.				
3	 Before administering any prescribed medication, checks the patient/citizen/resident's Medication Administration record (MAR) or equivalent chart for 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 Allergies 				
4	Washes hands thoroughly with soap and water and/or bactericidal alcohol hand rub, and apply apron and well-fitting gloves.				

5	Warms the drops to near body temperature by holding the container in the palm of the hand for a few minutes		
6	Asks or assists the patient into an appropriate position for administration of ear drops.		
7	Pulls the ear backward and upward to open the ear canal		
8	Places the correct number of drops into the affected ear. The dropper should not touch the ear		
9	It may be necessary to temporarily place a gauze swab over the ear canal		
10	Asks the patient to remain with ear tilted up in this position for 2–3 minutes		
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

