

<b>Holland Bloorview</b> Kids Rehabilitation Hospital	Manual Standard Of Care	Cluster Interprofessional
	Theme Medication Management	Number 00299
Medication – Family Member(s) Administrating Medication(s) to their Child		

**Purpose**

At Holland Bloorview Kids Rehabilitation Hospital, independence is encouraged for clients and their families. Part of this independence may include medication administration. The purpose of this standard is to outline the procedure for family members giving medication to their child while in hospital. The goal is to either educate parents about their child's medication(s) so that they can administer these medications safely and independently in order to prepare the family for leave of absence and/or discharge and/or allow families who stay at the bedside to continue giving their child's medications (for example, Sleep Study). A Physician/Nurse Practitioner Order is required to initiate this program.

**Standard**

The following procedure must be followed for all inpatient clients.

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**Procedure:**

1. The families desire to give their own medications during hospitalization is discussed at rounds or Family Team Meeting.
2. If parents have not already been giving their child’s medication, then a teaching/ learning plan is developed by the Primary Nursing Team (PNT) If parent/delegate has been giving the child the medications at home then teaching/learning plan is not required, however nursing needs to review medications with family member to ensure that family is aware of medications ordered while the child is in hospital. (e.g. sleep study)
3. The clinical pharmacist teaches family member(s) about their child’s medication(s), including drug names, dosages, frequency, treatment duration, preparation, administration, storage requirements, documentation and therapeutic as well as adverse effects. The nurse reinforces this education throughout the child’s stay. The pharmacist is not required to teach family medication administration for sleep study clients.
4. The pharmacist and/or nurse documents education on progress notes and Teaching/Learning plan.
5. The family member(s) demonstrates proper preparation, administration and documentation of child’s medication under supervision of the nurse over the specified period outlined in the Teaching/Learning Plan, if appropriate.
6. The family member(s) accepts responsibility for their child’s medication by signing the Family Member Medication Administration Contract attached. The contract indicates the period of time when a family member will be responsible for giving their child’s medication. Other family members may be delegated on the contract by the parent to also participate in the program to administer their child’s medication if they have received the education.
7. The medications must be stored in a locked bedside table in the child’s room. The nurse obtains a key from the unit secretary and gives it to the family member. **NOTE:** If the family members leave the hospital, they must report off to nursing and leave their key. In the event that the key is lost / forgotten, the unit will have a spare key. A replacement cost of \$25 will be charged to the client / family for lost keys.
8. The medications requiring refrigeration are kept in the refrigerator in the medication room and are accessible in the presence of a nurse only.
9. Controlled drugs including narcotics are stored in a locked drawer in the medication room and are accessible in the presence of a nurse only.
10. The client’s nurse ensures that the bedside medication drawer is stocked with the appropriate administration supplies.

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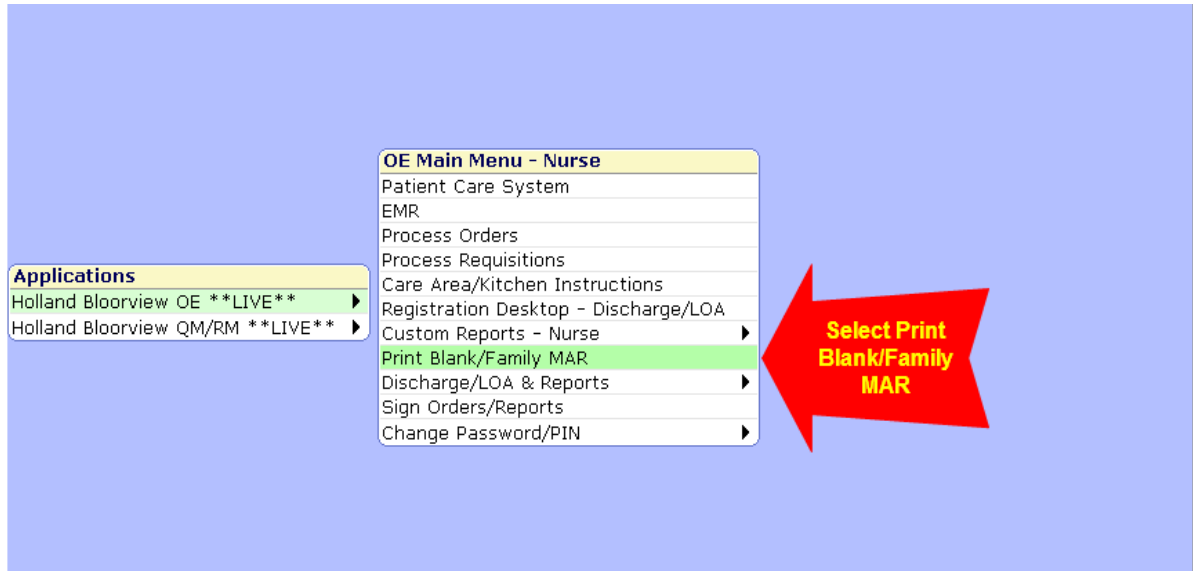
11. The client's nurse prints a Family Medication Administration Record (MAR) by printing the eMAR created by pharmacy and reviews it with a family member. This MAR is kept at the bedside and is updated when a child's medication orders change. See attached instructions for how to print a MAR.
12. The family member initials for each medication they administer to their child.
13. It is the responsibility of the family member to inform the client's nurse if they are unable to administer a medication dose during the contracted time 30 mins before or 30 mins after the time indicated on the Family MAR.
14. The client's nurse checks the Family MAR at **appropriate times throughout** the shift to ensure medications have been signed off and administered. The nurse signs off on the EMAR as a "non-administered" and selects the non-admin comment of "FAMILY ADMIN PROGRAM".
15. If the physician/nurse practitioner changes the client's medication orders, the pharmacist/nurse ensures that meds and supplies in the drawer reflect the change in order and ensures all discontinued medications/supplies are removed from client's locked medication drawer at bedside. It is the responsibility of the client's physician/nurse practitioner/pharmacist/nurse to educate family member(s) on an ongoing basis about alterations in medication regime. The nurse prints a new eMAR every time an order is changed.
16. If a family member makes an error, a medication incident report is filled out by the healthcare provider who discovers the error. The nurse/pharmacist educates the family on the importance of letting the nurse know if an error has occurred and works with the family to identify potential improvements in the system to avoid future errors.
17. The family member returns the Family eMAR copy and the key to the client's nurse at the end of contracted time.
18. The nurse ensures that clients going on Leave of Absence are given medications for the weekend as per Leave of Absence policy. Families are encouraged to call the unit, when on leave if they have any questions about their child's medications.

**Documentation:**

1. The NURSE/ delegate outlines teaching schedule on the Teaching/Learning Plan
2. The NURSE/delegate records teaching/learning progress in progress notes.
3. The family member documents on the Family MAR when medication is administered.
4. The Family Member Medication Administration Contract is kept in client's health record.
5. Family MARs are obtained from family members and kept as part of the client's health record.

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### How to Print a BLANK/Family MAR



Enter the clients name in the Patient field. The remainder of the fields i.e. status etc. will default onto the screen.

Enter the start Date as today. Leave the Start shift as "1"

Alternate MAR format – Use F9 and select either the 14 DAY MAR or FAMILY for Family/Client MAR.

If you do not want the MAR to print on the designated printer of 3EAST-M etc you can select an Alternate Printer.

Select OK and the MAR will queue to print on the printer.

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Attachment:

[Consent for Family Members administering Medications to their Child](#)  
[Family Members schedule for Administering Medications to their Child](#)

**Reviewed and Approved by:**

Safe Medication Practice Committee – June 2012

Nursing Practice Council – Sept 2012

Pharmacy and Therapeutics Committee – Sept 2012

Medical Advisory Committee – Feb 2013

Professional Advisory Committee – Feb 2013

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External Link(s) - Click on the title(s) below to open the link.
• <a href="#"><u>Consent for Family Members Administering Medications</u></a>
<a href="#"><u>Schedule for Administering Medications</u></a>

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<b>Standards Lead</b>	<b>Issued Date</b>
Joanne Maxwell	-
<b>Committee Chair</b>	<b>Review Date</b>
Joanne Maxwell	May 01, 3013
<b>Committee Member(s)</b>	<b>Review Date</b>
Kim Krog	May 01, 2013
<b>Authorizer</b>	<b>Review Date</b>
Diane Savage	-
<b>Authorizer's Signature</b>	