

Compilation of Interim MAR by Senior Care Workers

Where there is a delay in acquiring a MAR chart from a participating community pharmacy, a hand written NPT Social Services Interim MAR chart may be completed by the Service Provider and used for **no more than four working days**. Completion will be undertaken by Supervisor and **MUST** be checked by a second individual such as a care worker or family member, signed and dated. If an Interim MAR is provided, this should be recorded in the Service Delivery Plan of Care.

Interim MAR charts should only be provided where all other possible options of MAR provision have been exhausted, via community pharmacy or hospital pharmacy (if discharged from hospital) where appropriate and following consultation with a health care professional (e.g. via Out of Hours services or NHS Direct) who could advise on the urgency of the individual taking the medicines that evening.

Blank Interim MAR charts are controlled stationery and as such must be kept securely until needed for use.

Procedure for Compilation of Interim MAR

Purpose

To describe the process of compiling an Interim MAR (IMAR)

Scope

This procedure will detail how Interim MAR charts will be compiled by Supervisors where obtaining a pharmacy produced MAR is not possible.

Responsibility

It is the responsibility of:

- the Supervisor or healthcare professional to initiate IMAR
- the Care Worker or health care professional to check the IMAR after compilation
- the Supervisor to arrange a pharmacy produced MAR as soon as possible as IMAR are only to be used for **four** working days unless counter signed by CMMT which then extends the use to seven days in total
- all staff undertaking this procedure to ensure that this procedure is adhered to and any deviation must be reported to their Manager or the CMMT
- each senior/supervisor to ensure that they are trained and deemed competent to compile IMARs

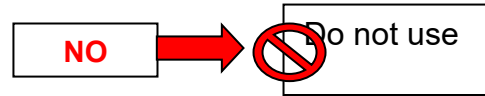
Process

The process must be undertaken by two people. The Supervisor must compile the IMAR and the other must check.

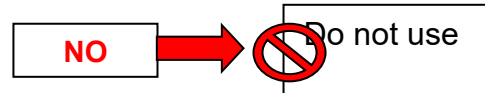
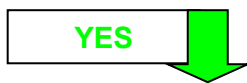
1. Arrange medicine containers on an uncluttered surface.
2. If the individual has recently been discharged from hospital, refer to the hospital's Transfer of Care list of medicines where this is available.
3. Before using, the Supervisor must assess the suitability of medicines for use by Care Workers following the flowchart below.
4. Place unsuitable medicines in a bag and put away in a secure place.

ASSESSING SUITABILITY OF MEDICINES FLOWCHART

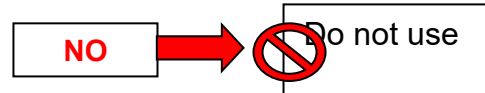
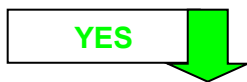
IS THE MEDICATION IN THE ORIGINAL DISPENSED CONTAINER?



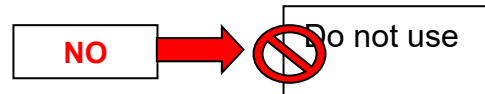
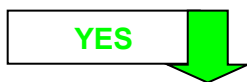
ARE THE LABEL, CONTAINER AND MEDICATION INTACT, CLEAN AND IN GOOD CONDITION?



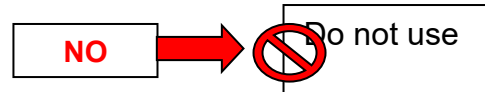
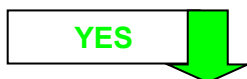
HAS THE MEDICATION BEEN DISPENSED WITHIN THE LAST SIX WEEKS?



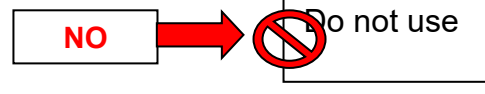
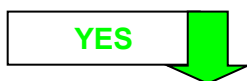
DOES THE LABEL STATE THE CORRECT PATIENT NAME?



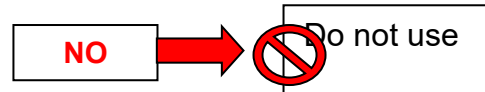
ARE THE INSTRUCTIONS ON THE LABEL LEGIBLE, CLEAR AND ADEQUATE?



IS THE MEDICINE WITHIN THE EXPIRY ON THE DISPENSING LABEL OR ORIGINAL CONTAINER?



DO ALL THE CONTENTS OF EACH CONTAINER MATCH THE MEDICATION NAME AND STRENGTH STATED ON THE LABEL?



MEDICATION SAFE TO USE

5. Using BLOCK capitals and black **indelible** ink to complete the Interim MAR, complete:
 - the individual's forename and surname
 - the individual's date of birth
 - the individual's GP
 - the date i.e. month and year
6. Copy the exact text from the medicine label onto the first container under the heading 'Drug' on the IMAR, including:
 - medicine name and form
 - strength of medicine
 - dose instructions
 - special instructions
 - warnings
7. The supervisor will initial each box of the IMAR after completing.
8. The checker will ensure each entry is correct and counter sign.
9. Continue until each medicine has been copied onto the IMAR.
10. Cross through all the boxes that will not be required throughout the IMAR's use, by using a **Z** shape.
11. Both the Supervisor and checker will sign and date at the bottom of the IMAR thus:

Date, written by NAME, DESIGNATION, Signature, Date

Date, Checked by NAME, DESIGNATION, Signature, Date

12. Where the individual has Warfarin tablets the policy and procedure regarding Care Worker administration of Warfarin must be adhered to and the Supervisor must make appropriate arrangements to ensure no doses of Warfarin are missed.
13. Where any medicines are excluded from the IMAR following assessment, the Supervisor must seek advice from a health care professional (via Out of Hours, NHS direct etc) re any potential risk to the individual of missing a dose, and the Supervisor must make arrangements for urgent replacement (if needed/appropriate) of the medicine at the earliest opportunity i.e. the following day where this is possible.
14. The Supervisor must make arrangements to have the IMAR replaced with a community pharmacy produced MAR at the earliest opportunity i.e. the following day where this is possible (individuals regular pharmacy to be used at all times).