

MEDICATION ADMINISTRATION

PURPOSE:

To establish guidelines for Safe administration, handling, storage, and disposal of medications.

POLICY:

Medication Administration shall be in accordance with COMAR regulations and all applicable state and Federal regulations including Federal Laws and Regulations in Reference to Controlled Substances). Nursing staff will administer medication within their scope of practice and must have documented skills/competency training for Intravenous medication, Intramuscular injection, topical and g-tube.

PROCEDURE:

1. The Nurse Supervisor will ensure that No medication is accepted without a PHYSICIAN'S order and the PHARMACIST'S written instructions as to the drug, dosage, interval, and the patient's name on the unit packaging.
2. Registered Nurse staff will transcribe physician's orders to MAR (Medication Administration Record) exactly as written and obtains the Physician's signature of the verbal order within a period of time not exceeding 72 hours after the order is given.

3. The Nurse Supervisor shall provide education to the caregiver and/or patient regarding the proper storage, side effects and correct dosage of and how to administer the medications.

4. Verbal Orders

Definition: Verbal Order are orders that has been verbally relayed by a physician's signature either in person or via telephone to an authorized individual.

- When a verbal order is given, the authorized individual receiving the order shall enter it in the Physician Verbal/Telephone Order Form and read back details of the order to the Physician for verification.
- All verbal orders are expected to be signed promptly by the responsible physician and within a period of time not exceeding 72 hours after the order is given.
- Individuals with authority to take and enter verbal orders from Physicians are only Registered Nurses.
- All medication changes will be documented on the individual's MAR, Individual's progress note, and on the paper Emergency Medical Form. Written documentation must be obtained within 72 hours from the prescribing physician and placed in the individual's record.
- Current medication order must always be obtained from the prescribing physician and placed in the individual's record.

5. Administration of Medications:

- The administration of medications will be within one hour of a designated order time, unless prescribed at a specific time by the physician.
- Any medication administered to an individual with the assistance or supervision shall be with the assistance of a qualified individual who has adequately trained and legally licensed to administer medications. In the administration of oral medication, the actual act of swallowing the medication must be witnessed and recorded by designated agency staff. The name of the individual, dosage, and time of administration of each dose must be recorded on the MAR.
- Medications shall be administered only to the individuals for whom the medications are prescribed and shall be administered as prescribed. The six rights of Medication Administration shall be utilized before administration/assistance with medication/treatments:
 - Right Individual
 - Right Medication
 - Right Time
 - Right Dose
 - Right Route
 - Documentation of administration of Medication/Treatment
- All medication Administration shall be documented on the MAR to include the patient's allergies. The name of the individual, dosage, and time of administration of each dose must be recorded on the MAR.
- The MAR must be signed by the qualified person assisting or supervising the individual taking the medication so long as the individual is on medication.

- Nursing Staff will maintain a daily log of all medicines received and refused by each individual on the Daily Medication Log. Staff Names are required on the daily log to identify the staff who administered the medication. If a patient refuses to take their medication the staff member notifies the Nursing Manager, then follows the procedure for "Medication Error" The Nurse Manager shall notify the patient's physician as appropriate.
- In the event of a possible or actual adverse reaction to a medication while in the patient's place of residence, the staff shall notify the physician immediately for orders, Implement the anaphylaxis protocol, if ordered, Activate the Emergency Medical System (911) if necessary. Initiate first aid measures to provide for an open airway. Administer CPR if required. Complete the Incident Report and forward it to the Nurse Supervisor.
- Qualified nurse personnel must have evidence of experience and/or education and competency evaluations filed in their personnel files in order to administer intravenous, chemotherapy , psychotropic medications, IM (intramuscular injection), topical, via g-tube).Such medications shall be administered by the RN following the process and routes as prescribed the physician.
- The administration of PRN medications, controlled substances shall include documentation of the use and effectiveness of these medications by the nurse in the patient's chart.

6. Handling and Storage of Medication:

- All Medications including packaged medications brought by individuals from home or other residences shall be in their original containers as provided by the pharmacy and have legible labeling intact on the container with the labeling having the following information:
 - the prescriber's name
 - the patient's name
 - the date
 - the Rx Medication name
 - Dosage of the drug

- All Medications must come with pharmacy instructions.

- All medication containers shall be labeled properly and stored in a safe, appropriate, and secure area. Unlabeled containers and medications are to be removed from the individual's possession and disposed of immediately, according to company policy.

All medications must be stored in the original containers in which they were dispensed by a licensed pharmacist. The labels must be legible and intact on each container. An order must be on file for both prescription and over the counter medication that the individual is taking.

- All medications must be stored centrally in a locked cabinet or refrigerator if required (38-40 degrees, and designated for medication only), with sufficient storage space and adequate lighting. All Schedule II medications (controlled substances) must be secured in a double locked area. This can be accomplished by securing medications in a locked medication cabinet/cart in a locked room. If the medication calls for refrigeration it must be stored in a locked

refrigerator that is designated only for medication, or a locked box securely attached in the refrigerator in the locked medication storage area. For all controlled medications that are dispensed or stored at in the home the medication must be secured in a double locked area.

- A monograph (Medication Side Effect Sheet) shall be on file in the individual's record for all medications.
- The Controlled Drug Inventory Sheet will be located with the current MAR of the designated individual. The amount of control medication received from the pharmacy must be recorded on the Controlled Drug Inventory Sheet. When the medication is dispensed it must be recorded on the individuals' MAR and on the Controlled Drug inventory Sheet.
- A Controlled Drug Balance Sheet will be located in the front of the MAR to be completed each time the medication key changes hands. This certifies that all drug balances match those listed on the individual Controlled Drug inventory sheets.
- In the event that the medication count is incorrect the Nursing Supervisor will be notified immediately, no keys should be exchanged and all staff will remain on site. The Nurse Supervisor will verify the count as either incorrect or correct. The Director will be notified of the findings, and if the balance remains in question an incident shall be initiated for further investigation by the Director and forwarded to the Quality Assurance Committee.

- Any suspected violation of the medication policy and procedures shall be reported immediately, to both the Director and the Quality Assurance Committee.
- The discontinuation of physician orders and medications shall be documented by the Nurse Supervisor and updated on the MARS. Expired or discontinued medication must be separated from all current medications immediately and disposed of according to D&P Healthcare Staffing Agency Policy and Procedures.
- Unauthorized labeling is not permitted. (Unauthorized labeling is any label that has been altered or changed in any way since dispensed from the pharmacy).
- Excessive drug quantities are prohibited.
- The medication storage area must be clean, orderly, uncluttered, and free from trash. Cabinets, carts, refrigerators as well as drawers are to be cleaned of spills and drips immediately. Cabinets, carts, refrigerators and counter tops are to be cleaned daily.
- Medication storage areas shall be locked at all times when unattended.
- The nurse supervisor is responsible for monitoring staff to ensure that all procedures are followed in accordance to D&P Healthcare Staffing Agency Policies and Procedures.
- All individuals that require Blood Glucose monitoring will have an individual Blood Glucose Meter, lances, and lancing device.

- All syringes, needles, lancets and other injection supplies must be secured in the locked medication area and inaccessible to all unauthorized persons.
- Insulin dispensed for subcutaneous injection in a multi-dose vial (10ml vial), shall be dated and initialed at the time the manufacturer's seal is first broken and is to be discarded after 30 days, as it is then expired. All insulin should be stored according to the manufacturer's guidelines.
- All contaminated needles, syringes and lancets are to be disposed of in a rigid plastic Sharps container in accordance with Federal regulations as set forth by the Occupational Safety and Health Administration (OSHA).

7. Disposal of Medication

Prescription and over-the-counter medications will be disposed of appropriately. This includes medications that have met their expiration date or have become contaminated (dropped on the floor or on other unsanitary surfaces) or unused medication due changes in the drug regime. Staff are not authorized to dispose of medication themselves. Prescription and over-the-counter medications to be disposed will be documented on the Medication Waste Form.

- Expired Medication
 - Medications that have met or exceeded their expiration date shall immediately be removed from the medication cabinet.
 - The medication shall not be removed from its original packaging.

- The medication shall be stored in a separately in a locked cabinet until the medication is either picked up by authorized pharmacy personal or by the Nurse Supervisor.
- *Contaminated Medication*
 - Periodically staff or individuals may drop medication on unsanitary surfaces such as counter tops and floors. Staff shall place the medication in an envelope, seal the envelope, and do the following:
 - Complete the Wasted Medication form
 - Store the medication separately until the contracted pharmacist destroys the medication.
- *Unused Medications*
 - Medications that can be returned to the pharmacy shall be returned and the appropriate account credited.
 - If the medication is not accepted by the pharmacy, the medication shall be stored separately until the medication is picked up by the nurse and taken to appropriate pharmacy for disposal.

Related Policies/Forms

1. *Medication Assistance by Personal Care Aides*
2. *Medication Administration Record*
3. *Daily Medication Log*
4. *Medication Waste Form*

MEDICATION ASSISTANCE

POLICY

D&P Healthcare Staffing Agency will assist clients to maintain the maximum level of independence by assisting with medications within the scope of practice for non-licensed staff as outlined in this policy.

PROCEDURE

Medication Assistance by non-licensed staff (Home Health Aides and Certified Nurses Aides) shall be limited to the following:

- a. The staff may remind a client when it is time to take the medications*
- b. The staff may assist with gathering the medications and liquid*
- c. The staff may read medication bottles and instructions for use*
- d. The staff may open medication bottles for the client*
- e. The staff may reassure client that medication has been taken*

The client signs an informed consent form consenting to assistance by a non-licensed individual with treatments of a routine nature, or with the self-administration of medications.