



Medication Administration In-Service and Evaluation

Name of Facility/Home: Wolf Lake

Employee Receiving In-Service: Kelly Fox

Date of 1st In-Service*: 2 / 3 / 21 Time: 1: 00 am / pm Trainer: Training Dept

*This is done by a regional nurse
Date of 2nd In-Service: 2 / 3 / 21 Time: 3: 00 am / pm Trainer: Training Dept

Date of 3rd In-Service: 2 / 4 / 21 Time: 12: pm am / pm Trainer: [Signature]

Date of 4th In-Service: 2 / 4 / 21 Time: 4: pm am / pm Trainer: [Signature]

Date of 5th In-Service: / / Time: : am / pm Trainer:

Date of 6th In-Service: / / Time: : am / pm Trainer:

Date of Final Evaluation: / / Time: : am / pm Trainer:

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	✓	✓	✓	✓				



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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: _____ 8 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.

Kelly Fee
Employee Signature

2/4/21
Date

[Signature]
Home Manager Signature

2/4/21
Date