

Common safeguarding issues – Maladministration of medication

This guidance is designed to help managers and professionals know when to report an incident of misuse or maladministration of medications in accordance with the Oxfordshire Safeguarding Adults Board's procedures.

Good medical care also includes the proper use of non-oral medication, equipment and appliances including catheter care, use of oxygen, etc.

There are isolated cases of medication being mismanaged recklessly or intentionally, such as the misappropriation and misuse of drugs by staff. These should always be reported.

Mistakes are made by people across the process from the GP to the pharmacist and care staff. Incidents occur where a person is accidentally given the wrong medication, given too much or too little of their own medication or given it at the wrong time. Most errors do not result in significant harm but mistakes can lead to serious and, in some cases, fatal consequences.

Incidents meeting the lower level criteria should, wherever possible, be addressed at a local level with the individuals and professionals concerned with the aim of promoting positive relationships and an open culture which addresses the underlying issues.

For further details please refer to the Threshold of Needs matrix overleaf.

Reporting: To be reported within one working day of establishing it is a safeguarding issue.

Thames Valley Police

Cases of serious neglect should be reported to the police.

Non-emergency number: **101**

In an emergency dial: **999**

Oxfordshire County Council

Wherever possible please use the on-line referral form at:

<http://www.osab.co.uk/public/reporting-concerns/>

Telephone: 0845 050 7666

Threshold of Needs Matrix:

Guidance: This tool does not replace professional judgement or aim to set a rigid threshold for intervention. It helps you consider the type and seriousness of abuse and the circumstances in which a referral to adult social care may be required.

Types of abuse and seriousness	Levels of harm and related indicators/examples				
Level	Lower Level Harm Would not normally be reported to safeguarding. Incidents meeting the lower level criteria should, wherever possible, be addressed at a local level with the individuals concerned with particular attention to preventing reoccurrences.		Significant ↔ Very significant Harm Would normally need to be reported to safeguarding regardless of whether harm has occurred or not.		Critical Serious criminal matter – immediate discussion with police required. Must be reported to safeguarding in all cases.
Medication errors	<ul style="list-style-type: none"> Isolated incident where the person is accidentally given the wrong medication, given too much or too little medication or given it at the wrong time but no harm occurs 	<ul style="list-style-type: none"> Isolated incident causing no harm that is not reported by staff member Isolated prescribing or dispensing error by GP, pharmacist or other medical professional resulting in no harm 	<ul style="list-style-type: none"> Recurring missed medication or errors that affect more than one adult and result in actual or potential harm to one or more adults Recurring prescribing or dispensing errors by GP, pharmacist or other medical professional that affect more than one adult and/or result in harm to one or more adults 	<ul style="list-style-type: none"> Covert administration without the person's consent or having a best interest decision recorded in the care plan Misuse of/over-reliance on sedatives to control challenging behaviour 	<ul style="list-style-type: none"> Deliberate maladministration of medications or failure to follow proper procedures, e.g. controlled medication Pattern of recurring errors or an incident of deliberate maladministration that results in ill-health or death Deliberate falsification of records or coercive/intimidating behaviour to prevent reporting