



Form A

Information About This Medication Administration Kit

This Kit has been designed to assist in minimising the risks associated with the administration of medication and is particularly important when a person uses more than one service. The Scheme has a detailed system that uses various forms to track the administration of medication in order to reduce the likelihood of error. We expect that you will inform us whenever there is a change to the medication that is taken by the person we are supporting. Please contact the relevant Coordinator when changes occur and they will send you out a new "Form C - List of Medication Authorised by Doctor". You will need to have this completed by your Doctor before we can provide support. Please ensure that your GP lists all non-prescription medication such as fish oil, cornflower, ginseng, ginkgo biloba, St. John's Wort etc. as our staff cannot administer them without GP approval.

The Forms used in this Program are:

1. Form A – Information About This Medication Administration Program (this document)
2. Form B – Permission to Administer Medication
3. Form C - List of Medication Authorised by Doctor
4. Form D – Authorised PRN Plan
5. Form E – Medication Count - Scheduled & PRN
6. Form F – Recording Sheet - Scheduled Medication
7. Form G – Recording Sheet - PRN
8. Form H – Self Administered Medication Authorisation

The Person, their Parents or Guardian need to ensure that:

- they have completed Form B - "Permission to Administer Medication"
- the person's Doctor has completed:
 - Form C – "List of Medication Authorised by Doctor"
 - Form D – "Authorised PRN Plan"

This form is part of a "Medication Kit" that has been designed by to assist in minimising the risks associated with the administration of medication when a person uses more than one service. Staff supporting the Person are to maintain Forms E, F, G, & H and are to ensure that **all** Forms remain with the Person in the Kit supplied where they move from one Agency to another. Link Staff must photocopy and file a copy of each of the Forms before the Person moves from their care as a record of the medication administered.