

Licking County Board of Developmental Disabilities

Administrative Policy Manual

Policy: Administration of Medications and Health Related Activities

**Board Approved: 11/93
Revised: 5/00, 4/02, 12/04, 10/10
10/14, 05/18**

Section: 3.4

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POLICY

It is the policy of the Licking County Board of Developmental Disabilities, hereinafter referred to as the Board, to comply with Ohio Administrative Code sections 5123:2-6-01 through 5123:2-6-07 regarding medication administration and health related activities for eligible persons enrolled in services authorized and paid for by the Board.

MEDICATION ERRORS BY CERTIFIED PROVIDERS:

Board staff are required to report errors associated with administration of medications and health related services according to OAC 5123:2-6-07 (2) Any medication/treatment error by developmental disabilities personnel shall be reported in accordance with rule 5123:2-17-02 of the Administrative Code when the medication/treatment error meets the definition of major unusual incident or unusual incident; (3) All medication/treatment errors shall be documented in an unusual incident report in accordance with rule 5123:2-17-02 of the Administrative Code. Developmental disabilities personnel who observe, identify, or become aware of a medication/treatment error shall report to the delegating nurse and/or supervisory staff immediately in accordance with the employer's written policy and procedure.

SELF-MEDICATION ASSESSMENT

No less than once every three (3) years persons who receive supported living or home and community based waiver services delivered by a provider certified by DoDD will be assessed using an instrument prescribed by the Ohio Department of Developmental Disabilities.

The purpose of the Self-Administration Assessment is to ensure that the person is able to safely accomplish medication administration and health-related activities.

A review of the self-administration assessment by the person's service coordinator is done annually. A new assessment completed at least once every 3 years or more often when there is a change that affects the individual's routine, such as medication route, service setting, service provider, or health status.

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- 1) The assessment should be completed in the setting where the person takes his/her medications or receives medication administration. This is to determine if the person can safely take their medication(s) in their own environment.
 - 2) The self-medication assessment is completed by one person who knows the person well and is familiar with his/her manner of communication. When possible, a second observer should be present to ensure results are indicative of the person's capacity to safely self-medicate, should there be any question.
 - 3) Once the assessment is completed, the service coordinator will include details of individual's specific ability and the specific necessary support from licensed or certified personnel to complete medication administration shall be noted in the Individual Service Plan.

Eligible persons have the right to perform as many steps of medication administration as they can do either independently or with support, even if they are not assessed to be able to self-administer with or without assistance (5123:2-6-02(C)).

If two people do not agree with the assessment based on safety concerns, a third party should be consulted. If an agreement cannot be determined, the DoDD should be consulted.

COMPLIANCE AND QUALITY ASSESSMENT REVIEWS

The Board arranges for quality assurance reviews to assure compliance by providers of specialized services with OAC 5123:2-6-01 through 5123:2-6-07 at least once every three years. A registered nurse employed by or under contract with the Board completes the required compliance and quality assessment reviews in a format prescribed by the Department of Developmental Disabilities. More frequent reviews may be conducted if the registered nurse, Board or the DoDD determines there are issues that warrant such reviews.

Quality assessment reviews include, but are not limited to the following:

- Observation of the performance of staff certified to administer prescribed medication and perform health-related activities;
- Review of documentation to assess for completeness and for documentation of appropriate actions taken based on parameters provided in training;
- Review of all medication errors in past twelve (12) months; and

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- Review of the system used by the provider of specialized services to monitor and document the techniques used during oral and topical prescribed medication administration and health-related activities.

The registered nurse who performs the reviews provides a copy of the completed review to the Board. Copies are also provided to the person, his or her legal guardian and the provider(s) of services within ten (10) business days of the receipt of the quality assessment review by the Board.

The registered Nurse who performs the reviews recommends to the Board and the provider(s) of services steps to take to improve the competency of trained staff and maintain compliance with OAC 5123:2-6-0 through 5123:2-6-07.

COMPLAINTS

Any complaint regarding the administration of prescribed medication, performance of health-related activities, or performance of tube feedings or compliance with DODD rules will use the process established under OAC 5123:2-17-01. Any complaints related to the scope of nursing practice shall be referred to the Ohio Board of Nursing, which regulates nursing practice in accordance with Chapter 4723 of the Ohio Revised Code.

When a registered nurse performing quality assessments receives a complaint or identifies concerns during the course of a review, the registered nurse will conduct an initial investigation. The initial investigation will include a discussion with the service coordinator and provider staff and management regarding the identified concerns. The registered nurse performing the initial investigation provides feedback regarding the complaint and initial investigation to the Board.

In the event that the investigation results in a finding of failure to comply with the requirements regarding the administration of prescribed medication, performance of health-related activities, or performance of tube feedings or compliance with other applicable rules, the Board will work with the provider to assure immediate action is taken to correct the issue and assess compliance with the correction within thirty (30) days of the corrective action. Non-compliance with corrective action will be referred to the Ohio Department of Developmental Disabilities Office of Provider Standards.