

## PATHWAYS ABILITIES SOCIETY

### **PROCEDURE: MEDICATION ADMINISTRATION HOMES**

**Applies to:** All Personnel, Person's Receiving Service, Families, Advocates and Caregivers

#### **Effective/Revision Date:**

1993

April 28, 2003

January 26, 2004

August 11, 2005

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January 31, 2006

November 8, 2007

March 6, 2008

May 28, 2008

May 27, 2010

July 4, 2011

September 12, 2011

January 28, 2013

May 6, 2013

August 1, 2013

May 30, 2014

January 26, 2015

June 16, 2015

September 14, 2015

January 16, 2017

March 27, 2017

December 13, 2017

January 15, 2018

March 26, 2018

January 14, 2019

December 16, 2019

June 22, 2020

October 19, 2020

January 18, 2021

#### **A. Medication Administration**

Each staff signs and initials the Medication Administration Signature Register prior to their first administration of medication in each service area for Pathways.

1. At the start of shift, look through every page of the medication administration record (MAR) for each home member:

- To note the medication administration time for each home member that occurs during the shift.
- To look for places that need a double signature.
- That PRN effectiveness was documented.

2. When it is time to begin medication administration, wash hands thoroughly.

3. Medication is prepared and administration completed for one person at a time.

4. Each home member's medication is located in the locked medication cabinet and in a medication box inside the cabinet. The outside of the medication box must have the name of the person, picture of the person, allergy alerts, physician's name and pharmacy information.

5. Pull out the medication packages one at a time checking the person's name, administration time, date, route, dosage, and medication name on the package. Make sure it is the same information as on the MAR. Do this with each package until you reach the next administration time. Check the expiry date on each package.
6. Go through every page of the MAR to ensure you are administering all the medications requiring administration at that time.
7. If the MAR indicates a medication is to be administered but it does not have a package, find the container containing this medication and repeat step 5. Be sure to check the expiry date on the container.
8. Tear off the package(s), and repeat step 5 with each package while placing a dot(s) in the MAR space under the correct date and medication. The number of dots equals the number of pills in the package(s).
9. If there is a medication indicated on the MAR that does not have a package, dispense the correct number of pills and/or liquid into the appropriate container and put the correct number of corresponding dots in the appropriate space on the MAR.
10. Count the dots on the MAR and compare this to the number of pills and/or liquids. The number should be the same.
11. Check packages and/or medications containers a final time compared to the MAR to ensure the information is the same (person's name, administration time, and date, route, dosage, and medication name).
12. Lock/Secure the medication storage container. Do not leave medications unattended.
13. Administer the medications following the 12 R's of medication administration. Provide a glass of water (unless otherwise specified). Remain and engaged with the person until you confirm that all medications have been consumed. Do not administer medications in a person's bedroom unless necessary (i.e. the person is ill in bed).
14. Record on the original MAR form that the medication has been administered.
15. Initial the empty packages and place the packages on top of the duplicate MAR form.
16. Repeat the procedure for each person washing hands in between each home member.
17. A second staff, either after the medication was administered or at the start of their shift (if the staff administering medications was working alone during medication administration), goes through every home member's entire MAR to:
  - Ensure all the medications were administered at the appropriate time.
  - Check if any PRN's were administered.

- Compare the medication packages to the MAR to ensure the person's name, date, administration time, and medication name are the same on the duplicate MAR.
- Check the expiry date of each medication.
- Initial the medication packages and signs the MAR in the appropriate space.
- If a PRN was administered, check that the back of the MAR was filled out and the effectiveness of the PRN documented.
- Put the packages in the plastic sealed storage container.

18. Monthly, the LPN or designate reviews the medication binder ensuring medications are being managed in accordance with Pathways' policies and procedures.

19. Upon hire, annually or if additional training is required, the LPN or designate will perform a medication audit to ensure quality assurance of each employee during medication administration.

## **B. PRN Medications**

A PRN is an abbreviation meaning "pro re nata" or "when necessary." For procedural purposes, there are two classifications of PRN medications:

- PRN medications deemed to be a controlled substance: PRN medications that the supervisor or designate deem to be controlled substances are stored in a PRN binder. These are dispensed in limited numbers and require daily counts.
- PRN medications NOT deemed to be a Controlled Substance: Do not require daily counts and are stored either in the medication cabinet (i.e. large bottles) or in the back of the home member's medication box.

Administration of a PRN:

1. If an individual displays symptoms for which a PRN can be administered, administer the PRN medication as directed on the MAR.
2. If there is no PRN listed on the MAR that will alleviate the displayed symptoms (i.e. Tylenol for a headache), check the home member's standing orders located in the home member's section of the MAR binder.
3. If the standing order includes a medication that will alleviate the displayed symptoms:
  - Locate the medication in the medication cabinet. Be sure to check the expiry date. If expired follow the steps in the Drug Disposal section; **do not administer**.
  - Write the medication's name, dose and how often it can be administered on the next empty space of the MAR.
  - If there is not a supply of the medication or if the medication on hand is expired, purchase the medication from a pharmacy.
4. Administer the PRN or Standing Order medication as outlined in Medication Administration.
5. After administration, write on the back of the MAR the medication's name, administration date and time, whether it was effective or not (if known at that time) and initial.

6. Once administered, move the small plastic divider, found in the section for that home member, up one hole. This indicates to the second signer that a PRN has been administered. Once the second signer has signed and if the effectiveness of the PRN has been documented they move the divider back into place. If the effectiveness has not yet been determined, the divider stays up until the effectiveness is documented.

7. Document in notables using the PRN label in the drop down menu in the individuals ShareVision site. Documentation must include the name of the PRN administered, the symptoms, the dose, and the effect of medication the PRN had. Complete this documentation every time a PRN medication is administered.

8. Physician's Standing Orders are reviewed as determined by the individual's physician or if the supervisor or designate believes there is a health reason to do so.

9. If PRN medication is deemed a controlled substance, also document the PRN medication on the "Medication Count Sheet," including the count of how many pills were administered and how many are remaining.

10. Each day the morning staff checks the Medication Count Book and counts the medications. The morning staff document the amount of pills on hand and sign confirming the count prior to the night staff leaving. If there are any medication discrepancies, complete a Critical Incident Report as outlined in the policy and procedure.

11. The supervisor or designate monitors, updates or replaces "Medication Count Sheets" as required.

### **C. Medication Errors**

If one of the following occurs: Wrong dosage administered, medication administered to the wrong person, wrong medication administered, medication not administered at the prescribed time or date, or the medication is administered via the wrong route or any deviation from the 12 R's. Do the following:

1. Immediately note the health status of the individual i.e. consciousness, appearance, responsiveness. If the individual is unconscious or has an extreme reaction to the medications ingested call 911.

2. If it is not a medical emergency, email the supervisor or manager. If it is a medical emergency call the supervisor or manager on duty immediately.

3. Call Okanagan Home member Plus Pharmacy at 250-807-6725 or after hours at 250-878-7404 (or the dispensing pharmacy if other than Okanagan Home member Plus) and make them aware of the error. Ask for their recommendation(s), implement and document.

4. The pharmacist may recommend one of the following:

- Monitor the status of the person and continue with the person's medication administration regime. Implement and document or,

- Call Kelowna General Hospital Emergency at 250-862-4485 and make them aware of the error. Ask for their recommendation(s). Implement and document, or
  - Call the person's doctor and make them aware of the error. Ask for their recommendation(s). Implement and document, or,
  - Staff call 911. Implement and document.
5. If you cannot reach the pharmacy and the individual is conscious and has not had an extreme reaction to the medication ingested, ensure you have the individual's health care number, call 811 and ask for their recommendation(s). Implement and document.
  6. Make note of anything out of the ordinary in the person's notables and on the back of the MAR form.
  7. If it is a serious error that leads to ill health, the supervisor or manager or Licensed Practical Nurse (LPN) calls the family and informs them.
  8. Document in the Notables section of the individual's ShareVision site and on the appropriate incident report form(s) in ShareVision (see Incident Reporting policy and procedures).
  9. Medication errors that result in adverse medical effect that require medical treatment are reported to Licensing via the online Critical Incident Report form. Prior to submitting the online document, a copy is printed and kept on file by the Executive Director.

#### **D. Drug Disposal**

1. Put any unused, expired, discontinued, contaminated or found medication into a small medication envelope or leave in their original packaging. All known information related to the medication is recorded on the envelope and "DISCARDED" written across the envelope. Sign envelope.
2. Enter the pertinent information in the Drug Disposal Inventory list on ShareVision. Place the medication into the Pharmacy return bag.
3. Once a month, give the medications return bag to the person who delivers the medications. Contact the pharmacy and ask for another return bag be delivered with the next delivery of weekly medications.
4. Enter the date the medications were returned to pharmacist on each of that month's medication disposal forms in ShareVision.

#### **E. Receiving Medications**

1. The pharmacy provides the MAR, Patient Education Information sheet outlining the medication's purpose, desired effect, side effects and interaction cautions and the medications.
2. Upon receipt of the medication, confirm that all the information is correct and corresponds with the MAR form. Weekly medications come in clear plastic packages attached in a row. Each package has the person's name, date, and administration time, name of medication, dosage and amount, physician's name, expiry date and pharmacy information.

3. Medications such as Lax-A-Day or lactulose are required to have the date written on the bottle after administering the first and last dose in order to monitor correct dosing. Eye drops are required to have the date written onto the yellow tag attached to the medication after opening the bottle as eye drops expire 28 days from opening.
4. If an error exists, call Okanagan Home member Plus Medical Pharmacy at 250-807-6725 to report the error and have them correct it and deliver.
5. In ShareVision, document the medication received in Medication Delivery Check Off list.
6. After the next supply of medication is delivered and checked, submerge the packages in warm water overnight until the ink on the package disappears, drain the water and place the packages into the recycle bin.

#### **F. Medication Changes or Discontinued**

1. Medication changes are faxed to Okanagan Home member Plus Medical Pharmacy by the person's physician when possible. The supervisor or designate may be required to fax prescription information to pharmacy if physician unavailable. Okanagan Home member Plus Pharmacy fax: 250-807-6699.
2. Okanagan Home member Plus Medical Pharmacy delivers the medication and label to the house. Place the new label on the next free square on the MAR and check to ensure the medication corresponds with the label.
3. For discontinued medication, write the word discontinued in the empty dates spaces beside the discontinued medication.
4. Dispose of discontinued medication as outlined in Drug Disposal section.

#### **G. Ordering Medications**

1. Existing medications are filled every week by the pharmacy.
2. The prescribing physician orders new medications from Okanagan Home member Plus Medical Pharmacy. The pharmacy is located at 120-3515 Spectrum Court.

Contact information:

During hours of operation (8:30 am – 5:30 pm): 250-807-6725

Weekends and holidays (pharmacist on call): 250-878-7404

Fax: 250-807-6699

3. The senior support staff or designate reviews creams, suppositories, liquids, etc. to determine the quantity and expiry date of each medication 48 hours before the next medication delivery.
4. If there will not be enough medication to last for the next ten days, they call the pharmacy and order a new supply.

5. If a medication is expired, they call the pharmacy to order a new supply and dispose of the medication as outlined in Drug Disposal. Some medications may not be covered by individuals' medical plan therefore they may need to be paid for.
6. If the medication is needed before the next pharmacy delivery date, staff may need to pick the order up from the pharmacy.
7. New MAR sheets will be provided with the new medications.
8. When MAR sheets and medications arrive, follow the steps outlined in Receiving Medications.
9. Put the medication in specified locked medication container.

## **H. Traveling**

1. Phone Okanagan Home member Plus Medical Pharmacy to tell them the confirmed travel dates.
2. Okanagan Home member Plus Medical Pharmacy will advise whether to take the existing medications or the pharmacy will package the medications specifically for the trip. The pharmacy provides the appropriate MAR form. The total medication taken should be enough supply for the length of the trip plus two extra days.
3. On the day of departure, package each home member's medication in a separate Ziploc bag with their MAR form.
4. Keep all medications together and stored in a safe place.
5. Adhere to Homes Medication Administration procedures outlined above.
6. Upon returning, place the empty medication packages in the sealed plastic storage container (during COVID 19, remove ink from packages by soaking in water, draining and dispose per procedure).

## **I. Medication Safety Advisory Committee**

1. The supervisor:
  - Establishes the Medication Safety and Advisory Committee (MSAC) that consists of the supervisor, senior support worker, the pharmacist, and the LPN.
  - Arranges for the pharmacist to inspect the area of the facility where medication is being stored.
2. The MSAC reviews Pathways' medication training, orientations, policies and procedures and ensures compliance with the Pharmacy Operations and Drug Scheduling Act.
3. The pharmacist provides documentation confirming compliance with the Community Assisted Living Act, Residential Care Regulations 68 to 72.

### J. Common Medical Abbreviations on Pharmacy Prescriptions

<b>Abbreviation</b>	<b>Meaning</b>
BID	Twice per day
CR	Controlled release (these medications cannot be crushed)
ER	Extended release (these medications cannot be crushed)
h or hr	Hour
PO	Orally or by mouth
q	Every (e.g. q12h means every 12 hours)
QID	Four times per day
SL	Sublingual (dissolve under tongue or in cheek)
SR	Sustained release (these medications cannot be crushed)
TID	Three times per day

This is a condensed list of the medical abbreviations. If you have any questions, call the pharmacy or speak to your supervisor.