

<p>§11-148-16 <b>RECORD:</b>                  (b)(2)(C)(4) &amp; (6) During residence, foster adult record includes medications administered as ordered by physicians.</p>	<p>Effective immediately, the certified caregivers shall take the following action to minimize the risk of medication errors:</p> <p>(a) When preparing the Medication Administration Record (MAR) the certified caregivers shall record the name of the medication, the dosage, the number of capsules/tablets, the number of times per day it is to be given, the specific time the medication is to be given and the route/method by which it is to be given.</p> <p>(b) When giving medications, the individual's MAR must be present.</p> <p>(c) Before giving a medication, the medication label and the physician's order shall be read and compared with the MAR (The physician's order, the MAR and the label must match).</p> <p>(d) Record the administration of the medication immediately on the individual's MAR.</p> <p>(e) The certified caregiver shall also follow best practice guidelines by adhering to the "six rights" of medication administration (RIGHT MEDICATION, RIGHT DOSE, RIGHT ROUTE/METHOD, RIGHT TIME, RIGHT PERSON, RIGHT DOCUMENTATION).</p> <p>(f) An Adverse Event Report (AER) documenting the medication error shall be completed and submitted to the foster adult's assigned Case Manager. A copy of the AER shall be submitted to the Certification Unit for verification by 9/27/20.</p> <p>(g) The certified caregiver shall be retrained on proper medication administration and documentation from</p>	<p>9/04/20</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------

Name of Foster Parents (s): Ernesto & Marcelina Ordonez Date of Inspection: 8/27/20

	the Registered Nurse (RN) overseeing Residential Habilitation services and delegating the nursing task of administering medications. Verification of such retraining shall be submitted to the Certification Unit by 9/27/20.	