

Medication Policy



All staff, trained and certified will follow The Cottages procedures in receiving, administering/assisting and monitoring of medication. All medications will be packaged, label and stored according to state regulations.

PROCEDURE:

Receiving of medications:

All medications entering this facility require written orders from the resident's physician or authorized provider, including any PRN medications and over-the-counter drugs. Facility nurse will review medication orders and give direction as needed to staff prior to the staff administering/assisting the medications to the resident.

Monitoring effects of medications:

Staff will document any side effects of medications on the progress notes. The facility nurse will review the process notes, report side effects to residents' practitioner and obtain recommendation as needed. Side effect training will be provided by the nurse annually as part of the 8 hours of ongoing education. This training will cover general medications and side effects.

Storage of medication:

All medications will be kept in locked areas, including a locked box; locked cabinet; or locked room. Poisons, toxic chemicals, and cleaning agents will be stored in separate, locked areas apart from medications.

Medication distribution system to be used:

This facility uses blister packs.

How staff is to respond if:

A resident refuses a medication:

Document that the resident refused the medication. Notify the administrator or the licensed nurse of this facility in writing or by phone. The administrator and the facility nurse will notify the prescribing provider if the resident continually refuses a medication.

A resident misses a medication and the reason:

Document the medication was missed and the reason why. Notify the administrator and the licensed nurse of this facility in writing or by phone. The nurse will determine when the next dose should be given for the medication.

A resident medication is not available:

Document the medication is missing and the reason why. Notify the administrator and the licensed nurse of this facility in writing or by phone. The administrator or licensed nurse will make arrangements to assure the medication will be available for the resident.

Medications are missing:

Document medications are missing. Notify the administrator and the licensed nurse of this facility in writing or by phone. The administrator or licensed nurse will make arrangements to secure additional medications for the resident and to investigate why the medications are missing and who may have been responsible.

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A resident receives an incorrect medication:

Document that a resident got an incorrect medication. Notify the administrator and the licensed nurse of this facility in writing or by phone. The licensed nurse will assess the resident for any side effects and arrange for any necessary medical care or emergency services.

Staff will observe for compliance of residents taking their medications.

The process for determining who can self-administer medication:

Residents who self-medicate must have a written order from a primary physician or authorized provider that states the resident is capable of self-medicating. The facility's licensed nurse shall assess the resident's ability to continue to self-medicate. The self-medicated resident's medication will be locked in a secure area to prevent access by other residents.

Unused medications:

Unused or discontinued medications shall not accumulate at this facility for longer than thirty (30) days. Unused medication will be disposed of by using proper methods to assure that the drug cannot be retrieved. A written record of all medication disposals will be maintained and will include a description and amount of the medication; the name of the resident; the reason, method, and date of disposal of the medication, and the signatures of responsible facility personnel and witness disposing of the medication.

- a. Destruction or disposal of medications will be done using the following method:
Place unused medications into used/moist coffee grounds in a secure area or container with constant oversight, until the medications are completely dissolved. Dispose of coffee grounds into trash receptacle.
- b. Return of medications to the pharmacy.

Documentation requirements:

Medications of residents will be tracked and according to the following categories, including medications not taken and the reason for the omission.

- a. Take
- b. Refused
- c. Missed
- d. Not available
- e. For residents self-medicating:

Resident who self-medicate must have a written order from a primary physician or authorized provider that states the resident is capable of self-medicating. The facility's licensed nurse shall assess the resident's ability to continue to self-medicate every month. The resident's medication will be locked in a secure area to prevent access by other residents.

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Additional requirements:

1. Medications will not be borrowed between residents.
2. This facility will take all necessary precautions to protect residents from obtaining medications stored by this facility or in resident rooms.
3. All PRN medications taken by residents will be documented, including the reason for taking the medication and the results.
4. All staff assisting residents with medications will have completed the required medication certification course and received delegation instructions from the nurse of this facility.
5. Injectable medications which cannot be self-administered by the resident will be administered by a licensed nurse.
6. A licensed nurse for this facility will review the medications of each resident at least every 90 days.

REQUIREMENTS FOR MEDICATION:

MEDICATION DISTRIBUTION SYSTEM:

Each facility will use medi-sets or blister packs. This facility may also use multi-dose medication distribution systems that are provided for resident's receiving medications from the Veterans Administration or Railroad benefits or those who have been granted a bulk medication waiver from the Division of Licensing and Certification. The medication system will be filled by a pharmacist and appropriately labeled in accordance with pharmacy standards and physician or authorized provider instructions. A licensed nurse may fill medi-sets, blister packs, or other Licensing and Survey Agency approved system as provided in Sections 39-3326, Idaho Code and Section 157 of IDAPA 16.03.22-Residential Care or Assisted Living Facilities.

- A. All medications will be kept in a locked area, including a locked box; locked cabinet; or locked room.
- B. Poisons, toxic chemicals, and cleaning agents will be stored in separate locked areas apart from medications, including a locked medication cart, locked box; locked cabinet; or locked room.
- C. Biologicals and other medications requiring cold storage will be refrigerated. A covered container in a home refrigerator is considered satisfactory storage and the temperature will be maintained at thirty-eight to forty-five degrees (38-45 degrees F) Fahrenheit. The temperature is to be monitored and documented on a daily basis.
- D. Assistance with medication will comply with the Board of Nursing requirements.
- E. Each medication will be given to the resident directly from the medi-set, blister pack or medication container.
- F. Each resident will be observed taking the medication.

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UNUSED MEDICATION:

Unused, discontinued, or outdated medications will not accumulate at this facility for longer than thirty (30) days. Any unused medication will be disposed of in a manner that assures it cannot be retrieved. This facility may enter into agreement with a pharmacy to return unused, unopened medications to the pharmacy for proper disposition and credit. A written record of all drug/medication disposals will be maintained in this facility, including the following:

- a. A description of the drug, including the amount.
- b. The name of the resident for prescription medication.
- c. The reason for disposal of the drug.
- d. The method of disposal of the drug.
- e. The date of the disposal of the drug.
- f. Signatures of responsible facility personnel and witness disposing of the drug.

CONTROLLED SUBSTANCES:

- All schedule II drugs will be entered on the **Individual Narcotic Record** per state regulations and will be counted simultaneously by oncoming and off going staff persons whom were/are responsible for medication administration / assistance at shift change utilizing the **Narcotic Count Sheet**.
- Entered on the page of the Scheduled II drugs will be:
 - Name of drug and dosage
 - Resident's full name
 - Physician's full name
 - Date received
 - Pharmacy
 - Prescription number
 - Amount received
- Controlled substances not used after a thirty-day (30) period will be evaluated for need to continue the medication by the resident's physician. An order to discontinue the drug will be received by the physician.
- All scheduled II drugs to be destroyed will be inventoried, documented and disposed of according to state regulations. All destruction of drugs shall deem them unrecoverable.
- Narcotics shortage
 - If the count of narcotics reveals a shortage it will be reported to the administrator.
 - a. If a shortage of narcotics is determined proceed with following steps:
- Staff members will be detained until investigation is completed or dismissed by the administrator
- Administrator will contact the regional manager and the licensed nurse.
- The administrator or regional manager will then contact the appropriate authorities if needed.
- All employees deemed to be involved with the shortage will be drug tested.
- The Cottages reserves the right to prosecute to the fullest extent of the law.

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PSYCHOTROPIC OR BEHAVIOR MODIFYING MEDICATION:

Psychotropic or behavior modifying medication intervention will not be the first resort to address behaviors. This facility will attempt non-drug interventions to assist and redirect the resident's behavior. Alternative non-drug interventions will be list on the residents' ADL sheet.

Psychotropic or behavior modifying medications will be prescribed by a physician or authorized provider.

This facility will monitor any resident on psychotropic medication to determine the continued need for the medication based on the resident's demonstrated behaviors.

This facility R.N. will monitor any resident on psychotropic medication for any side effects that could impact the resident's health and safety. The resident will be reviewed for signs or symptoms of decreased effectiveness on continued medication. The R.N. will also contact the doctor.

The use of psychotropic or behavior modifying medications will be reviewed by the resident's physician or authorized provider at least every quarter. This facility will provide behavior updates to the resident's physician or authorized provider to help facilitate an informed decision on the continued use of the psychotropic or behavior modifying medication.

The R.N. will perform quarterly assessments on all residents and their medications and upon change of condition. In addition the Administrative staff will fax the physician quarterly medication review. The R.N. will also note the effectiveness and the current responses of psychotropic medications.