



Medication Administration In-Service and Evaluation

Name of Facility/Home: New Haven

Employee Receiving In-Service: Bethany Remitz

Date of 1st In-Service*: 9/15/21 Time: 8 : am / am / pm Trainer: Pbraboy

Date of 2nd In-Service: 9/16/21 Time: 8 : am / am / pm Trainer: Pbraboy

Date of 3rd In-Service: 9/17/21 Time: 8 : am / am / pm Trainer: Pbraboy

Date of 4th In-Service: 9/18/21 Time: 2 : am / am / pm Trainer: Pbraboy

Date of 5th In-Service: 9/18/21 Time: 8 : am / am / pm Trainer: Pbraboy

Date of 6th In-Service: 9/19/21 Time: 8 : am / am / pm Trainer: Pbraboy

Date of Final Evaluation: 9/20/21 Time: 8 : am / am / pm Trainer: Pbraboy

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	<input checked="" type="checkbox"/>							
	a. Location of ample supplies prior to administration	<input checked="" type="checkbox"/>							
	b. Area is clean and organized	<input checked="" type="checkbox"/>							
	c. Area is always locked	<input checked="" type="checkbox"/>							
	d. Location of all medication: Internal, External, Refrigerated, Controlled Drugs (narcotics)	<input checked="" type="checkbox"/>							
2	DMA washes hands prior to administering medications and between each Resident	<input checked="" type="checkbox"/>							
3	Medication keys are retained by DMA	<input checked="" type="checkbox"/>							
4	Resident is identified per facility policy and procedure prior to administration	<input checked="" type="checkbox"/>							
	5. Vital signs are taken per facility policy prior to administering medications (if applicable), always on cardiac and BP medications	<input checked="" type="checkbox"/>							
	a. If Pulse and BP are required, hands and equipment are washed per facility policy	<input checked="" type="checkbox"/>							
	b. If Apical Pulse is required, privacy is provided	<input checked="" type="checkbox"/>							
6	Medications Administration per facility policy and procedure: to include review of the '6 Rights'	<input checked="" type="checkbox"/>							
	a. Medications are properly removed from container/blister and the (✓) dot is placed in appropriate box on MAR	<input checked="" type="checkbox"/>							
	b. Liquid medication is poured at eye level, with palm following label of stock bottle	<input checked="" type="checkbox"/>							



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	In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
6	c. DMA verifies medication and strength with order as prescribed on medication record per facility policy								
	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. If an additional MAR pages have been added								
	k. Medication control technique is reviewed								
	l. If a resident with a 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								
	d. Medications are administered by the Resident or a DMA if there is a resident's order present, per facility policy and procedure								
	e. Sharps and needles are disposed of in sharps container, without 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 policy and procedure								
12	Side effects of psychoactive medication are noted (lethargy, confusion) 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. Medication Procedures and Documenting for administering								
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 and procedure								



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In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
19	Medication errors are reported to Home Manager and RN regarding 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	Medication instructions and documentation							
24	Review of procedures, procedures for found/spilled medication, and the National Epocrates link on staff computer							
25	Review of Staff Verification, what it is, when it is needed, and how to document it							
26	Review of Medication procedures (prompt 3 times, then write appropriate documentation)							

FOLLOW UP CONCERNS

Time frame for completion: _____ N/A

I have received the above In-service and have read the Organizations **Medical Policies**. I understand that I am expected of me as a Designated Medication Administrator. I also understand that any medication 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.

Sitran Nantz

9-22-21
Date

Pam Brown

9.22.21
Date