

ANNUAL 'DMA' RECERTIFICATION TEST

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

<u>Route</u>	<u>Person</u>
<u>Time</u>	<u>Medication</u>
<u>Dose</u>	<u>documentation</u>

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

Yes No

Explain:

goes on counter at eye level.

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

Yes No

Explain:

It is signed after each pass.

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

Yes No

Explain:

With a physician order so it can be taken in apple sauce, yogurt, ect.

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

Yes No

Explain:

The medication door is the first lock of the ~~room~~ controlled substances are locked separately behind the locked door.

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

Yes

No

Explain:

Every medication error
needs to be reported.

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

Yes

No

Explain:

Medication room
keys stays on the DMA's person
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 can never give
out others medication because it violates the rights
of medication.

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

Yes

No

Explain:

If glucose levels
are to high the nurse might ask for the
lantus to be held.

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

Yes

No

Explain:

To see if the
treatment is working, not working, or
worse.

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

Yes

No

Explain:

7, 8, 9 only

12.) Medications that have been popped from a bubble pack and then the resident refuses to take them, are put back in the bubble pack?

Yes

No

Explain:

They are disposed of with a second staff verification.

13.) Orders to no have to be on record for insulin injections?

Yes

No

Explain:

Every medication passed have to be on record.

14.) When a Resident gets up late for a medication pass, just enter in the EMAR system "Resident Not in the Home for Medication Pass" and give the medication to the resident whenever they wake up?

Yes

No

Explain:

Call nurse if ~~late~~ late. If late pass is down & EMAR, pass in paper mar if OK'd

15.) OTC means "Other Than Called" for?

Yes

No

Explain:

Over the counter.

16.) One Tablespoon is equal to 30ml?

Yes

No

Explain:

1 table Spoon is 15ML

17.) NPO means "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 are disposed of in a narcotics box with two staff.

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

Yes

No

Explain:

It is most common because of the neurological effects on the body.

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

Yes

No

Explain:

Constipation is a common side effect of psychotropic medications



Medication Administration In-Service and Evaluation

Name of Facility/Home: The Oaks

Employee Receiving In-Service: Montiece Sanders

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: 12/18/20 Time: 8:10 am pm Trainer: Rebecca Johnson

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.

Employee Signature

Date 12/18/20

Home Manager Signature

Date 12/18/20