***Blister Packs – Medication Administration ***

***PROCEDURE:***

* + A count is needed for all prescription medications on the MAR.
  + Over-the-counter and dietary supplements (vitamins) do not need to be counted and will usually not come in the blister packs.
  + Staff administering the medication will initial the blister pack above the number of the does they are administering - on the front side of the blister pack. Staff will also sign off dose in the MAR.
  + Once you have removed a medication from the blister pack place your initials above the number and then immediately place it in the back of your med box for that consumer.
  + To count medication: the number of pills left in the blister pack after you have taken out your dose - is the number that is written on the MAR under count.
    1. Example: if you take pill #1 from the blister pack. You write 30 from the new blister pack that you take out and put in supply. There should never be a 0 (Zero) on the MAR under the count.
  + If a medications is lose or in the blister pack incorrectly remove the dose and tape it back into the blister pack correctly. The person making this adjustment will initial the tape on the ***back*** of the blister pack.
  + If several medication are lose in the blister pack readjust them back into the correct place and press down to reseal the blister packet – counting to be sure all medications are accounted for. Notify the pharmacy if medication are missing.

***SET UP RESPONSIBILITY:***

* + DCC/DCA is responsible to check stock supply regularly to ensure all needed medications are always in stock supply.
  + DCC/DCA - Blister pack, prescription bottles or box medication should always come with a prescription label for the medication – this is the order for the medication. If medication is in a box save the box with the prescription label.
  + DCC/DCA is responsible to check that the prescription in the blister pack matches the MAR. If they do not match - adjust MAR or check with nurse or doctor as needed to have both items match. If you do not understand to order check with pharmacy, doctor or nurse.
  + DCC/DCA will write the name of client on each blister pack
  + DCC/DCA will pick up the stock supply and are responsible to check that all meds are accounted for in the blister packs and that the medications are correct before putting the medication into stock supply.
  + DCC/DCA will NO LONGER color code all cards.
  + DCC/DCA will Write the Name of the consumer and time of medication in the upper Left Corner of the blister pack and Highlight the name of the medication on the pharmacy label.

***PROTOCOL:***

* Cassettes are to NO LONGER be used in medication administration program.
* Over-the-counter and dietary supplements (vitamins) should be in a prescription bottle or blister pack. All staff will dispense these medications from this supply.
* If you drop a mediation or loose a medication, it is that staff person’s responsibility, to contact the pharmacy for a replacement and document in the communication book what has transpired and also document on Medication Destruction sheet.
* Most medications come in a 30 day supply. CLOZAPINE – only comes in a 28 day supply.
* PRN medications – only a small supply (2-6 doses/patches) of psychotropic or scheduled medication should be place in stock supply at a time. PRN psychotropic come in a blister pack and will be counted on the MAR per the protocol like all other medications. For patches the count will be tracked on the package they come in and initiated off by the person placing them in supply.
* Only send needed doses of medication to ODC. Example: if holiday (Christmas) is on Thursday then leave Thursday’s dose in our supply at the program. Place a X in the supply sent to another facility (ODC) on the MAR.
* If it storms and the dose is at the ODC, use dose from another day and request the dose back from ODC – put back where you borrowed from and tape back of blister pack, put initials on the tape and document in communication book what has transpired.
* When medications are sent home with a consumer send the supply needed plus 1 extra day.
* If consumer returns early - error out the sent dose(s) and give medication as normal and initial on the blister pack and in the MAR the medications that you administer. Do the same for the extra day supply.
* If a medication is returned to the program after a visit away and the medications were not given – report to case manager. Document what is returned by whom in the progress notes and follow **Destruction of Medication Policy** for the medications not given.
* Blister packs may be thrown after errors have been checked by nursing staff. If no errors with the blister pack throw them away.
* If an error occurs because a med is not available - ask Nurse or Doctor for direction on giving medication once it is available. Document in progress notes reason error occurred and directions from Nurse or doctor and follow **Medication Error Policy**.
  + Example – doctor has not reordered med to pharmacy, pharmacy did not have medication in stock etc.
* If a bubble on the blister pack that is scheduled to be given is empty, [*because pharmacy didn’t fill it]*, administer the med from bubble # 1 of the blister pack. Document on the **Missing Medication Form** that you took pill #1 to be replaced at a later time and initial the bubble for the missing pill to keep the sequence in order.
* If the scheduled med in the blister pack has already been punched out and given in error, initiate a med error form. Give the med from the next bubble in line. Document on the **Missing Medication Form** why the numerical sequence was interrupted.
* If a med is missing when CC reviews blister packs from the pharmacy, document on the Missing Medication Form the missing med and pick up med replacement from the pharmacy.