



Administration of Medication: Practical Assessment Form

Staff Name: Date:

Assessor's Name: Designation:

Venue:

Key: √ = Competent / Achieved x = not yet competent N/A = not applicable

Skills Criteria

To be determined by direct observation by the assessor, of the staff member administering medication to the individuals within the above mentioned house.

1. Prepares the individual for administration
2. Follows basic hygiene procedures (washes hands / PPE)
3. Prepares appropriate equipment and materials for administration
4. Accesses records and checks details: -
 - a. Identity of individual
 - b. Name of medication
 - c. Timing of Medication
 - d. Dosage of medication
 - e. If PRN – that none has been given recently
 - f. Checks administration procedure (individual preferences)
5. Accesses medication and: -
 - a. Checks details of medication against records
 - b. Checks expiry dates
 - c. Checks records are correct and complete
 - d. Checks quantity of Medication held is correct
 - e. Checks administration method (route)
6. Prepares the correct medication using a non touch technique
7. Returns medication not required to safe storage
8. Correctly identifies the person to whom it is to be administered
9. Provides the required support for the individual to take medication
10. Checks the individual has taken the medication
11. Completes the medication chart appropriately
12. Administers in a way which promotes good practice
(e.g. administers to one person at a time)
13. Remains focused on the task
14. Maintains security of keys and medication throughout
15. Encourages self management where possible and appropriate

Outcome: Passed Not Yet Passed Action Plan identified

Signatures:

Assessor: Staff member: