

**SECTION:** Supports and Services

**DEPARTMENT:** Clinical

**EFFECTIVE DATE:** April 2002

**DATE LAST REVISED:**January 2022

Approved by:

Chief Executive Officer

### **POLICY STATEMENT**

Kerry's Place Autism Services "Kerry's Place" is committed to providing safe and consistent standards for the authorization, preparation, administration, documentation and security of medication throughout all sites.

### **Purpose**

To ensure that all medications are administered in a safe manner to the supported individual.

# Scope

This policy and procedure applies to employees and/or agency staff who provide direct support and are required to administer and supervise the administration of medications and/or prescribed treatment. **This policy must be used in conjunction with the Medication Guide** as the guide outlines specific details on administration, medication reconciliation, self- administration, medication refusal, access and storage of medication, transfer of medication and responsibility of medication.

### **Definitions**

- MAR (Medication Administration Record): The M.A.R. sheet is a legal document to be retained as part of the persons supported documentation.
- High-alert/high-risk medications: drugs that bear a heightened risk of causing significant harm to the person supported when used incorrectly, such as hospitalization, health deterioration or death.



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- High-risk situations: Scenarios where significant harm can occur if not appropriately handled in a time-sensitive manner.
- <u>Adverse Drug Reactions:</u> an unintended harmful or unpleasant reaction acquired from treatment with the medication.
- <u>Medication Incidents:</u> Any incident where harm or potential to harm has occurred or potentially occurred (e.g., errors, refusals) involving medication administration.
- <u>Designate:</u> an employee who has taken the medication administration training within the last year.

### **Roles and Responsibilities**

### **Employee:**

- Work in compliance with this policy and procedure and medication guide.
- Report all Medication Incidents in the electronic software (i.e., EMHware).
- Participate in comprehensive training if new to Kerry's Place and participate in the annual refresher course.

### Manager:

- Ensure that the policy, procedures and guide are followed by employees.
- Ensure employees have the information and resources to safely administer medications to persons supported.
- Ensure medication administration observation training is followed as per process and documented in staff profile in ADP.
- Collaborate with Nurse Practitioner and/or pharmacy to ensure training is provided to employees for any controlled acts.



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- Collaborate with Resident Care pharmacy to ensure medication audits are conducted twice a year and to ensure medication reconciliation (i.e., med review) with the pharmacist is completed annually (for supported living homes).
- Follow up with employees on any recommendations made at the time of pharmacy audits for supported living homes.
- Present action plans on recommendations made by resident care pharmacy as required to the medication management committee.

### **Employer:**

- Shall take every precaution reasonable for the protection of persons supported.
- Ensure information on Medication Incidents is carefully collected, documented and analyzed for the purpose of ensuring that persons supported receive optimum care and are safe from harm.
- Conduct analysis of the type of Medication Incident and rates at which they occur. In consultation with the Quality Improvement Committee and the Nurse Practitioner, the VP Clinical Supports and Services will identify areas of risk so that appropriate modifications can be made to our existing procedures, training program and/or operations. This information may be reported, within incident reporting, to the Board on a quarterly basis.
- Ensure trainings and resources are updated as required.

### Communication

This policy and procedure, along with the medication administration guide, will be communicated to all employees identified in the scope through the orientation process. Any updates will be communicated to employees via Kerry's Place email and team meetings. The



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policy and procedure and any supporting material (i.e., guide) will be made available on the Kerry's Place Intranet. The Kerry's Place manager shall ensure that a laminated copy of the 9 Rights (i.e., guidelines for safe administration) will be displayed in the medication preparation area of each site.

### Standard/Procedure

# Press Ctrl+Click to follow link and quickly find the procedure you are looking for:Thorough Documentation4Guidelines of Safe Administration5High Risk or High Alert Medications5Mixing/Crushing Medications into Food6Adverse Drug Reactions6Addressing Medication Incidents7Reporting an Error or Omission as a Serious Occurrence8

## **Employees Will Ensure Thorough Documentation:**

The MAR sheet is a legal document to be retained as part of the person's supported documentation. The current MAR will be located in the med binder. 1(one) year of completed records are to be kept in the person's supported "archive" section in the medical binder. Any MAR sheets older than 1(one) year are to be added to the person's profile in EMHware.

Note: A MAR will be provided by Resident Care Pharmacy for supported living sites and the MAR located on ADP will be used for medication administration in community programs.



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### 1) Communication Book

a) Any event in which medication is introduced or discontinued shall be recorded under the "Medical" heading with a circled "M" written in red ink preceding the pertinent information prior to the next medication administration time.

# **Employees Will Administer Medication in Accordance With the Guidelines of Safe** Administration (e.g., 9 Rights):

- 1. Right Medication
- 2. Right Person
- 3. Right Time
- 4. Right Frequency
- 5. Right Dose
- 6. Right Method/Route
- 7. Right Documentation
- 8. Right Reason
- 9. Right of the person to refuse

A laminated copy of the 9 Rights is to be displayed in the medication preparation area of each site and resource centre as applicable.

### **High Risk or High Alert Medications**

High-alert or high-risk medications are drugs that bear a heightened risk of causing significant harm to the person supported when used incorrectly. Although mistakes may or may not be more common with these medications, the consequences of a medication



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incident are clearly more devastating to persons supported in our care. A two-person quality assurance check (i.e., double check) is required before the employee administers a high risk medication to a person supported in their care.

A list to determine which medications require special safeguards to reduce the risk to the person supported is provided within the Medication Guide, Appendix One.

### Mixing/Crushing Medications into Food

Employees are to take note that mixing/crushing medications into edible substances such as applesauce, yogurt or pudding may alter the efficacy, composition or strength of the medication. Under no circumstances are employees allowed to arbitrarily mix or crush medication into food substances without a formal written protocol that has been recommended by the person's supported physician and the knowledge of the Resident Care Pharmacist for supported living. Community programs will take direction from the parent and will be outlined within the medication authorization form. The protocol must be signed by the substitute decision maker.

Please see Appendix Two in the Medication Guide.

### **Adverse Drug Reactions**

For severe adverse reactions such as difficulty in breathing, wheezing, excessive coughing, rapid heartbeat, change in consciousness or swollen lips or tongue, immediate medical attention will be required and 911 must be called. Any adverse drug reaction of non-acute nature (e.g., upset stomach, loose bowels, rash or hives), requires consultation with a



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physician or pharmacist. Follow through on advice provided through consultation. The discussion will be recorded in the (Telephone) Consultation Health Team form. If the employee suspects an allergy or adverse reaction to the medication, the employee should not administer the next dose until he/she has consulted with the pharmacist or health care professional immediately.

Any adverse reaction is to be immediately reported to the manager or the on-call person and a medication incident report be completed; however, the employee should not wait to hear back from the manager or on-call person before seeking expert advice or assistance.

### **Addressing Medication Incidents**

All medication incidents are identified to the manager through Incident Report filing through the Kerry's Place electronic software (i.e., EMHware). Managers are expected to look for patterns in incidents and engage in coaching and/or problem solving with employees to prevent incidents and to minimize the risk of recurrences. Medication incidents will be reviewed, along with incidents submitted on a quarterly basis, and applicable action plans to address mitigation strategies will be presented to the medication management committee on a quarterly basis.

 After any medication administration incident, a call must be made to either the person's physician or the pharmacist to seek advice regarding the remedial action to be taken



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- 2. The SDM will be notified as soon as possible for any incident reports related to medication errors regardless if they have been elevated to a serious occurrence
- 3. Poison Control (1-800-268-9017) must be contacted only in the event of an overdose since they do not offer support when medication is missed or forgotten.
- 4. Any medication incident, including high risk medications or situations, must be reported immediately to the manager or on-call person to ensure they are aware of the incident and the steps taken to rectify the situation. The incident must be documented in an incident report located on EMHware.
- 5. The Kerry's Place manager shall have the discretion to recommend more frequent training along with the option of in-class training for employees. With the use of a checklist for medication administration, the training will include the observation of the medication administration routine for one (or more) persons supported on a specific shift carried out by employee.
- 6. Medication Incidents, which fall into a pattern of re-occurrence, may be subject to the progressive discipline system up to and including termination depending on the severity of incident and outcome.
- 7. Any discussion regarding the incident will be documented on the (phone) Consultation Form.

### Reporting an Error or Omission as a Serious Occurrence

Medication errors: There is a medication error involving the prescribing, transcribing, dispensing, administration and/or distribution of medication(s) to an individual receiving a service. Any error that resulted or may result in physical or psychological impairment of the individual or has or may threaten the



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individual's health or safety, requiring immediate medical attention. Please refer to IR/SOR policy on ADP.

### **Training**

## Initial (New staff):

The following must be satisfied before an employee can be assigned to administer medications:

- Attend the Medication Administration training and successfully pass the post-test and observation session completed by the manager within the first 3 months of employment.
- 2. On-site training must occur as part of each new employee's orientation by the manager or his/her designate.
- 3. When initially assigned the responsibility of administering medication, the employee will do so under the supervision of the manager or his/her designate (for duration of time to be determined by the site manager).
- 4. During on-site training, each new employee must, at a minimum, observe medication being administered, and be observed administering medication without error three times respectively. This observation form will be sent to HR for reference should the employee transfer to another site.

### **Annual Refresher**

Direct support employees will complete the Kerry's Place Medication Administration refresher training annually through the CLC.



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### **Re-training**

If a direct support employee is away from work in excess of four (4) consecutive months, the employee will receive a minimum of on-site orientation and complete the refresher training upon their return.

If an existing employee requires re-training, he or she will be enrolled in training for new employees on medication administration procedures.

Employees who do not complete the medication administration routine successfully shall be identified as candidates for re-training.

### **Controlled Acts**

Kerry's Place is committed to ensuring that employees provide the highest quality care to the persons they support. Under Ontario law, certain acts, referred to as "controlled acts" may only be performed by authorized healthcare professionals. However, under appropriate circumstances, these acts may be taught or delegated to unregulated workers. Process is outlined within the "Controlled Acts Guide" as well as policy C608 "Regulated Health Professionals and controlled acts" located on ADP.

### **Evaluation**

This policy and procedure, along with the medication guide must be reviewed at least once every three years.



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# **Related Documents, Forms and Tools**

- Medication Administration Guide
- IR/SOR policy M.A.R. (Medication Administration Record)
- Communication book
- Medical/Dental Visit form
- Cumulative Medical/Dental Appointment / Consultation Summary
- Intrusive measure form Medical Binder
- · Controlled acts policy and guide
- · Medication authorization form