



Medication Administration In-Service and Evaluation

Name of Facility/Home: LS Mill Park

Employee Receiving In-Service: Paige Burns

Date of 1st In-Service*: 3/3/20 Time: 8:00 am / pm Trainer: Will Atkinson
*This is done by a regional nurse

Date of 2nd In-Service: 3/11/20 Time: 8:00 am / pm Trainer: Will Atkinson

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: 3/12/20 Time: 8:00 am / pm Trainer: Will Atkinson

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 is 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 interrupted. 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 #	Description	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 found/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 3 times, then write appropriate documentation)	✓	✓	✓					

FOLLOW UP CONCERNS

Specify time frame for completion: Good at med deliveries & 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.

Paige Burns
Employee Signature

3-12-20
Date

W. A. [Signature]
Home Manager Signature

3/12/20
Date

ANNUAL 'DMA' RECERTIFICATION TEST

1.) List the Six (6) Patient Rights:

Right Person _____ Right Route _____
Right Dose _____ Right Time _____
Right medication _____ Right Documentation _____

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

Yes No Explain:
At eye level on a flat surface

3.) Controlled Substance Medication Count Sheet is signed after the shift is over?

Yes No Explain:
During shift change

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

Yes No Explain:
only if there is an order for it.

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

Yes No Explain:
Narcotics need to be double locked

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

Yes

No

Explain:

All medication errors need to be reported.

7.) The Medication Room Keys are left hanging on a special hook in the office area?

Yes

No

Explain:

med room keys are to be kept on the DMA's person 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:

I never use another's person medication

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

Yes

No

Explain:

unless there are guidelines set by doctor.

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

Yes

No

Explain:

Blood pressure readings are used to monitor any and all blood pressure medication could be

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

Yes

No

Explain:

1 hr before or 1 hour after

12.) Medications that have been popped from a bubble pack and then the resident refuses to take them, are put back in the bubble pack?

Yes

No

Explain:

They are to be disposed of in the med disposal box or jug.

13.) Orders to no have to be on record for insulin injections?

Yes

No

Explain:

Yes. We need an order for All medication.

14.) When a Resident gets up late for a medication pass, just enter in the EMAR system "Resident Not in the Home for Medication Pass" and give the medication to the resident whenever they wake up?

Yes

No

Explain:

You prompt them before time is up. If time is up and they still have not come down. It's entered in EMAR as refused. You need to call on call ^{nurse} when they come down after they are late

15.) OTC means "Other Than Called" for?

Yes

No

Explain:

over the counter

16.) One Tablespoon is equal to 30ml?

Yes No Explain:

2 tbs

17.) NPO means "para oral"?

Yes No Explain:

Nothing through the mouth.

18.) All Controlled Substances are returned to the pharmacy to be repackaged?

Yes No Explain:

~~because it is an unopened bubble pack~~

19.) Choking and aspiration is a rare problem among Residents on Psychotropic medications?

Yes No Explain:

In rare cases choking and aspirations have occurred w/ psych meds.

20.) Constipation is never a side effect of Psychotropic medications?

Yes No Explain:

Constipation can be a side effect of psychotropic medications.