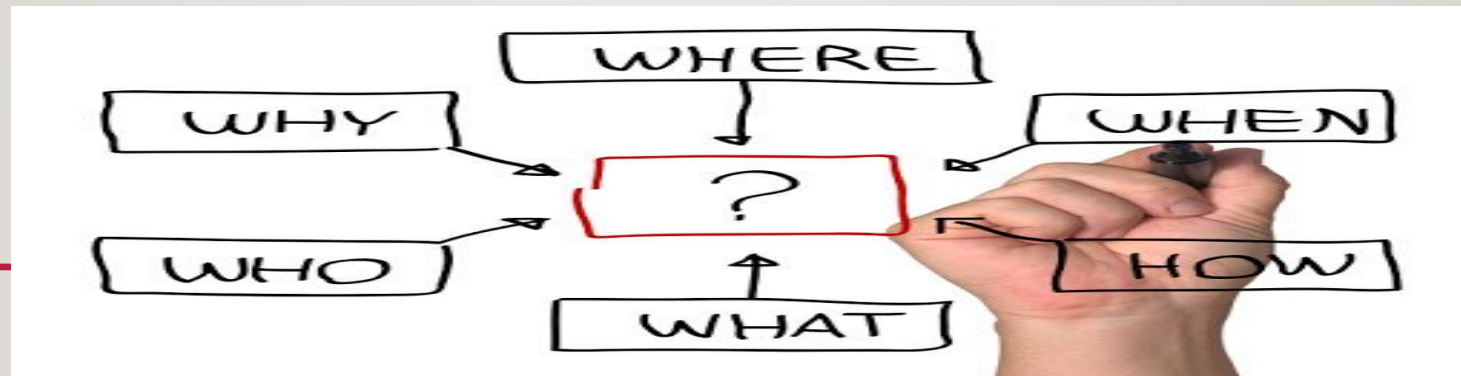


RETHINKING MEDICATION DELIVERY: **MEDICATION AIDES** IN SNF, LTC AND AL FACILITIES



SHERRI GUNASEKERA, MSN, RN-BC, LNHA, MHA

PRESIDENT & INSTRUCTOR OF NURSING TRAINING CENTER, LLC

NURSINGTRAININGCENTER.COM



DISCLOSURE

- The Planner and presenter have declared no conflicts of interest



AGENDA

→ Review Chapter 4723-27 of the Ohio Administrative Code; Ohio Board of Nursing

- Definitions
- Delegation
- Requirements for issuing a Medication Aide Certificate
- Continuing Education Requirements
- Program Emphasis
- Program approval
- Curriculum/clinical experience
- Competency testing
- Testing for Certification



ASSESSMENT/PRE-TEST

1. What does MA-C refer to?
2. Are LTC, SNF and AL facilities authorized to employ and utilize the services of Medication Aides _____?
3. Are there different types of Medication Aides? _____?
4. The MA-C is regulated under the Board of _____?
5. Are Medication Aides listed on a registry? _____



PURPOSE AND GOAL

- By attending this one hour presentation, the participant will be able to:
 1. Understand Ohio Administrative Code regulations regarding Medication use in LTC, SNF and AL facilities.
 2. Understand the training and role of the MA-C
 3. Understand the role of delegating medication administration to the MA-C
 4. Understand the nursing shortage and causes requiring a need for change.
 5. Consider Medication Aides as a safe option.



WHERE DID THIS CONCEPT COME FROM?

- Not a new concept
 - At last count, 35 U.S. States utilize Medication Aides in LTC, SNF and AL facilities.
- Studies show: Credentials are not the basis for safer medication administration
 - RNs have the highest medication error rates due to frequent interruptions
 - Medication aides reduce errors, unnecessary administration of drugs and facility deficiencies.
- Higher acuity levels demand increased nurses time at the bedside
 - MA-Cs allow additional minutes of nursing care per resident daily
 - MA-Cs increase quality of care and team satisfaction
 - Nursing shortages are related to long medication passes and decreased resident interaction



DEFINITIONS OVERVIEW 4723-27-01

- **Delegation**: transfer of responsibility for the administration of prescription medication from a registered nurse, or a licensed practical nurse acting at the direction of the registered nurse, to a certified medication aide
- **Certified Medication Aide**: a person who holds a current, valid certificate as a medication aide issued by the board of nursing under section 4723.651 of the Revised Code
- **Active certificate**: the certificate held by the individual who has fulfilled all the requirements of the board for initial certification or for certification renewal
- **Board**: The Ohio Board of Nursing
- **Curriculum**: the standard minimum curriculum to be used in a board-approved training program for medication aides in accordance with the rule 4723-27-08 of the Administrative Code



ROLE: STANDARDS OF SAFE MED ADMINISTRATION BY A MA-C 4723-27-02

- A certified medication aide shall administer prescription medications only at the delegation of a nurse according to section 4723.67 of the Revised Code, Chapt 4723-13 of the Adm Code and to residents of nursing homes and residential care facilities.
- MA-Cs Can Administer
 - Oral medications
 - Topical medications
 - Medications administered as nasal spray, or as drops, or ointment to a resident's eye, ear or nose
 - Rectal and vaginal medications
 - Inhalants delivered by inhalers, nebulizers, or aerosols, that allow for a single dose of a fixed, pre-mo-unt of medication



CANNOT ADMINISTER

- 1. Medications containing schedule II controlled substance (sections 3719.01 of the Revised Code)
- 2. Medications, including inhalants delivered by inhalers, nebulizers, or aerosols, requiring dosage calculations
- 3. Medications that are not approved drugs
- 4. Medications being administered as part of clinical research, or



THE MEDICATION AIDE SHALL NOT ADMINISTER MEDICATIONS BY ANY OF THE FOLLOWING METHODS

- Injections
- Intravenous therapy procedures
- Splitting pills for purposed of changing the dose being given
- Through jejunostomy, gastrostomy, nasogastric, or oral gastric tubes



THE MEDICATION AIDE SHALL NOT

- 1. Receive, transcribe, or alter a medication order
- 2. Administer the initial dose of a medication ordered for a resident
- 3. Administer medications to a person other than a resident of a nursing home or residential care facility
- 4. Administer any medication without the task having been delegated by a nurse
- 5. Administer medications to pediatric residents
- 6. Access schedule II controlled substances



MEDICATION AIDE-CERTIFIED (MA-C)

- A certified medication aide shall display the title “medication aide certified” at all times when administering medications to residents of a nursing home or residential care facility.
- A certified medication aide shall not accept a resident care assignment that would interrupt or conflict with the administration of medications or the performance of other tasks and activities that are directly related to the administration of medications.



THE RN OR LPN DELEGATING MEDICATION ADMINISTRATION BY THE MA-C

- (L) A Registered Nurse or a Licensed Practical Nurse acting at the direction of a registered nurse, who delegates the administration of medications to a certified medication aide (section 4723.67 of the Revised Code), **shall not be liable** in damages to any person or government entity in a civil action for injury, death, or loss to person or property that allegedly arises from action or omission of the certified medication aide in the administration of medications.



MEDICATION AIDE CERTIFICATION

- 1. 18 years of age
- 2. HS diploma or HS equivalence diploma
- 3. To function in a nursing home, must be a state tested nurse aide;
- To function in a residential care facility: must be a state tested nurse aide,
 - or must have one year of direct care experience in a rc facility
- 4. BCI and FBI Background checks
- Complete an approved medication aide training program and passed the board examination



CERTIFICATION PERIOD

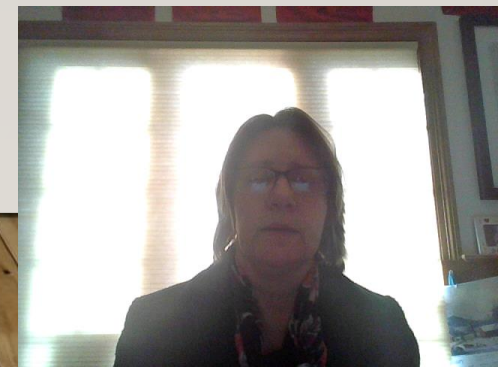
- Renewed biennially on or before April 13th of even numbered years
- CE requirements



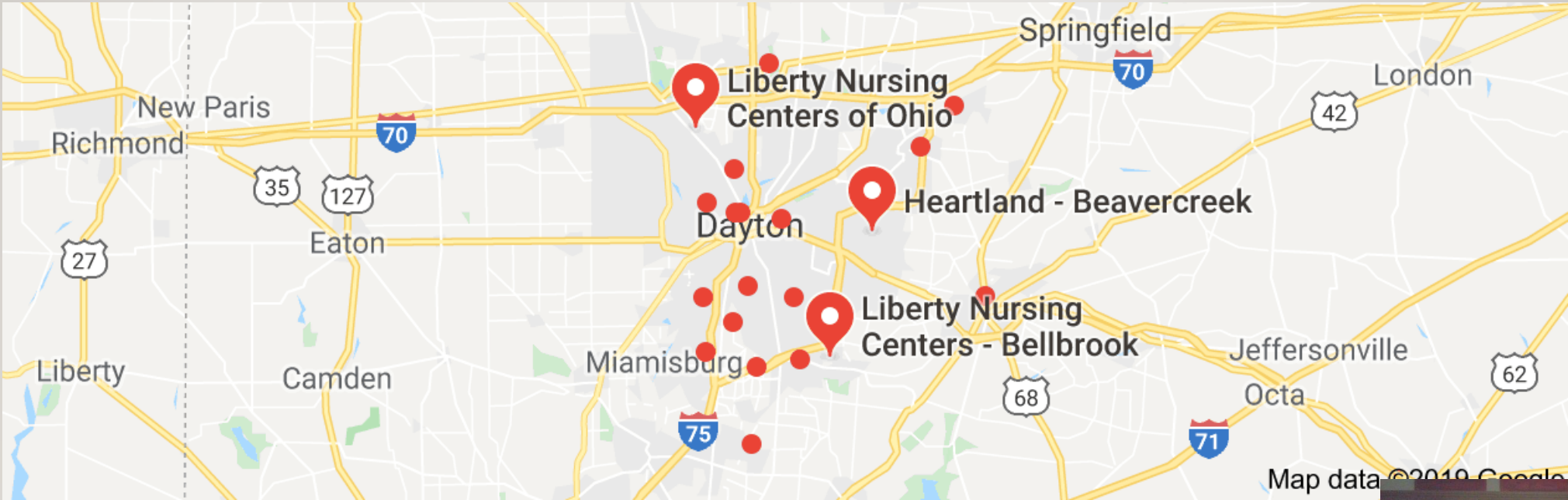
CONTINUING EDUCATION REQUIREMENTS FOR THE MA-C

During the certification period, a certified medication aide must obtain fifteen (15) approved contact hours of continuing education, that includes the following;

- A. 1 hr directly related to Chpt 4723 of the Revised Code
- B. 1 hr directly related to establishing and maintaining professional boundaries
- C. At least 10 hrs related to medications and medication administration consistent with the function of the certified medication aide



HOW MANY NURSING FACILITIES ARE IN OHIO?



OVER 1000 FACILITIES IN OHIO...HOW ARE WE GOING TO SAFELY PROVIDE CARE????

- Ohio has over 1000 nursing homes and 40 assisted living facilities
- Approximately 10,000 baby boomers retiring daily
- In US, we have 2.9 million nurses, by 2026 need 3.4 million
- Expected in 2022, over half a million nurses expected to retire.
- Thousands fewer RNs entering geriatric field annually
- Recent survey of 245 entry level RNs: only 27 went to LTC and 5 AL

Alabama Nursing Home Association



PALLIATIVE/HOSPICE CARE IN NURSING HOMES...

ARTICLE IN *THE GERONTOLOGIST*, VOL. 46, ISSUE 3

- An investigation of pain management among nursing homes found 72% of residents experienced pain. The following hindered pain management:
 - Limited physician availability
 - Nurses lack of pharmacologic knowledge (80% nurses stated only attended a in-service on palliative care and management). Not a subject addressed in many nursing programs.
 - “Inadequate staffing was a major problem” (*The Gerontologist*). Long hours and burdensome patient loads. When nurses asked about plans to manage pain, replies included “I don’t have a plan. I have 40 patients, and I don’t have time to make a plan” (*The Gerontologist*).
 - Nurses claimed calling physicians for pain management was time consuming.

PALLIATIVE/HOSPICE CARE

HOW MEDICATION AIDES CAN HELP

- They increase nurses time at the bedside
- Help prevent delays in care
- Medication Aides receive extra training including simulations on Palliative Care, such as symptom and pain management.
- MA-Cs can administer the following medications to manage symptoms:
 - Phenergan (for nausea) and Tylenol (for pain and fever) rectal suppositories and oral medication.
 - Scopolamine patches (for nausea)
 - Sublingual medications
 - Atropine drops (to dry secretions)
 - Ativan (to help with anxiety and to help reduce respirations)

*Medication Aides have time to provide one-on-one, repositioning and other comfort measures.

WHAT DOES A 'NURSING HOME NURSE' DO?

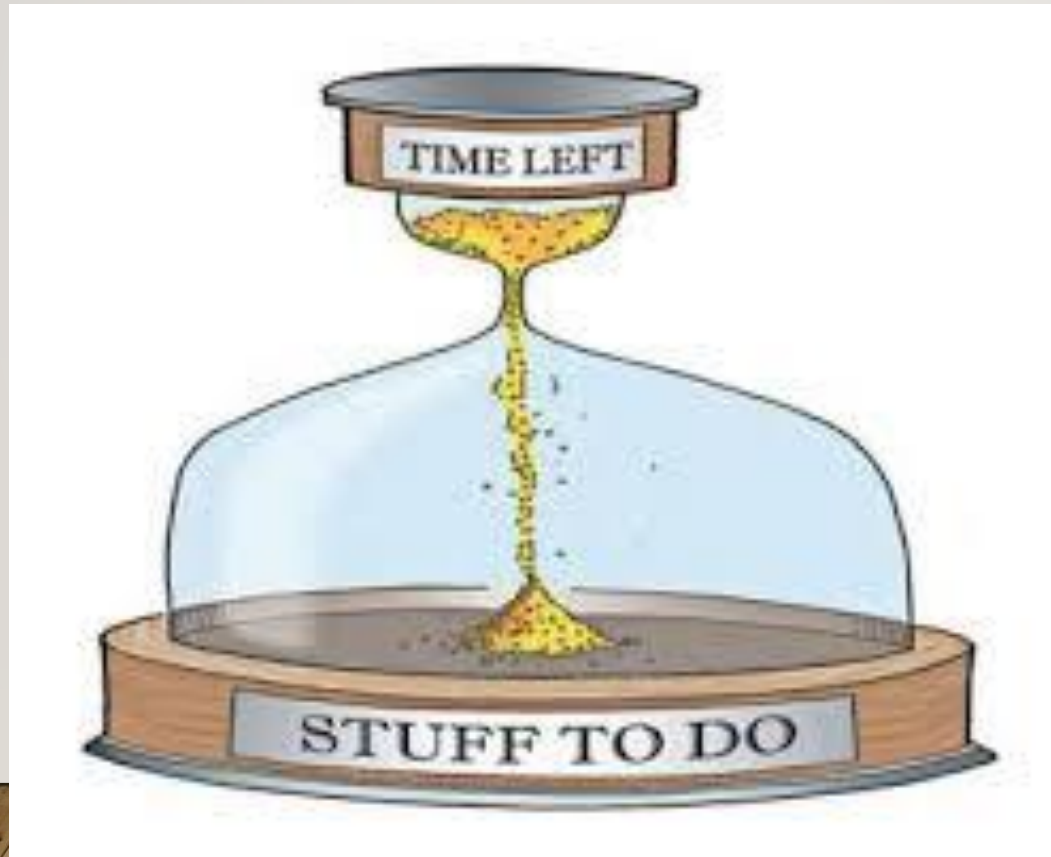


DUTIES OF LONG TERM CARE NURSES IN A TYPICAL TWELVE-HOUR SHIFT

- Pass meds at least three times per shift (within a two-hour time frame)
- Monitor blood sugars and give insulin
- Check vital signs
- Manage certified nursing assistants
- Watch mealtimes/supervise dining room
- Perform wound care
- Receive and transcribe physician's orders
- Complete incident reports
- Complete documentation
- Complete Admission and Discharge education and paperwork
- Arrange transportation, diagnostic testing, and schedule appointments
- Ensuring their residents are safe and cared for and notifying physicians and family members of any concerns are additional tasks to



HOW MUCH TIME DO YOU THINK THE NURSE HAS TO PROVIDE CARE FOR EACH RESIDENT?



OHIO DEPARTMENT OF HEALTH STAFFING REQUIREMENTS FOR NURSING HOMES 2.5 HOURS OF 'NURSING' CARE PER PATIENT PER DAY

(nurse and nurse aide)

- Number of nurses & nurse aides in 24 hour period X 7.5 = 2.5 total hrs
number of residents

- Example: 9 nurses and 22 aides (in 24 hrs) x 7.5 = 1.93 HPPD (with 3 managers 2.58)
120 residents

Nurses only Example: 9 floor nurses x 7.5 = 0.56 (33.6 minutes total in 24 hr period)

120 residents

The nurses spend 33.6 minutes per patient in a 24 hour period **(16.8 minutes per 12/hr shift)**

the nurse aide spends the other 1.94 hours per patient in a 24 hour period



33.6 MINUTES PPD (PER PATIENT DAY) (16.8 MINUTES PER RESIDENT IN 12 HR SHIFT)

- Typical Assignment: 18 plus residents.
- 6 hours or more for 3 med passes (2 hours each)
- 6 hours remaining minus 1 hour for lunch and breaks=5 hours left
- Calculation on previous slide indicates the nurse has 16.8 minutes per resident per shift.
- 18 res/5 hours left=16.7 minutes per resident after the med pass.
- **PDPM** studies show 18% increase in nursing staff time for each AIDS patient (so additional 6 minutes of time per AIDS patient)
- Recent study published in *The Gerontologist* reveals nursing hours per resident day increase at least 38 minutes when medication aides used.



THE NEED TO DELEGATE PDPM---PATIENT DRIVEN PAYMENT MODEL 10/01/2019

- Medically complex residents bring an increase of residents with psychiatric diagnoses and multiple comorbidities. The Centers for Medicare & Medicaid initiative to reduce rehospitalizations -- the Patient-Driven Payment Model (PDPM) -- facilities will treat higher acuity residents.
- - Tracheostomies/possibly ventilators
 - Intravenous Medications
 - Psychiatric Patients
 - More HIV/AIDS patients—studies show each resident takes 18% more time per day (around 6 more minutes per patient)
- Sicker patients with no change in staffing ratios.
- State requirements: 1 RN for one 8 hour shift in 24 hour period.



WILL THE FACILITIES AND NURSING STAFF BE ABLE TO TELL THE DIFFERENCE BETWEEN THE MEDICATION AIDES?

Medication Aide-Certified (MA-C) vs DODD Medication Certification



MEDICATION AIDE-CERTIFIED COMPARED TO DODD MEDICATION AIDE CERTIFICATES QUESTIONS THE NURSE CAN ASK TO DETERMINE DELEGATION

MEDICATION AIDE-CERTIFIED
OHIO BOARD OF NURSING (OBN)
PERMITTED TO ADMINISTER MEDICATION
IN
**SKILLED LONG TERM CARE AND
ASSISTED LIVING FACILITIES ONLY**

80 HOURS OF DIDACTIC/LAB PRACTICE
40 HOURS OF CLINICALS
IN A NURSING HOME OR ASSISTED LIVING
FACILITY

Renew Certification even numbered years

ADMINISTER MEDICATIONS MENTIONED
DELEGATED BY THE NURSE.
MA-C'S DO NOT ADMINISTER
OXYGEN, INSULIN, G/J TUBE, OR SCHEDULE 2
NARCOTICS

TAKE STATE WRITTEN & SKILLS EXAM

MEDICATION CERTIFICATE 1, 2 OR 3
DEPARTMENT OF DEVELOPMENTAL DISABILITIES
(DODD)
PERMITTED TO ADMINISTER MEDICATION IN
DODD FACILITIES ONLY (ALL AGES)

CERTIFIED LEVEL 1: **14** HOURS OF TRAINING
CERTIFIED LEVEL 2: **4** HOUR TRAINING
CERTIFIED LEVEL 3: **4** HOURS TRAINING
ALL TRAINING AND TESTING COMPLETED IN
THE EMPLOYEES DODD FACILITY
Renew Certificate annually

LEVEL 1: ~~ALL ORAL OR TOPICAL, OXYGEN; NO~~
NURSING DELEGATION REQUIRED
LEVEL 2: MEDICATIONS AND FEEDING PER G/J
FEEDING TUBES
LEVEL 3: INSULIN AND OTHER SQ MEDICATIONS
NO STATE TEST; TESTED IN FACILITY BY
RN.

ITEMS SUBMITTED FOR APPROVAL BY OHIO BOARD OF NURSING

- NTC Medication Aide Program---Approved 2016
- Organizational Chart
- Curriculum (OBN has an established model curriculum)
- Program Evaluation forms-for students, instructors, facilities to complete.
- Notification to the Board within 30 days of RN Administrator changes
- Statement that I will give an advanced written notice to the Board, current students, and app the program will be closing and where students can obtain their records.



CURRICULUM

80 PLUS HOURS OF CLASSROOM AND LAB TRAINING

- Roles and Responsibilities *Types of Facilities MA-Cs can work
- Anatomy and Physiology *Medical Abbreviations and Terminology
- Communication: Practice receiving and giving report
- Basic Pharmacology *Drug Classifications and affect on body
- Monitoring for Side Effects *Circumstances to report to Nurse
- Storage and Disposal of Medications (with nurse)
- Medication Error Identification, Reporting and Documentation
- Vital Signs, including apical pulse



NTC MEDICATION AIDE OBJECTIVES & OUTCOMES SUBMITTED FOR APPROVAL

- **Program objectives:**

- Describe the role and responsibilities of a certified medication aide.
- Administer medications safely, accurately and document appropriately.
- Relate the function of administering medications to the promotion of resident's rights.
- Describe the six rights of medication administration and their application to safe medication administration.
- State medication effects and allowable routes for administering them.
- Maintain the dignity of the residents.
- Comply with current Ohio laws governing certified medication aides.

- **Program outcomes:**

- 1) Student will be able to state his or her role as a certified medication aide.
- 2) Student will be able to state medications he or she are allowed and not allowed to administer.
- 3) Student will be able to safely administer prescription medications pursuant to nursing delegation in the appropriate categories.
- 4) Successfully complete the written and clinical examinations approved by the Ohio Board of Nursing.



ITEMS SUBMITTED FOR APPROVAL BY OHIO BOARD OF NURSING

- Policies & Procedures showing the Program meets requirements:

 - Program Administrator directs & supervises all aspects of program
 - Program informs all applicants at admission:
 - Refund Policy
 - Cost of State Exam \$110
 - Must test within 60 days of completion of program
 - Qualifications for Certification
 - Admission Exam-reading, writing, and mathematical skills sufficient to administer medication safely
 - Program keeps records for 6 years



APPLICATION PROCESS

- Submit items listed so far
- Application
 - OBN meets every once quarterly to review applications
 - Took six months for approval letter.
- Pay \$800 (now is \$1000) application fee



PROGRAM REQUIREMENTS

OHIO ADMINISTRATIVE CODE 4723-27-07

- Registered Nurse Instructors
 - Current Ohio RN License
 - Worked one year as a RN in Nursing Home or Residential Care Facility in last 5 years
 - Experience in adult instruction
 - Train the trainer course

- RN Program Administrator



PROGRAM REQUIREMENTS

OHIO ADMINISTRATIVE CODE 4723-27-08

- Program no fewer than 20 business days and no more than 90 business days
- Student must successful complete didactic and laboratory component to participate in supervised clinical component and pass the course.
- Skills competency check off-midterm and final checkoff in lab.
- Student must take their state test within 60 days of completion of the course.



DAILY 4-HOUR CLASSES CONSIST OF:

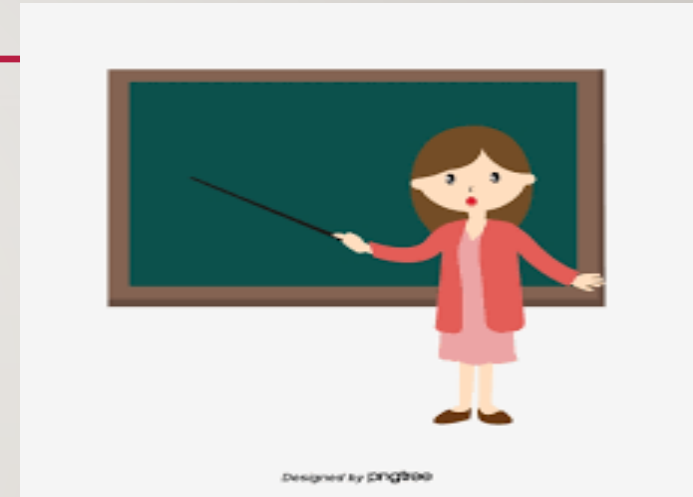
Review



Quiz or Exam every class



Lecture



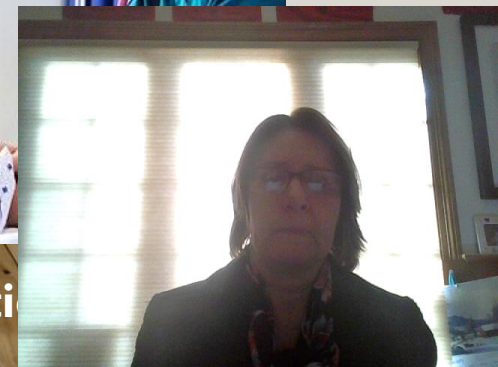
Practice at desk



Medication Preparation at med cart



Simulati



EXAMPLE OF TEST QUESTIONS:

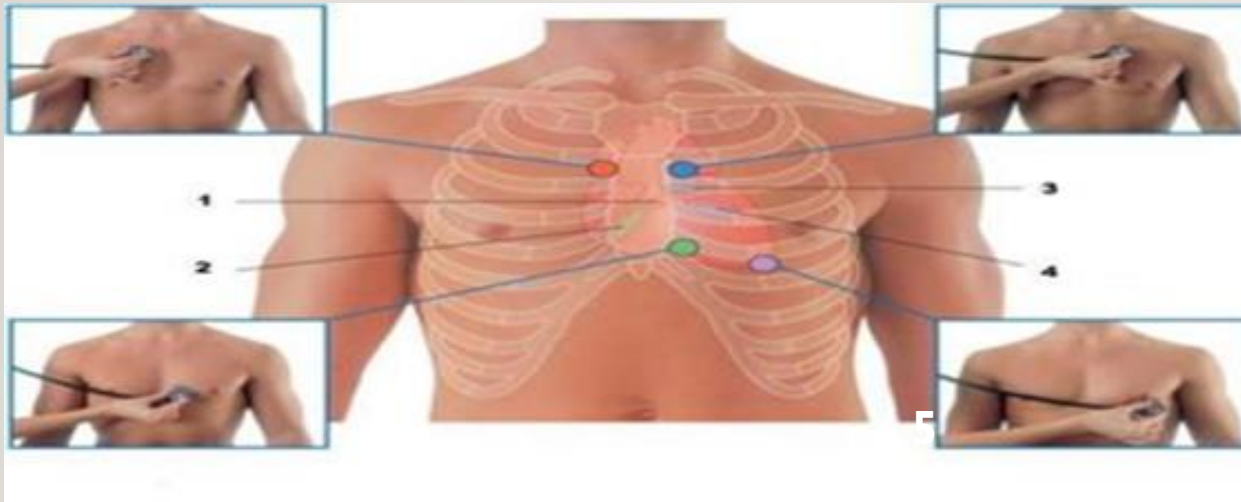


- What class of drug is digoxin _____
- What type of physician orders do you expect to see on the MAR _____
- Do you need to collect any information before or after giving it (if so, what) _____
- Your resident asks what the medication does, you reply _____
- What are some adverse reactions you would need to report to the nurse _____
- What is digoxin given for _____



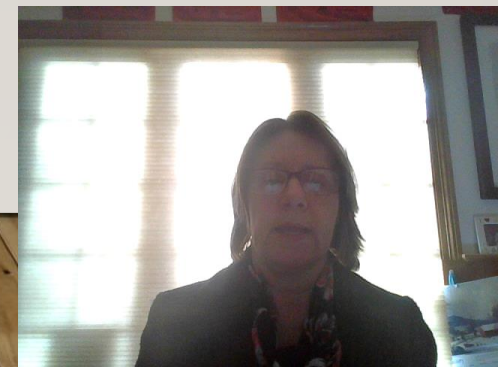
QUESTION?

- It's 8 am and you are administering digoxin for Mr. Gordon in room 502-A. You enter the room to take the resident's apical pulse. Which site will you place your stethoscope on to listen for the apical pulse?



QUESTION????

- 1) The MA-C is preparing medications for Ms. Leonard in room 502-B. The MA-C checks the MAR and midodrine is due to be given.
- 2) Based on the BP below, will the MA-C administer?



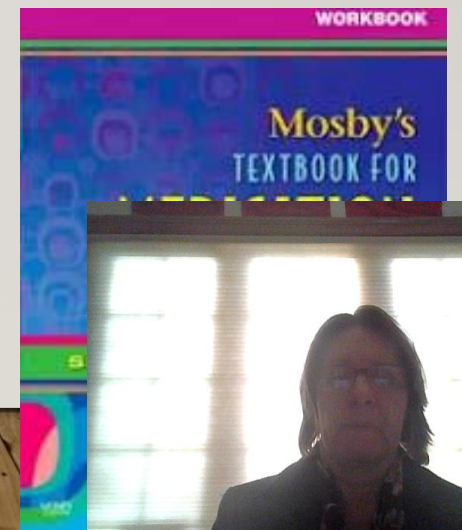
QUESTION

- 1) Mr. Gordan in room 518-A visited his cardiologist two-weeks ago and the resident was diagnosed with hypercholesterolemia. Mr. Gordan states that since he started taking this medication he has been experiencing muscle weakness. Which medication did he start?
A) sertraline hydrochloride or B) simvastatin



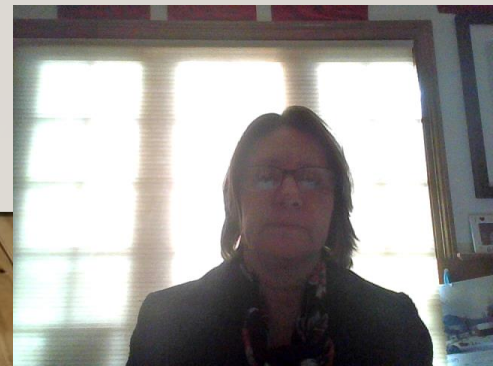
DAILY HOMEWORK ASSIGNMENTS

- Mosby's Medication Aide workbook chapters
- Make Six Medication Drug Cards and prepare for practice and tests related to them the next day.
- Practice at Home medication cart and MAR assignments
 - **Example:** Based on these vitals or this residents condition
 - What medication would you administer or not?
 - Why?
 - Documentation on MAR
- Nightly worksheets



TO PASS THE CLASS/LAB AND CONTINUE TO THE CLINICAL ROTATION:

- Pass the final examination with 80% or higher
- Average for the class 80% or higher
- Pass final lab competency evaluation with 80% or higher and not miss crucial steps
- Submit all necessary items required for the course
- Class paid in full



CLINICALS

COMPLETED IN THE STUDENTS FACILITY IF APPLICABLE

- Facility free from deficiencies related to the administration of medications and skilled nursing care in the two most recent annual surveys
- 40 clinical hours with instructor
- Facilities that I have trained for so far:
 - St. Leonard
 - Edgewood Manor in Greenfield, OH
 - Trinity of Beavercreek
 - Forest Glen Springfield (a Trilogy facility)
 - Cypress Point (a Trilogy facility)
 - Cottages of Clayton in Dayton
 - Kingston of Miamisburg
 - Four Seasons
 - Fox Run in Fairborn
 - The Glen
 - St. Joseph Senior Living



STATE KNOWLEDGE TEST

D&S TESTING CENTERS IN CINCINNATI, COLUMBUS & FINDLEY

50 Questions in 60 minutes
80% required/2 chances to pass

SIX RIGHTS (6 ITEMS)	ERROR REPORTING (2 ITEMS)
MEDICATION EFFECTS (10 ITEMS)	ROLE AND RESPONSIBILITIES (8 ITEMS)
ALLOWABLE ROUTES (2 ITEMS)	TERMINOLOGY (4 ITEMS)
CONTROLLED SUBSTANCES (4 ITEMS)	STATE REGULATIONS (2 ITEMS)
DOCUMENTATION (2 ITEMS)	MEDICATION ADMINISTRATION (10 ITEMS)



STATE SKILLS TEST
25 MINUTES FOR TWO TASK GROUPINGS
MUST RECEIVE 80% OR BETTER AND NOT MISS ANY BOLD PRINT ITEMS

- SKILL 1 Oral Liquid / Ear Drops Administration
- SKILL 2 Topical Medication Spray/Tablet Unit Dose Administration
- SKILL 3 Topical / Oral Capsule Medication Administration
- SKILL 4 Oral Tablets / Eye Drop Administration
- SKILL 5 Oral Capsule Administration
- SKILL 6 Oral Liquid / Ointment Administration
- SKILL 7 Ear Drops / Tablet Administration
- SKILL 8 Nasal Spray / Tablet Administration
- SKILL 9 Eye Drops / Tablet Administration
- SKILL 10 Eye Drops / Tablet Unit Dose Administration



AFTER PASSING STATE EXAM....

OAC: 4723-27-07

- D&S testing sends OBN the students state test results
- The OBN receives criminal records background check (BCI & FBI) results
- Program Administrator submits form to OBN stating the student's eligibility for certification.
- The student submits an application to the OBN for certification
- Student pays \$50 fee.



CONCERNS



ADDRESSING CONCERNS

- Residents receive 7 to 16 medications each
- Regulation less than 5% medication error rate.
- Study observing RNs & LPNs shows 21.2% med error rate-mostly Medicare skilled residents.
- RNs highest errors due to frequent interruptions at 10.4% and LPNs 7.25%.
 - One in three medication passes interrupted causing errors.
 - All studies show Medication Aides reduce medication errors, reduce nurse stress and increase their assessment time with residents.
- Receive as much pharmacology and medication administration time as a LPN student.



COMMENTS/CONCERNS

- Will the nurse be responsible for medication errors?
 - All studies show medication aides reduce medication errors.
- Will the Medication Aide know if there are side effects?
- Will facilities cut nurses hours to use medication aides?
 - Studies show facilities do not reduce nurses hours or nurses
 - MA-Cs reduce turnover rates for nurse aides
 - MA-Cs reduce the number of burnt-out nurses
 - Attract and retain older experienced nurses to remain in LTC



IN CLOSING...EDUCATION IS NECESSARY

- Nurses, Director of Nurses, Administrators and Human Resource departments need education on Medication Aides.
- Facilities are using the wrong type of Medication Aides.
- High acuity levels
 - MA-C's Improve the quality of care
- Attract nurse aides seeking advancement to the facility
 - Shortage of nurse aides. They can perform care between med passes and improve nurse aide hours.
 - medication aides reduce medication errors, reduce staffing deficiencies, reduce the use of unnecessary nurse hours (Walsh, Lane, Troyer, 2014)



POST-TEST

1. What does MA-C refer to?
2. Are LTC, SNF and AL facilities authorized to employ and utilize the services of Medication Aides _____?
3. Are there different types of Medication Aides? _____?
4. The MA-C is regulated under the Board of _____?
5. Are Medication Aides listed on a registry? _____

