

 <b>Seniors and People with Disabilities</b> <b>State Operated Community Program (SOCP)</b> <b>Policies and Procedures</b>	Supersedes: July 1, 2004	Policy Number: 4.004
	Effective Date: December 1, 2006	
	Approval Signature:	
Subject: Medication Administration		

**REFERENCE:**

OAR 411-325 (5 – 9); 411-345-0190

SOCP Policy #2.010 (Training); #4.012 (Medication Handling)

**POLICY:**

All medications, both prescription and non-prescription including PRN medications (except over-the-counter topical), and treatments other than basic first aid will have a signed physician's or qualified health care provider's written order (Physician Visit Order Attachment A) and will be administered or self-administered per those orders. All orders written by a physician or qualified health care provider will be implemented as written.

Medications will be kept in a secured locked area and stored as indicated by the product manufacturer. The dispensing pharmacy, product manufacturer or physician will properly label medications, as specified by the physician or qualified health care provider written order. A stock supply of prescription drugs will not be maintained in the home.

Each employee is required to administer medications and treatments to individuals living in the home and must complete the SOCP Medication Administration Curriculum as part of their assigned duties.

**MEDICATION ADMINISTRATION**

<u>Responsibility</u>	<u>Action</u>
Trainer/ Behavior Specialist	Train each staff using the SOCP Medication Administration Curriculum. This training must be completed prior to any administration of medications or treatments.
Nurse Manager	Provide RN/LPN and Respiratory Therapists site-specific orientation for medication administration.

**MEDICATION INCIDENT REPORTS (MIR)**

- A. The following situations require the completion of a Medication Incident Report – MIR (Attachment C) and documentation on the Medication Administration Record – MAR and Treatment Administration Record – TAR (Attachment B) with notification of the physician:
  1. Administering the wrong medication to an individual.

2. Administering an incorrect dosage of the medication.
3. Administering a medication more than one-hour before/after a scheduled time. Even if within the Addendum To Physician Orders. (Attachment D) parameters.
4. A medication omission.
5. Administering a medication using a route other than the one prescribed.
6. An individual refusing to take their medications resulting in a medication omission.
7. An apparent adverse reaction to a medication that results in a change in condition status for the individual.
8. The Individual Narcotic Count Sheet (Policy 4.012) has a discrepancy in the number of pills.
9. Any medication is missing.

B. Any other irregularity such as the individual is gone, documentation error, etc. must be documented on the MAR/TAR by placing a circle in the appropriate square on the front of the document with accompanying explanation on the back. These irregularities do not require a MIR, as they do not affect the health of an individual.

## **SELF ADMINISTRATION OF MEDICATION**

<b>Responsibility</b>	<b>Action</b>
ISP Team	<p>Assure individual requesting to self-administrator of their medication is "independent" as defined in the OAR definition section.</p> <p>Provide a plan for periodic monitoring of the self-administration of the medication and ensure that the individual keeps the medication in a place unavailable to other individuals living in the home and stores them as recommended by the product manufacturer.</p> <p>When the ISP team considers and individual to be independent in the self-administration of a controlled medication, the SOCP Director must be included in the planning process.</p>

- Attachment A: Physician Visit Order (PVO)
- Attachment B: MAR/TAR
- Attachment C: Medication Incident Report (MIR)
- Attachment D: Physician Visit Order Addendum

**Policy research table: 4.004 Health: Medical**

<b>OAR</b>	<b>Issue/Description:</b>	<b>Research reference materials:</b>	<b>Contacts/links:</b>
411-325-0120 Health: Medical	<p>All meds (prescription &amp; non-prescription) any treatment other than 1<sup>st</sup> Aid will have a signed PYO order.</p> <p>Med purchase, distribution, storage and disposal.</p> <p>Each employee is required to administer meds and treatments and <u>must complete</u> Med. Admin. Curriculum.</p>	<ul style="list-style-type: none"> <li>• NEO Med Admin Handouts</li> <li>• Medication Administration Manual 2009-10</li> <li>• Nurse Orientation Materials in development</li> </ul>	<p><a href="http://arcweb.sos.state.or.us/rules/OARS_400/OAR_411/411_325.html">http://arcweb.sos.state.or.us/rules/OARS_400/OAR_411/411_325.html</a></p>
<b>SOCP overlap policies:</b>	<ul style="list-style-type: none"> <li>• 2.010 Training</li> <li>• 4.005 Response to Emergency medical situations</li> <li>• 4.006 Controlled Medications</li> </ul>	<ul style="list-style-type: none"> <li>• 4.007 Individual Health Care</li> <li>• 4.008 Nurse / Client</li> <li>• 4.010 Medication Disposal</li> </ul>	<ul style="list-style-type: none"> <li>• 4.011 Pharmacy</li> <li>• 4.012 Self-administration</li> <li>• 5.005 Incident Reports (IRs)</li> </ul>
<b>FORMS / TOOLS:</b>	<p>4576 Physician Visit Orders (PYO) Attach A</p> <p>4573 Medication Admin. Record (MAR) Attach B</p> <p>4630 Medication Incident Report (MIR) Attach C</p> <p>4621 Addendum to Physician's Directions Attach D</p> <p>4664 Telephone Orders</p> <p>4595 Incident Report (IR) part 1</p> <p>4595A Incident Report (IR) part 2</p> <p>4595B Incident Report (IR) part 2</p> <p>4595C Incident Report (IR) part 4</p> <p>4595D Incident Report (IR) part 4</p>	<p>4570 Individual Narcotic Count Sheet</p> <p>4590 Drug Disposal Sheet</p> <p>4596 Progress Notes</p> <p>4613 Health List</p> <p>4645 Client Monthly Summary Report (Jasmine's)</p> <p>4629 Daily Log</p> <p>4650 Hospitalization &amp; Surgery Record</p> <p>4663 Medication Administration Accountability Sign-off Sheet</p>	

## State Operated Community Program

■ See “Form Search Directions” at beginning of binder.

Check the “Forms Server” for the most current version as forms are updated regularly.

**NOTE: IR and MIRs are available ONLY through Central Office and not downloadable.**

#### 4.004 Health: Medical (forms)

Attach	DHS #	Name:	Date	Mandatory/Tool
	2097	HIPPA Disclosure of Protected Health Inform.		Mandatory
	2099	Authorization for Use and Disclosure of Inform.		Mandatory
	4664	Telephone Orders	08/09	4.004 Tool
	4573	Medication Administration Record (MAR)	04/08	Mandatory
	4630	Medication Incident Report ( <i>Pads available at Central Office</i> )	10/08	Mandatory
	4621	Addendum to Physician Orders Medication Administration Irregularities Physician’s Directions	09/09	Mandatory
	4571	Psychotropic Drug Record	11/09	
	4570	Individual Narcotic Count Sheet ( <i>Keep 6 months/ destroy</i> )	01/07	
	4590	Drug Disposal Sheet	03/10	Mandatory
	4663	Medication Administration Accountability Sign-Off Sheet	09/09	4.012 Mandatory
	4559	Incident Report (IR) Part 1 ( <i>pads available in Central Office</i> )	05/09	Mandatory
	4559A	Incident Report (IR) Part 2 ( <i>pads available in Central Office</i> )	03/10	Mandatory
	4559B	Incident Report (IR) Part 3 ( <i>pads available in Central Office</i> )	10/07	Mandatory
	4559C	Incident Report (IR) Part 4 ( <i>pads available in Central Office</i> )	10/07	Mandatory
	4559D	Incident Report (IR) Part 5 ( <i>pads available in Central Office</i> )	01/10	Mandatory
	4576	Physician Visit Orders	06/07	Mandatory

4596	Progress Notes	08/09	4.007 Mandatory
4613	Health List	04/07	4.007 Mandatory
4615	Client Monthly Summary Report ( <i>Use Jasmine's – not posted to forms server</i> )	2010	Mandatory
SOCP policy 2.001, 3.001, 3.002, 3.005, 4.007, 4.008 Mandatory			
4616H	Safety Plan Home		Mandatory
4616W	Safety Plan Work		Mandatory
4629	Daily Log	06/08	4.007 Mandatory
4650	Hospitalization and Surgery Record	12/08	4.007 Mandatory
4649	Weight Record		Mandatory
4651	Annual Menstruation Record		Mandatory
4556	Client Demographic form		Mandatory
4571	Psychotropic Drug Record	11/09	Mandatory
4554	Balancing Test		Mandatory
4645	Bowel Record		Tool
4616	Placement Referral Assessment GuidelinesForm		
4625	Relocation Plan		Mandatory
4632	Needs Meeting		Mandatory
4672	POLST	01/10	Tool
4588	Functional Assessment/Behavior Support Plan ( <i>FA/BSP Blended plan</i> )		
	Registered Nurse Communication Log		Mandatory
	Immunization Record	07/04	Mandatory
	Influenza Immunization Informed Consent	07/04	Mandatory
	Risk Tracking Record (RTR)		Mandatory
	Seizure Report, Log, Calendar		Tool