



# Medication Administration: A Course for Unlicensed Personnel in Community Facilities

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updated 5/13/19

# Purpose and Introduction

- ▶ This course is prepared using the material approved by the North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services and is also approved by NC DHHS.
- ▶ This course is designed to provide basic information on medication training for unlicensed personnel. It is a generic training course based on a best practices approach. This instruction is designed to ensure the competency of those staff members who administer medication to clients in community facilities and adult care homes. Successful completion of this course minimally prepares unlicensed personnel to administer medication by oral, topical, rectal, sublingual, inhalation and instillation methods. The course does not include any clinical observation.
- ▶ This training does not license, register or certify the trainee.
- ▶ These credentials do not transfer outside of Turning Point Services, Inc.
- ▶ After completing the informational portion of training and written exam you will be scheduled for the clinical portion to complete your certification.

# Policy Regarding Medication Requirements

- ▶ A copy of the Turning Point Services, Inc. policy regarding medication requirements is given with each new medication administration training.
- ▶ This policy is reviewed annually in September and available at each local office or you may request a new copy when renewing your certification.
- ▶ Turning Point Inc. policy requires medication administration annually which includes the informational content with written test and also a clinical portion which will require the RN to observe certain aspects of the medication administration procedure.
- ▶ After completing the informational and written test portion your QP will notify the Nurse Supervisor to arrange the clinical portion.

# Unit 1 - Medication Administration is a Serious Responsibility

- ▶ Direct Service Staff Do Not Make Medication Judgements.
- ▶ As a direct service staff member you are NOT to make judgements about medications, only to observe and report. Remember
  - ▶ A pharmacist, physician or advanced practice professional, such as a family nurse practitioner or physician's assistant, are the only persons qualified to dispense drugs to a client or facility. He/she is also the only one who may label medication or change a label.
  - ▶ Those advanced practice professionals with prescriptive privileges are the only people qualified to prescribe medication.
  - ▶ The staff cannot administer medication to a client without a physician order. However, the staff must know enough about how medication works to understand what the physician is trying to accomplish with the medication. Observations, when accurately reported are invaluable to the physician in the treatment of a client.
  - ▶ Direct service staff are responsible for monitoring clients who self administer medications. Clients residing in licensed facilities or AFL's must have an order to self administer medications.
  - ▶ The better you know someone the better you will be able to accurately report observations. The best way to do this is to know what is normal and then you can report what is abnormal.

## Unit 2 - Staff Responsibility

- ▶ The medication cycle has five areas. Medication administration is more than simply handing out medication. It should be looked at as a complete cycle which includes the following 5 areas
  - ▶ Observation - The direct service staff member will be making the observations
  - ▶ Prescription - The physician writes the prescription based upon reported observations
  - ▶ Dispensing - The pharmacist dispenses the medication from the prescription.
  - ▶ Administration - The direct service staff member administers the medication.
  - ▶ Documentation - After administration the cycle is completed when the direct service staff member documents.
- ▶ Remember you are responsible for all medication you give and do not give, you must make sure the prescription, medication label, and documentation (MAR) all match exactly.
- ▶ Also if you notice the prescription is not what the Dr. told you or the label does not match the prescription you have the responsibility to double check information before giving the medication. Don't just assume it is correct, Dr's and Pharmacists are human and mistakes can happen.

# Staff Responsibility

- ▶ No medication is harmless. All medication carries with it some degree of danger. A written physician order must be obtained for both prescription and nonprescription medications in all licensed facilities.
  - ▶ For nonlicensed AFL's Turning Point Services, Inc requires a physician or pharmacist to ok any non prescription over the counter medications prior to administering them. This is because so many OTC medications could interfere with prescription medication.
- ▶ The Food and Drug Administration requires medication manufacturers to prove the value and safety of new medications before they are released for sale.
  - ▶ This determines which medications may be sold with or without a prescription.
  - ▶ Prescription medication labeling: a clear description of contents, directions for use, the quantity of medication dispensed and the date of expiration.
  - ▶ Non-prescription medications labeling: the name of the medication the strength, quantity and average direction for use.
  - ▶ Warning statements on certain medication labels
- ▶ How does this affect you
  - ▶ Every medication must have a label
  - ▶ Look for additional colored labels that indicate a warning statement (may cause drowsiness, take with food, etc.)
  - ▶ If a client takes medication in more than one location, both containers must have a label containing the medication name, dosage of medication and directions for use.
  - ▶ If you do not understand a medication label as written contact your pharmacist for clarification. You may also contact you supervisor in order to have a TPS nurse assist in the case the pharmacist is not available.

# Staff Responsibility

## Controlled Substances

- ▶ Controlled Substances - Some medications have a higher potential for abuse and therefore are classified as controlled substances. These drugs require stricter federal and state regulations for ordering, dispensing, delivery, administration, storage and disposal.
- ▶ Agency policy should always be followed.
- ▶ Pharmacies require signing for these drugs when received.
- ▶ Any discrepancies in number received should be reported to pharmacy immediately.
- ▶ These drugs should be transported in a locked container.
- ▶ These drugs should be kept in limited supply (do not overstock)
- ▶ Controlled drugs that are no longer needed should be noted on inventory and returned to the pharmacy or disposed according to agency policy.
- ▶ Wasted, contaminated or other discarded doses must be documented on appropriate form and witnessed according to agency policy.
- ▶ Any drugs unaccounted for must be recorded on the appropriate form according to agency policy.
- ▶ Some regular, recurring system to monitor (count) and document these drugs should occur according to agency policy.
- ▶ Controlled drugs should be stored according to facility policy - (DOUBLE LOCKED)
- ▶ Best practice guidelines encourages the routine counting/documenting of all controlled substances.

# Unit 3 - Six Rights of Medication Administration

- ▶ In order to give medications correctly, staff need to observe the six rights of medication administration
  - ▶ Right client
  - ▶ Right medication
  - ▶ Right dose
  - ▶ Right route
  - ▶ Right time
  - ▶ Right documentation
- ▶ Most Medication Errors are made because one of the Six Rights was not observed.



# Right Client

- ▶ It is essential to confirm identity of the client prior to medication administration.
- ▶ Never give medication to someone unfamiliar to you.
- ▶ Staff should also avoid giving medication to more than one person at a time.
  - ▶ Complete the entire process with one before beginning another.
- ▶ Giving medication to the wrong client involves danger for two people. The client not receiving the medication is deprived of the desired effect and the client receiving the medication may experience serious negative consequences.

# Right Medication

- ▶ The right medication must be given to have the desired effect. Matching the label of the container with the Medication Administration Record (MAR) and physician's order is one way to be sure the right medication is given. If any time you think you have the wrong medication do not administer it until you have verified accuracy.
- ▶ It is your responsibility to know the specific purposes of each medication you administer.
- ▶ Once a medication or medicated treatment is administered to a client the staff member should immediately document (sign his/her initials) in the correct area of the MAR.
- ▶ Never sign before administering medication. Do not delay in signing the MAR. The entire process must be completed within the allotted time period.

# Right Dose

- ▶ Physicians prescribe an amount within the dosage range depending on how strong an effect is needed and on the age, size and physical condition of the client. For this reason most medications come in different strengths.
- ▶ You must make sure you have the correct strength of the medication and the right amount to equal the right dose.
- ▶ Again, the right dosage equals the right strength and the right amount.
- ▶ The most frequently used system for measuring medication is metric. Most liquid medications are administered in milliliters and most solid forms are measured in milligrams, grams or kilograms.
- ▶ Always use the proper measuring device for liquid medication to be sure proper dosage is administered.
- ▶ Never use a household spoon to measure medications!!!

# Right Route

- ▶ The route is the part of the body to which the medication is administered. Most medications are give by the oral route which means they are taken by mouth and swallowed. They are called internal medications. Other medications that are applied to the outside of the body such as skin cream, eye drops, and eardrops are call external medications.
- ▶ The route is included in each prescription, on the medication label and must be on the MAR as well.
- ▶ The most common route of medication administration is oral or you may see po which is the medical abbreviation for by mouth.
- ▶ AFL's are encouraged to always write out instructions and not use abbreviations as this is where most errors can occur. If you use abbreviations make sure a reference page is in the MAR in the event of an emergency and a backup person must give meds. They may not be as familiar with abbreviations and need to double check. (Attachment A in your booklet is an excellent reference page)

# Right Time

- ▶ Medications are scheduled a regular times to maintain consistent levels of effectiveness. Medications that are quickly used by the body need to be taken more often to maintain and adequate amount in the blood so the desired effect will occur. Other medications can be given less often because the body does not use the medication as rapidly.
- ▶ Medications may be given in a grace period of one hour before scheduled dosing time until one hour past dosing time. This allows some flexibility in schedules and activities. The closer to the scheduled time the better it is for the client so blood levels are maintained.
- ▶ Turning Point Services, Inc. requests you try to stay within 30 minutes of before and after dosing time however you do have the full hour if needed before it becomes a medication error.
- ▶ Always pay special attention to any special instructions regarding medication scheduling.
  - ▶ Take with food.
  - ▶ Take on empty stomach.
  - ▶ Take before meals or after meals

# Right Documentation

- ▶ The Medication Administration Record is a legal document.
- ▶ Use the MAR throughout the administration of medication and medicated treatments. After the medication or treatment has been administered to the right client, immediately record this on the MAR including the right dose, right date and time, right route, right medication and finally right documentation with your own right initials
- ▶ Do not sign another staff members initials even if you know they administered the medication. The MAR is a legal document and signing someone else's initials would be considered fraudulent documentation.
- ▶ Always use black ink. No blue, red, purple, pink. All documentation on the MAR must be in Black.
- ▶ If error occurs then you must error correct by drawing one line through error, date initial and then document correctly. Never, ever use pencil, white out, scribble or write over.

# Unit 4 - Administration Procedures

## ▶ Procedure for Oral Medication Administration

- ▶ Time Schedule - organize your time so you are ready to administer medication at the appropriate time.
- ▶ Wash your hands - both staff and client should wash their hands prior to medication administration and each time hands are contaminated during the process.
- ▶ Unlock medication storage area. Medications must be stored in a locked location with controlled drugs being double locked. The pharmacist will indicate which medications must be double locked.
- ▶ Check the label - Always, always, always check the medication label 3 times before the client swallows the medication. Even if you have given the same medication for 10 years you must check each and every time. Never rely on memory, location, color, shape or size.
  - ▶ Check the label when you remove the medication from the storage area
  - ▶ Check the label again when you remove the correct dose from the container.
  - ▶ Check the label again after removing but before giving to the client to swallow.
- ▶ Remove the right dose from the container. (Attachment C in your booklet has measuring tips for liquid medication.
- ▶ Observe them swallow the medication. You must watch them swallow, do not hand it to them and turn away.
- ▶ Replace the medication in the locked storage area
- ▶ Document the medication was administered.
- ▶ Observe for desired and side effects of the medication. This is an ongoing part of medication administration. Remember you observe and report.

# Unit 5 Special Medication Procedures

- ▶ To make sure medications are given correctly you must obtain a copy of the written prescription either from the physician or from the pharmacy.
- ▶ A copy of all prescriptions must be kept in the home and a copy of medications must be in the client record.
- ▶ When a new medication is prescribed or a change is made to a current medication is made the MAR must be changed to reflect this. In order to do this the AFL must have a copy of the physician order and the medication label to correctly complete the transcription to the MAR.
- ▶ When a staff administers medication they are responsible for knowing where to find the following information.
  - ▶ What is the purpose and desired effect?
  - ▶ What is the response time? (How long until the effects will be noted)
  - ▶ What are the side effects?
  - ▶ Are there possible interactions with this medication and other medications?
  - ▶ Are there any special storage instructions or administration procedures? (refrigerate, take with food, etc)
  - ▶ Is it a controlled substance?
- ▶ The informational handout given with each prescription should answer all of these questions. Keep a copy of the medication information sheet with the MAR.



# Special Medication Procedures

- ▶ Whenever a new medication or change in dosage is ordered by the physician verify that the medication label and physicians order are the same.
- ▶ If a medication change occurs during the month, mark the section as discontinued, date and initial and rewrite the change in a new section on the MAR.
- ▶ The information from the physician's order which must be transcribed to the MAR includes:
  - ▶ Medication name
  - ▶ Dose - both strength and amount
  - ▶ Time - when it is to be given
  - ▶ Route - how it is to be taken

# Special Medication Procedures

- ▶ Procedure for When Client is away from the AFL or facility.
- ▶ To avoid missing a dose of medication when a client will be away from the AFL or facility you have must do one of the following.
  - ▶ Sending an individual dose with the client if gone during one scheduled medication time. This individual dose should be placed in a container with client's name, medication name and strength, time to give and route.
  - ▶ Sending the medication as packaged by the pharmacy if the client will be gone for more than one scheduled medication time.
- ▶ Instruct family/friends when medication is to be taken, be sure they have labeled containers with clear instructions and explain why the client needs the medication. Always document the amount sent home and the amount returned.

# Special Medication Procedures

- ▶ Procedure for PRN medication
- ▶ PRN means “only as needed” It is a term applied to prescription or over-the-counter medications that are taken only if the client has a symptom that can be relieved by the medication.
- ▶ PRN medications should not be given at the same time every day since they are only as needed and the symptom should not occur the same day every day at the same time. If this occurs the physician should be notified and the medication should be ordered routinely and not PRN.
- ▶ All PRN medications prescription and nonprescription (OTC) must be documented on the MAR.
  - ▶ The documentation on the front will include the medication name, dose, and instructions and if it is needed on a particular day then the person administering the medication would initial the block for that day.
  - ▶ The documentation on the back will give the details, date, medication name and dosage, reason it was needed and the results obtained and once again initials of person administering the medication.
    - ▶ The reason and results must be documented for every prn medication each and every time it is administered.
- ▶ Procedure for Over-The-Counter Medication
- ▶ All OTC medications must be documented including vitamins, supplements, cold medication, cough medication, etc.
- ▶ The medication name, strength and dosage information from the label will be written for the instructions just like the instructions from a physician order.
- ▶ NOTE: All Prescription PRN's must be on the MAR every month regardless if administered or not. OTC PRN's only need to be written on the MAR if they are administered during the month.

# Special Medication Procedures

## PRN Guidelines for all licensed facilities (Day Program, Residential and Licensed AFL's)

- ▶ If a PRN medication is required to be given to a client for a period of 48 hours the client's physician will be notified, even if the client is showing signs of improvement.
- ▶ The client's physician will be contacted immediately any time a client experiences a temperature 103 F (39.4C) or higher.
- ▶ Staff will seek immediate medical attention if any of these signs or symptoms accompany a fever: Severe headache, unusual skin rash, especially if the rash rapidly worsens, unusual sensitivity to bright light, stiff neck and pain when you bend your head forward, mental confusion, persistent vomiting, difficulty breathing or chest pain, abdominal pain or pain when urinating, or convulsions or seizures.
- ▶ If a PRN medication is given it will be documented on the MAR and the individual that administered the medication will complete the information on the back of the MAR regarding date, time, medication and dose, reason and results and initials.
- ▶ The reason and results must be documented for every dose of PRN medication.

# Other Medication Administration Routes of Administration

- ▶ Your booklet contains instructions for administration of medication by the following routes/methods.
  - ▶ Ear Medication
  - ▶ Eye Medications
  - ▶ Metered Dose Nasal Pump
  - ▶ Metered Hand Held Inhalants
  - ▶ Nasal Drops/Sprays
  - ▶ Rectal Medications and Enemas
  - ▶ Techniques for Crushing Medications
  - ▶ Topical Medications
  - ▶ Transdermal Patch
  - ▶ Vaginal Medication
- ▶ If you ever have a question regarding the proper way to administer a medication contact your supervisor and a TPS nurse will contact you.

## Unit 6 - Special Issues

- ▶ Many clients have difficulty swallowing medications. Do not just crush and give. Your booklet contains several useful tips to assist someone having difficulty swallowing which may help. If medication must be crushed always check the label or with the pharmacist first to make sure it is ok to crush the medication. Certain medications cannot be crushed or capsules opened.
- ▶ You may work with a client who refuses to take medication. While the client does have the right to refuse medication if staff uses the following approaches many times clients will agree to take the medication.
- ▶ Accept the refusal initially and then approach in about 10 minutes to see if client decides to take.
- ▶ Offer Choices
- ▶ Repeat offers until client decides to take or the allotted time limit has ended.
- ▶ Do not consider it a refusal until the time frame to correctly administer the medication has ended. At this time you will need to document refused, notify the physician or pharmacist to give instructions as to what to do and then within 24 hours notify your supervisor.
- ▶ Medication Error - The same steps in a refusal are taken in a medication error. As soon as you realize there has been an error, call the physician or pharmacist and follow their instructions, notify your supervisor within 24 hours. Legally you are in a much better position if you can show that you promptly recognized the error and you took action to remedy it.
- ▶ Remember everyone makes mistakes; people who are wise learn from them. Admit any errors, made, document, but do not dwell on past mistakes. Relax, Tension and anxiety cause mistakes. Learn from your mistake and move on.

# Conclusion

- ▶ This concludes the informational portion of the Turning Point Services, Inc. Medication Administration training.
- ▶ Your next step is to complete the written test and turn in to your supervisor.
- ▶ After you have completed the written test then you will meet with a TPS RN to complete the skills portion. This will include a review of your most recent MAR, physician orders and medication administration procedure. This portion may be completed in the office or in the home and will require current MAR, physician orders and current medications to be available for RN to review.
- ▶ This training must be completed annually for all AFL providers and their emergency backup AFL provider. In addition Residential and Day Program Staff designated to administer medications must complete the training annually.
- ▶ For recertification this entire training process needs to be completed prior to the expiration date of your current certification.

WE HOPE YOU HAVE FOUND THIS MEDICATION CERTIFICATION TRAINING INFORMATIVE. IF YOU HAVE ANY QUESTION PLEASE ASK YOUR IMMEDIATE SUPERVISOR. PLEASE PROCEED TO THE TURNING POINT TRAINING PAGE TO COMPLETE THE TEST ASSOCIATED WITH THIS TRAINING. THE LINK CAN BE FOUND AT:

<http://www.turningpointservicesinc.com/employee-training/>