



## Medication Administration In-Service and Evaluation

Name of Facility/Home: County Line

Employee Receiving In-Service: Jessie Rivers

Date of 1st In-Service*: <u>6/10/20</u>	Time: <u>7:30</u> (am) pm	Trainer: <u>Tour Brianna Winowiecki Shadow</u>
<small>*This is done by a regional nurse</small>		
Date of 2nd In-Service: <u>6/11/20</u>	Time: <u>8:15</u> (am) pm	Trainer: <u>Brianna Winowiecki Shadow</u>
Date of 3rd In-Service: <u>6/11/20</u>	Time: <u>12:00</u> am / (pm)	Trainer: <u>Brianna Winowiecki</u>
Date of 4th In-Service: <u>6/12/20</u>	Time: <u>4:00</u> am / (pm)	Trainer: <u>Pass Brianna Winowiecki</u>
Date of 5th In-Service: <u>6/12/20</u>	Time: <u>8:00</u> (am) / pm	Trainer: <u>Pass Brianna Winowiecki</u>
Date of 6th In-Service: <u>6/13/20</u>	Time: <u>12:00</u> am / (pm)	Trainer: <u>Pass Brianna Winowiecki</u>
Date of Final Evaluation: <u>6/13/20</u>	Time: <u>8:00</u> (am) / pm	Trainer: <u>Brianna Winowiecki</u>

**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
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.

J Rivers  
Employee Signature

6/13/20  
Date

Bianca Winowiecki  
Home Manager Signature

6.13.20  
Date