

STATE OF WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES BUREAU FOR PUBLIC HEALTH OFFICE OF HEALTH FACILITY LICENSURE AND CERTIFICATION

Long-Term Care Nurse Aide Program

Joe Manchin III
Governor

Martha Yeager Walker Secretary

AMAP GUIDELINE: AM-07-01 ISSUED DATE: AUGUST 21, 2007

To: All Approved West Virginia AMAP Facilities

From: Twonna Williams, RN, Program Manager

Long-Term Care Nurse Aide Program

Subject: Updated Approved Medication Administration Guideline

PURPOSE:

The purpose of this memorandum is to communicate a change in the Approved Medication Administration guidelines and forms to all approved AMAP facilities.

GUIDELINE PROVISION:

- 1. Effective 9/1/07, the following form will no longer be required by the Office of Health Facility Licensure and Certification
 - a. Form WVAMAP 5 and 5a Documentation to be submitted annually by January 31st and additional page.
- 2. Effective 9/1/07, the following forms have been updated or changed.
 - a. Form WVAMAP 1 RN Orientation Application
 - b. Form WVAMAP 3 Program Change
 - c. Form WVAMAP 4 Retraining
 - d. Form WVAMAP 6 Verification
 - e. Guidelines
 - f. Medication Pass Observation Worksheet
- 3. The following guidelines shall be utilized by all AMAP facilities to provide safe medication administration by unlicensed personnel.

AMAP QUALIFICATIONS:

- 1. High school diploma or GED is required. Due to falsification of these documents by some personnel and facilities, the registered nurse needs to view the original high school transcript, diploma, or GED documentation. If there is a question, please verify with the schools.
- 2. Criminal background checks are required prior to the class. Any drug convictions, misdemeanor or felony, disqualify the individual from taking the class. If there is knowledge of a drug conviction after the AMAP has successfully completed the class and test, they must be withdrawn and reported to the Nurse Aide Program.
- 3. Facilities must check all potential students with the Nurse Aide Registry. Documentation of this must be in the students personnel file. See Form WVAMAP-6 or the on-line verification www.wvdhhr.org/ohflac/na; select the on-line verification of nurse aide.
- 4. Completion of CPR and First Aide course.
- **5.** The candidate must not have been withdrawn previously from an AMAP program.

RN QUALIFICATIONS:

- Registered nurses must have a current valid nursing license in the State of West Virginia. Please check the West Virginia Board of Examiners for Registered Nurses (304-558-3596) or the web site at www.wvrnboard.com to verify the licensure.
- 2. The registered nurse must be approved by the Office of Health Facility Licensure and Certification, Nurse Aide Program and completed the AMAP RN-Orientation course. If you are hiring a new AMAP registered nurse, please call this office to verify the RN's eligibility status.
 - The Orientation course will be offered as a web-base program and the required form must be completed and submitted for review to the nurse aide program. See form WVAMAP - 1. This application can be completed on line bv accessing the website at www.wvdhhr.org/ohflac/amap. A letter of affiliation from the administrator of the facility must accompany the application. If the application is completed on line, it will be assigned an identification letter. This number must be written on the facility's affiliation letter and submitted to this office by fax or by US mail within 72 hours 3 business days) after the application submission. Applications submitted without

an affiliation letter will not be processed.

b. This office will notify all participants, as well as the facilities, in writing with the pertinent information required to access the web-based tutorial course once the application has been approved (WVAMAP -1). There is no charge for the course; however there will be a monetary fee required to obtain a copy of the manual.

TEACHING:

The AMAP course must be between 30 and 40 hours. This includes medication passes and skills performance. Depending on the size of the class and the prior knowledge of the students, this may require more than 40 hours. The class should **never** be less than 30 hours.

- 1. Learning to take vital signs and know the basic normal readings is an essential part of medication administration. This is a critical step that must be taught and a return demonstration performed by the student.
- 2. All areas of the teaching curriculum must be covered. There are no areas of less importance.
- 3. Abbreviations are another critical area if the AMAP is to understand prescriptions, orders and some labeling.

TESTING:

1. For inquiries related to testing contact:

Professional Healthcare Development (PHD)

P.O. Box 399, Ona, WV 25545.

Attention: Denise Cihy, R.N.

Telephone: 304-733-6145 Fax 304-733-6146 Email: info@profhd.com

2. Absolutely no one is to review the State approved test except the candidate taking the test. The tests are sealed. The seal is to be broken by the candidate testing only. The registered nurse is to monitor and proctor the test. The test can be monitored only by the authorized AMAP registered nurse. No one else in the facility may proctor or monitor the test. The registered nurse is not to review the test. The registered nurse is to pass out the exams with the seals intact. The testing candidates are not to ask the registered nurse for assistance with the test. If there is a problem with any of the questions, the candidate can make a notation on the test form and this will be reviewed by the registered nurse at Professional Healthcare Development (PHD), the

agency's contracted vendor. When testing is complete, the tests are to be placed in an envelope and sealed to be returned for scoring. **TESTS ARE NOT TO BE PHOTOCOPIED.**

- 3. If there is an extra test for any reason, the test is to be left sealed and returned to Professional Healthcare Development.
- 4. These tests must remain valid in order to continue to allow testing to be done at the facility. This office is working with PHD to maintain the validity of the testing. A safe outcome for the resident is the primary goal. Any violation of the testing procedures could result in withdrawal of the AMAP program or the AMAP approval for the registered nurse.

RETRAINING:

- 1. Following successful completion of the AMAP program and passing the state approved test, the AMAP will receive a certificate from the State Agency's designated vendor PHD.
- 2. Retraining documentation (Form WVAMAP-4) is required to be kept in the personnel record of the individual. Retraining is required for:
 - a. Any AMAP that has worked at the same facility will be retrained every two years from the date of successful completion of the program and state testing.
 - b. Any AMAP hired that was originally trained and tested in another facility.
 - c. Any AMAP withdrawn from administering medication temporarily, this could include retraining due to medication errors, inadequate procedures, etc. This is not a permanent withdrawal.
 - d. Any time the registered nurse has determined that retraining is necessary for safe medication administration.
 - e. The state approved test does not have to be repeated unless the registered nurse has determined that this would assist in providing documentation.

SUPERVISING AMAPS:

- 1. AMAPs must have an OHFLAC approved registered nurse accessible to them at all times. This may be in person, by phone or by page.
- 2. All medication administration records and orders must be reviewed by the

registered nurse for accuracy **prior to** administration of medication by the AMAP. Any changes of orders documented on the MAR must be reviewed by the registered nurse for accuracy prior to administration by the AMAP.

- 3. AMAPs must be observed for competency a minimum of once every three months. This must be **documented** and placed in the AMAP personnel file on site. A medication pass checklist is attached to these guidelines which can be used for this purpose. The registered nurse may use their own checklist form for documentation.
- 4. Any counseling with AMAPs due to problems with medication administration must be documented and placed in the personnel file.
- 5. Careful supervision must be done when allowing AMAPs to administer PRN medication. Individual "as needed or PRN" medication order must specify the exact dose, time and frequency and the purpose for administering the drug. If facility policy requires - The registered nurse should be notified when PRN medication is given.
- 6. The effects of the PRN medication must be documented. There needs to be documentation in the resident's chart that justifies the need for the medication.

For example:

A resident with a history of indigestion and esophageal reflux verbalizes to the AMAP that he is having indigestion and feels uncomfortable. Per the facility's policy, the AMAP calls the registered nurse and gives the ordered Mylanta. In one hour the resident states he is feeling better and is no longer having indigestion symptoms.

This should be recorded either on the MAR, nurses notes, or the facility's designated part of the residents chart

- 7. It is the responsibility of the registered nurse to have open communication and knowledge of what the AMAPs are doing in the facility. The registered nurse is delegating the medication administration to the AMAP.
- 8. AMAPs cannot take medication orders or transcribe a new prescription order from a physician on the MAR.
- 9. AMAPs cannot give injections.
- 10. AMAPs cannot make decisions that require nursing judgment.

11. All medication given by the AMAP is to be documented **after** the medication is given.

MISCELLANEOUS RECOMMENDATIONS:

- Each facility is to have available resource information on all drugs being administered in the facility, including the risks and side effects of the medication. A current version of the nursing drug handbook or printed pharmacy handout, for example, might be an easier resource to use or read. All reference materials must be accessible.
- 2. Policies and procedures for medication administration should be reviewed periodically to determine if changes are needed. Remember you must be in compliance with your own policies.
- Any changes to the policies must be sent to the Office of Health Facility Licensure and Certification's Behavioral Health or Assisted Living Program for review and approval, along with a completed AMAP Change Form (WVAMAP-3).
- 4. Any privileges withdrawn, whether permanent or temporary, involving an AMAP, must be reported to the Nurse Aide Program using the AMAP Change Form as well (WVAMAP-3).

AMAP VERIFICATION

- This form is to be used to verify the AMAP's status on the West Virginia Long-Term Care Nurse Aide Registry. Please review the form and the questions prior to calling the registry. (WVAMAP-6)
 - a. The first section of the form must be completed prior to contacting the registry.
 - b. The remainders of the form are the questions that are answered at the registry when a request is made. Please be sure to document the name of the person at the registry that you spoke to. For your convenience, you can also use the on-line look-up as an option to validate a nurse aide's status on the website. Sign and date the last line of the form and place form WVAMAP-6 in the employee's personnel file. This form can be found on the OHFLAC website. www.wvdhhr.org/ohflac/na, select on-line verification of nurse aide.