**Appropriate covert administration of medication - A checklist for care staff**

This checklist will help to ensure that steps have been completed for appropriate covert administration of medication. It can be used to train care staff on the steps that need to be taken and to help them understand the importance of each step.

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| Step 1 |  |
| Has a Mental Capacity Assessment for understanding medication been completed and determined a LACK of capacity? |  |
| Is a Deprivation of Liberty Safeguards (DoLS) or Liberty Protection Safeguards (LPS) application necessary in the context of the holistic care of the person or if behaviour modifying medication is prescribed? |  |
| Is all documentation included in the care plan? |  |
| **Step 2** |  |
| Has the person appointed a Lasting Power of Attorney (LPA)? |  |
| Does the person have family or friends who could represent their wishes? If not, has an advocate or relevant persons representative (RPR) been appointed? |  |
| Has a multidisciplinary team developed the Best Interest Decision actions considering the 10 checklist points? |  |
| Has a doctor and pharmacist completed the documentation required and included this in the care plan? |  |
| Is a review time scale clearly indicated on the documents? |  |
| **Step 3** |  |
| Are there clear instructions for carers to be able to administer each medication appropriately in a covert way? |  |
| Are carers aware if they are administering a licensed or unlicensed product or “off label” use? |  |
| **Step 4** |  |
| Is there indication on the profile of the person that covert administration may be necessary? – this may be kept with the MAR sheet to assist medication rounds. |  |
| Are kitchen staff aware of any dietary changes? |  |
| Is the carer documenting on the back of the MAR sheet when medication is administered covertly? |  |
| **Step 5** |  |
| Are carers familiar with the personal preferences and directions to administer for covert administration? |  |
| Are carers aware of actions needed when covertly administered medication is refused or only partially taken? |  |
| Are carers aware of the potential detrimental effects to the person if covert administration is resulting in refusal of food or drink? |  |
| **Step 6** |  |
| Are reviews being carried out in agreed timescales? |  |
| Have there been changes to medication which would trigger a review or a DoLS/LPS application? |  |