



## Medication Administration In-Service and Evaluation

Name of Facility/Home: Bridgette Miller

Employee Receiving In-Service: Deje Coach Center

Date of 1st In-Service: 07 / 22 / 21 Time: 1 : 00p am / pm Trainer: Learning and Development

Date of 2nd In-Service: 07 / 22 / 21 Time: 3 : 00p am / pm Trainer: Learning and Development

Date of 3rd In-Service: 08 / 18 / 21 Time: 8 : 00a am / pm Trainer: Suzanne Street

Date of 4th In-Service: 08 / 20 / 21 Time: 8 : 00a am / pm Trainer: Suzanne Street

Date of 5th In-Service: 08 / 20 / 21 Time: 12 : 00p am / pm Trainer: Suzanne Street

Date of 6th In-Service: 08 / 21 / 21 Time: 8 : 00a am / pm Trainer: Suzanne Street

Date of Final Evaluation: 08 / 23 / 21 Time: 8 : 00a am / pm Trainer: Melissa Carlson

**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		<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 pack and (.) dot is placed in appropriate box on MAR		<input checked="" type="checkbox"/>							
	b. Liquid medication is poured at eye level, with palm covering 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 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 #	Description	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

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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.

Bridgette Muller  
Employee Signature

8/23/21  
Date

Melissa Carlson  
Home Manager Signature

8/23/21  
Date