

CareHomesGuidance

Overt administration of medication - Quick Reference Guide for care homes

This reference guide has been produced by the BLMK ICB Care Homes Medicines Optimisation team to support care homes, PCNs & GP Practices with managing residents/patients who may require their medicines to be administered overtly. This practice is different to covert administration of medication. For further information on covert administration of medication please refer to guidance available on the [care home page](#) via the BLMK ICB Medicines website.

Overt administration – Important points:

- Overt administration is the practice of putting medication into food and drink to make it more palatable often at the request of the individual, but unlike covert administration it is not hidden or disguised.
- Overt administration could still be regarded as deceitful and open to abuse unless clear documentation supports the practice in the individual care plan.
- Overt administration is a co-operative process that is transparent and open to scrutiny and audit and requires a person's capacity to understand what is being done.
- An example of Overt administration is if a person has swallowing difficulties and has consented to medication being mixed in food and drink to aid administration and is fully aware that this is being done.
- **A person MUST have capacity to consent to their medications being administered this way. If that person's understanding that they are taking medication and what it is for, is doubted, but they are accepting their medication overtly, then it is the manager's responsibility to ensure that a MCA assessment is completed by an appropriately trained member of staff. If they are deemed to lack capacity for that decision, then the 'Seven steps' covert administration process should be followed.**
- If not already done, it is recommended that a SMR is conducted by a prescriber or pharmacist to review the medication and explore other options before considering overt administration. This may include considering alternative formulations (e.g. dispersible tablet, liquid etc.) especially if the person struggles to swallow large tablets or capsules, or if the person does not like the taste of a medicine. The review may also be an opportunity to deprescribe medication if this is appropriate.
- A pharmacist must be consulted for advice on how the medication can be administered overtly. This advice should preferably be in writing – see template overleaf.
- Care staff MUST advise the individual that their medication has been mixed with food or drink every time it is administered, and this should be clearly documented.
- In general, the medication(s) which are to be administered overtly should be mixed with the smallest volume of food or drink possible to ensure that full dose is taken. The medication must be administered immediately after mixing it with food or drink and each medication should be administered separately, not mixed together.
- Overt administration (like Covert administration) involves altering medicines, for example crushing tablets or opening capsules, and/or adding medicines to food or drink. This is altering the medication and becomes an unlicensed (off-label) activity. Therefore, it is important to get authorisation, preferably in writing, from a prescriber (independent prescriber). The template overleaf could be used to record this authorisation.

Overt instructions for carers from pharmacist

This information should be included in the patient’s care plan and with the medicines administration record (MAR) sheet.

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Practical points for care staff:

- ✓ Before administering medication in an overt manner (mixed with food or drink) the patient should be encouraged to take it in the normal way.
- ✓ Care home staff should be aware of personal preferences for administration via the care plan.
- ✓ Care staff **MUST** advise the individual that their medication has been mixed with food or drink every time it is administered, and this should be clearly documented.
- ✓ Pay particular attention to the pharmacist’s advice with regards to specific instructions for how each medicine should be given, including cautions such as temperature/types of food to avoid.
- ✓ In general, the medication(s) should be mixed with the smallest volume of food or drink possible to ensure the full dose is taken.
- ✓ Try and add the medicine to the first mouthful of food so that the full dose is received.
- ✓ The medication must be administered immediately after mixing it with food or drink.
- ✓ Consider the taste and other possible effects of the medicine, particularly if tablets are crushed or contents removed from capsules.
- ✓ Different medicines should not be mixed together in food or drink as this cannot be quantified and also could be unsuitable to be mixed together.
- ✓ Administration must be recorded on the MAR chart

Name of patient			
Date of birth		Location	

Medication:	Advice from pharmacist:	Resource(s) used:	Date:	Pharmacist signature:

Important – please note that overt administration usually involves altering medicines and this may be unlicensed (off-label) activity. By signing this form the prescriber is also authorising unlicensed (off-label) use of medication. At present this can only be done by an independent prescriber.

Prescriber name:	
Signature:	
Date:	

Report to GP or an appropriate healthcare professional at next contact if:

- Overt administration results in a refusal to eat or drink
- It appears that the full dose of medication has not been taken (make a note on MAR chart or eMAR)
- There appears to be a deterioration in the patient’s health & well being, or there is reason to doubt capacity