

Appendix 8

Summary of steps for clinicians to follow for informal carer administration of injections procedure

1. Obtain agreement from patient (ideally without carer present).
2. Obtain agreement from a GP and discuss with District Nurses if known by a DN team.
3. Obtain agreement from carer (ideally without patient present).
4. Assess suitability of carer and complete Criteria for Suitability check list (Appendix 1).
5. Gain consent from patient and carer. Complete consent form (Appendix 2). Make Best interests Decision in line with Mental Capacity Act if patient lacks capacity.
6. Teach process and assess competence. Complete Competence Assessment (Appendix 3.) Appendices 1-3 and patient/carers information Appendices 6 and 7 are available here to [download as a pack](#)
7. Ensure you discuss:
 - That it can be difficult for carers to undertake this as it places a burden on them - they do not have to do it; they can change their minds.
 - That near the end of life injections may need to be given; these will not cause death but may be required near the time of death.
 - That the locality SPA/District Nurse Team (first line) or relevant hospice (second line) can be contacted 24/7 for advice.
8. Insert SAF-T Intima line if injections likely to be needed in next 7 days and attach a Bionector connector to the end.
9. Ensure Community Palliative Care Drug Chart and Carers Authorisation Chart (Appendix 4 or 5 available [here](#)) have been completed by a prescriber. Show the carer how to complete the Community Palliative Care Drug Chart including completing their specimen initials on the front of the chart.
10. Show the carer how to complete the stock card and remind them to contact the GP for repeat prescriptions if stock running low.
11. Remind the carer that they should contact Sirona SPA (1st line) and relevant local hospice (2nd line) in the following circumstances:
 - Any time if they have given 3 injections in total within a 24hour period to discuss whether it is appropriate to give additional injections, or whether a review is needed.
 - If the symptom has not improved in an hour (or sooner if they are worried) after giving the drug.
 - They have any concerns, questions or queries at all related to injectable medication.
 - They no longer wish to give the subcutaneous injections.
12. Give the Carers information leaflet (Appendices 6 & 7 available in pack with Appendices 1-3 [here](#)).
13. Leave all paperwork in the house. Document fully on EMIS. Add a warning to EMIS to record assessment of suitability and outcome.
14. E.g. Carer (add full name) is suitable for administration of SC medication. Full process completed.
15. Arrange for a weekly face to visit for line change and support.