

**Policy:**

It is the policy of Thrive Behavioral Network, LLC that all direct service staff members will be instructed in proper medication documentation by the facility nurse or designated supervisor during the orientation. It is the responsibility of direct service staff to utilize this knowledge and follow this procedure at all times.

**Procedure:**

**428.10 Medication Errors**

**Subpart 1 – Definition**

Medication errors are defined as the following:

- Wrong medication given
- Dose omitted
- Dose duplicated
- Wrong route of administration
- Incorrect dosage
- Not ordered
- Wrong time
- Medication taken by wrong client
- Error in original order
- Error in transcription (order incomplete, order illegible, etc.)

**Subpart 2 – Notifications**

The staff responsible for medication supervision at the time the medication error is first noticed must notify the facility nurse or take appropriate medical action, as well as complete Form 4029 – Medication Incident / Error Report. The nurse will then notify the Treatment / Program Director.

**Subpart 3 – Corrections**

If the medication was given, but not initialed by a client or staff, the client or staff will initial the space in black ink at their first opportunity.

The staff will follow the Licensed Independent Practitioner’s order for what to do in the event that a medication is missed or omitted based on the Form 4017 – Late/Missed Medications Procedures as well as complete Form 4055 – Medication Error and Notification Report and notify the facility nurse. If such an order exists and is followed, it may not be considered a medication error based on facility nurse/supervisor discussion.

# Thrive Behavioral Network, LLC

## Subpart 4 – Staff Responsibilities

If there is a medication error, the staff working must:

- Attempt to notify the facility nurse or supervisor immediately.
- Record the following information on Form 4029 – Medication Incident/Error Report.
  - Date, time, medication and dosage of medication error.
  - Reason of medication error.
  - Notification procedure of facility nurse or supervisor.
  - Recommendation of facility nurse or supervisor.
  - Legal signature and job title in black ink of staff working, facility nurse/supervisor and client involved.
- See that all recommendations of supervisor are followed through and documented accordingly.

## Subpart 5 – Adverse Reactions

Adverse drug reaction (ADR) is any harmful, unintended, undesirable, or unexpected response to a drug that occurs at doses used for individuals to assist with prophylaxis, diagnosis, therapy of disease, or for modification of psychological function. This definition excludes predictable, dose related side effects which result in little or no change in care management.

Indications of an ADR include but are not limited to; anaphylaxis, arrhythmia, convulsions, hallucinations, shortness of breath, rashes, itching, hypotension, dystonia, leukopenia, urinary retention, and also includes true allergic (hypersensitivity) reactions and idiosyncratic reactions.

### Responsibilities

- **Direct Care Staff:** Observe and report to nursing staff any suspected adverse drug reactions.
- **Licensed Nurses:** Observe, report to Licensed Independent Professional and Treatment Director (if available), transfer to higher level of care if warranted. Attempt to notify the facility nurse or supervisor immediately.