BEACON Specialized Living

Medication Administration In-Service and Evaluation

Name of Facility/Home: The Oaks

Employee Receiving In-Service: Brittany Robinson

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: __/__/__ 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: 9/10/20 Time: 8:00 (am) / pm Trainer: Brenda Norman

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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	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							✓	

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	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 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.

Employee Signature _____ Date 9/10/20

Home Manager Signature _____ Date 9/10/20

ANNUAL 'DMA' RECERTIFICATION TEST

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

right resident (name) right route
right time right ~~route~~ medication
right dosage right documentation

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

☐ Yes ☒ No Explain:
Must be laid on a flat surface
at eye level

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

☐ Yes ☒ No Explain:
Controlled substance Medication count sheet
~~should be~~ should be signed while passing
medication and during shift change

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

☐ Yes ☒ No Explain:
You are not able to crush tablets, [redacted]
unless it is doctors ordered.

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

☐ Yes ☒ No Explain:
There are two locks to the controlled substances.

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

☐ Yes ☒ No Explain:
All medication errors must be reported.

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

☐ Yes ☒ No Explain:
The medication room keys are always left w/ an assigned staff.

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:
It has to be the medication for the correct resident. You cannot take medications from other residents.

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

☐ Yes ☒ No Explain:
Per order

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

☒ Yes ☐ No Explain:

16.) One Tablespoon is equal to 30ml?

☐ Yes ☒ No Explain:
2ml

17.) NPO means "para oral"?

☐ Yes ☒ No Explain:
None para oral - not by mouth

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

☐ Yes ☒ No Explain:
Disposed of per company policy

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

☐ Yes ☒ No Explain:
Common side effect

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

☐ Yes ☒ No Explain:
Common side effect