

 <p style="text-align: center;">DIVISION OF ADULT INSTITUTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p>	DAI Policy #: 500.80.11	Page 1 of 8
	Original Effective Date: 08/15/02, 10/15/03	New Effective Date: 03/02/15
	Supersedes: 500.80.11	Dated: 10/20/14
	Administrator's Approval: Cathy A. Jess, Administrator	
Required Posting or Restricted:		
<input type="checkbox"/> Inmate <input checked="" type="checkbox"/> All Staff <input type="checkbox"/> Restricted		
Chapter: 500 Health Services		
Subject: Medication Delivery, Administration and Training		

POLICY

The Division of Adult Institutions shall ensure staff who deliver or administer prescription medication are appropriately trained.

REFERENCES

66 Wis Op. Attorney General 179 (Wis.A.G.), WL 36140
Standards for Health Services in Prisons, National Commission on Correctional Health Care, 2014, P-C-05 -- Medication Administration Training
DAI Policy 500.80.10 – Accountability for DEA Controlled Medications
DAI Policy 500.80.12 – Pharmaceutical Recycling and Waste Management
DAI Policy 500.80.26 – Medication Non-Adherence

DEFINITIONS, ACRONYMS, AND FORMS

Administer – The direct application of a vaccine or a prescribed drug or device, whether by injection, ingestion or any other means, to the body of an inmate patient or research subject by any of the following: an advanced care provider, or his or her authorizing agent; an inmate patient or research subject at the direction of an advanced care practitioner; or a pharmacist.

Advanced Care Provider (ACP) – Healthcare provider with prescriptive authority.

BHS – Bureau of Health Services

Controlled Medications – Medications maintained under staff control until an individual dose is provided to an inmate. The staff control of medication may be permanent or temporary depending on the type of medication, population status of the inmate, or at the direction of an advanced care provider or nurse clinician.

DAI – Division of Adult Institutions

DEA – Drug Enforcement Administration

Deliver – The actual constructive or attempted transfer of medication from one person to another. In the DOC, non-licensed staff may deliver medications to inmates as assistance for self-administration. Staff who deliver medications are not licensed as a Registered Nurse or Licensed Practical Nurse and are not supervised by the Health Services Manager so medication delivery is not a delegated medical or nursing act.

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DOC – Department of Corrections

DOC-2466 – Incident Report (WICS)

DOC-3021 – Progress Notes

DOC-3026 – Medication/Treatment Record

DOC-3393 – PRN Medication Record

DOC-3538 – Medication Education Log

DOC-3622 – Patient Communication

HSU – Health Services Unit

ID – Identification

Medication – Prescription and over-the-counter medication.

PRN – As needed

Responsible ACP – A designated ACP who has the final authority at a given facility regarding clinical issues.

PROCEDURE

I. Medication Delivery – Correctional Officers

- A. 66 Wis Op. Attorney General 179 (Wis. A.G.), WL 36140 allows Correctional Officers to deliver prescription medication to inmates.
- B. The method of delivery of medications to those with disabilities (i.e., visual impairments, inability to read or the ability to understand English), shall be determined on an individual basis by the HSU nursing staff or physician.
- C. Correctional Officers shall maintain safety and sanitary conditions when securing and delivering medications.
- D. Correctional Officers shall be trained in matters of medication delivery upon hire, and then annually at their assigned facility if the job duty entails medication delivery. Training at a minimum shall include the importance of the following:
 1. Right inmate patient.
 2. Receiving the right medication.
 3. Receiving the right dose of the medication.
 4. Right method of taking medication.
 5. Receiving medication at the right time.

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E. Security controls

1. Packaging:
 - a. All medications shall be in unit dose packaging.
 - b. Correctional Officers shall not remove or pour doses from a multi-dose container.
2. Accountability of medication of DEA controlled substances, perpetual inventory and counts.
3. Delivery procedure.
4. Documentation.
5. Common side effects of medications.

F. Delivery Procedure

1. Inmate patients must report in person to the assigned delivery location to take or refuse their medications at the ordered time. Inmate patients shall have DOC state issued ID visible for identification.
2. Correctional Officers shall compare the label on the medication container/packaging to the DOC-3026 – Medication/Treatment Record to ensure accuracy identifying the right:
 - a. Inmate.
 - b. Medication.
 - c. Dose.
 - d. Time.
 - e. Route.
3. If there is a discrepancy between the medication label and the DOC-3026, the Correctional Officer shall contact a nurse in the HSU or the on-call nurse for direction before proceeding with delivery.
4. Correctional Officers shall not deliver medication specifically prescribed for one inmate patient to another inmate patient.
5. Correctional Officers shall show the medication container/package and label to the inmate patient. The inmate patient verifies the following information is correct:
 - a. Inmate patient name.
 - b. Medication.
 - c. Dose.
 - d. Time.
 - e. Route.
6. Correctional Officers shall deliver the prescribed dose of the medication to the inmate patient in view of the inmate patient. This shall be done in the following manner. Without touching the medication:
 - a. Punch the medication from the blister pack either directly into the inmate patient's hand or a cup; or
 - b. Provide the inmate patient a single dose of a liquid medication; or
 - c. Provide the container of medication to the inmate patient to self-administer.
7. Correctional Officers shall conduct a visual inspection of the inmate patient's entire mouth after every medication delivery.

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- a. With tongue outstretched, inmate patient shall move tongue up, down, side to side.
- b. Visual inspection of the inside of both cheeks shall also occur.
8. Correctional Officers shall not remove doses of medications in advance.
9. Correctional Officers shall not crush or split tablets.

G. Offsite appointments

1. Correctional Officers may need to deliver a dose of medication to an inmate patient when they are transported to an off-site appointment.
2. Medications shall only be repackaged by nursing staff in a medication envelope. If the medication is not repackaged by nursing staff the original medication container and DOC-3026 – Medication/Treatment Record shall accompany the inmate patient.
3. If the medication is packaged in an envelope, nurses shall provide specific directions regarding the medication on the outside of the envelope.
4. Nursing staff shall document on the DOC-3026 that the medication was sent if they prepare a medication envelope.

H. Documentation

1. All controlled medications delivered by staff shall have a corresponding DOC-3026 – Medication/Treatment Record.
2. The DOC-3026 identifies the inmate patient name, medication name, dose and time medication is to be taken.
3. Staff member's initials (first initial of first name and first initial of last name) signify the inmate patient took the medication. Staff shall not use any other code for compliance.
4. Document delivery immediately after giving the prescribed medication and visual inspection of the mouth.
5. Documentation shall be completed in the appropriate box, for the day, date, and medication pass time.
6. The following codes shall be used on the DOC-3026 when applicable:
 - a. R = Refused. Inmate patient reported to the delivery point and refused to take the medication.
 - b. ® = Refused medication and the HSU was notified of refusal. Staff shall notify HSU if there are three consecutive days of a single medication or a pattern of refusing any medication. DOC-2466 – Incident Report (WICS) shall also be completed.
 - c. A = Absent. Inmate patient not in the facility at the time of medication delivery.
 - d. U = Unavailable. Medication is not available at the time of delivery. Notify the HSU whenever there are medications not available.
 - e. W = Withheld. HSU provided instructions not to give.
 - f. S = Sent. Medication was sent with the inmate patient off-site or to work or to an appointment.
7. There should be no blank boxes on the DOC-3026 for prescribed medications unless the medication is a PRN.

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8. Unscheduled PRN medications may also require documentation of the time of delivery as well as a quantity. The Medication/Treatment Record DOC-3026 will indicate if additional information is necessary.
 9. Correctional staff who deliver medications shall complete the bottom section of each individual inmate patient's DOC-3026 they are responsible in delivering medication to with a signature. The signature shall include their full legible name and identifying initials.
- I. HSU staff responsibility when Correctional Officers deliver medications:
1. Educate inmate patients regarding the following:
 - a. Name of medication.
 - b. Dose of medication.
 - c. Time of medication.
 - d. Reason for taking medication.
 - e. Possible side effects of the medication.
 2. Education shall be documented on any of the following:
 - a. DOC-3538 – Medication Education Log.
 - b. DOC-3021 – Progress Notes
 - c. DOC-3622 – Patient Communication.
 3. Assure the DOC-3026 – Medication/Treatment Record and the medication label match. HSU staff may not, under any circumstance, change or update a label of a medication provided by the BHS Central Pharmacy.
 4. Licensed health care staff shall:
 - a. Follow-up with the patient and address medication non-adherence according to DAI Policy 500.80.26.
 - b. Health Care staff shall also review individual DOC-3026 for adherence monthly when reconciling records from month to month.
- II. **Medication Administration – Licensed Health Care Staff**
- A. Inmate patients must report to the assigned delivery location to take or refuse their medications. Inmate patients shall have DOC state ID visible for identification
- B. Health Care staff who administer medication shall be licensed and competent in medication administration. orientation, training and validation of competency at a minimum shall include:
1. The importance of inmate patients receiving their medications within the scheduled times.
 2. The importance of educating inmate patients on the medications they receive.
 3. Scope of practice as it relates to medications.
 4. Security.
 5. Packaging.
 6. Accountability of DEA controlled substances.
 7. Administration procedure.
 8. Documentation.

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C. Administration Procedure

1. Each nurse shall compare the label on the medication container to the DOC-3026 – Medication/Treatment Record to ensure accuracy identifying the right:
 - a. Inmate patient.
 - b. Medication; always check allergies.
 - c. Dose.
 - d. Time.
 - e. Route.
2. Nurses shall not administer medication specifically prescribed for one inmate patient to another inmate patient.
3. Nurses shall administer the prescribed dose of medication to the inmate patient.
4. Nurses shall verify the inmate patient took the medication by visual inspection of their mouth. With tongue out stretched, inmate patient shall move tongue up, down, side to side. Visual inspection of the inside of both cheeks shall also occur.

D. Documentation

1. All medications administered by nurses shall be documented on the DOC 3026 – Medication/Treatment Record; this shall include PRN and over-the-counter medications the nurse administered.
2. The DOC-3026 identifies the medication name, dose, and time medication is to be taken.
3. Staff member's initials (first initial of first name and first initial of last name) signify the inmate patient took the medication. Staff shall not use any other code for compliance.
4. Health care staff who administer medications shall sign the bottom section of each individual inmate patient's DOC-3026 they administer medication to with a signature. The signature shall include their full legible name and identifying initials.
5. Document administration immediately after giving the prescribed medication.
6. Documentation shall be completed in the appropriate box, for the day, date and medication pass time.
7. Additional documentation codes when applicable include:
 - a. R = Refused. Inmate patient reported to the delivery point and refused to take the medication.
 - b. A = Absent. Inmate patient not in the facility at the time of medication delivery.
 - c. U = Unavailable. HSU staff shall investigate and obtain medications whenever medication is not available at the time of delivery.
 - d. W = Withheld. HSU provided instructions not to give.
 - e. S = Sent. Medication was sent with the inmate patient off-site or to work.
8. Documentation for injections shall also include:
 - a. Site of injection.

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- b. Route (subcutaneous or intramuscular).
- 9. There should be no blank boxes on the DOC-3026 for prescribed medications unless the medication is a PRN.
- 10. For PRN medications administered, it is necessary for the nurse to document the inmate patient response to medications.
- 11. The DOC-3393 – PRN Medication Record may be used in place of the DOC-3026 for inmate patients who receive frequent PRN medications.

E. Nursing staff responsibility when administering medications:

- 1. Administer the right medication, to the right inmate patient, right time, right route, right dose and document.
- 2. Educate inmate patients regarding the following:
 - a. Name of medication.
 - b. Dose of medication.
 - c. Time of medication.
 - d. Reason for taking medication.
 - e. Possible side effects of the medication.
- 3. Education can be documented on any of the following:
 - a. DOC-3538 – Medication Education Log.
 - b. DOC-3021 – Progress Notes.
 - c. DOC-3622 – Patient Communication.
- 4. Inmate patients who refuse to take prescribed medications shall have follow-up with the nurse and the nurse shall address medication non-adherence according to DAI Policy 500.80.26.

III. Orientation and Training Records

- A. Documentation of completed officer pre-service training in medication delivery and annual medication delivery training shall be kept on file.
- B. Documentation of completed orientation, training and competency for all nurses who administer medications shall be kept on file with the Health Service Manager.

IV. Medication training programs shall be approved by the BHS Director.

Bureau of Health Services: _____ **Date Signed:** _____
 James Greer, Director

_____ **Date Signed:** _____
 Ryan Holzmacher, MD, Medical Director

_____ **Date Signed:** _____
 Mary Muse, Nursing Director

Administrator's Approval: _____ **Date Signed:** _____
 Cathy A. Jess, Administrator

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name		
Original Effective Date:	DAI Policy Number: 500.80.11	Page 8 of 8
New Effective Date: 00/00/00	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Medication Delivery, Administration and Training		
Will Implement <input type="checkbox"/> As written <input type="checkbox"/> With below procedures for facility implementation		
Warden's/Center Superintendent's Approval:		

REFERENCES

DEFINITIONS, ACRONYMS, AND FORMS

FACILITY PROCEDURE

- I.
 - A.
 - 1.
 - a.
 - B.
 - C.
- II.
 - A.
 - B.
 - C.