



Medication Administration In-Service and Evaluation

Name of Facility/Home: Stanton-Bunkhouse

Employee Receiving In-Service: Keisha Ackley

Date of 1st In-Service*: 03/10/2020 Time: 9:00 am/pm Trainer: Cathryn Strahan RN

Date of 2nd In-Service: 03/10/2020 Time: 12:00 am/pm Trainer: David Schmitz

Date of 3rd In-Service: 03/31/2020 Time: 12:00 am/pm Trainer: Alexis Clark

Date of 4th In-Service: 4/1/2020 Time: 12:00 am/pm Trainer: Alexis Clark

Date of 5th In-Service: 4/1/2020 Time: 5:00 am/pm Trainer: Alexis Clark

Date of 6th In-Service: 4/8/2020 Time: 12:00 am/pm Trainer: Alexis Clark

Date of Final Evaluation: 4/9/2020 Time: 12:00 am/pm Trainer: Bionca Ritter

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		✓	✓	✓	✓	✓	✓	✓	



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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

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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: _____ 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.

Keisha Ackley
Employee Signature

04/10/2020
Date

Beth
Home Manager Signature

04/10/2020
Date

ANNUAL DMA RECERTIFICATION TEST

1 List the six patient rights:

<u>Time</u>	<u>Resident</u>
<u>Route</u>	<u>Dose</u>
<u>Location</u>	<u>Medication</u>

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

Yes No Explain:

You have to hold the liquid medication
and have the cup on flat surface.

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

Yes No Explain:

You need to do all Controlled Substance logs
as you go.

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

Yes No Explain:

The only time medication can be crushed
is when you have a written physician's order.

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Controlled substances are double locked.

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

Yes No Explain:

If you make a error you need to report it
immendtly.

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

Yes No Explain:

DMA keys have to 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 never use another residents medication.

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Only time you have to give insulin is
when resident glucose levels are high.

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

Yes No Explain:

All these medication's are used for high Blood
pressure.

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

Yes No Explain:

You can only do hour before and hour
after.

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

Yes No Explain:

You will need second staff to dispose of
non-controlled or controlled.

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Because if you don't have a order you
won't know dose the resident needs.

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 can't take a resident their medications.
You will need to document they refused medications.

You need to document as refused they contact medical to pass meds late.

15. OTC means other than called for?

Yes No Explain:

Over the Counter

16. One Tablespoon is equal to 30ml?

Yes No Explain:

one tablespoon is 15ml.

ANNUAL DMA RECERTIFICATION TEST

17. NPO means nothing para oral?

Yes No Explain:

Resident can't have nothing by mouth
if they have fasting labs.

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

Yes No Explain:

You can't return medications to the
Pharmacy after them being opened.

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

Yes No Explain:

Choking and aspiration is ^{Common} problem among
residents on Psychotropic medications.

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

Yes No Explain:

Constipation is a side effect of psychotropic
medications.