

## **Good Practice Guidance for Care homes**

# Practical guidance for Administration of Medication to Residents with swallowing difficulties

## The guidance applies to residents:

- Who find it difficult to swallow tablets or capsules
- Who have been assessed by speech and language as requiring a modified diet and fluids
- Who require medication to be administered via a feeding tube

This guidance does not cover the management of patients who are refusing medication.

For patients where oral medication usage is further complicated by psychological conditions such as learning disabilities, severe mental illness and dementia a multidisciplinary team should be involved in a best interest decision about the need to continue the medication, and how any medication administration should be managed.

Patients with dysphagia should be referred to the speech and language team.

## Protocol for patient unable to swallow tablets:

- Arrange a meeting with the resident and all the care staff involved with the resident, to establish the extent of swallowing difficulties. Consider if the resident can swallow similar sized food or if they can manage liquids (without a thickening agent).
- Consult with prescriber, explaining the problems associated with administering each medication and request a medication review. A copy of this communication should be kept in the care plan.
- The prescriber will then arrange for a suitable medication review which may involve liaison with a pharmacist.
- The prescriber will amend the prescription to enable safe administration. This will usually be:
  - o a switch to a liquid (if available and suitable) or
  - guidance within dosage instructions on how to administer the medication e.g. "may be added to food to facilitate swallow" or "may be crushed and mixed with food to facilitate swallow" or
  - o a switch to an alternative medication.

#### **Procedure for Administration:**

• The preferred option (if the medication is suitable to be administered with food) is to administer the tablet or capsule whole in yoghurt or apple sauce.

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Consider whether the resident can manage to swallow a similar sized piece of food to the tablet or capsule and refer to speech and language therapist for further advice if needed. Tablets less than 4mm diameter can usually be safely swallowed in yoghurt. If administering medicines in food, complete an Administration of medicines in food permission form.

- Some medicines are available as a licensed liquid; if the resident can safely manage liquids the GP may switch the medication to a liquid. Many liquid medicines however may not be suitable for patients requiring thickened fluids.
- If a liquid medication is not available some capsules can be opened and sprinkled on yogurt and some tablets can be crushed and mixed with yogurt.
  Sometimes this may result in an unpleasant taste that the resident cannot tolerate.
- Residents must consent to having their medication administered in this manner.
- Residents who do not have capacity must have a best interest's decision to administer in this way.
- Instruction to alter the tablet or capsule must be on the label and documented in the patient's care plan.
- The procedure for administration should be clearly documented; this needs to be individually tailored to include the vehicle the medication is administered in e.g. water, juice, jam, yogurt at room temperature.
- Medication must be prepared immediately prior to administration.
- Each medicine must be administered separately.

## The following are summaries on processes of administration

## **Dispersing Tablets in water:**

- Place the tablet(s) in a small quantity of water, allow to disperse this can take a few minutes; alternatively the water can be agitated with a spoon to speed up the process.
- Each different medication should be separately dissolved and administered.

#### **Crushing Tablets:**

- A tablet crusher must be used for this process. A separate tablet crusher must be used for each different tablet and for each service user which must be thoroughly cleaned and dried in between each administration process.
- Crush the tablet using a tablet crusher; add the crushings to a small amount of a suitable soft food, alternatively add a little water or squash to the crusher for the resident to take as a liquid.
- Each different medication should be separately crushed and administered.

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#### **Opening capsules:**

- Open capsule and sprinkle contents into either a small volume of soft food water or squash
- Each different medication should be separately administered

## Administration via a feeding tube:

- Feeding tubes should be flushed with water before and after each medication is administered. If a liquid medicine is thick or syrupy, dilution may be required. Some patients are fluid restricted; this needs to be taken into account.
- When administering crushed or opened capsules via a feeding tube, add the powder to 15-30ml water and mix well. Draw into a 50ml oral syringe and administer. If you have used a tablet crusher, rinse this with water and administer the rinsing also.

## Suggested protocol for administering medicines via feeding tubes:

- 1. Stop the feed (leaving a break if necessary)
- 2. Flush the tube with 30ml water
- 3. Prepare the first medicine for administration and give it.
- 4. Flush with 10ml water
- 5. Repeat stages 3 and 4 with subsequent medicines
- 6. Flush with 30ml water
- 7. Re-start the feeding (leaving a break if necessary)

## CARE STAFF CAN ONLY ADMINISTER MEDICINES IN THIS MANNER ON THE INSTRUCTION OF THE PRESCRIBER

A WRITTEN INSTRUCTION TO CRUSH OR DISPERSE TABLETS OR TO OPEN CAPSULES MUST BE DOCUMENTED IN THE PATIENT'S CARE PLAN. (Nursing staff should refer to Nursing & Midwifery Council (NMC) guidance)

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