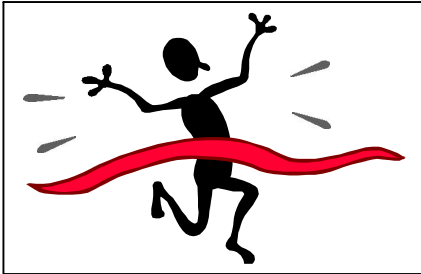


# Self Medication / Self-Medication With Assistance

## Self - Medication

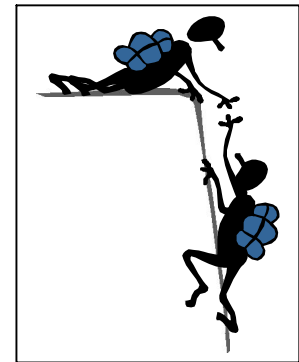


Each individual has the right, if capable, to self-medicate or self-medicate with assistance. A self-medication assessment should be completed as mentioned in OAC 5123:2-6-02. The self-medication assessment should be completed prior to the completion of the service plan. The result should be included as part of that plan.

## Self - Medication with Assistance

When assessing the client. It is important to be sure that the client is proficient in manipulation of the delivery mode (bottle vs blister pack) and able to take the medicine in the way it is to be taken (swallowed whole vs split in half or crushed).

It is entirely possible for the client to be proficient in the use of one delivery mode, but not another. We cannot assume that the client's skill to self medicate automatically transfers across modes of delivery or ways of taking the medication.



Each time the medication delivery mode changes or the manner in which the medication is taken changes, the client must be reassessed to be sure he or she can correctly self-administer. **Examples of changes can include, but are not limited to:**

- ◆ Going from a container with a lid to a blister pack or vice versa
- ◆ Going from a solid to be swallowed to a liquid to be measured or vice versa
- ◆ Going from a solid to be swallowed to a solid to be dissolved in the mouth
- ◆ Going from a tablet to be swallowed to a medicine that must be injected
- ◆ Going from a whole pill to a half pill
- ◆ Going from a whole pill to crushing the pill and mixing in water or applesauce
- ◆ Going from taking the med with food to taking 1 hour before or 2 hrs after eating

A Self Administration Tool is found on page 87. This tool is easy to use and directions are found on the page immediately after the tool. This tool is used to assess the client's ability to self medicate with or without assistance. It is not meant to be used with the ODDP which is used for funding purposes.

## Introduction to Completion of Self-Administration Assessment

The purpose of the Self-Administration Assessment is to ensure that the client is able to **SAFELY** accomplish medication administration and health-related activities. Every client with developmental disabilities (DD) has the right to self-administer their medications. The CB and the service provider are responsible for the safety of the individual with DD.

### **When it is determined a Self – Administration Assessment is needed:**

Consider the client's safety. If on occasion the client cannot safely self administer medications (e.g. ◀ client experiences an episode of mental illness, ◀ client becomes physically ill, ◀ client goes to a new environment and cannot transfer skills to the new environment right away), **certified** staff will need to provide assistance or medicate the client during those times. When the client is able, he or she can self medicate as indicated in the ISP.

The self administration assessment needs to be completed at a minimum of every 3 years, with a review done annually. A new assessment will be completed in the event of (but not limited to) the following occurrences:

- The needs of the individual changes
- The medication packaging changes (ie. bubble pack to bottle; pill to liquid, etc)
- There is a change in the usual medication routine (new location, new provider)

### **Where to complete the assessment**

Complete the assessment in the setting where the client takes his / her medications or receives medication administration. This is to determine if the client is able to safely take their medications in their own environment.

### **Using the form**

Answer each question on the form. Questions are answered with a "Yes" or "No." Follow the instructions on the form to determine where to go following a "Yes" or "No" response.

### **Processing the Assessment results**

Once the assessment is completed, the Individual's Service Plan should specify how medication administration will be done. See the form for statements that could be used. Check the appropriate statements to include in the ISP.

### **Other**

Remember, clients have the right to do as many steps of the medication administration as that can do either independently or with support, even if they are not assessed to be able to self-administer with or without assistance (5123: 2-6-02 (C)).

### **Medication(s) assessed at this time:**

Attach another page if there is not enough space on the form to record meds or attach a copy of the MAR. Multiple Self-Administration Assessments may be used for an individual.

For example, if a client requires certified staff assistance due to multiple medications at 8am but can self – administer 1 medication at 12N, or can use the glucometer, separate Self –Administration forms must be used and should be included in the ISP.

### **Reviewed by (May be other than those completing Self Administration Assessment Form):**

- ◆ If the client has a SSA, the SSA should review the results and make the applicable indications on the IP.
- ◆ If nursing delegation is used, the nurse should view and sign the assessment. If a nurse is not available, Indicate with N/A. Nursing delegation may not be needed in all situations.
- ◆ The Med Administration course is a training for DD personnel and does not constitute authorization, or delegation from the RN teaching the course.

If two people do not agree with the assessment, a third party should be consulted. If an agreement cannot be determined, the DODD representative should be consulted.

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