

The MAR chart is individual to the person and reflects the items which are still being currently prescribed and administered, together with information about repeat prescriptions for PRN ("when required") medicines.

A good MAR chart should include information to assist with:

The six "R"s of medication administration

- Right patient
- Right drug
- Right dose
- Right formulation
- Right route
- Right to refuse

Purpose of a MAR chart

A Formal Confidential Record of Medication Administration. MAR charts must be clear, accurate, and up to date.

A MAR chart should contain the following information:

Client's details: - Full name, date of birth, and weight (if child or frail elderly), and include known allergies and type of reaction experienced.

Details of any medications taken or used (including creams):

- Name of medication, strength, form, dose, how often it is given, and the route of administration.
- Special instructions on how the medication should be taken

MAR charts in USE - keeping record, keeping clients safe...

- The MAR chart must be signed at the time of administration after a client has taken their medication.
- Staff signatures must be easily identified and must not resemble the MAR chart codes.
- It must be clear what medication has been taken, on which date, and at what time.
- With variable doses (e.g., 1-2 tablets) it must be clear what actual dose was given/taken.
- When a prescribed medication has not been given or taken, the MAR chart codes must be used to reflect this. The reasons should be recorded in the notes section and in the client's care plan.

Administration of controlled drugs should be recorded on the MAR chart

Problems to watch out for with MAR charts:

- Accurate at the time of printing, but medications and dosages can change.
- New prescriptions and mid-cycle issues may result in many MAR charts with different start dates.
- Medications that are only for "as required use" may not be listed on the monthly MAR chart.
- MAR charts may include previously used medications that have now been discontinued.

Communicate with the April office they will then contact the social worker, family, or pharmacy to help rectify these matters.

When required variable doses

MAR Charts must be accurate and kept up to date.

‘when required’ (PRN) medications should be kept in original packaging.

Each client should have individual care plans that indicate when medication is to be prompted.

Record PRN medication when they have been given, noting the dose given.

How to amend a MAR chart

The carer should follow the process of checking a MAR chart using the six R's and cross-referencing the daily diary notes.

Any queries, carers must contact the April Office or our out-of-hours on-call service.

When a client's medication is altered, care staff must not amend or write on the MAR chart; this can only be changed by a GP or pharmacist.

April care staff are not to write on the MAR charts, add or remove any medication

Additional dates can be added in writing to continue the medication while pending a new chart. If you are not sure, contact the April Office or the out-of-hours on-call supervisor

No medication is to be signed for if not given. Do not sign on behalf of a colleague.

MAR charts are legal documents and must be recorded, signed, and stored accordingly.