

## PATHWAYS ABILITIES SOCIETY

### **POLICY: MEDICATION ADMINISTRATION**

**Applies to:** All Personnel, Volunteers, Persons Served, Families, Advocates and Caregivers

### **PREAMBLE**

Pathways Abilities Society adheres to the 12 Rights (12 R's) of Medication Administration as outlined in this policy and procedures. Medication administration is one of the most important and risky (legally) tasks staff perform. When the 12 R's of Medication Administration are adhered to any chance for error and injury to the individual is virtually eliminated.

#### Definitions:

**Medications:** Any chemical substance intended for use in the medical diagnosis, cure, treatment, prevention and/or alleviation of the symptoms of disease.

**Non-Prescription Medication:** Over the counter medications, which include but are not limited to Tylenol, Antacid and Antihistamines and other non-prescription medications are to be treated like prescription medications and administration requires a doctor's prescription and a pharmacy provided medication administration record. External products such as creams or powders can be applied if the known risk is low and if application is directed by a supervisor or LPN.

**The 12 R's of Medication Administration:** The Right Person, Right Drug, Right Date, Right Dose, Right Time, Right Route, Right Documentation, Right to Refuse, Right to receive Medications Respectfully, and the Right to Request PRN medications, the Right Reason, and the Right to Informed Consent.

**PRN (Pro Re Nata) Medications (as needed):** Medication used only on an as needed basis. PRN medications include non-prescription medications and must be prescribed by a doctor. Administration requires a Physician's Authorization to Administer PRN Medications specifying under what circumstance they can be administered and a protocol. They must not be used for any other purpose than the purpose outlined by the physician.

**Contaminated Medication:** A medication that has been improperly handled including hitting the ground or floor. Any contaminated medication needs to be discarded accordingly.

**Medication Errors:** Administered to the wrong person, wrong drug, wrong dose, wrong time, wrong route, wrong documentation, found medication and any other deviations from the 12 R's of Medication Administration.

**Medication Administration Record (MAR):** The person's physician supplies the pharmacy with medication information authorizing the administration of prescribed medication. The pharmacy, when issuing the medications, provides a MAR form

detailing this information. There are different MAR forms depending on the pharmacy issuing the form. Staff may be required to either sign the back or the front and initial. Staff then initials the form each time a medication is administered. The LPN or designate initials the top of the MAR after receiving and reviewing a new MAR form.

Medication Administration form: A Pathways Abilities Society form for staff to record their signatures and initials. Used to reference initials on MAR forms and needs to be signed after staff receives a medication orientation.

Physician's Authorization to Administer PRN Medications: Written authorization from the physician outlining under what conditions a person receives PRN medications and may also be accompanied by a protocol for medication administration.

## **POLICY**

Pathways Abilities Society does not dispense or prescribe medication.

Pathways Abilities Society employees will administer medications to individuals who reside in licensed homes as authorized by the person's physician. Pathways Abilities Society will administer medications to service recipients in other areas if there is an absolute medical need documented by a physician. Pathways Abilities Society encourages individuals to establish medication routines that occur outside of service hours.

Medications are administered with the utmost respect and discretion. The Pathways Abilities Society supervisor, in conjunction with the person's support network team, determine through the person's planning process whether or not medications can be self-administered or if Pathways Abilities Society staff assistance is required. If an individual does administer their medication independently they must keep that medication with them at all times or lock it in a secure location.

The supervisor or designate trains employees to administer medications. A thorough medication orientation occurs at the beginning of each employee's employment, is reviewed throughout the probationary period and during employment. Employees can only administer medications after successfully completing the orientation.

Medications cannot be administered without a MAR form and a pharmacy provided Patient Education Information sheet outlining the medications purpose, desired effect, side effects and interaction cautions. PRN medications also require a completed Physician's Authorization to Administer PRN Medications.

A month before a PRN's expiry date the area supervisor, LPN or designate will contact the individual's caregivers to inform them that a new supply of the PRN is required. PRNs that have expired may not be administered if they are expired unless verbal and/or written authorization is given by the dispensing pharmacy stating that the medication is safe to administer. If the pharmacy states that Pathways cannot safely administer the PRN, the individual who is prescribed the PRN cannot attend Pathways services until a new supply of the prescription is delivered to Pathways. Pathways Abilities Society employees only administer pill form medications that are

blister packed or in a pharmacy role, except when accompanying individuals to community activities (see Procedures). Liquid medications are administered from their original container.

Medications must be kept locked and secured at all times, except when staff is accompanying individuals to community activities (see Procedures). They must never be left unattended.

Medication storage areas are dry and unlit in order to properly store any medications which require protection from light. Medications requiring refrigeration will be kept in a locked container in the refrigerator.

Pen must be used for documentation and whiteout never used to correct mistakes (see Logging/Charting/Documentation/Communications Policy).

A Critical Incident Report must be completed when a medication error occurs.

Volunteers and practicum students are not permitted to administer medications.

A qualified Pharmacist reviews the drug regime on site or by video conference of each resident residing in a licensed home, at least once every 6 months, with the residential supervisor and/or facility staff and/or the LPN. The review date is documented in each person's Residential Care Plan and the Six Month Review form is uploaded to their respective ShareVision site.

The 12 R's:

1. Right Person: This seems self-evident but is not always. If you are new to a person, make sure you are introduced properly and can identify the person by name.
2. Right Drug: ALWAYS read the label of the drug to be given. Check the label of the drug 3 times. Check that it matches the MAR form. Check when you take the drug from the blister pack. Check before you give the drug.
3. Right Dose: Usually drug orders are fairly standard and easy to follow. Always check to ensure the drug order and the dosage match. Check the dosage 3 times. Pharmacies do occasionally make errors. It is necessary to check and not administer the medication if the label does not match the dosage or the MAR form. Clarify the error with the pharmacy, correct and complete an incident report if the wrong dose has been administered.
4. Right Time: Drugs are administered at specific time and/or day intervals to maintain the optimum therapeutic dosage in the blood stream. If they are not administered within the specified time frame they may not have the ability to do their job effectively. There is a half-hour "window" period either before or after the stated administration time. For example, if a drug is to be administered at 8:00 am, the drug may be given as early as 7:30 am or as late as 8:30 am. Anything earlier or later is considered a medication error. This will change slightly if a drug is to be given before/after meals. Meal times can and do fluctuate however it is important to establish a relatively routine meal schedule. Check the time 3 times. PRN medications have a different time frame as outlined in the Physician's Authorization to Administer PRN Medications form.
5. Right Date: Day, month and year.

6. Right Route: Orally, sublingually (held under the tongue or in the cheek until the pill dissolves), topically, rectally or by tube are typical routes. Ensure you are clear. Check 3 times.
7. Right Documentation: The documentation required is a MAR sheet, a Pathways Abilities Society Medication Administration form and a pharmacy provided Patient Education Information sheet outlining the medications purpose, desired effect, side effects and interaction cautions. A PRN medication also requires a completed Physician's Authorization to Administer PRN Medications form. Staff are required to document on the MAR after a medication is administered. If a PRN has been administered they will also need to document on the nurses notes sheet located after the MAR or on the back of the MAR and in the individual's ShareVision Notables.
8. Right to Refuse: Individuals have the right to refuse to take medications. Staff must document as outlined in Pathways Abilities Society policies and procedures, monitor the person's health status and inform the supervisor. The supervisor will follow up and resolve.
9. Right to Receive Medications Respectfully: Medications must be administered in a respectful, discrete manner and individually to each person.
10. Right to Request PRN Medications: If a person has been prescribed PRN's and does not administer their own medications, they have a right to request the medication from those responsible for administering.
11. Right Reason: You must know what the medication does and why it has been prescribed. For example, you would not give a medication that the physician has prescribed for seizures, if the person was complaining of pain.
12. The Right to Informed Consent: The individual has the right to the best of their ability to know what medication they are taking, why they are taking it and the side effects.

### Aseptic Techniques

Medications must never be handled with bare hands. However, hands must be washed before and after administering medications, even though a person does not actually come into contact with the medication. This greatly reduces the chance of infection being passed on from person-to-person.

Before Administering Medications, You Must Know the Following:

1. Who: The person who is to receive the medication.
2. Why: The person is taking the medication.
3. What: The name and dosage of the medication (what is written on the MAR form must correspond with the drug labels), the desired effects of the medication are, what the side effects of the medication are and what the drug interaction cautions are.
4. When: The medication is to be administered.
5. How: The medication is to be administered and where to access information on the medication(s).
6. Where: The location of the medications.

### Administration

Residentially, one staff handles each medication time period. At ICO, the activity and social venture services, medication time periods may be handled by more than one staff depending on current staff/individual assignment. The assigned staff is responsible for the administration of all medications to that person during that time period. The person who administers the medications must be the person who signs the MAR form.

The MAR form must be signed immediately after administering medications. Signing the MAR form confirms the staff person is taking responsibility for the administration of the drug and the 12 R's of medication administration have been followed. In the activity service and social ventures services a witness signatory is mandatory, unless staff is working alone. If signatures are missing, a drug is considered not given, even if it has been. In a medical emergency, confusion can result and help needlessly delayed because the medication book has to be deciphered.

Part of the responsibility of administering a medication includes assessing the response to determine if the medications are having the desired effect. If staff has questions or concerns about certain medications consult with the supervisor, who in turn consults with the family, caregivers, doctor, pharmacist or community health nurse.

Upon hire and annually, the LPN or designate will perform a medication audit to ensure quality assurance of medication administration for employees working at the residences. A medication audit may be done with an employee working in any service area when additional training is required.

There are three separate procedures related to the policy:

- Medication Administration-Residential
- Medication Administration-Travel Club
- Medication Administration-Activity Services, Social Ventures and Integrated Career Opportunities (ICO)

Staff must adhere to the specific procedure identified for the relevant service area.

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