

# Guidance for Pharmacists Delivering a Seasonal Influenza Vaccination Service to Care Homes



## Responsibilities under the Mental Capacity Act (MCA)

As the practitioner administering the vaccine, the pharmacist holds overall responsibility for ensuring that the MCA legislation has been applied appropriately.

Partnership working between care homes and pharmacists is key to delivery of a successful service.

Flu vaccinations are an intrusive procedure. It is essential that the pharmacist administering a flu vaccine to a care home resident is assured that:

The individual consents to receive the vaccine.

**Or**

Appropriate capacity assessment has taken place, and the best interests decision made is for the individual to receive the vaccine.

## Capacity assessment

Before administration of the vaccine, the pharmacist must be assured that any consent provided, capacity assessment undertaken, or best interests decision made is both time-specific and decision-specific to administration of the flu vaccine 2020/21

Previous capacity assessments, or consent sought for other vaccines, MAY NOT be utilised for this year's flu vaccination.

As best practice, capacity assessments should be detailed and timely. Consent should be sought, or best interests decisions made, as near as possible to the time of the intended flu vaccination.

Care homes are best placed to prepare their residents for flu vaccination, by seeking consent or completing capacity assessments and making best interests decisions, prior to the pharmacist's visit to administer the flu vaccine.

The pharmacist SHOULD NOT accept verbal assurances about a resident's capacity to consent to receive a flu vaccination. This must be evidenced in the resident's care home records, which should confirm that consent has been provided, or detail any capacity assessment and best interests decision made. **Without this evidence, the pharmacist SHOULD NOT proceed with the vaccination.**

## Fluctuating capacity

As best practice, the care home should choose a time when the individual is capacitous to discuss their wishes and feelings about receiving a flu vaccine. If the resident has a Lasting Power of Attorney (LPA) for Health and Wellbeing, it would be appropriate for the care home to include them in this discussion.

The resident's decision should be documented and dated, as it may be integral to a later best interests decision. If the individual presents as lacking capacity at the time of the pharmacist's visit, their LPA MAY consent on their behalf.

## Consent

Next of kin, family members or friends MAY NOT consent to flu vaccination on behalf of a resident. If the individual is deemed to lack capacity this must be assessed, and a best interests decision made.

Where the resident has a LPA for Health and Wellbeing, this person MAY make the decision on their behalf.

## **Refusal**

If an individual with capacity refuses to receive a flu vaccine, this should be documented in their care home records, along with their reasons for reaching that decision.

When an individual lacks capacity and the best interests decision is for them NOT to receive the flu vaccine, this should be documented in the resident's care home records, along with the reasons for reaching that decision.

## **Immediately prior to vaccinating a resident**

### **The pharmacist should ask to see:**

Signed consent, which the pharmacist should clarify with the resident at the time of vaccination. Words along the lines of "we have a record here that says you're happy to have your flu jab. Is that still ok?" would be sufficient.

### **Or**

A dated, written capacity assessment if the resident lacks capacity, along with details of the best interests decision reached and evidence that the person making the decision on the resident's behalf has LPA for Health and Wellbeing (not welfare).

### **Where the individual is known to have fluctuating capacity, the pharmacist will need to be assured that the individual is either:**

Able to give consent at that moment.

### **Or**

Presenting as lacking capacity at that moment.

## **Appropriate use of restraint**

Pharmacists may encounter residents who resist administration of the vaccine, despite the appropriate paperwork being in place. This scenario can be common in residents living with dementia. Gently holding a resident's arm is deemed acceptable.

Any force to restrain an arm or limb, or use of medical restraint, would require additional robust planning. There should be evidence in the resident's care home records to support the decision-making process, which should consider the potential level of distress caused by administration of a flu vaccine, alongside the risks and benefits for the resident.

When it is anticipated that flu vaccination may cause this level of stress and anxiety for a resident, care homes should consult with the individual's GP/Specialist Health Practitioner (Dementia Team) to prepare in advance of the vaccination appointment.

### **If a resident is not compliant and use of restraint beyond a gentle arm hold is required:**

The resident's care home records should provide evidence of planning, appropriate assessment, and decision-making to permit additional restraint. **Without this evidence, the pharmacist SHOULD NOT proceed with the vaccination.**