

BEACON
Specialized Living

Certificate of Completion

IS HEREBY GRANTED TO

Taylor Butterworth

NAME

TO CERTIFY THAT THEY HAVE COMPLETED TO SATISFACTION IN

Annual DMA Certification

TYPE OF TRAINING

2/13/2020

COMPLETION DATE

Adrienne Shaffer

TRAINER SIGNATURE

ANNUAL DMA RECERTIFICATION TEST

1 List the six patient rights:

Right resident

Right route

Right medication

Right time

Right dosage

Right documentation

2. Liquid medication is poured at eye level holding the cup with your hand?

Yes No Explain:

you set the cup on a flat leveled surface (counter top),
pour liquid medication at eye level.

3. Controlled substance log is signed after the shift is over?

Yes No Explain:

Controlled substance log is signed after every narcotic
is passed and for shift/key change.

4. The DMA may crush tablets if resident does not want to swallow whole?

Yes No Explain:

you need to have a script that says to crush medications
in order to crush them.

ANNUAL DMA RECERTIFICATION TEST

5. Controlled substances are stored (single locked) according to policy and procedures?

Yes No Explain:

Controlled medications need to be double locked. Locked cabinet and locked door at all times.

6. Medication errors only need to be reported if the error causes harm?

Yes No Explain:

Medication errors need to be reported no matter what.

7. The medication room keys are left hanging on a special hook in the office area?

Yes No Explain:

The medication keys must be on DMA at all times.

8. If a resident runs out of a psychotropic medication and another bubble pack is not in the house, you can use one from another resident?

Yes No Explain:

You can NEVER mix patients medications.

ANNUAL DMA RECERTIFICATION TEST

9. Always give Lantus insulin regardless of the glucose level?

Yes No Explain:

Give food items to person of concern if glucose level is low. If glucose level rises then give insulin. Make sure glucose level is within normal range before giving insulin. Has to be a physicians orders.

10. Blood pressure readings are used to monitor the treatment results of Lisinopril, Tenormin, or Norvasc?

Yes No Explain:

Each medication ^{are} all used as blood pressure medications. you can monitor blood pressure changes by taking blood pressure readings throughout the day.

11. Eight o'clock medication may be given at 8:00, 9:00, or 10:00?

Yes No Explain:

DMA has one hour before and after medication time given. 8:00 medications can be given between 7:00 and 9:00. Never one minute before or one minute after 9 unless medical is called.

12. Medications that have been popped and then the resident refuses are put back in the bubble packs?

Yes No Explain:

Medication refusals are documented properly then medications are destroyed in destruction jug and documented with another staff as a witness.

ANNUAL DMA RECERTIFICATION TEST

13. Orders do not have to be on record for insulin injections?

Yes No Explain:

Every medication has to have doctor's order/prescription in order to give the medication.

14. When a resident gets up late for a medication pass, just enter in the quickMAR, resident not in house for the med pass, and give the medication whenever they get up?

Yes No Explain:

You prompt resident to take medications, if they don't take medications you wait until they wake up. If they still won't/willing to take medications call medical. If they wake up & refuse, mark medication refusal.

15. OTC means other than called for?

Yes No Explain:

OTC stands for Over The Counter.

16. One Tablespoon is equal to 30ml?

Yes No Explain:

One tablespoon is equal to 15 ml.

ANNUAL DMA RECERTIFICATION TEST

17. NPO means nothing per os?

Yes No Explain:

Patient can not take anything orally.

18. All controlled substances are returned to the pharmacy to be repackaged?

Yes No Explain:

Every medication comes pre-packaged, with script. you can not take anything back to pharmacy.

19. Choking and aspiration is a rare problem among residents on psychotropic medications?

Yes No Explain:

This depends on the patient. Psychotropic medications alter/change state of mind, emotions, etc. Psychotropic medication affects patients differently. But can often cause choking & aspiration.

20. Constipation is never a side effect of psychotropic medications?

Yes No Explain:

Depends on how psychotropic medications affect that specific patient. But can often cause constipation.



Medication Administration In-Service and Evaluation

Name of Facility/Home: Cascade Home

Employee Receiving In-Service: Taylor Butterworth

Date of 1st In-Service*: 2/1/2020 Time: 8:00 am / pm Trainer: Heather Shuffly
*This is done by a regional nurse

Date of 2nd In-Service: / / Time: : am / pm Trainer:

Date of 3rd In-Service: / / Time: : am / pm Trainer:

Date of 4th In-Service: / / Time: : am / pm Trainer:

Date of 5th In-Service: / / Time: : am / pm Trainer:

Date of 6th In-Service: / / Time: : am / pm Trainer:

Date of Final Evaluation: / / Time: : am / pm Trainer:

All staff must complete all three (6) In-Services and Final Evaluation

Instructions: Check (✓) the appropriate box after Employee has been in-serviced.

		In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
1	Medication Area		✓	✓						
	a. Location of ample supplies prior to administration		✓	✓						
	b. Area is clean and organized		✓	✓						
	c. Area is always locked		✓	✓						
	d. Location of all medication: Internal, External, Refrigerated, Controlled Drugs (narcotics)		✓	✓						
2	DMA washes hands prior to administering medications and between each Resident		✓	✓						
3	Medication keys are retained by DMA		✓	✓						
4	Resident is identified per facility policy and procedure prior		✓	✓						
5	Vital signs are taken per facility policy prior to administering medications (if applicable), always on cardiac and BP medications		✓	✓						
	a. If Pulse and BP are required, hands and equipment are washed per facility policy		✓	✓						
	b. If Apical Pulse is required, privacy is provided		✓	✓						
6	Medications Administration per facility policy and procedure: to include review of the '6 Rights'		✓	✓						
	a. Medications are properly removed from container/blister pack and (.) dot is placed in appropriate box on MAR		✓	✓						
	b. Liquid medication is poured at eye level, with palm covering label of stock bottle		✓	✓						



Medication Administration In-Service and Evaluation

		In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
6	c. DMA verifies medication and strength with order as transcribed on medication record per facility policy and procedure		✓							
	d. Observe Resident to ensure medication swallowed		✓							
	e. Offer adequate and appropriate fluid with medication		✓							
	f. Medication record is signed immediately after administration of same		✓							
	g. Controlled substance record is signed immediately after administration of same		✓							
	h. Correct dose is administered		✓							
	i. Medication is administered at correct time		✓							
	j. Verify no additional MAR pages have been added		✓							
7	Infection control technique is reviewed		✓							
8	Medication via gastric tube administered per facility policy and procedure (if applicable)									
	a. Resident is properly positioned, at a 45° sitting angle									
	b. Tube is checked for placement and patency									
	c. Tube is flushed before, between and after medications are administered									
9	Injections are administered by the Resident or a DMA if there is a doctor's order present, per facility policy and procedure									
	a. Syringes and needles are disposed of in sharps container, by person giving the injection without recapping									
	b. Proper glucometer testing is observed. Determination of competence re: accurately perform and read glucometer testing results									
10	DMA crushes medication according to facility policy and procedure ONLY with physician's orders.									
11	DMA administers eye and ear medication according to facility policies and procedures		✓							
12	Side effects of psychoactive medication are noted (lethargy, hallucinations) and reported.		✓							
13	Medication administration should not interrupt. DO NOT RUSH		✓							
14	Controlled drugs are stored (Double Locked) according to facility policy and procedure		✓							
15	Residents' rights are observed		✓							
16	Location, Procedures and Documenting for administering PRN		✓							
17	Designated Medication Administrator follows facility policy and procedure for medications refused or withheld. (MER & IR written)		✓							
18	Medications are administered within time frame per facility policy		✓							



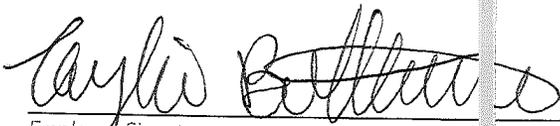
Medication Administration In-Service and Evaluation

		In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
19	Medication errors are reported to Home Manager and RN teaching medication classes		✓							
20	Medication area is cleaned and locked after completion of medication administration		✓							
21	Designated Medication Administrator can identify action and common side effects of medications administered		✓							
22	Approved Abbreviations List is reviewed		✓							
23	Seizure precautions and documentation		✓							
24	After hour procedures, procedures for four spilled medication, location of Epocrates link on staff computer		✓							
25	2nd Staff Verification, what it is, when it is needed, and how to document it		✓							
26	Refusal of Medication procedures (prompt appropriate documentation)		✓							

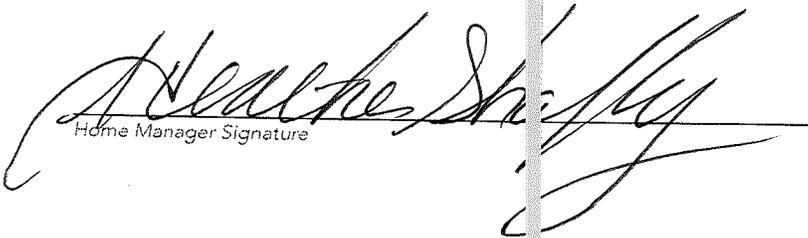
FOLLOW UP CONCERNS

Specify time frame for completion: _____ N/A

I have received the above In-service and have read the Organizations **Medical Policies**. I understand what is expected of me as a Designated Medication Administrator. I also understand that any immediate medical questions or concerns should be directed to the Coordinator of Care at my Site during open office hours and to the On-Call person after hours.


 Employee Signature


 Date


 Home Manager Signature


 Date