

POLICIES AND PROCEDURES MANUAL

KEYSTONE COMMUNITY RESOURCES, INC.

KEYSTONE INDEPENDENT LIVING, INC.



Policy Title:
Administering medication

Chapter:
9

Effective Date:
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Policy Number:

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SCOPE:

- Chapter 6400 – Community Homes For Individuals With Mental Retardation

INTRODUCTION:

1. Medications are chemicals that effect body functions. The medications given in your home are medications prescribed by a doctor for a specific reason. Medications are given only at the orders of the doctor who cares for the resident.
2. Medications are prescribed for one of the following reasons: to promote health and/or prevent disease (vitamins, vaccinations); to control disease and/or restore normal body functions (seizure medications; insulin) to cure disease (antibiotics); to treat chronic disorders (depression); to relieve pain (aspirin); and to diagnose a disease (tuberculosis skin test).
3. Prescription medication may only be administered by the following:
 - Licensed physicians, licensed dentist, registered physician's assistants, registered nurses, licensed practical nurse.
 - Graduates of approved nursing programs functioning under the direct supervision of a professional nurse who is present in the home.
 - Students of approved nursing programs functioning under the direct supervision of the nursing school faculty who is present in the home.
 - In homes serving eight (8) or fewer individuals, staff persons (non-medical personnel) who complete and pass the Medications Administration Training Course may administer medication. Annual recertification (Practicum section only) is required. Documentation of training including the date, the Certified Trainer, signature and credentials, Written Module Exam and Module Exam Data Summary Sheet must be retained for each person administering medication.
4. An individual is considered capable of self-administration of medication when:
 - He/She is able to recognize and distinguish personal medication.
 - He/She knows how much medication is to be taken.

- He/She knows the time medication is to be taken.
5. Regarding Administration of insulin – In cases where non-medical personnel administer insulin injections, the following guidelines must be met:
 - In homes serving eight (8) or fewer, the staff person must complete and pass the medications Administration Course and pass a diabetes patient education program within the previous 12 months.
 - The individual must be under the care of a licensed physician who is monitoring their diabetes.
 - Insulin must always be pre-measured by licensed, certified or registered medical personnel.
 6. Medications are prescribed by a doctor for a specific condition of a specific person and are only given to the person for whom they are prescribed.
 7. Medications must be stored under proper conditions of sanitation, temperature, moisture and light. For safety reasons, prescription and toxic non-prescription medications must be stored in an area or container that is locked and accessible only to authorized staff. These may be kept unlocked if all individuals residing in the home are able to safely use or avoid these. Medications which require refrigeration must be stored in a separate locked container in the refrigerator, and the same exception applies. Prescription medication must be kept in the original container with pharmaceutical label that includes the individual's name, name of the medication, the date the prescription was issued, the prescribed dose, and the name of the prescribing physician. Non-prescription medication must be labeled with the original label.
 8. A medication log is maintained for each individual and includes the individual's name, the medication prescribed, time, date medication is administered and the name of the person who administers the medication. The administration of medication must be recorded immediately after giving including non-prescription medication.
 9. A list of prescribed medication, dose, time and prescribing physician is kept for individuals who self-administer medication.
 10. A medication error is defined as :
 - Failure to administer.
 - Incorrect medication administered.
 - Incorrect medication time (explanation: a medication is administered more than 60 minutes prior to or 60 minutes after the prescribed time).
 11. Errors in the administration of medication must be reported immediately to the nurse-on-duty or medication supervisor who has the responsibility to contact the physician or poison control Center and carry out the medical instructions given. The person responsible for the error must complete an incident report at the time the error occurs. The Program Coordinator will review the circumstances and establish a plan of corrective action and this documentation will be maintained with the incident report.

12. Remember the “**6 Rights**” of giving medication: Give the **Right Medication** in the **right amount** to the **right person** at the **right time** by the **right route** and **right method** of administration.
13. You must understand the actions of the medications that are administered and precautions necessary in giving some of these drugs so that you can recognize any adverse effects. This information is provided to the individual and to you at the time the medication is prescribed so that adverse reactions can be watched for and reported. An adverse reaction must be reported immediately to the Medication Supervisor or nurse-on-duty who has the responsibility to notify the prescribing physician, immediately. In the event of a medical emergency, such as breathing difficulty, emergency medical services should be sought first by contacting 911. An adverse reaction to medication will be noted through an incident report and maintained in the individual’s file.
14. Discontinued medication must be disposed of in a safe manner following these guidelines:
 - Notation is made on the medication record indicating date and time medication was last administered. A line is drawn through the remaining calendar days with the signature of the person responsible for the documentation.
 - Medication is disposed of by flushing it down the toilet or returning it to the Pharmacy.
 - An incident report is completed documenting that medication was disposed of and in what manner.
 - A witness should observe the disposal of medication and indicate this in writing on the incident report.

DISCUSSION: