



Certificate of Completion

IS HEREBY GRANTED TO

Bianka Palumbo
NAME

TO CERTIFY THAT THEY HAVE COMPLETED TO SATISFACTION IN

D.M.A. Training
TYPE OF TRAINING

2/5/2021
COMPLETION DATE

Jennifer McManis
TRAINER SIGNATURE



BEACON

Specialized Living

Medication Administration In-Service and Evaluation

Name of Facility/Home: Mission Point

Employee Receiving In-Service: Bianka Palumbo

Date of 1st In-Service*: 1/29/21 Time: 12:00 am / (pm) Trainer: C DeFalle

Date of 2nd In-Service: 2/3/21 Time: 1:00 am / (pm) Trainer: T Dept

Date of 3rd In-Service: 2/3/21 Time: 5:00 am / (pm) Trainer: T Dept

Date of 4th In-Service: 2/3/21 Time: 5:15 am / (pm) Trainer: Amber Fowler

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

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

Date of Final Evaluation: 2/5/21 Time: 8:00 (am) / pm Trainer: Jennifer McClendon

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	✓	✓	✓	✓			✓	



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				✓			✓	



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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.

Bianka Palumbo
Employee Signature

2/5/2021
Date

Jennifer McClaranahan
Home Manager Signature

2/5/2021
Date