





Medication Training for Care Workers



Medicines Shadowing Record:

QCF Units Supporting Use of Medication in Social Care Settings/ Administer medication to individuals, and monitor the effects.

As part of your learning you are required to undertake a period of shadowing where you observe other members of staff supporting people with their medicines. Any shadowing experiences you gain should be recorded in this workbook which will be given to you by your supervisor/manager before the course starts. The Shadowing Record has been designed for you to work at your own pace, with the support of your trainer and/or your line manager/supervisor and the colleagues who you will shadow during your training period. You will need to complete a minimum number of 3 shadowing visits, record these. and write a little about these experiences.

Please ensure you gain consent with the service user prior to carrying out each of your shadowing activities.

You may hand in your completed Workbook and Shadowing Record when you attend the second training session or, alternatively, it can be submitted by your supervisor with your completed competency assessment after the training.

Name:	
Organisation:	
Date of Completion:	



About the Medicines Shadowing Record

As part of your training you will need to record that you have undertaken at least 3 (and a maximum of 6) shadowing observations, 2 of which must involve observing a service user who is having their medicines administered using a Medication Administration Record (MAR) chart.

You will need to write about your experiences for each of these shadowing activities you undertake. Your shadowing experiences will vary and you will have your own thoughts about them, but here are a few questions to help you.

Questions you may consider

- How did your colleague greet the service user?
- Where did you find instructions for the service user relating to their medicines
- Did you observe the whole process of the person being supported with their medicines?
- What did you observe during the support with/administration of medicines?
- How did the Service User seem to feel about the care given at the call?
- Were there any practical problems experienced during the call regarding the person's medicines?
- Describe how your colleague spoke to and engaged with that service user
- What role did you have in the call?

You do not need to answer all of these for every observation - some will not apply to your specific experience and you will have your own thoughts about it, but you may find the questions helpful in getting started.

Observation 1				
Date:	Time: Level of		Support observed:	
Care worker Comments:			I	
Name of Care Worker:		Signed:		Date:
Name of Supervisor:		Signed:		Date:
Observation 2				
Date:	Time: Level or		Support observed:	
Care worker Comments:				
Name of Care Worker:		Signed:		Date:
Name of Supervisor:		Signed:		Date:

Observation 3					
Date:	Time:		Level of	Support observed:	
Care worker Comments:					
Name of Care Worker:		Signed:		Date:	
Name of Supervisor:		Signed:		Date:	
Observation 4					
Date:	Time: Level o		Level of	f Support observed:	
Care worker Comments:					
Name of Care Worker:		Signed:		Date:	
Name of Supervisor:		Signed:		Date:	

Observation 5					
Date:	Time:		Level of	Support observed:	
Care worker Comments:					
Name of Care Worker:		Signed:		Date:	
Name of Supervisor:		Signed:		Date:	
Observation 6					
Date:	Time: Level			of Support observed:	
	Time:		Level of	Support observed:	
Care worker Comments:	Time.		Level of	Support observed:	
Care worker Comments: Name of Care Worker:	Time.	Signed:	Level of	Date:	