



**BEACON**  
Specialized Living

**Medication Administration In-Service and Evaluation**

Name of Facility/Home: Five Lake

Employee Receiving In-Service: Judy Pitz

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: 1/25/21 Time: 9:00 am / pm Trainer: EW

**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							✓	
20							✓	
21							✓	
22							✓	
23							✓	
24							✓	
25							✓	
26							✓	

**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 *Judy Pitz*

Date 1-25-21

Home Manager Signature *Erin N...*

Date 1/26/21

Judy Pitz

# ANNUAL DMA RECERTIFICATION TEST

1 List the six patient rights:

Person

Dose

Time

Route

med

Documentation

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

Yes  No Explain:

needs to be on a flat surface

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

Yes  No Explain:

because it has to be counted

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

Yes  No Explain:

they need a doctors order

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# ANNUAL DMA RECERTIFICATION TEST

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

Yes     No    Explain:

Double locked

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

Yes     No    Explain:

All med. errors need to reported even if

no harm caused

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

Yes     No    Explain:

med keys need to be with DMA at all times

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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 give other residents meds. to another resident

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# ANNUAL DMA RECERTIFICATION TEST

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

Yes     No    Explain:

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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:

*meds need to be given with in Time Frame*

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15. OTC means other than called for?

Yes     No    Explain:

*over the counter*

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16. One Tablespoon is equal to 30ml?

Yes     No    Explain:

*15 mL*

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# ANNUAL DMA RECERTIFICATION TEST

*Judy Katz*

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

Yes     No    Explain:

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

Yes     No    Explain:

*To see if the meds. are*

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

Yes     No    Explain:

*Can be given at 7 or 8 and before 9*

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

Yes     No    Explain:

*they are disposed of in the proper container*

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# 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:

Dispose of them (Nurse)

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:

constipation is common with psychotropic meds