

Bergen County Special Services

Final Policy

Section: Adults

Number: 1000

Title: Administration of Medication

BCSS staff members within the adult continuum will enroll in the DDD's mandated training: Medication; however, all aspects of medication storage, physician authorization and administration of medication will be performed by a District nurse or designee. Program staff will not administer medication to individuals receiving services with the exception of life threatening emergencies (i.e. epi pen to treat a potential anaphylactic reaction.)

DEFINITION

For the purposes of this policy, the words and terms listed shall have the following meanings:

"Individual with developmental disabilities" will be interchangeable with individual and individual receiving service.

"Administration" means the taking of any medication by ingestion, injection, or application to any part of the body or the giving of direct physical assistance to the person who is ingesting, injecting or applying medication.

"Health care professional" means a person who holds a current license as a registered professional nurse in the State of New Jersey.

"Certified school nurse" means a person who holds a current license as a registered professional nurse from the State Board of Nursing and Educational Services Endorsement, school nurse or school nurse/non-instructional from the Department of Education pursuant to N.J.A.C. 6A:9-13.3 and 9-13.4.

"Medication" means all medicines described by a physician for a particular individual receiving services, including emergency in the event of bee stings, etc., and all non-prescription "over the counter" medicine or nutritional supplements and includes, but is not limited to, aspirin, Tylenol, vitamins and cough drops.

"Pre-filled auto-injector mechanism containing epinephrine" also called an "epi-pen" means a medical device used for the emergency administration of epinephrine to an individual for anaphylaxis.

“Self –administration” means carrying and taking medication without the intervention of the nurse, approved by legal guardian(s), parent(s), family member(s) and physician and in compliance with DDD requirements.

PRESCRIPTION MEDICATION PROCEDURES

1. All medication(s) require a physician’s authorization. The authorization (prescription) must clearly state:
 - a.) The individual’s full name
 - b.) Date of prescription
 - c.) Name of medication
 - d.) The dosage
 - e.) The frequency
 - f.) The word “copy” must be written or stamped on the prescription.
2. A copy of the physician’s prescription must be given to the nurse prior to any request to administer medication in a program or at program related events.
3. The prescription copy shall include the individual’s full name, date of prescription, the name of the medication, the dosage, the frequency and the word “copy” written or stamped on it.
4. Along with the prescription copy the nurse must have an updated and completed BCSS Medication and Consent Form/Physician Authorization to Administer Medication in Program. This form must be signed by the legal guardian(s), the individual, the parent(s) or family member(s) and physician.
5. Written document shall be filed in the individual record indicating that the prescribed medication is reviewed at least annually by the prescribing physician, i.e. prescriptions current within one year.
6. A Medication Administration Record shall be maintained by the BCSS nurse for each individual receiving medication.
7. BCSS nurses require medication updates from legal guardians, parent(s), family member(s) and community residence personnel on a consistent basis, or as medication(s), dosages, frequency or time of medication changes. Without the appropriate information and prescription copy, BCSS nursing staff will not administer medication. If this should happen, the guardian(s), parent(s), family member(s) and/or community residence personnel will be invited to come to the program to administer medication or pick up the individual for transport home.
8. Any change in medication dosage by the physician shall be immediately noted on the current Medication Administration Record.
9. Verbal orders from a physician shall be confirmed in writing within 24 hours or by the first business day following the receipt of the verbal order. The prescription shall be revised at the earliest opportunity.
10. BCSS nurses will transcribe information from the pharmacy label onto the Medication Administration Record (MAR).

11. If the exact administration time the medication is to be administered is not prescribed by the physician, determination of the time will be coordinated with the legal guardian(s), parent(s), family member(s) or community residence personnel. The time will be recorded on the Medication Administration Record (i.e. at mealtimes).
12. A supply of medication, adequate to ensure no interruption in the medication schedule shall be available at all times. BCSS nurses will follow up with physician(s), guardian(s), parent(s), family member(s) or community residence personnel as needed to ensure adequate supply in program at all times.
13. All medication received by the adult day program shall be recorded at the time of receipt including the date received and the number of the pills indicated on the bottle (i.e. 30 pills).
14. For individuals who are supported through services which are not associated with a facility, the dosage of medication for the day must be provided in a properly labeled pharmacy container. The label on the container must provide the following:
 - a. The dosage;
 - b. The frequency;
 - c. The time of administration; and
 - d. The method of administration.

PRN PRESCRIPTION MEDICATION (Given as needed) and OTC (Over the counter)

1. PRN and OTC prescription medication must be authorized by a physician. The authorization must clearly state:
 - a.) The individual's name
 - b.) Date
 - c.) Name of medication
 - d.) Dosage
 - e.) Interval between dosages
 - f.) Maximum amount to be given during a 24 hour period
 - g.) A stop date for each medication, if appropriate
 - h.) Under what conditions the PRN/OTC should be given
 - i.) Under what condition additional PRN/OTC should be administered.
2. PRN medication administered in program or at related events must be authorized by a physician as indicated on the BCSS Medication Authorization Consent Form. Administration of PRN/OTC medication will be documented on the Medication Administration Record (MAR), separate from the one utilized for prescription medication.
3. To ensure proper intervals between dosages, the BCSS nurse will communicate with legal guardian(s), parent(s), family member(s) or community residence personnel. Communication between parties should determine the time previous PRN/OTC medication was given and convey the time the PRN/OTC is/was given by the BCSS nurse.

SELF ADMINISTRATION OF MEDICATION

Individuals receiving medication shall take their own medication to the extent that it is possible based on their desire, request, and need based on community participation and employment.

The request to administer medication will be addressed by legal guardian and the Interdisciplinary Team (IDT). Whenever possible the most recent DDD "Self Medication Assessment Training" document will be utilized and maintained in the individual record.

1. Any request to self-administer medication must be approved in writing by the individual's legal guardian and physician.
2. Self-administration of medication shall be documented in the individual's service plan.
3. If an individual is capable of taking their own medication without assistance, no daily Medication Administration Record is required.
4. The following information shall be placed in the individual record:
 - a.) Name of the medication
 - b.) Type of medication
 - c.) Dosage
 - d.) Frequency
 - e.) Date prescribed
 - f.) Location of medication
5. Medication shall be kept in an area that provides for the safety of others, if necessary.
6. Each individual who administers his or her own medication shall receive training and monitoring by the BCSS nurse regarding the safekeeping of medications for the protection of others, as necessary.

EMERGENCY ADMINISTRATION OF MEDICATION

1. BCSS shall insure the safety of individuals who have a history of severe life threatening conditions requiring the administration of prescription medication in emergency situations. Examples include, but are not limited to, severe allergic reaction (anaphylaxis) which requires the use of epinephrine via an "epi pen" injection or nitroglycerin tablets for cardiac conditions.
2. Prescription medication used in emergency situations must follow all requirements as detailed in prescription medication procedures. Procedures outlined by the physician and in life threatening situations shall be followed.

ADMINISTRATION OF EPINEPHRINE TO ADULTS

The parent(s), legal guardian(s) or community residence personnel may provide the BCSS Nurse authorization for the emergency administration of epinephrine via a pre-filled auto injector mechanism containing epinephrine to an individual for anaphylaxis provided that:

1. The parent(s), legal guardian(s) or community residence personnel provide the nurse with a written authorization for the administration of epinephrine with written orders from the

physician or an advanced practice nurse stating the individual requires the administration of epinephrine for anaphylaxis.

2. The BCSS nurse has the primary responsibility for the administration of epinephrine. However, the nurse shall designate, in consultation with the Board or Superintendent, additional employees of the District who volunteer to administer epinephrine via a pre-filled auto injector mechanism to an individual when the nurse is not physically present at the scene. These volunteers shall be trained using standardized training protocols established by one of the following: New Jersey Department of Education, Department of Health and Senior Services, Division of Developmental Disabilities, EMS or Bergen County Board of Health. The individual's parent(s), or legal guardian(s) must consent in writing to the administration of epinephrine via a pre-filled auto-injector mechanism by the designee(s).
3. The parent(s), or legal guardian(s), must provide their consent for the BCSS nurse or trained staff member to administer epinephrine. This consent can be provided on the Medication Consent Form.
4. The parent(s), or legal guardian(s), must sign a statement acknowledging their understanding that the District shall incur no liability as a result of any injury arising from the administration of epinephrine via a pre-filled auto-injector mechanism to the individual and the parent(s) or legal guardian(s) shall indemnify and hold harmless the District and its employees or agents against any claims arising out of the administration of epinephrine via a pre-filled auto injector mechanism.
5. The permission for the emergency administration of epinephrine via a pre-filled auto injector mechanism is effective for the year in which it is granted and must be renewed for each subsequent year.
6. The BCSS nurse shall be responsible for the placement of the individual's prescribed epinephrine in a secure but unlocked location easily accessible by the nurse and designees to ensure prompt availability in the event of an allergic emergency. The location of the epinephrine shall be indicated on the individual's emergency information form and in their program file.
7. The nurse or designee shall be promptly available on site and sponsored functions in the event of an allergic reaction.
8. The nurse or designee shall arrange for the transportation of the individual to a hospital emergency room by emergency services personnel after the administration of epinephrine, even if the individual's symptoms appear to have resolved.

MEDICATION STORAGE

1. All prescription medication shall be stored in the original container issued by the pharmacy and shall be properly labeled.
2. All "over the counter" (OTC) medication shall be stored in the original containers in which they were purchased, labels intact.

3. BCSS nursing staff shall supervise the use and storage of prescription medication and ensure that a storage area of adequate size for both prescription and non-prescription medications is provided and kept locked.
4. The medication storage area shall be inaccessible except by those designated by BCSS nursing staff. These staff members shall have a key for emergency access.
5. Specific controls will be put in place by BCSS administration regarding the use of any key to stored medication. Additionally, periodic checks will be conducted to ensure adequate supervision of medication and how these medications are accessed.
6. Each individual's prescribed medication shall be separated and compartmentalized within a specific storage area (i.e. Tupperware, Zip-loc bag, etc).
7. If refrigeration is required, medication must be stored in a locked box in the refrigerator, or in a separate locked refrigerator.
8. Oral medications must be separated from other medications.
9. OTC medications must be stored separately from prescription medication in a locked storage area.
10. For medication that may need to be stored off site, the following must take place:
 - a.) Medication(s) should be stored in a locked box or container.
 - b.) Each individual's prescribed medication shall be separated and compartmentalized within the locked container. The container must be with the staff member at all times.
 - c.) Special storage arrangements shall be made for medication requiring temperature control.
 - d.) Designated staff shall have a key to permit access to all medications at all times and to permit accountability checks and emergency access to medication.
 - e.) All medication stored off site must be in a sealed container labeled with the individual's name, name of medication, dosage, frequency, time medication is to be administered and method of administration.

SUPPLIES

BCSS nurses will ensure that an adequate supply of medication will be available at all times; as a general guideline, a refill will be requested when a four or five-day supply remains.