HJ17 Study of Medication Aides in Nursing Homes Montana Recommendations for Curriculum

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NOTES:

- 1. The HJ17 workgroup examined the curricula from 6 states that utilize Medication Aides (MA) plus the curriculum developed by the National Council of State Boards of Nursing (NCSBN).
- 2. One overriding comment coming from the HJ17 workgroup is that Montana should enact one standardized curriculum for purposes of training; the test then would be derived from the curriculum and utilized by anyone desiring to be licensed as a Nursing Home Medication Aide in Montana. This process is different from that currently being used by Medication Aides in Assisted Living environments.
- 3. The following is the recommendation for Montana and is almost exclusively based on the NCSBN curriculum with a few exceptions. The curriculum is based upon 6 modules:

A. Medication Fundamentals

D. Medication Administration

B. Safety

E. Ethical and Legal Considerations

C. Communication and Documentation

F. Practicum

4. Like the NCSBN, Montana recommends the curriculum entail **100 hours**--60 for didactic training (which includes skills lab) and 40 hours of supervised clinical practicum.

Module 1: Medication Fundamentals—20 hours

Content Outline					
Med	lication O	rders, Documentation, Storage an	d Disposal		
A. Medication Prescription Order	B. Medication Documentation System				
1. Recorded on patient record 2. Complete order	2. M 3. C C. M 1. St 2. M 3. M 4. M	 Documentation of orders onto agency's medication document Medication Administration Record (MAR) Controlled substance medication log Medication Storage Storage Area Medication room Medication cart Medication Tray 			
		Weights and Measures			
A. MA does not convert medication B. Systems of Measurement	n dosages				
	•				
	rms of Me				
A. Liquids B. Solid and Semi-Solid			id and Semi-Solid		
1. Aerosol 8. Syrup 2. Inhalant 9. Tincture 3. Drops	2. Inhalant 9. Tincture		7. Lozenges8. Ointment9. Paste		
4. Elixir 5. Spray		 Scored v. unscored Caplets Time-released 	10. Powder 11. Cream/Lotion		

6. Solution	6. Covered w/special coating	ng 12. Liniment		
7. Suspension				
Content Outline (cont)				
	Medication Basics			
A. Terminology	I. Contrain	ndications		
B. Abbreviations	J. Allergic	Reactions		
C. Dosage Range	K. Adverse	Reactions		
D. Actions	L. Toleranc	e		
E. Implications for Administration	M. Interaction	ons		
F. Therapeutic Effects	N. Additive			
G. Side Effects		ratic Effect		
H. Precautions	P. Paradoxi	cal Effect		
Safety and	Rights of Medication Admir	nistration		
A. Three Safety Checks:	B. Six Righ	B. Six Rights of Medication Administration		
1. When removing from med. package from	n storage 1. Righ	1. Right Client		
2. When removing med. from package/con		2. Right Drug		
3. When returning package to where it is st		3. Right Dose		
		t Route		
		t Time		
	6. Righ	t Documentation		
Preparation and Actual Medication Administration				
A. Wash hands	F. Glove if			
B. Review medications that require checking o	1	the client		
blood pressure before administering		you explained		
C. Identify the client	•	ur hands		
D. Introduce yourself		considerations		
E. Explain what you are going to do	K. Docume	nt		

Module 2: Safety—7 hours

Content Outline			
Prevention of Medication Errors	Causes and Reporting of Medication Errors		
A. Know the following before administering medications	A. Failure to follow prescriber's orders exactly		
1. Name	B. Failure to follow accepted standards for medication		
2. Purpose	administration		
3. Effect	C. Failure to listen to a client's or family's concerns		
4. Length of time to take effect	D. Notify the agency's nurse/supervisor/pharmacist/physician		
5. Side Effect	or other prescriber		
6. Adverse Effects	E. Complete a medication error or incident report		
7. Interactions			
8. Special Instructions			
9. Where to get Help			

Module 3: Communication and Documentation—8 hours

Content Outline			
Building Relationships	Reporting of Symptoms or Side Effects		
A. Review the Communication Process	A. Observe, monitor and report any change that is different		
B. Review barriers to effective listening and communication	from the clients normal condition		
C. Setting boundaries	B. Notify the nurse as soon as possible with as much info as		
D. Review team building	available		
	C. Record Changes		
Report Any Change from the Normal Condition for the Patient	Documentation of Medication Administration		
A. Temperature F. Changes in levels of consciousness	A. Identifying initials and time on MAR		
B. Pulse G. Other changes in condition	B. Circle and document reasons that client may not take		
C. Respirations	meds		
D. Blood Pressure	C. PRN medication Issues		
E. Observe and report complaints of pain			

Content Outline (cont)

Role of Supervising Nurse

- A. Explain the Responsibilities of the supervising nurse when assigning medication administration to the Medication Aide
- B. Assignment Vs. Delegation

Module 4: Medication Administration—20 hours

Course Outline						
I	Routes of Administration		Factors Affecting How the Body Uses Medication			
A. Oral	F. Nasal	K. Soaks A. Age		E. Disease	H. Metabolic	
B. Buccal	G. Eye	L. Transdermal	B. Size	F. Psychological	Rate	
C. Sublingual	H. Ear		C. Family	Issues	I. Dosage	
D. Inhaler	I. Topical		Traits	G. Gender		
E. Nebulizer	J. Dressing		D. Diet			
	Classes of Medications Related to Body Systems and Common Actions					
	Identify the Classifications of Medications and State Common Side Effects					
A. Antimicrobia	A. Antimicrobials E. Gastrointestin			I. Respiratory		
B. Cardiovascul	ar	F. Musculoskele	tal	J. Sensory		
C. Dermatologie	cal	G. Neurological	G. Neurological			
D. Endocrine		H. Nutrients/Vitamins/Minerals				
Location of Resources and References						
Allows the MA to identify resources for contact and clarification						
A. Nurse D. Package/drug insert						
B. Pharmacist E. Drug Refer			•			
C. Physician						

Module 5: Ethical and Legal—5 hours

Course Outline

Role of the Medication Aide

- A. The MA may perform a task involving administration of medications if:
 - 1. The MA's assignment is to administer medications under the supervision of a licensed nurse in accordance with provisions of the governing act and subsequent rules;
 - 2. The assignment is not prohibited by any provision of the act and rules
- B. Role of the MA includes medication administration. The following acts shall not be assigned to the MA:
 - 1. Administration of PRN medications must be consistent with ARM 24.159.915;
 - 2. Cannot administer parenteral or subcutaneous medications except for pre-labeled, pre-drawn insulin.
 - 3. Cannot administer medications through nasogastric routes or by gastrostomy or jejunostomy tubes.
 - 4. Cannot take verbal orders
 - 5. Cannot convert dosages
- C. Any MA who has any reason to believe that he/she has made an error in the administration of medication shall follow facility policy and procedure to report the possible or known error to the appropriate superior and shall assist in completing any required documentation of the medication error.
- D. Medication Administration Policies
 - 1. The MA shall report to the supervising nurse;
 - a. Signs or symptoms that appear life-threatening;
 - b. Events that appear health-threatening; and
 - c. Medications that produce no results or undesirable effects as reported by the client or as observed by the MA.

The Responsibility of the MA when Accepting Assignment Tasks

- A. The MA has the responsibility not to accept an assignment that she/he knows is beyond her/his knowledge and skills.
- B. The MA is expected to speak up and ask for training and assistance in performing the assignment or request not to be assigned a particular task/function/activity.
- C. Both the nurse and the MA need the appropriate interpersonal and communication skills and organizational support to successfully resolve assignment issues.

Course Outline (Cont)				
Rights of Individuals		Specific Legal and Ethical Issues		
 A. Maintaining confidentiality B. Respecting clients rights C. Respecting clients privacy D. Respecting client's individuality and autonomy 	 E. Communicating respectfully F. Respecting client's wishes whenever possible G. Right to refuse medication H. right to be informed 	A. Abuse and/or Neglect 1. Identify types of abuse 2. Preventive measures 3. Duty to Report	 B. Exposure to medical malpractice/negligence claims/lawsuits C. Fraud D. Theft E. Diversion 	
Safety and Rights of Medication Administration				
A. Review the three safety checks				
B. Review the six rights of medication administration				

Module 6: Practicum—40 hours

• 40 hours of supervised clinical practicum, which should be progressive, where the instructor observes medication administration; gradually, the instructor increases the number of clients to whom the student administers medications.