# Medication Administration Error Notations

## Per DODD, ALL medication errors made by developmental disabilities personnel that hold a medication administration certificate must be notated on the certificate of the personnel that made the error in MAIS (Medication Administration Information System)

**WHY?**

* To keep our individuals healthy and safe, identify patterns of problems, ensure the ability to track personnel even when changing employers and for consistency among employers

**HOW ARE NOTATIONS MADE?**

* The notations are made on the personnel’s medication administration certificate within the Medication Administration Information System (MAIS)
* Notations can only be made by the RN trainer OR a person who has secretarial access to the MAIS system and an association with the RN trainer
* Notations also require documentation of the error and what the follow up was

**QUESTIONS-**

* Does a certain number of medication errors stop a person from administering medication?
	+ No, other than if/when the employer or delegating nurse chooses to stop them
* How long do notations stay on a personnel’s certificate?
	+ On a rolling 18 month basis
* What happens when a personnel has multiple notations for medication errors?
	+ 4 or more medication error notations on a certificate triggers a DODD review of the certification when the certificate is up for renewal
* What does it mean if DODD is reviewing the certificate?
	+ When there are 4 or more errors, DODD must review the certification prior to it being renewed in order to ensure that the personnel can safely administer medication. This would include DODD working with the personnel, RN trainer and employer to implement an action plan to increase the personnel’s accuracy and safe administration.
* What if I want to hire someone who is already medication administration certified; can I look at their notations?
	+ Yes, you must verify the status of someone’s medication administration certificate. You can check their record for the presence of notations. Only the notation category and dates are visible to non-state users. Only DODD can see the documentation explaining the reasons for the notations if you have questions, you should contact DODD for them to explain the notations (ma.database@dodd.ohio.gov)
* When did this go into effect?
	+ Has always been in rule to notify DODD, but there was no efficient means to do this until MAIS was started in 2013. It was clarified MAIS in rule in 2016 to use MAIS for reporting
* What rule is this information in?
	+ 5123:2-6-07 General provisions and compliance for performance of health related activities and administration of prescribed medication

(E) Prohibition on performance of health related activities and administration of prescribed medications by developmental disabilities personnel

(1) If an employer of a developmental disabilities personnel believes or is notified by the county board, the department, a delegating nurse, or the quality assessment registered nurse that developmental disabilities personnel have not or will not safely perform health-related activities or administer prescribed medication, the employer shall prohibit the action from continuing or commencing. Developmental disabilities personnel shall not engage in the action or actions subject to an employer’s prohibition

(2) When the employer prohibits the action from continuing or commencing, the employer shall:

(a) Notify the developmental disabilities personnel of the prohibition and immediately make other staffing arrangements so that the needs of individuals served are met in a manner that ensures compliance with the requirements of this chapter;

(b) Immediately notify the department by making a notation regarding the prohibition of the developmental disabilities personnel in the medication administration information system database

(c) If applicable, immediately notify the county board via the major unusual incident reporting system in accordance with rule 5123:2-17-02 of the Administrative Code; the county board, as applicable, shall notify the quality assessment registered nurse; and

(d) If applicable, immediately notify the delegating nurse

(3) The employer shall ensure corrective action is taken prior to allowing the developmental disabilities personnel to resume the performance of health-related activities or the administration of prescribed medication

(4) The employer shall notify the department by making an entry regarding the corrective action and the end of prohibition of the developmental disabilities personnel in the medication administration information system database and, as applicable, the county board, the quality assessment registered nurse, and/or the delegating nurse of the corrective action taking

* Who is receiving the training?
	+ There have been a variety of places where this information has been given out; including but not limited to- provider back to basics (B2B) training and conferences
	+ RN trainers should be aware of this requirement
* What type of documentation gets uploaded into MAIS regarding medication errors?
	+ Any type of documentation that explains what happened and what was done, examples given were incident reports and narratives. Any document uploaded needs to be specific to the situation. Since only DODD can see documents they do not need to have individual’s information redacted.
* What happens when there is a med error due to a med not being present to be passed (Example- pharmacy not delivering/refilling the medication in time). Does that count as a medication error for the staff even though the med being missing is not their fault?
	+ No, as it was not the staff’s error. The only medication errors to be notated on the certificate of the staff is when the person makes a mistake.

ADDITIONAL CLARIFICATIONS / COMMENTS

* When the rule specifies that when a personnel has not or will not safely perform health related activities or administer medication that the employer shall prohibit the action from continuing or commencing … that does not indicate a time required to correct the error. It must be stopped and corrected in a way that is appropriate to the situation, so the employer must use their judgment to make sure the intervention is appropriate to the problem. Two examples:
	+ Teachable moment: error discovered; personnel retrained; employer/supervisor believes issue is resolved; personnel continues to administer but does so more safely. That all happened in 20 minutes or less – then notation is made after the fact.
	+ Error leads to MUI: MUI is discovered/reported; immediate action is personnel is taken off duty during investigation; retraining may require as much as going through entire med class again; then person returns to duty.  In that case the first notation would be a “Med Pass Deferral” category notation (as-in “it was so bad you had to be taken off med pass responsibilities”) the process ensues, then a “Med Pass Deferral Ended” notation is added to explain outcomes  and corrective action. Time frame much longer in that case.
* Failure to document is a medication error. Providers and certified staff need to be familiar with what the definition of medication error is (OAC 5123:2-6-01)
* When retraining is required - there needs to be a record of the retraining. Note that the training should not just be requiring the staff to sign off, but should end with the personnel having an understanding of the implications of error
* In rule terminology, have not or will not safely administer = a medication error. When a medication error is made by a certified personnel, they *have not* safely performed health-related activities or administered prescribed medication.
* In the event med errors are discovered after the fact, they still need to be notated on the personnel’s certificate. They should be notated separately, but it would be up to the people involved/circumstances to determine how to notate them
* Providers should not “save up” medication errors for notation at a later time.

If you have specific questions about MAIS or medication error notations: you can contact DODD at this email address ma.database@dodd.ohio.gov