



Medication Administration In-Service and Evaluation

Name of Facility/Home: County Farm

Employee Receiving In-Service: Jessica Nebelung

Date of 1st In-Service*: / / Time: : am / pm Trainer:
*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: 8 / 20 / 2020 Time: 2 : 00 am / pm Trainer: Charles Tatch / Pam Polak

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 | | | | ✓ | | | | |
| | | | | ✓ | | | | |
| | | | | ✓ | | | | |
| | | | | ✓ | | | | |
| | | | | ✓ | | | | |
| | | | | ✓ | | | | |
| | | | | ✓ | | | | |
| | | | | ✓ | | | | |
| 7 | | | | ✓ | | | | |
| 8 | | | | ✓ | | | | |
| | | | | ✓ | | | | |
| | | | | ✓ | | | | |
| | | | | ✓ | | | | |
| 9 | | | | ✓ | | | | |
| | | | | ✓ | | | | |
| | | | | ✓ | | | | |
| 10 | | | | ✓ | | | | |
| 11 | | | | ✓ | | | | |
| 12 | | | | ✓ | | | | |
| 13 | | | | ✓ | | | | |
| 14 | | | | ✓ | | | | |
| 15 | | | | ✓ | | | | |
| 16 | | | | ✓ | | | | |
| 17 | | | | ✓ | | | | |
| 18 | | | | ✓ | | | | |



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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.

Jessica Nepelung

 Employee Signature

08/20/2020

 Date

[Signature]

 Home Manager Signature

08/20/2020

 Date

James Padilla, RN

 RN @ Beacon

08/20/2020

ANNUAL DMA RECERTIFICATION TEST

1 List the six patient rights:

person _____ route _____
dose _____ medication _____
time _____ documentation _____

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

Yes No Explain:

it now has to be on solid format and
the person brings themselves to
the cup being eye level

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

Yes No Explain:

that would be yes and no. Because
it is done at both beginning and
end.

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

Yes No Explain:

Meds can only be crushed if written
that way.

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

It depends on how the script is written

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

Yes No Explain:

Not for certain but I believe that only Lisinopril is the only B.P. medication

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

Yes No Explain:

Meds are only allowed to be given an hour before and an hour after scheduled time.

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

Yes No Explain:

We are to keep trying until time frame is up, and then they are to be disposed of.

ANNUAL DMA RECERTIFICATION TEST

17. NPO means nothing para oral?

Yes No Explain:

N.P.O. stands for nothing by mouth

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

Yes No Explain:

only if there are changes in either dose, time, and or route.

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

Yes No Explain:

alot of residents seem to have Choking and or aspiration

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

Yes No Explain:

Most meds tend to have constipation as an side effect.