BEACON Specialized Living

Medication Administration In-Service and Evaluation

Name of Facility/Home: Kal-Haven

Employee Receiving In-Service: John Stokes

Date of 1st In-Service*: 6/22/21 Time: 8:00 am / pm Trainer: Hubey Napier

*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: __/__/__ 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
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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	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.

John C. Stokes — *Employee Signature*

6-22-21 — *Date*

Audrey Dapier — *Home Manager Signature*

6/22/2021 — *Date*

John C. Stokes

20/20 100% **ANNUAL DMA RECERTIFICATION TEST**

1. **List the six patient rights:**

Route — Documentation
Time — Right Med
Person — Dosage

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

☑ Yes ☐ No **Explain:**

So you can stop at the correct mark it needs to be on a flat surface.

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

☐ Yes ☑ No **Explain:**

Before to make sure the count is correct, during med pass and after your shift.

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

☐ Yes ☑ No **Explain:**

Only if the label says that med may be crushed

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

ANNUAL DMA RECERTIFICATION TEST

☐ Yes ☑ No **Explain:**

Double locked According to policy

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

☐ Yes ☑ No **Explain:**

Needs to be Reported with IR And Disposed of.

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

☐ Yes ☑ No **Explain:**

The keys should be on the person who is passing meds

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:**

that is not Exceptable. You need to call the Home Manager and Medical for the Home.

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

☐ Yes ☑ No **Explain:**

ANNUAL DMA RECERTIFICATION TEST

All injections needs to be recorded and administered as prescribed.

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:**

Nurse should be contacted when asked can meds still be passed. It would already be marked as refused in the system so you would have to 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 14 ml

17. **NPO means para oral?**

☑ Yes ☐ No **Explain:**

Nothing by mouth

ANNUAL DMA RECERTIFICATION TEST

Humanlog is long acting Lantus is short Acting. GIVE AS PRESCRIBED.

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

☑ Yes ☐ No **Explain:**

if blood pressure is too low meds are not passed. This would be written on the script.

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

☐ Yes ☑ No **Explain:**

10:00 is too late. 7:00 to 8:59

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

☐ Yes ☑ No **Explain:**

After meds are offered 3 times they should be put in a Disposal box and marked refused.

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

☐ Yes ☑ No **Explain:**

ANNUAL DMA RECERTIFICATION TEST

~~PROFILES LOCKED~~ ALL MEDICATIONS NEED AN ORDER ON RECORD.

18. **All controlled substances are returned to the pharmacy to be repackaged?**

☐ Yes ☑ No **Explain:**

IF EXPIRED OR HAVE TOO MANY WE SEND THEM BACK NOT TO BE REFILLED, EXCEPT CONTROLLEDS NEED TO BE DISPOSED OF IN THE DEAD DRUG BOX.

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

☑ Yes ☐ No **Explain:**

BUT CHOKING CAN STILL OCCUR FROM TAKING MEDS

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

☑ Yes ☐ No **Explain:**

COULD BE. A SIDE EFFECT.