CONNECTICUT VALLEY HOSPITAL
OPERATIONAL PROCEDURE MANUAL

SECTION I:	PATIENT FOCUSED FUNCTIONS
CHAPTER 3:	Medication Management
PROCEDURE 3.5:	**Patient Self-Administration of Medication**
REVISIONS:	06/04/10; 08/08/16; Reviewed 02/18
Governing Body Approval:	08/11/16; 04/18

PURPOSE: The Registered Nurse ensures that client learning to self-administer their medications can knowledgeably and competently do so. The client can expect to receive education, instruction and support as the Registered Nurse assesses and a Licensed Nurse observes the client self-administer medications.

SCOPE: All Nurses and Medical Staff

POLICY:

Supervised Self-administration of medication is defined as the preparation and administration of medication to self, by a client, under the direct supervision of a nurse.

A Physician/APRN/PA Order will be written for client supervised self-administration of medication once the RN assesses the client's competency to do so.

A Physician, APRN/PA may write an Order to allow a client to self-administer an Epipen or Inhaler without direct supervision by the Nurse.

PROCEDURE:

I. **Competency Assessment:**

A. The Nurse will educate the client on prescribed medication(s) using the print out from the Micromedex, Healthcare Series.

B. The Registered Nurse will complete the Assessment for Supervised Self-Administration of Medication (CVH-515) on any client identified as a candidate for supervised self-administration of medication.

C. Results of the Competency Assessment will be reviewed with the client. If additional instruction and support is required, the RN will continue to meet with the client at a pace he/she is comfortable with until such time as they are ready to be reassessed for Competency Assessment of Supervised Self Administration of Medication.

D. Identify client-teaching interventions in the Nursing Plan of Care/Master Treatment Plan, and Progress Notes.

E. Review results of the assessment with the Attending Physician responsible for authorizing supervised self-medication. A physician's order is required for client supervised self-administration of medication. The order must be renewed every thirty (30) days.

F. Complete a new assessment for new modes of administration and/or new medications, before a client re-institutes supervised self-medication following discontinuation and/or whenever clinically indicated. Each individual who is authorized to self-administer medication under supervision will be reassessed at least annually and a new CVH-515 will be placed in the medical record.

G. File CVH-515 in the Assessment Section of the medical record following the Nursing Assessment.

II. **Procedure for Supervised Self-Administration:**

A. Clients will be encouraged to and staff will wash their hands both prior to and after handling medication. Client medications will be delivered by CVH pharmacy and stored in locked medication boxes in a locked cabinet. The area will regularly be inspected by nursing and pharmacy. A nurse will check the integrity of the blister pack and its contents upon receiving the medication from Pharmacy.

B. Medications that are given to clients have a double check to ensure the identity of the client. This is done by asking the client his /her name, and date of birth and matching this to the addressograph in the medical record.

C. Supervise the client's self-administration of medication using the Medication Administration Record (MAR).

D. Check the label(s) of the client's medications before giving them to the client.

E. Have the client identify the medications he/she is going to take with the label(s), recheck the label with you, and pour meds into a med cup, informing you of the following:
1. name of medication
2. prescribed dose when able
3. purpose of medication
4. directions for taking the medication
5. special considerations/side effects
6. time of day and frequency the medications are to be taken.

F. Observe/supervise the client's self-administration of his/her medication(s) and document in the Medication Administration Record (MAR).

G. Have the client return the medication to you and recheck the label.

H. When a client has an Order to independently self-administer an Inhaler/Epipen, request that the client inform the nurse so the nurse may document usage.

III. **Documentation:**

A. Note "SELF MED" on the Medication Administration Record (MAR).

B. Documentation by a Nurse supervising self-administration signifies that the client received the appropriate medication at the appropriate time.

C. Document Inhaler/Epipen usage as appropriate under STAT and/or PRN medications on the MAR.

D. Continually assess the client in terms of any change in condition which would suggest discontinuing supervised self-administration of medication if clinically warranted. Discuss further orders with the Attending Physician.

E. The Registered Nurse will document in the Progress Notes an initial Note addressing the client's competency to self-administer under supervision specific medications and any further educational needs. Competency must be obtained and documented prior to admission to the Cottage Program when possible.

F. At least annually, a reassessment by the RN will be performed, noting clients' proficiency and/or other issues in the Progress Notes.

IV. **Insulin Supervised Self-Administration**

A. The nurse checks the Physician's Order Sheet against the MAR and checks the vial for the prescribed insulin before giving it to the client for self-administration.

B. After the client administers the Insulin, the nurse places his/her initials in the first hour box of the MAR, signifying the client received the appropriate medication at the appropriate time. The same Nurse also records his/her initials in the second hour box, verifying with the client the correct type, dose and units were administered by the client.