



Checklist of practical steps when considering covert administration¹

- ✓ Is the patient consistently refusing medication?
- ✓ Establish reasons why the patient is refusing medication – e.g., medication unpalatable, adverse effects, swallowing difficulties, administration timing etc
- ✓ Consider alternative methods of administration, for example a change in formulation such as a liquid or dispersible tablet
- ✓ Conduct Structured Medication Review (SMR) and decide what is essential
- ✓ If patient is refusing medication for a mental health disorder, the relevant mental health team needs to be consulted
- ✓ If there is no reason to doubt a patient's mental capacity, then medication cannot be administered covertly
- ✓ If there is a reason to doubt the patient's mental capacity, then firstly support the patient into making his/her own decision
- ✓ Assess the patient's mental capacity if such support has not helped
- ✓ If patient lacks capacity to decide about his/her treatment, establish whether there is an Advance Decision, Lasting Power of Attorney for health & welfare, Court appointed deputy or Independent Mental Capacity Advocate (IMCA)
- ✓ A Best Interests meeting with the relevant people should be organised
- ✓ If a decision is made to administer medication in a covert manner, such essential medication needs to be specified and a care plan agreed with a review date
- ✓ A pharmacist should be involved to advise on the forms of administration and what food or drink the medication can be disguised in.
- ✓ Once a covert administration plan is implemented, the care provider should coordinate the review with the relevant people and inform the DoLS team

Covert administration is only likely to be necessary or appropriate where²:

- ✓ A person actively refuses their medication **AND**
- ✓ That person does not have the capacity to understand the consequences of their refusal (as determined by the Mental Capacity Act 2005) **AND**
- ✓ The medicine is deemed essential to the persons health and wellbeing

¹ Guidelines in Practice, February 2019, Volume 22, Issue 2: 19-24

² [Care Quality Commission: Covert administration of medicines, 23 October 2020](#)