



# T&C RN – AER & MED ADMIN

As of 9/13/2021

**Q: Will AER guidance be updated to formally remove nurses from the process?**

The current AER policy includes the role of the DDD RN in review of AERs. DDD does not recommend that nurses be formally removed from the process.

**Q: When a participant who is receiving nursing services has an AER (refusing medication), can the RN determine if it is an AER?**

If there are any questions on whether an incident meets the definition of a medication error, DDD advises agency staff to consult with their service supervisor or contact the Outcomes and Compliance Branch.

Currently, an AER would be required when the participant refuses to take a medication. This is considered a missed dose. It is important that an AER is submitted for each incident to allow the participant's support team, including the prescribing physician, to review possible contributory factors for the participant's refusal.

**Q: Our agency nurse feels that a participant refusing medication the first time does not warrant generating an AER. Can the agency nurse determine when the refusal is a bigger issue?**

Currently, the AER policy requires an AER when a participant refuses to take a medication. Reporting the incident, even if it occurred once, will ensure that a remediation plan is in place to address the participant's health and safety and to prevent recurrence of the event.

**Q: Just to clarify, medication administration is a nurse delegated task, right?**

Yes, medication administration is a nurse delegable task.

**Q: If medications are pre-poured by a family member in pillbox that the DSW is instructed to give (e.g., at 8:00a/lunch etc.), does this need to be nurse delegated as medication administration?**

Yes, this will require a delegation plan for medication administration, if the DSW is administering medication during waiver service hours.

**Q: Is it intended that there is a nurse delegation plan for each individual medication? If so, that task of creating a nurse delegation plan will take more than 2 hours.**

The initial 2 hours is for the Provider to complete the nursing assessment (i.e., DDD Provider Nurse Delegation Packet). Within the nursing assessment, the Provider RN should include their recommendation for the number of hours needed annually to complete the nurse delegation requirements, which include development of Nurse Delegation Plan(s), training, skills verification, and ongoing supervision/monitoring. Please note that the recommended number of hours must be supported by information provided in the nursing assessment and will be reviewed and considered for authorization by the DOH-DDD. Please also see the current Waiver Standards Manual for nurse delegation plan requirements for medication administration or assistance.



For the latest information visit our website – <https://health.hawaii.gov/ddd>

For additional questions, email – [doh.dddcrb@doh.hawaii.gov](mailto:doh.dddcrb@doh.hawaii.gov)