2901.0 Medication Safeguards

2901.1 Policy Approval Clearance Record

☐ Rural Clinics Policy ☒ Rural Regional Center Policy	This policy supersedes: n/a	Number of pages in Policy: 5
Review by Representative from the Office of the Attorney General: n/a	Date: n/a	Date Policy Effective: 8/1/12
Rural Services Director Approval Signature: *Barbara Legier*	Date: 7/26/12	Policy Lead: Tammy Ponder & Peggy Hogan

2901.2 Statement of Purpose

2901.2.1 **Policy Statement:** To ensure all people receiving medication in Rural Regional Center (RRC) are supported in a way that promotes safety, health, welfare, and increased independence.

2901.2.2 **Purpose:** All RRC Contracted Providers of Supported Living will have uniform medication training and procedures for referrals to third party oversight to reduce medication errors and incidences for individuals served.

2901.3 Authority

NRS 454.213; 435
NAC 435
MHDS Policy DS 1.1 – Certification Process for Contracted Providers of Supported Living Services
MHDS Policy DS 1.4 – Medication Administration in Developmental Services Supported Living Arrangements (SLA)
Rural Regional Center Policy 2904

2901.4 Unique Definitions and Acronyms

2901.4.1 **Medication Error:** Any error involving medication that is not in accordance with prescriber's orders, Federal statute, State law, or Rural Services policies and procedures. This includes, but is not limited to errors involving:

A. Transcription errors such as misread or misunderstood orders;

B. Medications administered or taken:

1. To the incorrect person
2. By the incorrect route
3. At the incorrect time
4. When not ordered or incorrect medication
5. Incorrect dosage

C. Omission of medications

D. Medication storage

1. Missing medication
2. Storage area contains incorrect medication
3. Mislabeled medication

2901.5 Procedures

2901.5.1 Medication Training

A. All providers of supported living services (SLA) will train all SLA staff in medication supports within 30 days of hire. SLA staff will not support individuals with taking their prescribed or over-the-counter medications prior to completion of this training. SLA staff will not administer prescribed or over-the-counter medications without taking an approved Medication Administration Training as outlined in DS Policy 1.4.

1. Medication support training will consist of the following topics:

- Five Rights of Medication Support
- Routes of Medication
- Side Effects/ Medication Information Sheets
- Controlled Substance Documentation
- Medication Error Reporting and Documentation
- Medication Refusal Reporting and Documentation
- Medication Administration Record (MAR) Documentation
- As needed (PRN) Medication and Over-the-Counter Medication Documentation
- Use of Medication Minders is prohibited unless filled per NRS 454.213
- Medication Packages
- Medication Times
- Proper Storage of Medication
- Arrival/Destruction of Medication

2. The SLA provider case manager and/or QMRP will observe all new SLA staff in assisting individuals with medication or in administering medication prior to that SLA staff providing medication supports independently. The SLA staff must demonstrate competency in medication assistance or administration prior to providing medication supports independently. If the SLA staff does not demonstrate competency, the SLA provider must provide the SLA staff with additional training and observation until competency is demonstrated.

3. The SLA provider will provide medication training annually to promote compliance with policy and procedures.

4. The SLA provider will maintain documentation of training completion and competency in all SLA employee files.

B. Medication Errors

1. Medication errors that involve a person receiving the wrong medication, incorrect dose or missing a dose of their medication will be reported to the individual's primary physician immediately by the SLA provider, upon becoming aware of the error. If the individual's primary physician is not available, the medication error will be reported to a pharmacist immediately.

- If the medication error results in emergency medical treatment, hospitalization or injury, the SLA provider must verbally report via person-to-person contact to the individual's Developmental Specialist III (DS III) within one hour of becoming aware of the incident. If the

individual's DS III is not available, the incident will be verbally reported to a Developmental Specialist IV (DS IV) or the Clinical Program Manager II (CPM II).

2. All medication errors will be reported in writing to RRC using Developmental Services Initial Incident Report (IR) Form per RRC Policy 2070 – Incident Reporting.
    - Providers will submit an IR form within 24 hours of discovery for all medication errors resulting in emergency medical treatment, hospitalization or injury.
    - Providers will submit a written IR from within 48 hours of discovery for all other medication errors.

C. **Medication Review** - The individual's support team is responsible for determining when a referral to a third party review of medications is needed as noted in the following:

1. SLA provider agencies and/or the DS III will immediately refer individuals to their primary physician for:
    - Noted side effects and/or adverse effects from medications; or
    - Medication ineffectiveness.
2. SLA provider agencies and/or the DS III will refer individuals to a pharmacist for:
    - Questions on interactions with medications;
    - Questions on effectiveness of medication; or
    - Further follow-up for noted side effects and/or adverse effects for medications.
3. SLA provider agencies and/or the DS III may request a review of the medication record by a Medication Review Agency for the following:
    - Individual is taking four or more psychotropic medications;
    - Individual is taking three or more medications for the same purpose;
    - Individual is taking ten or more different medications/vitamins/supplements on a daily basis; or
    - The team reviews the medications and determines that it is necessary.
4. The provider, if applicable or DS III will request the Medication Review results be forwarded to all medication prescribers by the Medication Review Agency for follow-up and recommendations.
5. DS III will refer individuals to the RRC Nurse:
    - To assist the team with medication questions; and/or
    - For quality assurance reviews of medications.

2901.5.2 Timelines

Requirement	Deadline	Starting Date	Responsible Party	Actions to be Taken
SLA Provider Medication Support Training (2901.4.1.A)	Within 30 days of hire & annually	Date of hire	SLA Provider	All SLA staff are trained in medication supports
Medication Errors reported via DSIR Initial Incident Report (2901.4.1.B.1)	Within 24 hours of medication error	Medication error occurrence	SLA Provider	All medication errors are reported to RRC via the DSIR Initial Incident Report
Mediation Errors involving wrong medication or missing dose of medication is reported to primary physician (2901.4.1.B.2)	Immediately upon discovery of medication error	Medication error occurrence	SLA Provider	Mediation Errors involving wrong medication or missing dose of medication is reported to primary physician
Appropriate referrals to the primary care physician (2901.4.1.C.1)	Immediately upon discovery of medication error, adverse effects, and/or medication ineffectiveness	Occurrence of medication error, adverse effects, and/or medication ineffectiveness	SLA Provider or DS III	
Appropriate referrals to pharmacist (2901.4.1.C.2)			SLA Provider or DS III	
Appropriate referrals to medication review agency (2901.4.1.C.3)			SLA Provider or DS III	
Appropriate referrals to RRC Nurse (2901.4.1.C.4)			SLA Provider or DS III	

2901.5.3 Documentation

A. Case File Documentation (paper):

File Location	Data Required
DS III Case File in Section Five: Health Wellness & Safeguards	Copy of Medication Review
Provider Individual Record	Copy of Medication Review
Provider Employee File	Copy of training and competency record from Medication Support Training

D. DS-Now Documentation (electronic):

Applicable Screen	Data Required
DS Now	DS III will document all communication and information received in regards to medication questions, errors, reviews and/ or consultations. DS Nurse will document all communication and information received in regards to medication questions, errors, reviews, and / or consultations.

2901.5.4 Supervisory Responsibilities: Supervisors will provide in-service training to ensure all staff understands the requirements of this policy and its procedures. Supervisors will revisit this policy periodically, but no less than annually to identify recommendations for improvement.

2901.6 Policy Cross Reference

2901.6.1 Policies: Rural Regional Center 2070 – Incident Reporting