

15. SAFE MEDICATION ASSISTANCE ADMINISTRATION POLICY

1.00 PURPOSE

This policy establishes guidelines for employees to provide safe medication setup, assistance, and administration when:

- assigned responsibility to do so in the client's Support Plan (SP) or the Support Plan Addendum (SPA); and
- using procedures established in consultation with a registered nurse, nurse practitioner, physician's assistant or medical doctor.

2.00 APPLICATION

This policy applies to all employees and clients served by Merrick, Inc.

3.00 POLICY STATEMENT

A client's SP or SPA will identify if they require assistance with or administration of medications and/or treatments while in our program.

4.00 PROCEDURES

4.10 Self-Medication

If the client is capable of directing their own care, and is completely independent in self-medication administration, the Company will not be assigned the responsibility in their SP or SPA. A formalized program for self-administration could be developed if the person has the necessary skills and abilities as follows:

- It will be the responsibility of the client's residence to determine criteria for self-administration of medication and to obtain the prescriber's orders for self-administration if requested. The Company will comply with the program established by the client's place of residence.
- In the event the client is in a training program for self-administration and their residence requests the Day Services staff to supervise the administration of medications, staff will observe the person take his/her medication and will document the supervision on the medication administration record
- If there are concerns noted about a person's abilities in self-administration of medications, the staff will notify the person's place of residence and legal representative.

4.20 Medication Assistance

Medication assistance allows the client to self-administer their medications or treatments when they are capable of directing their own care (or when their legal representative is present and able to direct the person's care). Medication assistance includes the following tasks:

- bringing to the client and opening a container of previously setup medications, emptying the contents into their hand, or opening and giving the medications in the original container to them;
- bringing to the client liquids or food to accompany the medication; or
- providing reminders to a client to take regularly scheduled medication or perform regularly scheduled treatments and exercises.

4.30 Medication Administration

All clients receiving medication should be encouraged to be active participants in the process of receiving their medication or treatment. It is recommended that an assessment of the client's skills and abilities is made to determine how we can facilitate their active participation in receiving their medication or treatment.

4.40 Medication Setup

Medication setup refers to a technique of arranging medications. This technique can be used for any or all of the following:

- medication assistance;
- medication administration;
- later administration of medications; or
- when medication administration will occur outside of the onsite program.

4.50 Requirements for Medication Administration

To ensure safe, consistent, and accurate provision of healthcare, it is necessary that the Company have standardized policies and procedures for medication and treatment assistance/administration.

- Medication administration procedures must be established in consultation with a registered nurse, nurse practitioner, physician's assistant, or medical doctor. These procedures are found in the Medication Administration Procedures and General Medication Procedures sections of this manual.
- When client's healthcare needs change, procedures for medication administration or treatments will be revised as needed.
- The Company and RN will review these policies and procedures annually to evaluate continued adequacy and appropriateness to meet the specific needs of the clients.
- The nurse's signature on the front page of this manual indicates review and approval of the written procedures to assure safe medication handling and administration.
- Medication administration procedures must include those procedures necessary to implement medication and treatment orders. These include:
 - assignment of medication responsibilities in the SP;
 - authorization to administer medications / treatments;
 - medication administration procedures and treatments procedures;
 - employee training requirements for medication administration/treatment,;
 - documentation procedures;
 - notification procedures; and
 - review of systems to ensure safe medication handling and administration with a correction plan, if indicated.
- Non-medicated, preventative, topical solutions such as hand lotion, sunscreen, and insect repellent may be administered without guardian authorization or physician order based on the recommendations of the nurse and/or at the Company's discretion

4.60 Medication Administration and Treatment Authorization

If administration of medications/treatments is assigned in the SP, the Company will obtain written authorization from the client or their legal representative. This authorization must be updated and will remain in effect unless it is withdrawn in writing and may be withdrawn at any time. If the authorization is declined, the medication / treatment must not be administered. Refusal for authorization must be reported to the prescriber without delay. If the person or legal representative refuses to authorize the administration of psychotropic medications:

- a report must be made to the prescriber as expediently as possible,
- any directives or orders given by the prescriber must be followed,

- a court order must be obtained to override the refusal when warranted,
- refusal to authorize administration of a specific psychotropic medication does not constitute an emergency and is not grounds for termination of day services.

4.70 Administration of Injectable Medications

Only an RN is allowed to administer psychotropic medications by injection. Injectable medications may be administered according to a prescriber's order and written instructions when one of the following conditions has been met:

- an RN or LPN will administer the subcutaneous or intramuscular injection; or
- a supervising RN with a prescriber's order has delegated the administration of subcutaneous injectable medication to an unlicensed employee and has provided the necessary training; or
- an unlicensed employee may administer injections if there is a written agreement contained in the client's record which includes the following:
 - signatures of the license holder, the client's prescriber, and the client;
 - the client's legal representative;
 - specific instructions for the injections that may be given, including when and how they are given; and
 - a statement that the physician will retain responsibility for the employee giving the injections.

4.80 Setup Requirements for Medication Administration

All employees that have the responsibility of medication administration or medication setup must be at least 18 years of age and receive medication training through an accredited Minnesota post-secondary educational institution or from a formalized curriculum developed by a registered nurse. Medication training must:

- include medication administration procedures, information on medications, monitoring side effects of medication, use of a drug reference manual, and other relevant topics;
- be taught by a registered nurse; and
- include an observed skill assessment by a nurse to ensure that employee demonstrates the ability to administer medications consistent with policies and procedures.

Documentation of medication training and observed skill assessment will be located in the employee's personnel file and will include:

- the determination of competency for each route the employee will use to administer medications;
- the date of the training and demonstrated skill; and
- the signature of the RN observing the skill.

4.90 Routes of Medication Administration

Formalized medication administration training generally includes oral, eye, ear, and topical routes. The following routes of administration require specialized training:

- nebulizer;
- inhaler;
- nasal spray;
- vaginal;
- rec gastrostomy;
- subcutaneous injections;
- transdermal;

- buccal; and
- sublingual.

4.10 Transportation of Medications

Most client medications to be administered are sent from a family or residence to the program via the client's driver who is responsible for giving the medications to the employee unloading the vehicle. That employee is responsible to get the medications to the designated Trained Medication Passer (TMP) who will log receipt of the medications and make sure they are properly stored. Anyone dropping off a medication will be directed to the TMP who will receipt of the medications and make sure they are properly stored. Clients are not to bring medications in on their own (e.g. lunches, backpacks, etc.).

4.11 Procedures for Supervision of Employee Medication Administration

It is the responsibility of the RN to provide on-going supervision and monitoring of the performance of medication administration. This supervision may include: direct observation of the employee administering the medication; monitoring of medication administration error reports; and periodic review of the procedures. If at any time the RN has determined that medication administration is not being performed safely, the RN may do one of the following:

- retrain the employee;
- require additional training;
- provide more frequent direct supervision; and
- inform the Company if they have determined the employee cannot adequately perform the delegated medication administration.

4.12 Communication Concerning Medications

Concerns regarding medications (including effectiveness, side effects, adverse reactions, and issues about medications) may be communicated to the client's place of residence via phone. It is recommended the occurrence of this phone conversation be documented in the client's record.

An alternative method for communicating concerns to the client's place of residence is to submit them in writing. The *Health / Medication Concerns* form may be used for this purpose. A completed copy of this form will be sent to the client's place of residence and the original will be maintained in their record (see form in this section).

At the annual IDT meeting, the medications that are to be administered at the program will be reviewed. The client and legal representative will be asked if they require additional information regarding these medications and, if yes, the Company will contact the RN to provide this information.

4.13 Medication and Treatment Orders

Written prescriber's orders will be obtained for all medications to be administered and may be ordered by a physician, dentist, or other health professional licensed to prescribe. A copy of the written prescriber's orders will be requested from the client's place of residence and placed in their program record. The orders may be found on any one of the following:

- *Medical Referral* form;
- *Physician Admission Order* form;
- *Standing Orders for Over-the-Counter Medications*;
- *Dental Referral* form;

- *Physical Examination* form;
- *Mental Health Referral* form;
- Faxed prescriber's order;
- *A Medication Profile* form; or
- Written prescription (current prescription label can serve as the written order).

Non-medicated, preventative, topical solutions such as hand lotion, sunscreen, and insect repellent may be administered without guardian authorization or physician order based on the recommendations of the RN and/or at the discretion of the Company.

4.14 Notification Requirements for Reporting Concerns About Medications

A prescriber or RN must be notified of any concerns about the medication including:

- side effects;
- effectiveness;
- a pattern of the person refusing to take medication as prescribed;
- all medication errors; and
- suspected adverse reactions (must be immediately reported to the prescriber).

4.15 Requirements for Medication/Treatment Documentation

Each client receiving medication administration will have a medication record which contains the following information:

- Client's name;
- Name of medication;
- Dose;
- Frequency;
- Route;
- Times the medication or treatment is to be administered; and
- Other information to ensure effectiveness.

When medications are not administered as ordered, the potential consequences may be a worsening of the condition the medication was prescribed to treat. This information may be found in one of the following locations:

- on the monthly medication record when the reason the medication was prescribed is specified;
- on the *Information About Medications* form; and/or
- on the medication reference information which identifies the purpose/indication of the medication.

Since the consequences of not performing a treatment as prescribed are so varied, the consequences will be individualized to the client and procedure and will be included in the medication training. All training and competency is documented in the employee records.

Drug reference information is available at the program to all employees administering medications. This information may be located in a drug reference manual, on information supplied by the pharmacy, or on a recognized drug reference website. Adverse reactions that must be reported to the prescriber are located in the drug reference information and any observation of suspected side effects will be reported to the RN and the client's place of residence.

The RN consultant and the client's place of residence will be notified when the medication or treatment is not taken as prescribed at the time of occurrence. This information is located on the medication administration record or on the *Medication/Treatment Discrepancy* form if an error has occurred.

Notations of reports made to the individual's prescriber will be documented. Reports to the case manager or legal representative will be documented on a *Medication/Treatment Discrepancy* form, or on the *Medication Record Review* form.

The RN consultant will continually monitor medication administration systems to assure safe medication handling and administration. If the RN determines there are concerns with medication administration, they will complete a review of medication administration systems and determine a correction plan.

4.16 Review of Medication/Treatment Administration Records

Medication and treatment records require continuous monitoring by everyone involved to assure accuracy and compliance. Policies and procedures are written to assure action is taken, the RN is notified, and a direction is determined to correct discrepancies promptly. The documentation of medication reviews may occur in one of the following ways:

Ongoing monitoring of medication records by the RN consultant:

- Orders are reviewed by the RN consultant for all medication or treatment changes;
- Medication administration record reviews are done and signed on a monthly basis by the RN consultant to ensure completeness;
- The RN is notified of all medication / treatment discrepancies and refusals; and
- *Medication/Treatment Discrepancy* forms are completed by employees as they occur, and are reviewed by the RN who determines a plan of correction as necessary.

A review occurs on a quarterly basis (or more frequently if requested by the client or their legal representative and specified in the SP). This review will:

- determine if all medication / treatment orders are current and accurate;
- identify medication or treatment errors;
- specify a plan to correct patterns of medication administration/treatment errors when patterns are identified; and
- are documented on a *Medication Record Review* form.

4.17 Reports of Medication and Treatment Issues

The client's legal representative and case manager must be notified of the following as they occur or as identified in the individual's SP;

- medication or treatment issues;
- reports made to the prescriber regarding adverse reactions;
- reports made to the prescriber of medications or treatments not performed due to error or refusal; and
- concerns about the client's self administration of medications or treatments.

This notification may occur by phone call, fax, or in a written report, whichever is most appropriate depending on the circumstances and as directed in the SP. Documentation of this notification will be in the client's record. It may occur in a variety of formats including, but not limited to:

- *Health / Medication Concerns* form;
- *Medication / Treatment Discrepancy* form; or
- Individual's *Medication Record Review* form.

4.18 Employee Responsibilities for Medication Administration

- Administer medications only when you have received training in medication administration and completed a demonstration of your skill.
- Follow prescriber's orders and established procedures when administering medications.
- Know the purpose of the medication, consequences of not taking as directed, adverse reactions, side effects and specific instructions for administering.
- Be familiar with the condition of the client (for example: allergies, ability to swallow, etc.).
- If you believe the client is having side effects of medication, call the RN or client's place of residence before administering the medication.
- Follow warning label(s) on the medication container.
- Give medications to one client at a time and do not leave medications unattended.
- Give medication directly to the client, not via another person.
- Do not use one client's medication supply for someone else.
- Follow criteria listed on the medication administration record for giving PRN medication and chart the reason for giving PRN medication and the outcome of giving the medication in the progress notes.
- Put unused medications in an envelope marked "to be destroyed" in the medication cabinet and not in the original container.
- Chart medications immediately after they are given.
- Keep medication containers tightly closed and report any changes in color, odor, consistency, or suspected tampering to the pharmacist. Do not administer this medication.
- Make sure all medications are stored safely.
- Notify the RN of all new medication orders.
- Notify the RN, the client's place of residence and the TMP of all medication omissions, errors, or refusals.

Policy reviewed and authorized on 02/15/2024 by:



John Wayne Barker, Executive Director