



## Medication Administration In-Service and Evaluation

Name of Facility/Home: Stanton / bunk house

Employee Receiving In-Service: Mercede Kenworthy

Date of 1st In-Service\*: 11 / 24 / 2020 Time: 9:00 am / pm Trainer: Cathryn Strahan, RN  
\*This is done by a regional nurse

Date of 2nd In-Service: 11 / 24 / 2020 Time: 12:00 am / pm Trainer: David Schmitz

Date of 3rd In-Service: 11 / 25 / 2020 Time: 12:00 am / pm Trainer: Crystal Rose

Date of 4th In-Service: 11 / 25 / 2020 Time: 5:00 am / pm Trainer: Adrianna Pantano

Date of 5th In-Service: 12 / 3 / 2020 Time: 12:00 am / pm Trainer: L. Wicks

Date of 6th In-Service: 12 / 8 / 2020 Time: 12:00 am / pm Trainer: [Signature]

Date of Final Evaluation: 12 / 10 / 2020 Time: 12:00 am / pm Trainer: [Signature]

**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

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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.

*Mercede Kennedy*  
Employee Signature

12/10/2020  
Date

*[Signature]*  
Home Manager Signature

12-10-2020  
Date

A-1

# ANNUAL DMA RECERTIFICATION TEST

1 List the six patient rights:

<u>Resident</u>	<u>Route</u>
<u>dose</u>	<u>time</u>
<u>medication</u>	<u>documentation</u>

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

Yes  No Explain:

Sat on a flat surface, at eye level hand over label.

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

Yes  No Explain:

Any time keys are passed or when given get second staff.

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

Yes  No Explain:

Only with a doctors written order.

# ANNUAL DMA RECERTIFICATION TEST

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

Yes  No Explain:

All medications are double locked.

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

Yes  No Explain:

Medication errors are reported any time they happen.

( And recorded )

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

Yes  No Explain:

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:

You NEVER use any ones medication ever for no problems.

# ANNUAL DMA RECERTIFICATION TEST

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

Yes  No Explain:

only if a written order, based on level.

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

Yes  No Explain:

All blood pressure medications.

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

Yes  No Explain:

at 7pm, 8pm, and 9pm

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

Yes  No Explain:

They are destroyed.

# ANNUAL DMA RECERTIFICATION TEST

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

Yes  No Explain:

Everything needs to be documented.

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:

you call manager on call, then medical if they say no then miss note and pass on paper.

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 15ML

# ANNUAL DMA RECERTIFICATION TEST

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:

destroyed by someone certified to do so with a second staff.

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

Yes  No Explain:

Very Common

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

Yes  No Explain:

Very Common.