



**BEACON**  
Specialized Living

**Medication Administration In-Service and Evaluation**

Name of Facility/Home: Meadowland

Employee Receiving In-Service: Kathy Brown

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: 8/14/20 Time: 8:00 am / pm Trainer: Laura Weber

**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							N/A	
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)							n/a	
	a. Resident is properly positioned, at a 45° sitting angle							n/a	
	b. Tube is checked for placement and patency							n/a	
	c. Tube is flushed before, between and after medications are administered							n/a	
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:

~~CXN/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.

*Kathy Brown*  
Employee Signature

8/14/20  
Date

*Laura Weber*  
Home Manager Signature

8/14/2020  
Date

Kathy Brown

# ANNUAL DMA RECERTIFICATION TEST

1 List the six patient rights:

Right medication      Right dose  
Right documentation      Right time  
Right Person      Right Route

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

Yes     No    Explain:

poured at eye level on flat surface

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

Yes     No    Explain:

every time a medication is passed you sign the NABC paper. shift change is with staff

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

Yes     No    Explain:

only with Dr. order

# ANNUAL DMA RECERTIFICATION TEST

5. Controlled substances are stored (<sup>Double</sup>single locked) according to policy and procedures?

Yes     No    Explain:

cars are double locked

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

Yes     No    Explain:

all medication errors are reported immediately

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

Yes     No    Explain:

medication keys are kept 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:

Never use another resident's medication

# ANNUAL DMA RECERTIFICATION TEST

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

Yes     No    Explain:

all Injections are 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:

IF it's after 9:30 AM, call for  
authorization to pass meds out of  
the home.

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

# ANNUAL DMA RECERTIFICATION TEST

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

Yes

No

Explain:

*Follow the protocol*

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

Yes

No

Explain:

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

Yes

No

Explain:

*1 hour before, 1 hour after*

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

Yes

No

Explain:

*Dispose them with another staff*

# ANNUAL DMA RECERTIFICATION TEST

17. NPO means nothing para oral?

Yes

No

Explain:

*NPO = nothing by mouth*

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

Yes

No

Explain:

*bencom nurse will dispose of them*

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

Yes

No

Explain:

*Yes*

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

Yes

No

Explain:

*Yes some psychotropic medications do cause constipation*