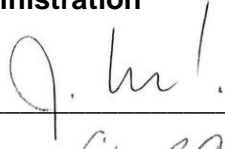



Leamington Mennonite Home  
Long Term Care

POLICY AND PROCEDURE

<b>CATEGORY:</b> Nursing	<b>SUBJECT:</b> Medication Administration	<b>SECTION:</b> M <b>POLICY:</b> 3
<b>DATE:</b> September 2004	<b>Administrator:</b> 	
<b>REVISION DATES:</b> January 2006, January 2011, January 2015	<b>Director of Care:</b> 	

**MEDICATION ADMINISTRATION**

**POLICY:**

To ensure the safe and controlled administration of medications to residents by the Registered Staff is conducted according to College of Nurses of Ontario's Guidelines.

**PROCEDURE:**

- Medications will be administered by the Registered Staff according to frequency and dosage ordered by the Physician. A Physician, Dentist, RN or RPN may administer a drug at the Home. No medication is to be used by or administered to a resident in the Home unless the drug is prescribed for the resident.
  - **Natural Health Products:** It is LMH preference that the Physician is consulted and prescribes any natural health products.
- The orders will also be properly stated on all medication and on the MARS / TARS. All medications noted on the MARS / TARS will have the prescription number, resident's name, date, drug name, description of the medication, dosage, frequency, form, route and prescribing Physician's name. The medication multidose paks and vials will have the resident name, drug name and description of the pill, date & time of drug administration.
- Medication will remain in the original labelled package/container provided by the Pharmacy or Government of Ontario until administered to the resident or destroyed.
- The resident will be properly identified prior to medication administration. A photograph of each resident will be located in the MARS/TARS.
- Change of direction for administration of medication will be noted on the MARS/TARS in the following manner: the drug name/information directives will have a line stroked through it, in the administration tic box area the word 'discontinued' is to be written, the date and initial of the Registered Staff writing this. The new order will be written at the first available space (or new page) on the MARS/TARS including the all the pertinent data required for drug administration. A line will be drawn from the beginning of the month to the date/time of the change of directive starts. A change in direction sticker will be placed on all the medication multidose paks (currently in the medication cart and any pending medication strip of paks already delivered from pharmacy prior to the med change over date) indicating the drug that

is to be changed and the date. At the time of administration, the drug that is changed will be left in the package and discarded in the drug destruction bucket. **This procedure is to be followed when medication is discontinued or any changes in directives occur.**

- **Complying with the Resident Bill of Rights**, each resident has the right to refuse his/her medications. The Registered Staff will make every effort possible to provide health teaching on the importance and benefits of the medication. The Registered Staff must properly document the refusal in the resident's electronic notes and on the resident's MARS using the corresponding codes located at the bottom of each MARS sheet. If the resident is refusing the medication on a regular basis, the Physician will be notified.
- **Leave of Absence with medication:** when notified that a resident will be on a LOA in accordance with the MOH guidelines the Registered Staff will send medication with the resident/ resident's guardian. The Registered Staff will educate the guardian in the administration of the medication, send the appropriate amount of medication packages from the strip of multidose paks. The absence from the Home is to be documented on the MARS /TARS with the appropriate code and in the electronic notes.
- **Self - administration of medications** by residents shall be permitted when specifically ordered by the Physician in consultation with the Director of Nursing and Personal Care and Registered Staff. Health teaching will be done to make sure that medications are kept in safekeeping and resident is aware of proper use. If resident becomes incapable of self administering, the Physician will be updated, and orders changed accordingly. Any resident with a MDS CPS score of 3 will not be considered for medication self-administration.
- All medications / treatments that are administered must be signed for in the MARS/ TARS under the drug name date given, dose, route and time given.
  - LMH medication administration pass times are:
    - OD – 0800 hours
    - BID – 0800 & 1700 hours
    - TID – 0800, 1200 & 2100 hours
    - QID – 0800, 1200, 1700 & 2100 hours
    - QHS – 2100 hours
    - AC Meals – ½ hour prior to mealtime
    - PC Meals – ½ h after meals
    - PRN – when needed.
  - Times may vary according to Physician specific orders. Some medications have specific administration times according for its prescribed purpose.
- There is a master signature sheet for the Registered Staff with their signature and initials updated annually and kept in a binder in the ward clerk's office.
- Each resident's response to the medication and treatments shall be monitored / evaluated and changes shall be made as required.
- If the resident has an adverse reaction to a medication, follow Medication Incident/Adverse Reaction Reporting policy, section M.

- All PRN medications must be documented on the MARS. The medication will also be recorded on the back - side of the MARS sheet noting the effectiveness of the medication given. If a PRN has been given and the effectiveness needs to be documented following the end of shift of the Registered Staff that administered it, the staff will flag the MARS/TARS and note this in shift report. The nursing evaluation for the need for the PRN will be noted in the resident's e-notes. If further intervention and documentation is required, it will be noted in the resident's e-notes.
- All individualized medical directives are located in each resident's chart in the Physician's Progress Notes. A generic copy will be placed in the front of each MARS book for reference. When a medical directive is given, it must be properly documented on the Doctor's order sheet, on the resident's MARS, the effectiveness charted on the back of the MARS. In the electronic notes Registered Staff will document the rationale for medication use and the outcome from the medication. The Physician will sign the order on his next visit; this is to be noted on the Doctor's day sheet. The Physician reviews the medical directives quarterly/annually and to any change in condition to determine if any of the directives require changing to address individual needs.
- Residents will be asked upon admission if they prefer their medications during mealtime unless contraindicated by the Physician's orders. They must sign a consent form stating their wishes. This consent will be reviewed annually at the Multidisciplinary Care Conference.
- Residents who cannot swallow their medications whole and require their medications to be crushed will be identified on their MARS and on their plan of care. Crushed medications may be administered in applesauce or jam unless otherwise stated from Pharmacy. Crushed or whole medications will not be added to food at mealtimes, unless this has been discussed with the POA and the Physician as part of an intervention related to dementia with behavioural issues and resident will not take the medications that are essential for the resident's health status as ordered. This will be clearly outlined on the MARS, Multidisciplinary Care Plan and the electronic multidisciplinary notes and assessed on an ongoing basis.
- Narcotics delivered through transdermal method (such as Duragesic /Fentanyl) will have:
  - The application location on the resident recorded– utilizing mainly the resident's upper back if there are repeated demonstrated resident removal issues.
  - The patch will be monitored for adherence to the resident X5 Daily (0500,0800, 1200, 1700 and 2100). If found missing a thorough search of the resident's clothing/bedding/personal space/washroom/wheelchair, walker or personal chair shall be undertaken and laundry notified for a search as required to locate the patch. This is to be documented in the e-notes and a new patch reapplied with the MARS being updated to reflect the new administration schedule. Any unaccounted, lost patches will be reported to the DNPC (or delegate) immediately who will notify the Administrator(delegate) immediately. A Critical Incident Report shall be completed for each lost and or unaccounted controlled substance.
  - The patch will be further secured by tegaderm /mefix tape dependent on resident's ability to tolerate tape.

- The tape will be dated and initialed by the Registered Staff that applies it.
- Upon removal of the patch, it is to be discarded in the sharps container.

**Leamington Mennonite Home**

**CONSENT FOR MEDICATION ADMINISTRATION DURING MEALTIMES**

Date: \_\_\_\_\_

Resident Name: \_\_\_\_\_

Resident Representative: \_\_\_\_\_

I / We request that medications ordered by the Physician for the hours of 0800, 1200 and 1700 hrs be administered during mealtimes.

\_\_\_\_\_  
Resident / Resident Representative Signature

\_\_\_\_\_  
Date