

ANNUAL DMA RECERTIFICATION TEST

100%

1 List the six patient rights:

- | | |
|-------------------------|----------------------------|
| <u>Right Patient</u> | <u>Right Time</u> |
| <u>Right Medication</u> | <u>Right Route</u> |
| <u>Right Dosage</u> | <u>Right Documentation</u> |

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

Yes No Explain:

Liquid medication is poured at eye level on a flat surface
with a gloved hand covering the label

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

Yes No Explain:

Controlled substance log is signed during shift change and
after passing the controlled substance

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

Yes No Explain:

Medications CANNOT be crushed without written
physicians orders

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

Yes No Explain:

Controlled substances are double locked according to policy and procedures

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

Yes No Explain:

Medication errors must be reported immediately

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

Yes No Explain:

Medication keys are to remain on the 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:

NEVER use anothers residents medications for another resident

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

Yes No Explain:

Always check glucose level so the correct dosage can be administered

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

Yes No Explain:

Blood pressure readings must be preformed before medication administration

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

Yes No Explain:

Medications can be give an hour before or 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:

Popped medications MUST be destroyed immediately with second staff

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

Yes No Explain:

Orders must be on record for insulin injections

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:

DMA must contact ^{medical} On Call Clinical to get permission to pass any late medications after calling on call management for permission

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 equal to 15ml

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17. NPO means nothing para oral?

Yes No Explain:

Nothing By Mouth

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

Yes No Explain:

All controlled substances must be destroyed if refused or expired with second staff

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

Yes No Explain:

Choking and Aspiration are common problems among residents on Psychotropic medications

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

Yes No Explain:

Constipation is a common side effect of Psychotropic Medications



BEACON
Specialized Living

Medication Administration In-Service and Evaluation

Name of Facility/Home: Stanton - The Cottage

Employee Receiving In-Service: Matthew Horton

Date of 1st In-Service*: 09/08/2020 Time: 9:00 am / pm Trainer: Cathryn Strahan-RN
*This is done by a regional nurse

Date of 2nd In-Service: 09/08/2020 Time: 12:00 am / pm Trainer: David Schmitz

Date of 3rd In-Service: 9/16/2020 Time: 12:00 am / pm Trainer: Alexis Clark

Date of 4th In-Service: 9/23/2020 Time: 12:00 am / pm Trainer: Alexis Clark

Date of 5th In-Service: 10/9/2020 Time: 11:30 am / pm Trainer: Cheryl Shook

Date of 6th In-Service: 10/14/2020 Time: 12:15 am / pm Trainer: S. Hicks

Date of Final Evaluation: 10/16/2020 Time: 12:15 am / pm Trainer: Lauryn Hill

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 #		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.

Matt Horton
Employee Signature

10/16/2020
Date

Alexis Claren
Home Manager Signature

10/16/2020
Date