BEACON
Specialized Living

AW 9:07A
JV 9:16A
CY 9:24A

Medication Administration In-Service and Evaluation

Name of Facility/Home: Kal-Haven

Employee Receiving In-Service: Heather Marchi

Date of 1st In-Service: 05 /20 /21   Time: 1 :00p am / pm   Trainer: Learning and Development

Date of 2nd In-Service: 05 /20 /21   Time: 3 :00p am / pm   Trainer: Learning and Development

Date of 3rd In-Service: 6 /7 /21   Time: 12 :00 am /(pm)   Trainer: Angie Stiles

Date of 4th In-Service: 6 /8 /21   Time: 12:00 am (pm)   Trainer: Angie Stiles

Date of 5th In-Service: 6 /21 /21   Time: 12:00 am /(pm)   Trainer: Heather Juan

Date of 6th In-Service: 6 /25 /21   Time: 12:00 am (pm)   Trainer: Heather Juan

Date of Final Evaluation: 7/7/2021 Time: 8:00 (am)/ pm   Trainer: Aubey Napue

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	✔	✔	✔	✔	✔	✔	N/A	Reviewed
	a. Syringes and needles are disposed of in sharps container, by person giving the injection without recapping	✔	✔	✔	✔	✔	✔	N/A	Reviewed
	b. Proper glucometer testing is observed. Determination of competence re: accurately perform and read glucometer testing results	✔	✔	✔	✔	✔	✔	N/A	Reviewed
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 Site Supervisor 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 Guide to Drugs Book	✓	✓	✓	✓	✓	✓	✓	
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 <u>Coordinator of Care at my Site during open office hours and to the On-Call person after hours</u>.

_____   _____7-7-21_____
Employee Signature   Date

_____   _____7/7/2021_____
Home Manager Signature   Date

ANNUAL DMA RECERTIFICATION TEST

1. List the six patient rights:

    Right Resident   " date/time

    " " med   " " route

    " " dose   " " document

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

    ☐ Yes   ☑ No   Explain:

    eye level on a secure surface

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

    ☐ Yes   ☑ No   Explain:

    As you pass shift change, DMA change, begin/end of shift

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

    ☐ Yes   ☑ No   Explain:

    Need a Dr order

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

ANNUAL DMA RECERTIFICATION TEST

☐ Yes ☒ No Explain:

Double lock

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

☐ Yes ☒ No Explain:

always reported

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

☐ Yes ☒ No Explain:

on designated DMA

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 only use the meds for that resident

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

☐ Yes ☒ No Explain:

Only if needed & prescribed

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

☑ Yes   ☐ No   Explain:

to moniter BP.

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

☐ Yes   ☑ No   Explain:

only an hr before and after scheduled time

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

☐ Yes   ☑ No   Explain:

Document & dispose of in dead drug bottle/box

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

☐ Yes   ☑ No   Explain:

all meds need orders

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 must be given in hr
before or after scheduled time
unless given permission

15. OTC means other than called for?

☐ Yes ☒ No Explain:

Over the Counter

16. One Tablespoon is equal to 30ml?

☐ Yes ☒ No Explain:

15ml

17. NPO means para oral?

☐ Yes ☒ No Explain:

Not oral

ANNUAL DMA RECERTIFICATION TEST

_____

_____

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

☐ Yes ☑ No   Explain:

To be disposed of.

_____

_____

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

☐ Yes ☑ No   Explain:

It is common

_____

_____

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

☐ Yes ☑ No   Explain:

It is common

_____

_____

DRUG NAME	
GENERIC NAME	
DOSAGE RANGE	
HOW TO TAKE	
USES	
SIDE EFFECTS	
WARNINGS	

DRUG NAME	
GENERIC NAME	
DOSAGE RANGE	
HOW TO TAKE	
USES	
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WARNINGS	

① D name Abilify   Gen: aripiprazole
Dose: 2mg - 30mg   How: orally
uses: schizophrenia, bipolar, major depressive dis,
sides: headache, weight gain, anxiety, nausea, dizziness,
     stroke, TIA, hemorrhage, seizures, suicidality
warning: suicidal risks, weight risk, depression, worsening behavior

② D name: Clozaril   gen: clozapine
Dose: 25 - 100mg   How: orally
uses: schizophrenia, suicide prevent,
sides: weight gain, drowsiness, dizziness, constipation, fever
     stroke, syncope, heat stroke, seizure, neutropenia

③ D name: Atrovent   gen: ipratropium bromide
Dose: 17mcg per cctuation How: inhale
uses: COPD, asthma
sides: UTI, backpain, nausea, bronchitis, nausea, dizziness
warning: none

④ D name: Crestor   gen: rosuvastatin
Dose: 5-40mg   How: orally
uses: hypercholesterolemia, dyslipidemia, cardiovascular,
atherosclerotic, homozygous, dysbetalipoproteinemia, hypertriglyceridemia
sides: headache, ab pain, nausea, dizzy, constipation, myopathy,
     tendon rupture, pancreatitis, diabetes mellitus
warning: none

⑨ D name= Flexeril   gen: cyclobenzaprine
Dose= 5-10 mg Tab, Cap 15-30 mg   How = Oral
Uses: muscle spasm, fibromyalgia,
Sides: seizure, MI, stroke, heat stroke, drowsy, dizzy
     fatigue, headache, constipation, nausea, blurred vision
Warning: none

⑩ D name= Levemir   gen: insulin detemir
Dose= 100 unit pr mL   How= injection
Uses diabetes type 1, type 2
sides: hypoglycemia, anaphylaxis, URF, headache, influenza,
     ab pain, back pain, cough, rash, vomit, weight gain,
warn= none