

Activity 3 – Managing therapy or monitoring a health condition

This activity considers a claimant's ability to:

- (i) appropriately take medications in a domestic setting that are prescribed or recommended by a registered doctor, nurse or pharmacist;
- (ii) monitor and detect changes in a health condition; and
- (iii) manage therapeutic activities that are carried out in a domestic setting that are prescribed or recommended by a registered doctor, nurse, pharmacist or healthcare professional regulated by the Health Professions Council.

The outcome of this activity is taking the medication or completing the recommended therapy as prescribed / recommended, without which the claimant's health is likely to deteriorate.

Notes:

Managing medication means the ability to take prescribed medication in the correct way and at the right time.

Monitoring a health condition or recognising significant changes means the ability to detect changes in the condition and take corrective action, as advised by a healthcare professional. Note that 'keeping an eye' on how a person is doing does not count as monitoring, unless the person is monitoring a specific parameter under medical advice and is implementing treatment modifications to prevent deterioration. Asking someone how they are will not meet the criteria unless there is a medical reason for expecting a change, a defined sign of deterioration and an advised action plan.

This activity takes into account the administration of medication or therapy irrespective of who delivers it, and includes delivery by healthcare professionals, such as district or community psychiatric nurses. It only applies to medication/therapy delivered in the **home environment i.e. where the claimant lives (and may include care homes), that has been prescribed/recommended by a registered healthcare professional or pharmacist.**

Examples of prescribed or recommended medication include tablets, inhalers, creams, suppositories and enemas. Therapies could include domiciliary dialysis, nebulisers and exercise regimes to prevent

complications, such as contractures. Whilst medications and therapies do not necessarily have to be prescribed, there must be a consensus of medical opinion that supports their use in treatment of the condition, hence the necessity for it at least to be recommended by a registered healthcare professional or pharmacist.

Descriptors C – F needs supervision, prompting or assistance to be able to manage therapy apply to the duration of the supervision, prompting or assistance and **not** the duration of the therapy. For example if compression bandaging is worn 24 hours a day for venous insufficiency, the time spent by another person applying the bandaging is counted, not the time the bandages are worn.

For the purpose of this activity, the ‘majority of days’ test does not require the individual to actually be receiving therapy on the majority of days in a year. However, the descriptor would still need to accurately describe the claimant’s circumstances on a majority of days – i.e. on a majority of days the statement about how much support an individual needs a week must be true. For example, if a claimant needs assistance to undergo home dialysis for three hours on Monday and Friday, they would not actually be receiving therapy on the majority of days in a year. However, the statement that they need ‘assistance to be able to manage therapy that takes more than 3.5 but no more than 7 hours a week’ would still apply, as it accurately describes the level of support needed in a week.

When considering whether a claimant requires an aid or appliance, HPs should distinguish between:

- an aid or appliance that a claimant must use or could reasonably be expected to use, in order to carry out the activity safely, reliably, repeatedly and in a timely manner; and
- an aid or appliance that a claimant may be using or wish to use because it makes it easier to carry out the activity safely, reliably, repeatedly and in a timely manner.

Descriptor advice in favour of an aid or appliance should only be given in the former case. An aid or appliance is not required in the latter.

Where a claimant chooses not to use an aid or appliance that he or she could reasonably be expected to use and would enable them to carry out the activity without assistance, they should be assessed as needing an aid or appliance rather than a higher level of support.

A	Either –	0
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	<ul style="list-style-type: none"> i. Does not receive medication or therapy or need to monitor a health condition; or ii. Can manage medication or therapy or monitor a health condition unaided. 	
<p>Within the assessment criteria, the ability to perform an activity 'unaided' means without either the use of aids or appliances; or help from another person.</p>		
B	<p>Needs either –</p> <ul style="list-style-type: none"> i. to use an aid or appliance to be able to manage medication; or ii. supervision, prompting or assistance to be able to manage medication or monitor a health condition. 	
<p>This descriptor captures the supervision required by the claimant taking their own medication in the home. Supervision due to the risk of accidental or deliberate overdose is also captured here.</p> <p>For example: the claimant needs physical help opening bottles or taking pills out of blister packs; help interpreting or reading blood sugar for the correct dose of medication; supervision to ensure the medication is taken properly; prompting to remind the claimant to take medication at the appropriate time(s).</p> <p>Pill boxes, dosette boxes, blister packs, alarms and reminders only apply to descriptor B if the claimant is unable to manage their medication due to their health condition or impairment and there is evidence to explain their use; or if they are unable to read and an aid would help them to manage medication independently.</p> <p><i>Note that needles, glucose meters and inhalers are not aids.</i></p>		1
C	Needs supervision, prompting or assistance to be able to manage therapy that takes no more than 3.5 hours a week.	2
<p>'Prompting' means reminding, encouraging or explaining by another person. For example, a claimant needs 15 minutes of assistance with therapy each day Monday to Friday, or reminding to manage</p>		

therapy.		
D	Needs supervision, prompting or assistance to be able to manage therapy that takes more than 3.5 but no more than 7 hours a week.	4
E	Needs supervision, prompting or assistance to be able to manage therapy that takes more than 7 but no more than 14 hours a week.	6
F	Needs supervision, prompting or assistance to be able to manage therapy that takes more than 14 hours a week.	8