STATE OF CONNECTICUT  
DEPARTMENT OF DEVELOPMENTAL SERVICES

Procedure No: I.D.PR.014  
Subject: Medication Administration Sanctions Process for Certified Non-licensed Personnel  
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Approved: Peter H. O’Meara/KdP

Section: Quality Enhancement Procedures

A. Purpose
To identify the standardized process that is to be implemented by registered nurses (RNs), clinical supervisors (Nursing Supervisors, Directors of Health Services, Directors of Nursing for Public Programs and administrative supervisors (Program Supervisors, Residential Managers) to address the violations of the DDS Medication Administration Regulations committed by certified non-licensed staff.

B. Applicability
This procedure applies to all RNs who are responsible for the supervision of medication administration by non-licensed staff that administers medications in residential or individual home support settings, day programs, respite programs and/or are involved in the clinical supervision of this process, and to the administrative supervisors who are responsible for the implementation of progressive discipline. All private residential and/or day providers licensed or funded by DDS are required by regulation to have a written policy that identifies the corrective procedures to be followed in the event certified non-licensed personnel make errors in the administration of medication. These agencies may adopt this procedure or develop a substantively similar procedure.

C. Definitions

Authorized LPN An LPN who has met the identified criteria (training and experience) and been granted authorization by DDS to participate in the medication administration process on an identified limited basis.

Certification The written authorization from the DDS commissioner to a non-licensed person that indicates that they can administer medications to persons served by the department when this responsibility is delegated to them by the RN.

Class A error or prohibited practice Type of action/inaction committed by certified staff that generally involves documentation requirements, medication supply and/or security/possession of keys for medication storage areas.

Class B error or prohibited practice Type of action/inaction committed by certified staff that generally involves a violation of any of the five rights, transcription activities that result in an error, handling medications incorrectly, and taking verbal or telephone orders.

Class C error or prohibited practice Type of action/inaction committed by staff that generally involves:
- The death of a person
- Injury requiring hospitalization or medical treatment at an emergency department, clinic or health care provider’s office
- Falsification of records and/or certification paperwork
- Administration of medication when requirements identified by DDS have not been met
Corrective action Remedial step(s) taken by the supervising/delegating nurse following a medication error(s) or prohibited practice incident(s) that is (are) intended to prevent duplication of the staff action/inaction that caused the incident.

Delegation The transfer of responsibility for the performance of an activity from the RN to another qualified individual, with the RN retaining accountability for the outcome.

Documentation A general practice standard of medication administration that indicates that a dose of medication has been administered to a person at the identified time, following the instructions of the prescriber. This standard includes the “right” documentation for the medication and circumstances of administration (e.g., documentation on the receipt and disposition record for controlled medications, documentation of the effect of medications administered on an as needed basis (PRN), etc.).

Error Defined in the DDS Regulations Concerning the Administration of Medication by Certified Unlicensed Personnel to mean:
- Failure to administer medication to an individual
- Failure to administer medication within one hour of the scheduled time (as indicated by the RN or time designated by the prescribing practitioner)
- Failure to administer the specific medication prescribed for the individual
- Failure to administer the correct dosage of medication
- Failure to administer the medication by the correct route
- Failure to administer the medication according to generally accepted medical practices

Five rights Five (5) areas of consideration in the accurate administration of medication. These include:
- Right individual for whom the medication is prescribed
- Right time medication is prescribed to be administered
- Right medication as prescribed
- Right dose of the medication as prescribed
- Right route of administration as prescribed

Levels of offense The steps in the sanction process that identify the actions that are taken by the supervising RN and the administrative supervisor when the DDS medication administration regulations have been violated. The level of offense is determined by the type, number and frequency of errors or prohibited practices committed by the non-licensed staff as outlined in Public Sector Sanctions for Certified Unlicensed Staff (Attachment A).

Medication Any medicinal preparation including controlled substances.

Occurrence Any combination of one or more errors or prohibited practices committed by the same person that happen before retraining is completed.

Omission A medication error in which medication(s) have not been administered as prescribed, or may have been administered but there has been no documentation of the administered dose(s) by the time the responsible certified staff has gone off duty. Prompt documentation on the MAR is the
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medically accepted practice that identifies that a medication has been administered as prescribed.

Pattern of sanctions A state of concern that exists when a certified staff person, despite retraining and the imposition of sanctions, continues to commit actions that violate the medication regulations. Recognition of this state may precipitate further sanction by the Director of Health Services, which may exceed the level of criteria identified for the offenses.

Program Supervisor/Manager The individual who has oversight of an employee’s job performance and is responsible for following Human Resources polices and procedures in the application of disciplinary actions.

Prohibited practice An action or inaction that affects the medication administration process in that it violates state or federal law, DDS regulation, and/or generally accepted medical practices.

Responsible persons Individuals (i.e., RN, Nurse Supervisor, Director of Health Services Program, Director of Nursing for Public Programs, Supervisor, Manager,) identified in the Public Sector Sanctions for Certified Unlicensed Staff (Attachment A) who are accountable for implementing the identified sanctions.

Revocation or Suspension of certification The removal or temporary cessation, by the DDS commissioner or designee, of the medication administration certification issued to non-licensed staff.

RN On Call The regional communication system that identifies one or more RNs who are responsible for responding to calls within specified areas that are made outside of normal business hours.

Sanction The consequence to staff for noncompliance with the medication administration regulations.

Supervising nurse The RN assigned by a residential facility or day program to be directly responsible for the management of medical services provided to the individual in the specific residential or day program. This is the nurse who is delegating the task for that location.

- **Primary supervising nurse** The supervising/delegating RN at the primary worksite of the certified staff.

- **Secondary supervising nurse** The supervising/delegating RN at any other worksite

Suspension of delegation The usually temporary measure imposed by the delegating RN to protect the health and safety of the individual following the identification of a single significant error or multiple errors committed by a certified staff. This measure means that certified staff are not permitted to administer medication at the identified site(s) until corrective action and/or sanction actions have been successfully completed and delegation is resumed.

D. Implementation

1. Medication administration is a responsibility that is delegated to certified non-licensed staff by the RN in accordance with DDS regulations and the Board of Examiners for Nursing Declaratory
Ruling on Delegation.

2. Certified non-licensed staff receive instruction on the accepted procedures and the prohibited practices associated with medication administration during the Medication Administration Certification Training and the On-Site Practicum. They also receive training that identifies:
   - Their responsibility to promptly report any errors or prohibited practices they commit or discover to the RN
   - The consequences imposed when errors or prohibited practices are committed

3. The supervising RN is responsible to provide training to, and observation of, staff to ensure that they possess the knowledge and skill to correctly administer medications to persons at the site. This training and oversight may be provided by more than one RN if the certified staff works at more than one site within the agency.

4. When the supervising nurse or the RN on Call is notified that an error or prohibited practice has been committed or identified, they shall collect information so as to be able to assess the situation and identify action(s) to ensure the health and safety of the individual(s). This action may include but is not limited to:
   - Contacting the primary health care provider
   - Directing staff to closely observe the individual
   - Advising staff to obtain immediate medical intervention
   - Notifying staff of new orders
   - Suspending delegation of medication administration by the responsible certified staff to ensure the health and safety of individuals until fact-finding has been completed
   - Completing Acknowledgement of Medication Sanctions form (Attachment H).

5. When the fact-finding has been completed, the supervising nurse will be responsible to identify the class of each error and/or prohibited practice committed by the non-licensed staff during that occurrence. Questions about this determination should be referred to the nurse’s clinical supervisor.

6. Sanctions for certified non-licensed staff are identified according to the level of offense in the Public Sector Sanctions for Certified Unlicensed Staff document (Attachment A). This document also identifies the responsible person(s) who shall implement the process.

7. The number and class of errors or prohibited practices committed by the non-licensed staff along with the certified staff person’s history of errors will determine the level of offense in the sanction process.

8. The primary supervising RN will be responsible for tracking the errors and prohibited practices committed by staff, and for maintaining documentation of this medication administration history. This documentation shall be recorded by the RN using the Certified Non-licensed Staff Medication Administration Error/ Prohibited Practices Tracking Form (Attachment B). A point value shall be applied to the occurrence for the purpose of tracking. If the certified staff commits an error at a site other than their primary work site, the secondary supervising RN is responsible to communicate the details of the occurrence to the primary supervising RN so this information can be recorded and added to any previous history. If the staff person transfers their primary work site, this information and supporting documentation shall be transferred to the new primary supervising RN.
9. All errors or prohibited practices require the corrective action of retraining by an RN. This responsibility to provide retraining shall not be transferred to a certified or other non-licensed person. This responsibility can be transferred to an Authorized LPN only when the content of the re-training is information that has previously been taught by the RN.

10. The extent of retraining shall be recommended in the sanction process and will depend on the staff’s history regarding errors and retraining. The nursing supervisor in consultation with the Health Services Director/Director of Nursing for Public Programs will make the final determination in this matter.

11. The retraining provided to staff shall be documented using the appropriate Retraining Record. Refer to Class A Retraining Record (Attachment C), Class B Retraining Record (Attachment D), and Class C Retraining Record (Attachment E). Retraining provided by the supervising RN is not considered disciplinary action.

12. Following retraining, the supervising RN shall communicate in writing with the Program Supervisor using the Sanction Notification Form (Attachment F). This will document the occurrence and shall identify the retraining provided, as well as the level of offense reached.

13. The Program Supervisor is responsible for reviewing the Sanction Notification Form. This form will identify the level of offense that has been reached as a result of the certified staff’s action/inaction. The recommended action appropriate to the level of offense is identified in the Public Sector Sanction for Certified Non-licensed Staff (Attachment A). All disciplinary procedures including the issue of union representation will be conducted in accordance with the collective bargaining agreement.

14. The Program Supervisor is responsible to sign the Sanction Notification Form and document that action has been taken. The original of this form shall be returned to the supervising RN.

15. All disciplinary actions taken as a result of the medication administration sanction process shall be incorporated by the supervisor into the employee’s annual performance appraisal.

16. The Sanction notification form that was completed and signed by the Program Supervisor shall be retained by the primary supervising RN as this documentation is necessary if suspension or revocation of certification by the DDS Commissioner is ever recommended.

17. Non-licensed staff who continue to commit errors or prohibited practices despite retraining and personnel action, or who commit a single class C error, may be referred to the DDS commissioner for revocation or suspension of medication administration certification. When this action is considered, the Request for Medication Administration Certification Sanction Form (Attachment G) shall be completed and forwarded to the Regional Health Services Director for review and approval before it is sent to Central Office. If this sanction action is recommended, the certified non-licensed staff would have the delegation of medication administration indefinitely suspended pending the outcome of this process.

18. Any person whose certification is revoked or suspended by the commissioner shall be advised in accordance with the regulations and shall have the right to request a hearing for reconsideration.
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19. Each medication error and/or prohibited practice committed shall be reviewed by the RN, Nursing Supervisor and/or Health Services Director/Director of Nursing for Public Programs for its potential as abuse/ neglect. For the most part, medication errors shall be addressed through the sanction process and would not rise to the level that would warrant report and investigation in the abuse/neglect system.

E. References:

Chapter 378 of the Connecticut General Statutes, “Nursing, Nurse Practice Act”
CT Board of Examiners for Nursing Declaratory Ruling on Delegation to Non-licensed Personnel
DDS Medical Advisory # 99-3, Interpretive Guidelines for the DDS Regulations Concerning Administration of Medication by Certified Unlicensed Personnel

F. Attachments:

I.D.PR.014 Attachment A: Public Sector Sanctions for Certified Non-licensed Staff
I.D.PR.014 Attachment B: Medication Administration Error Tracking Form
I.D.PR.014 Attachment C: Class A Retraining Record
I.D.PR.014 Attachment D: Class B Retraining Record
I.D.PR.014 Attachment E: Class C Retraining Record
I.D.PR.014 Attachment F: Medication Administration Sanction Notification
I.D.PR.014 Attachment G: Request for Medication Certification Sanction by Commissioner
I.D.PR.014 Attachment H: Acknowledgement of Medication Sanctions for Certified Non-licensed Staff concerning Delegation Suspension