| Transforming Lives | AGING AND LONG-TERM SUPPORT ADMINISTRATION (ALTSA)  **Assisted Living Facility Medication  Observation Worksheet** | | | |
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| ASSISTED LIVING FACILITY NAME | | | | LICENSE NUMBER |
| INSPECTION DATE | | LICENSOR NAME | | |
| Inspection Type:  Initial  Full  Follow up  Monitoring  Complaint: Number | | | | |
| Date  Time:   AM  PM | | | | |
| This form is **optional** and includes **sample** cues for observation, interview, and record review. | | | | |
| **WAC** | | | **Subject** | |
| 388-78A-2210 | | | Medication Services | |
| * Observe: Medication cart * Ask: What pharmacy is used? Do they do monthly cycle fill? Do you renew and process orders or does the nurse? What information is on the MAR? How is the MAR laid out? * Review: MAR | | |  | |
| 388-78A-2220 | | | Prescribed Medication Authorization | |
| * Observe: Medication bottle or bingo cards * Ask: If someone didn’t have an order for Tylenol but had a bad headache, what would you do? | | |  | |
| 388-78A-2230 | | | Medication Refusal | |
| * Ask: What do you do if someone doesn’t want their medications? * Review: Records of sample residents for medication refusal. | | |  | |
| 388-78A-2240 | | | Non-Availability of Medications | |
| * Ask: What is your process for new medications or residents returning from the hospital? What happens if the medications don’t show up? | | |  | |
| 388-78A-2250 | | | Alteration of Medications | |
| * Observe: Medication alterations (such as crushing) * Ask: Tell me more about how you are altering the medications. Are there any residents who have special medication needs? | | |  | |
| 388-78A-2260 | | | Storing, Securing, and Accounting for Medications | |
| * Observe: Narcotics storage, each time a medication cart is passed, pull the drawer to see if it is locked, look for any unsecured pills * Ask: How do you account for narcotics? What would you do if you arrived on shift and there were narcotics missing? How do you store refrigerated medications? * Review: Narcotics book for any missing signatures. | | |  | |
| 388-78A-2270 | | | Resident Controlled Medications | |
| * Ask: Which residents control their own medications? (Compare answer to Resident Characteristics Roster to ensure it is up to date.) How do you assess residents’ ability to manage their own medications? * Ask relevant residents: How are your medications stored and locked? * Review: Resident Characteristics Roster | | |  | |
| 388-78A-2280 | | | Medication Organizers | |
| * Observe: Medication cart | | |  | |
| 388-78A-2290 | | | Family Assistance with Medications | |
| * Ask: What is your facility policy on family assistance with medications? What happens if a family member no longer wants to be involved? * Review: For relevant residents, ensure there is an assessment (2100) and care plan (2130, 2140, 2290) | | |  | |
| 388-78A-2320 | | | Intermittent Nursing Services Systems | |
| * Review: Nurse delegation procedure * Ask: Do you use nurse delegation? Are there residents with nursing care needs? How do you meet their needs? | | |  | |
| 388-78A-2610 | | | Infection Control | |
| * Observe: Handwashing or sanitizer use, or proper glove use between residents while delivering medications. | | |  | |
| 388-78A-2660 | | | Resident Rights | |
| * Observe: Knocking on the door when delivering medications to resident rooms, staff to resident interactions. * Ask: Do residents have the right to refuse medications? | | |  | |
| **Notes** | | | | |
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