



<p>Team Name: Pharmacy &amp; Therapeutics Team</p> <p>Team Lead: Director -Pharmacy</p> <p>Approved by: Regional Lead – Medical Services &amp; Chief Medical Officer</p>	<p>Reference Number: CLI.6010.PL.046</p> <p>Program Area: Pharmacy</p> <p>Policy Section: General</p>
<p>Issue Date: April 14, 2021</p> <p>Review Date:</p> <p>Revision Date: August 17, 2023</p>	<p>Subject: Medication Self-Administration</p>

*Use of pre-printed documents: Users are to refer to the electronic version of this document located on the Southern Health-Santé Sud Health Provider Site to ensure the most current document is consulted.*

**POLICY SUBJECT:**

Medication Self-Administration

**PURPOSE:**

To provide guidance to staff regarding self-administration of medications by patients

**BOARD POLICY REFERENCE:**

Executive Limitation (EL-2) Treatment of Clients

**POLICY:**

Self-administration of medications by patients is permitted in acute and long term care facilities when the prescriber deems the patient is medically competent and documents a written order in patient’s health record.

Only medications on the approved list are eligible for self-administration by patients. Medications that are self-administered by clients are stored safely and appropriately. For example, the medication can be stored in a cabinet with limited access or at the bedside in a locked drawer.

**PROCEDURE:**

- The prescriber determines whether the patient is competent to self-administer medication(s).
  - The following criteria must be met:
    1. Reasonable memory recall and understanding of directions.
    2. Medical and physical condition capable of performing the task.
    3. Conducive environment for medications to be left at the bedside:

- a. Sharing a room with others whom may unintentionally/intentionally consume the medications due to one's own disease process &/or
  - b. Current status of the whole ward/unit mix (due to constant change of patients, this must be re-evaluated on a continual basis).
- The prescriber determines which medications from the below medication list are safe for self-administration of the patient.
  - The approved list includes:
    1. Topical creams/ointments
    2. Inhalers
    3. Nicotine gum or inhaler
    4. Nitroglycerin tabs/spray
    5. Eye drops
    6. Medical cannabis – refer to Cannabis for Medical Purposes (CLI.6010.PL.023)
    7. Narcotic/Controlled medications not permitted
    8. Other medications may be considered based on nursing assessment and prescriber's order
    9. Acetaminophen, Ibuprofen or/and Naproxen for Post-Partum analgesia
- The prescriber will verify the patient's previous history of allergy or contraindications to any of the medications.
- The prescriber writes an order for self-administration and indicates if the medication can be stored at the patient's bedside.
- Medications will either be dispensed by pharmacy or supplied by the patient.
- Medications left at the bedside must be labeled accordingly:
  - The patient's name
  - Medication name/strength
  - Directions for use
  - Quantity
- Pharmacy staff and/or nursing staff:
  - Provide education to the patient concerning medication administration and safe bedside storage.
  - Observe the patient during initial medication administration to ensure the education was understood.
- The nurse must transcribe on the Medication Administration Record (MAR): "self-admin by patient" for the ordered medication, and attach the Medication Self-Administration Record (CLI.6010.PL.046.FORM.01) on the chart. For Post Partum utilize the Post Partum Medication Self-Administration Record (CLI.6010.PL.046.FORM.02).
- The nurse must document the indication for use and the effectiveness of any self-administered PRN medication.
- Nursing staff monitors the patient for compliance to the prescribed self-administration medication and documents in the health record.
- If there is a change in the patient's condition, medication non-compliance or other risk identified, self-administration of medication may be discontinued by the prescriber.
  - In the above situation, nursing will contact the prescriber regarding review and possible discontinuation expeditiously.

- Any remaining medication may be taken home at the time of discharge if assessed to be appropriate.
- In Personal Care Homes, reassess resident health status at quarterly reviews.

**SUPPORTING DOCUMENT:**

[CLI.6010.PL.046.FORM.01](#)

Medication Self-Administration Record

[CLI.6010.PL.046.FORM.02](#)

Post Partum Medication Self-Administration Record

**REFERENCES:**

Cannabis for Medical Purposes (CLI.6010.PL.023)