

Name:



Competency Assessment for Medicines Handling in Schools

CAS19004



Guidance for using this Competency Assessment

Competency should be assessed after initial training, this should be undertaken a minimum of three times, and thereafter a minimum of once annually. It can be assessed by direct observation or questioning or both.

- *Additionally, competency can be assessed at any time when necessary e.g. after a medicines incident.*
- *The medicines policy of the organisation should be read and be available to all staff at all times.*

NOTE: *You should only assess staff on the tasks that they are actually undertaking e.g. if they only administer tablets, then only this checklist should be completed. Sheets may be photocopied*

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Supervision of Medicines (for children who self-administer)	Staff member is aware of the level of support required for each child and the need for monitoring			
	Staff member is aware that a risk assessment is required for self-management of medicines			
	Staff member is aware that parents and / or healthcare professional may need to be involved in the decision and may require parental consent form signed			
	Staff member records the supervision required and documents all necessary details e.g. children who carry medicines with them			
	Staff member is aware of safe custody and key access requirements for Controlled Drugs that are self-managed			
	Staff member is aware of who to inform if an error or change in circumstance arise			

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Administration of Medicines	Documentation checked			
	Hands washed			
	Log book / medication record checked to ensure child has not already taken the medication			
	Medicine found			
	Expiry date of medicine checked			
	Allergy / drug sensitivity checked			
	Label checked			
	6 point check carried out (RIGHT child, medicine, dose, time, route and right to refuse) plus cautionary warnings checked			
	Identity of child checked			
	Dose prepared			
	Child informed their medication is ready			
	Ensures child is in an upright position			
	Medication given according to best practice checklists (and drink offered for solid oral medicines)			
Observes child taking their medication				

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Administration of Medicines	Records and signs immediately for what has been given or refused			
	Demonstrates or knows correct procedure for refused medication			
	Knows correct procedure for administering Controlled Drugs (if applicable)			
	Demonstrates or understands correct procedure for administering “when required” medication and using a “when required” protocol			
	Understands correct procedure for dealing with a medication error or incident			

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Administration of Liquid Medicines	*Best Practice Checklists – Liquids			
	Check expiry date			
	Mark new bottles with date of opening and the new expiry date (if applicable)			
	Shakes the bottle			
	Uses an appropriate measuring device			
	If using a measuring cup, checks the amount poured at eye level on a flat surface			
	Pour the bottle with the pharmacy label facing up to minimise spillage onto the label and making it difficult to read			
	If using an oral syringe, removes air gap and directs the syringe to the side of the mouth, squirting a little liquid in at a time			
	Wipe around the neck of the bottle after measuring to keep the container clean and keep it easy to open for next use			

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Administration of Creams	*Best Practice Checklists – Skin Creams and Ointments			
	Check expiry date			
	Mark new tubes with date of opening and the new expiry date (if applicable)			
	Puts on clean pair of gloves			
	If applying moisturiser , applies to dry skin, applies cream down the limb in the direction of hair growth using sweeping motion. For fragile skin, uses a cupping action with both hands			
	If applying a steroid cream , administers a small amount using fingertip units (using Patient Information Leaflet)			
	If applying a steroid cream , applies cream thinly			
	If using both a steroid and an emollient, it is important to leave sufficient time (approximately 30 minutes) between the two treatments			
	If applying a barrier cream , applies as per directions			
	Monitors for any signs of skin irritation or reaction and follows correct procedure if this occurs			
Shows awareness of fire risk with all emollients				

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Administration of Eye Drops	*Best Practice Checklists – Eye Drops and Eye Ointments			
	Check expiry date			
	Mark new bottles with date of opening and the new expiry date (if applicable)			
	Inspect the eye drops even if still in date			
	Hands washed and gloves worn if appropriate			
	Ensures the child is upright			
	Confirm which eye the drop(s) are for			
	Takes the top off the bottle and puts it down somewhere clean			
	Tilts child’s head backwards and gently rolls down lower lid			
	Holds dropper above the eye and squeezes a drop inside lower eyelid			
	Wipes away any liquid from the child’s cheek with a clean tissue			
	Repeats in the other eye if drops prescribed for both eyes			

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Administration of Eye Drops	If using more than one drop, waits a couple of minutes before instilling second drop			
	If using gel or ointment, squeezes about 1cm of ointment into eye pouch unless otherwise directed			
	Replaces the top on the bottle			

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Administration of Ear Drops	*Best Practice Checklists – Ear Drops			
	Check expiry date			
	Mark new drops with date of opening and the new expiry date (if applicable)			
	Hands washed and gloves worn if appropriate			
	Ensures the child is upright			
	Confirm which ear the drops are for			
	Tilts child’s head to one side			
	For children <u>over three</u> , gently pull the top of the ear upward and backward. This will straighten the ear canal.			
	For children <u>under three</u> , gently pull the bottom of the ear back and down. This will straighten the ear canal.			
	Instils the correct number of drop(s) into the ear squeezing the bottle gently if necessary			
Keeps the head tilted for a couple of minutes to let the drops penetrate				

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Administration of Ear Drops	Straightens the head and wipes away excess liquid with a clean tissue			
	Repeats for the other ear if required			
	If you are instilling drops into both ears, wait 5-10 minutes between ears to allow the ear drops to run into the ear canal			

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Administration of Nose Drops	*Best Practice Checklists – Nose Drops			
	Check expiry date			
	Mark new bottles with date of opening and the new expiry date (if applicable)			
	Hands washed and gloves worn if appropriate			
	Shake the bottle prior to use			
	Ensures the child is upright			
	Asks child to blow their nose gently			
	Gently tilts child's head back			
	Instils required number of drops into each nostril			
	Asks child to stay like this for 2 minutes			
	Replaces top on the bottle			

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Assisting with Administration of Metered Dose Inhalers	*Best Practice Checklists –Inhalers			
	Child is in an upright position			
	Removes cap and shakes inhaler			
	If inhaler is new or has not been used for a week or more, spray it into the air first to check it works			
	Asks child to breathe out as much as possible then clasp mouthpiece in the mouth ensuring lips are sealed around it			
	Asks child to breathe in and at the same time press the top of inhaler downwards to release a puff of medicine			
	Asks child to hold their breath for 10 seconds			
	If a second puff is required, waits 30 seconds before starting again			
	If administering a preventer, asks child to rinse their mouth with water after using inhaler			

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Administering Metered Dose Inhalers	If using a spacer:			
	Child is in an upright position			
	Removes cap and shakes inhaler			
	If inhaler is new or has not been used for a week or more, spray it into the air first to check it works			
	Fits inhaler into space so that inhaler is pointing straight up			
	Ensures mouthpiece is clasped in the mouth			
	Presses one puff into the spacer			
	Asks child to breathe gently through the spacer for 10 breaths			
	If a second puff is required, waits 30 seconds before pressing another puff into the spacer. Repeat as with first puff.			
	Knows to wash and rinse spacer and leave to dry naturally			
	If administering a preventer, asks child to rinse their mouth with water after using inhaler			

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Knowledge Check - Obtaining Medicines and Storage	Understands procedure for signing medication in on arrival			
	Understands procedure for signing medication in and out for school, trips, off site visits, holidays etc			
	Understands storage arrangements for emergency medicines			
	Understands importance of safe storage and key security			
	Understands requirements for fridge storage			
	Knows the correct storage arrangement for Controlled Drugs (if applicable)			

Knowledge Check - Resolution of Problems	Knows appropriate action to take if medication error is suspected			
	Has an awareness of and monitors for potential side effects of medication and knows what action to take if a side effect is suspected			
	Understands medication must be in the original pharmacy labelled container if staff are to administer it			
	Knows the correct procedure if dose changes are made to medication			

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
Knowledge Check - Recording and Documentation	Knows the importance of the documentation required from parents e.g. parental consent letter			
	Knows the importance of detailed recording of administration of medicines			
Knowledge Check - Disposal	Understands all unwanted / discontinued medication to be returned to the parents as soon as possible and at the end of term			
	Knows records must be kept of all medication that has been returned to complete audit trail			
Knowledge Check - Non-Prescribed Medicines	Understands that written parental consent is required			
	Understands that ideally written certification by the parent is required to confirm the medicine has been taken before without ill effect			
	Understands that the GP / healthcare professional may need to be involved if the child is taking other medicines			
	Knows that children under 16 should never be given aspirin-containing medicines unless prescribed by a doctor			

Performance criteria	Interpretation of criteria	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign	Standard met Yes/No Date & sign
----------------------	----------------------------	---------------------------------------	---------------------------------------	---------------------------------------

Knowledge Check - Adrenaline Pens and Insulin	Understands that these tasks require specialist training by a healthcare professional			
	Understands an assessment of competence must be undertaken and passed before the task can be undertaken			