

Enroll



**BEACON**  
Specialized Living

Medication Administration In-Service and Evaluation

Name of Facility/Home: Stanton Cottage

Employee Receiving In-Service: Gracie Selleck

Date of 1st In-Service\*:     /    /     Time:     :     am / pm Trainer:     

\*This is done by a regional nurse

Date of 2nd In-Service:     /    /     Time:     :     am / pm Trainer:     

Date of 3rd In-Service: 8/20/2021 Time: 8:00 (am) / pm Trainer: Ashley Pearson

Date of 4th In-Service: 9/20/21 Time: 8:30 (am) / pm Trainer: C Shock

Date of 5th In-Service: 9/30/21 Time: 8:15 (am) / pm Trainer: C Shock

Date of 6th In-Service: 10/5/21 Time: 8:00 (am) / pm Trainer: C Shock

Date of Final Evaluation: 10/11/21 Time: 8:00 (am) / pm Trainer: C Shock

**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	✓	/	/	/	/			



## 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	✓	/	/	/	/			



## 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

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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.

*Yvaine Selbern*  
Employee Signature

10-11-21  
Date

*Cheryl Shost*  
Home Manager Signature

10/11/21  
Date

# ANNUAL DMA RECERTIFICATION TEST

Gracie Selleck

1. List the six patient rights:

Residents name \_\_\_\_\_ Dosage \_\_\_\_\_  
Medication name \_\_\_\_\_ Time \_\_\_\_\_  
~~Route~~ Route \_\_\_\_\_ Documentation \_\_\_\_\_

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

Yes  No Explain:

~~Hand~~ Set the cup on the counter, grab the liquid medication bottle with hand over label, then pour liquid at eye level.

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

Yes  No Explain:

After every shift you and the other DMA has to count every controlled and sign your initials.

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

Yes  No Explain:

The DMA is only allowed to crush tablets if its in a Doctor/physician order in the residents notes

# ANNUAL DMA RECERTIFICATION TEST

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

Yes  No Explain:

You should check the glucose first so you know how much insulin is needed.

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

Yes  No Explain:

Blood pressure readings are to be taken before given the medications to make sure its safe.

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

Yes  No Explain:

8:00 medications can be passed an hour before 8, an hour after 8, and then you have a 30 minute Grace period to pass.

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

Yes  No Explain:

You can put a little cup over the popped ones then put them in a bigger cup and that goes in their folder in the drawer. If they Refuse 3 times the controlled medications get put in the black box & their PRNs & other Daily Medication get destroyed.

# ANNUAL DMA RECERTIFICATION TEST

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

Yes  No Explain:

You always need a doctors order to inject insulin

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:

If its past the time, you have to call on call <sup>medical</sup> and ask if its alright if the resident takes it.

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 = 15 ml

# ANNUAL DMA RECERTIFICATION TEST

17. NPO means nothing para oral?

Yes     No    Explain:

Nothing para oral  
(Nothing by mouth)

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

Yes     No    Explain:

Everything is destroyed.

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

Yes     No    Explain:

Choking & aspiration is a rare side effect of  
Psychotropic medications

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

Yes     No    Explain:

Constipation can be a side effect of psychotropic  
medication