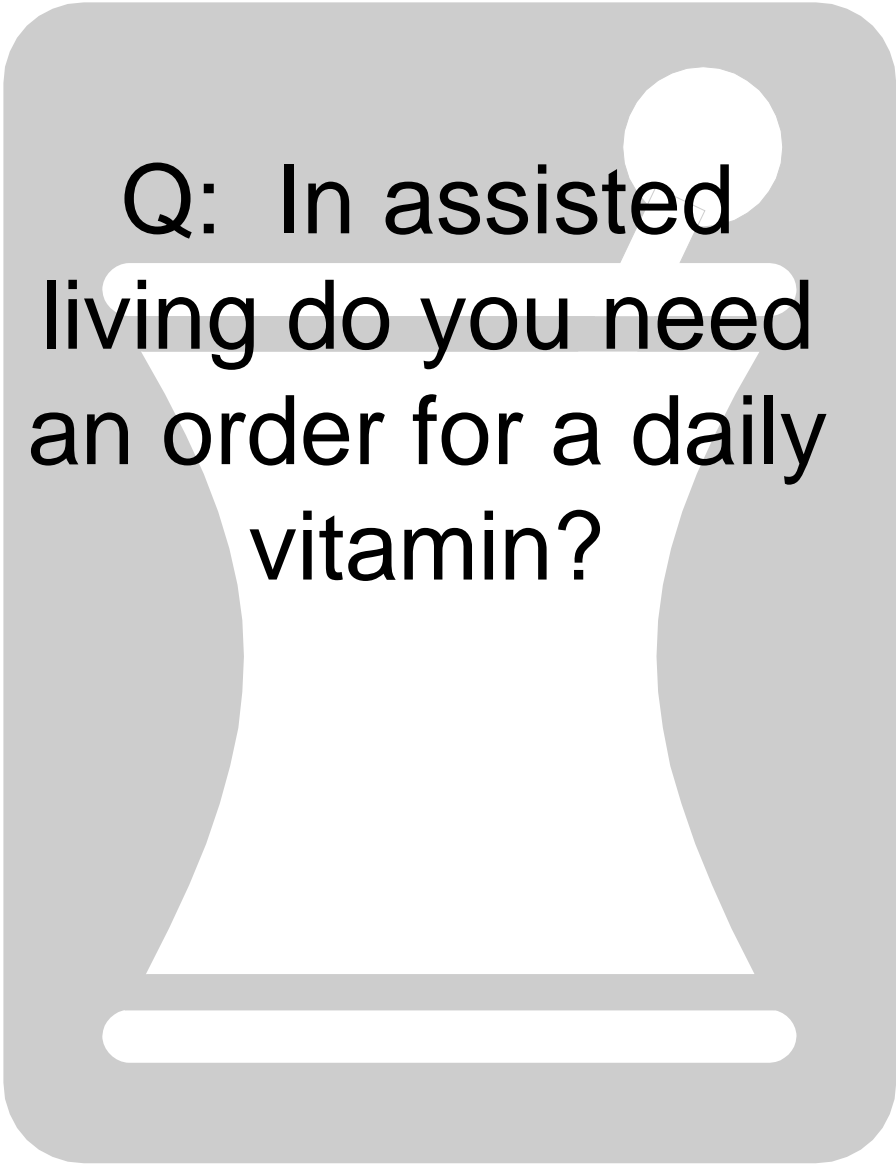


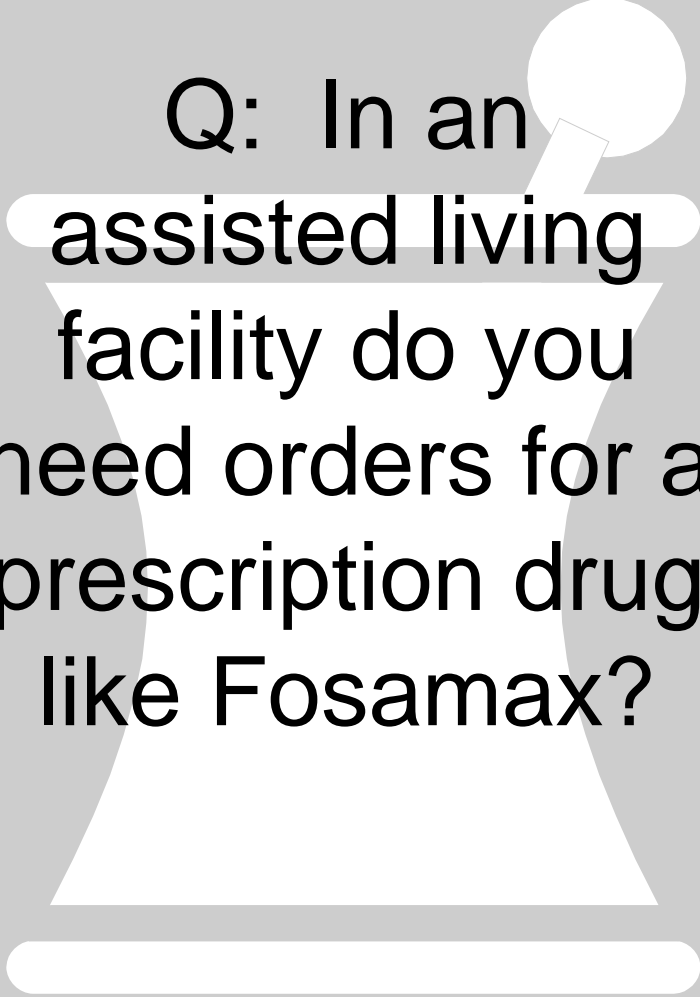
# Pharmacy Q&A for Assisted Living

The following is a powerpoint containing Q&A that has come up in provider and surveyor training.



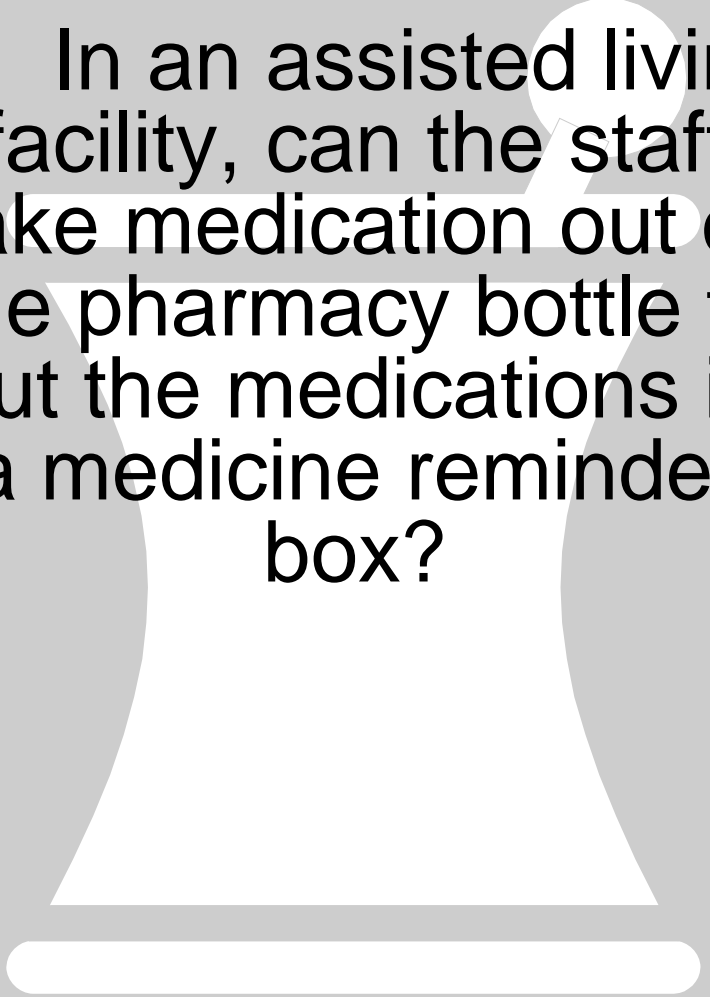
**Q: In assisted living do you need an order for a daily vitamin?**

A: In all assisted living facilities, prescription medications need a prescription order somewhere. For over-the-counter products like vitamins, some assisted living facilities will need an order. DQA Memo 04-026 (Physician Orders and Medications) answers some of those specifics.



Q: In an assisted living facility do you need orders for a prescription drug like Fosamax?

A: In all assisted living facilities, prescription medications need a prescription order somewhere. For over-the-counter products like vitamins, some assisted living facilities will need an order. DQA Memo 04-026 (Physician Orders and Medications) answers some of those specifics.



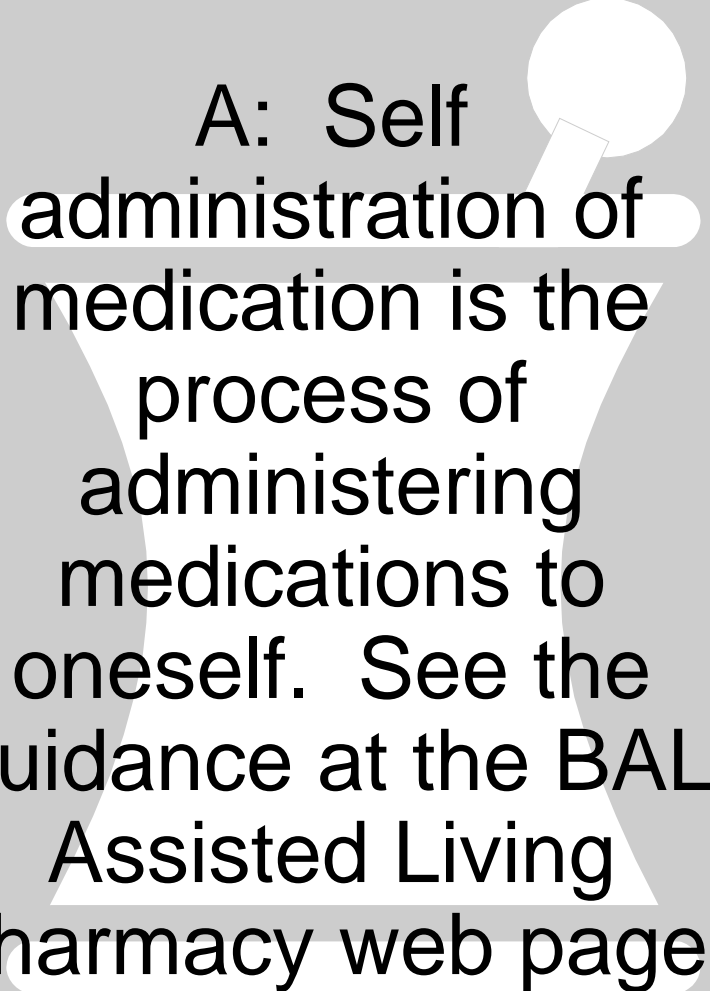
Q: In an assisted living facility, can the staff take medication out of the pharmacy bottle to put the medications in a medicine reminder box?

A: This is repackaging or medication set up. This is when someone takes medication out of the package provided by pharmacy and placed in another form of packaging like medication boxes.

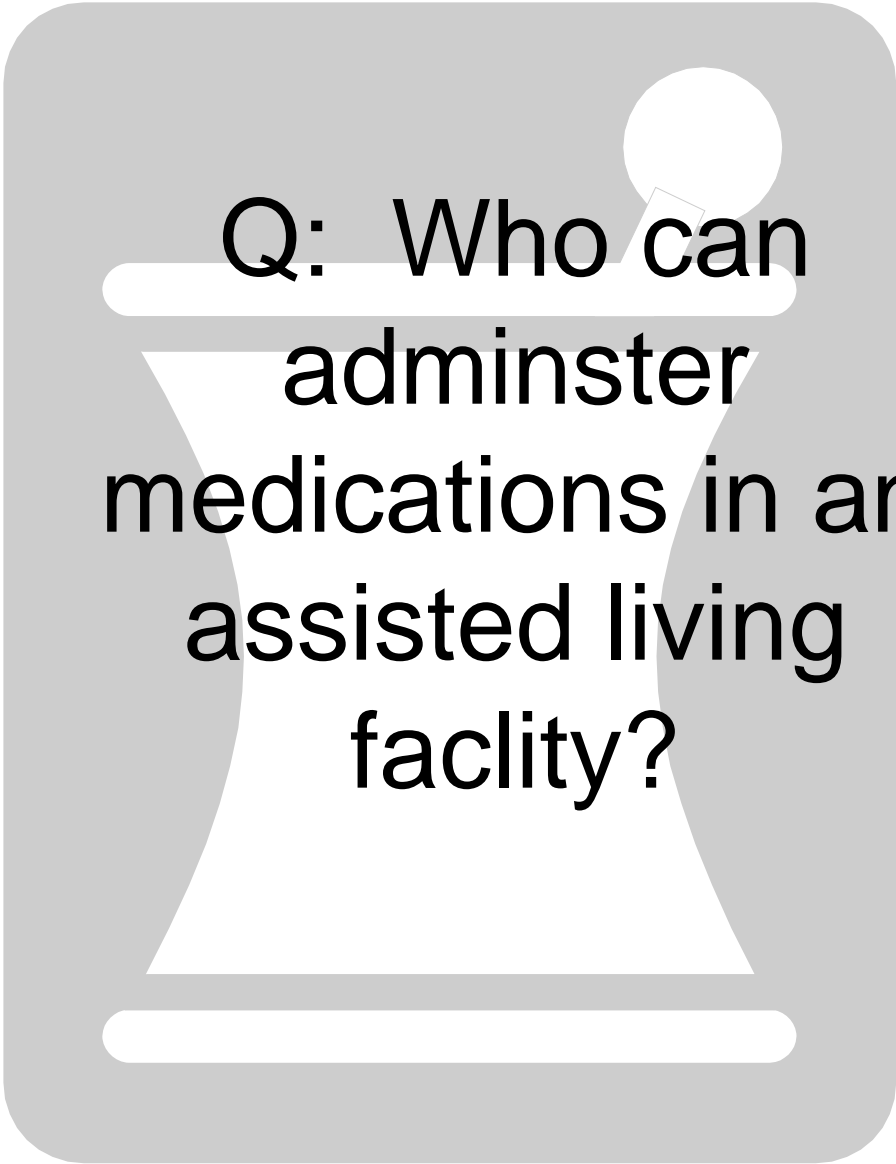
DQA Memo 04-006  
(Medication Set Up in Assisted Living) answers this question specific to your facility type.



**Q: What is self  
administration?**



A: Self administration of medication is the process of administering medications to oneself. See the guidance at the BAL Assisted Living Pharmacy web page.



**Q: Who can  
administer  
medications in an  
assisted living  
facility?**



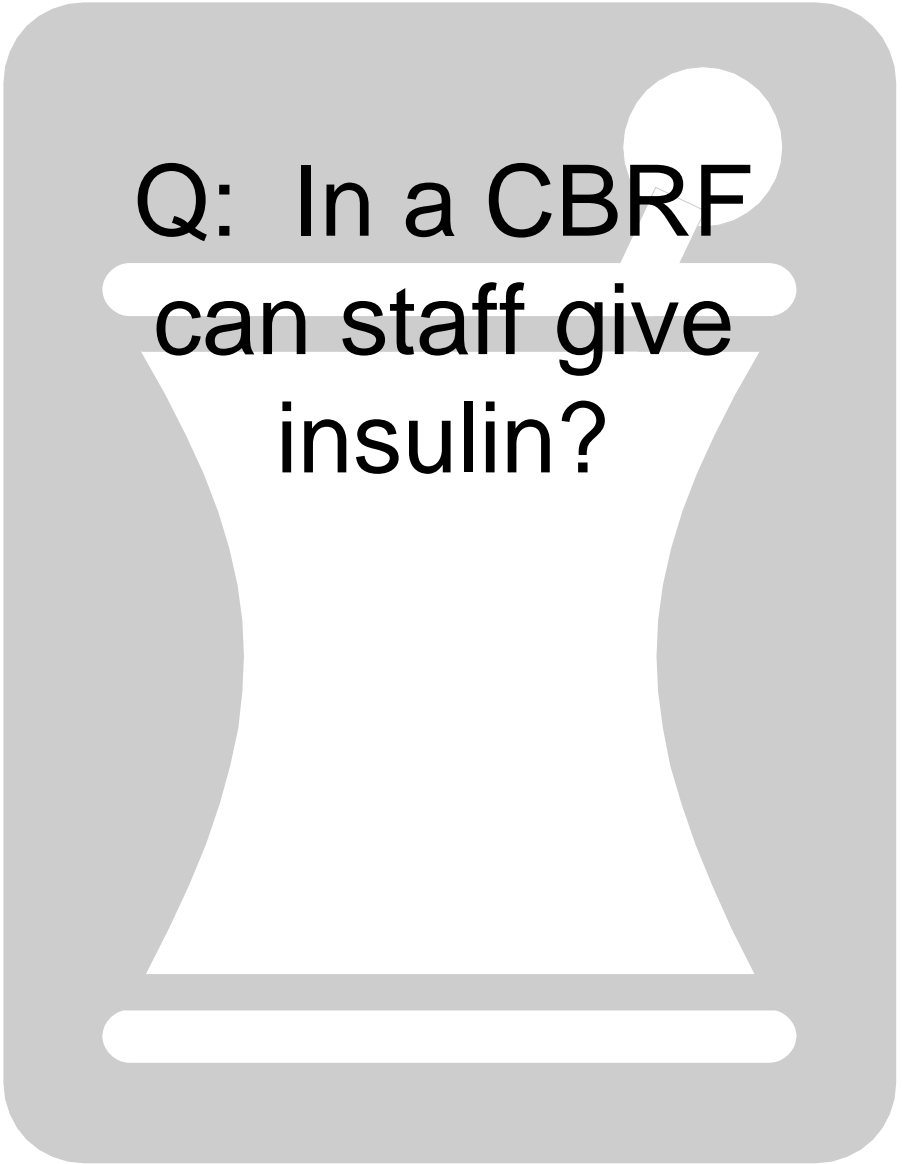
A:

ADC - Staff defined by policy can administer medications.

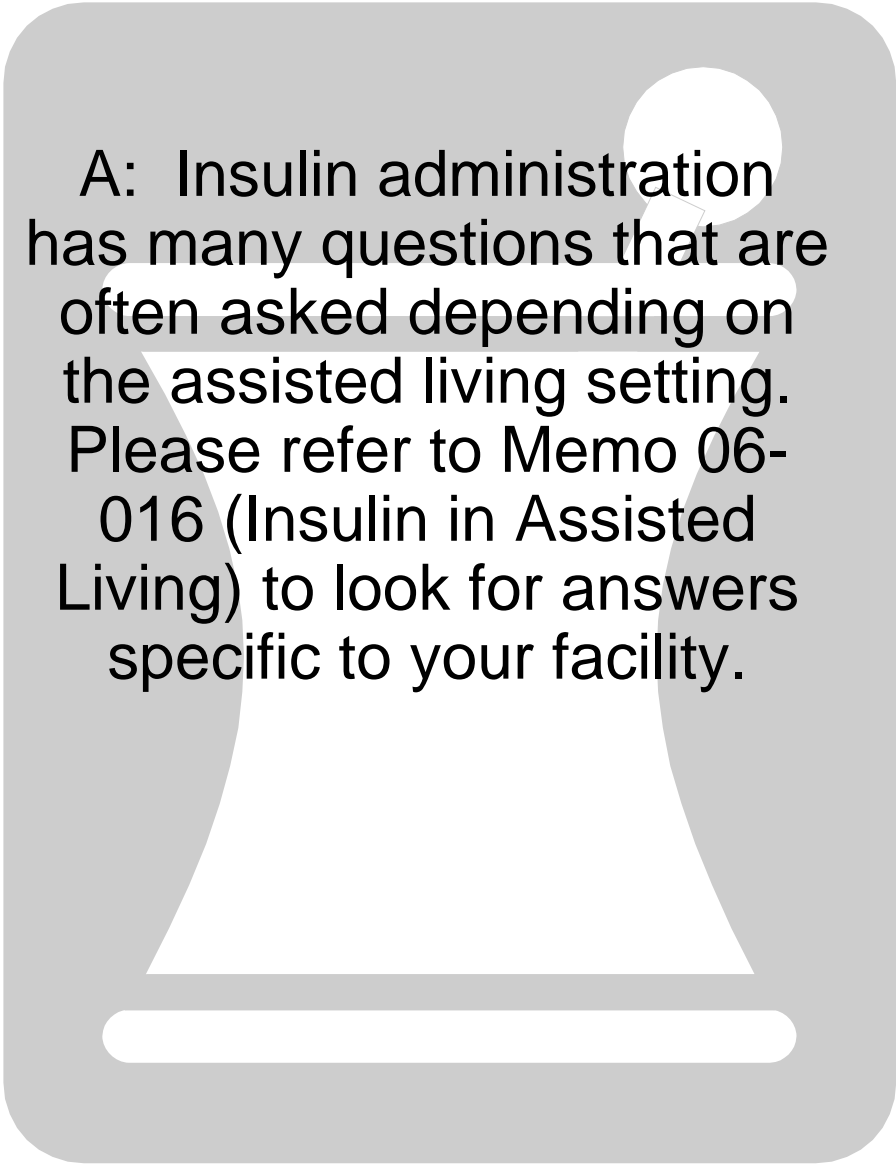
AFH – Staff may administer medications per physician order.

CBRF – Staff who has taken the required medication training can administer medications.

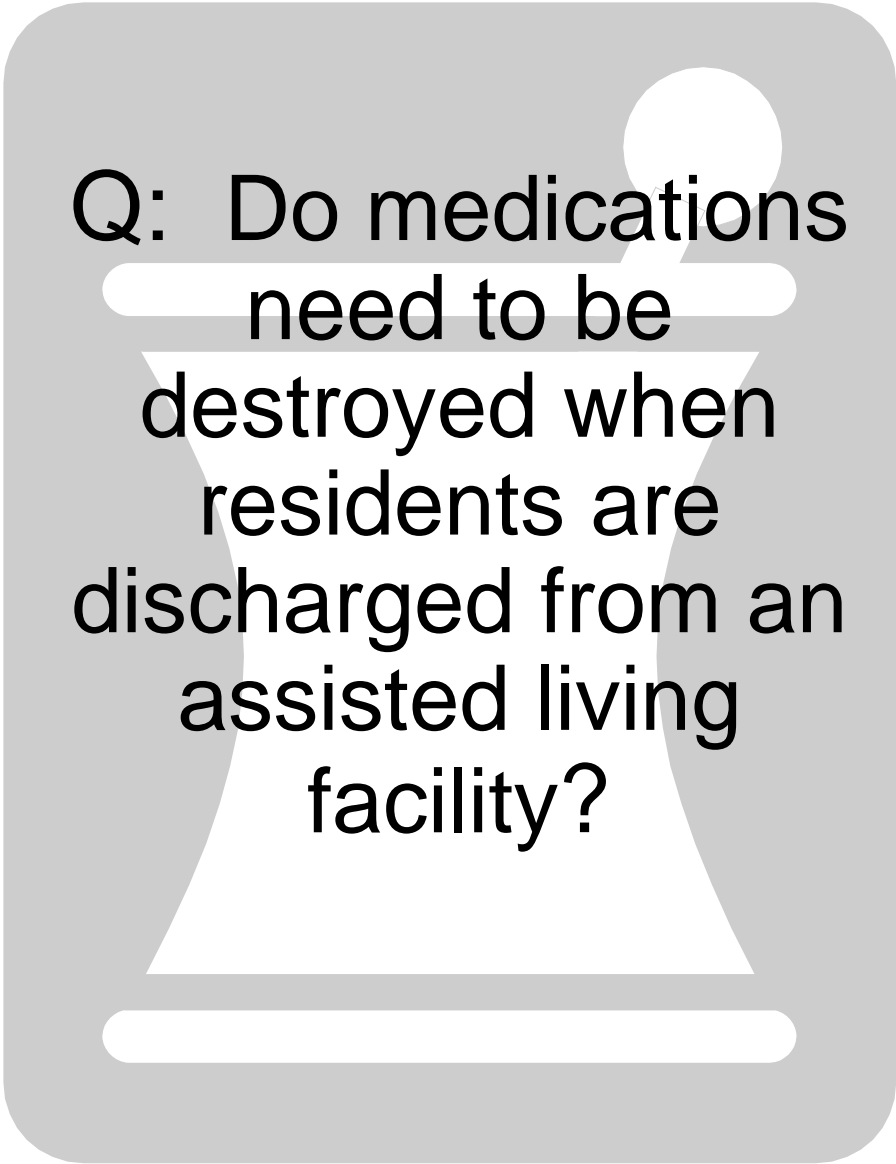
RCAC – Staff may administer medications pursuant to RN delegation.



**Q: In a CBRF  
can staff give  
insulin?**



A: Insulin administration has many questions that are often asked depending on the assisted living setting. Please refer to Memo 06-016 (Insulin in Assisted Living) to look for answers specific to your facility.

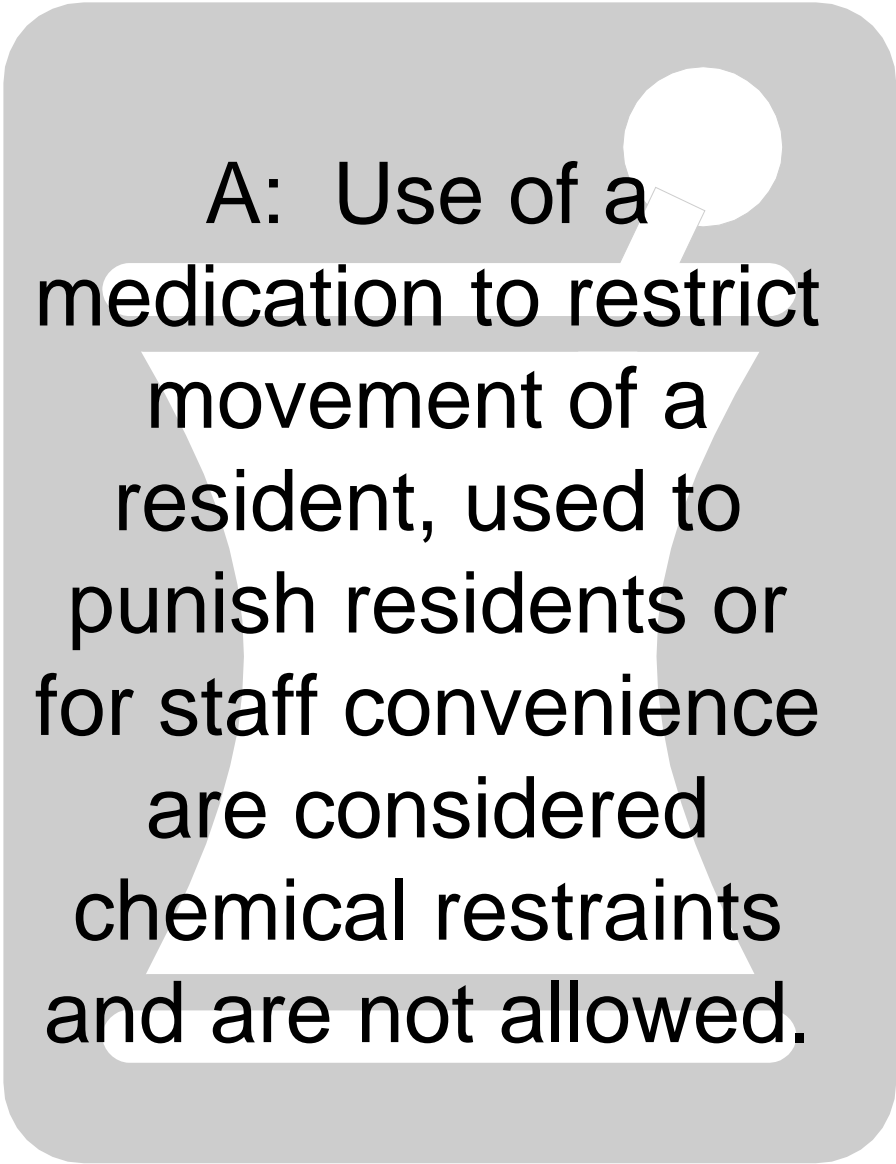


**Q: Do medications  
need to be  
destroyed when  
residents are  
discharged from an  
assisted living  
facility?**

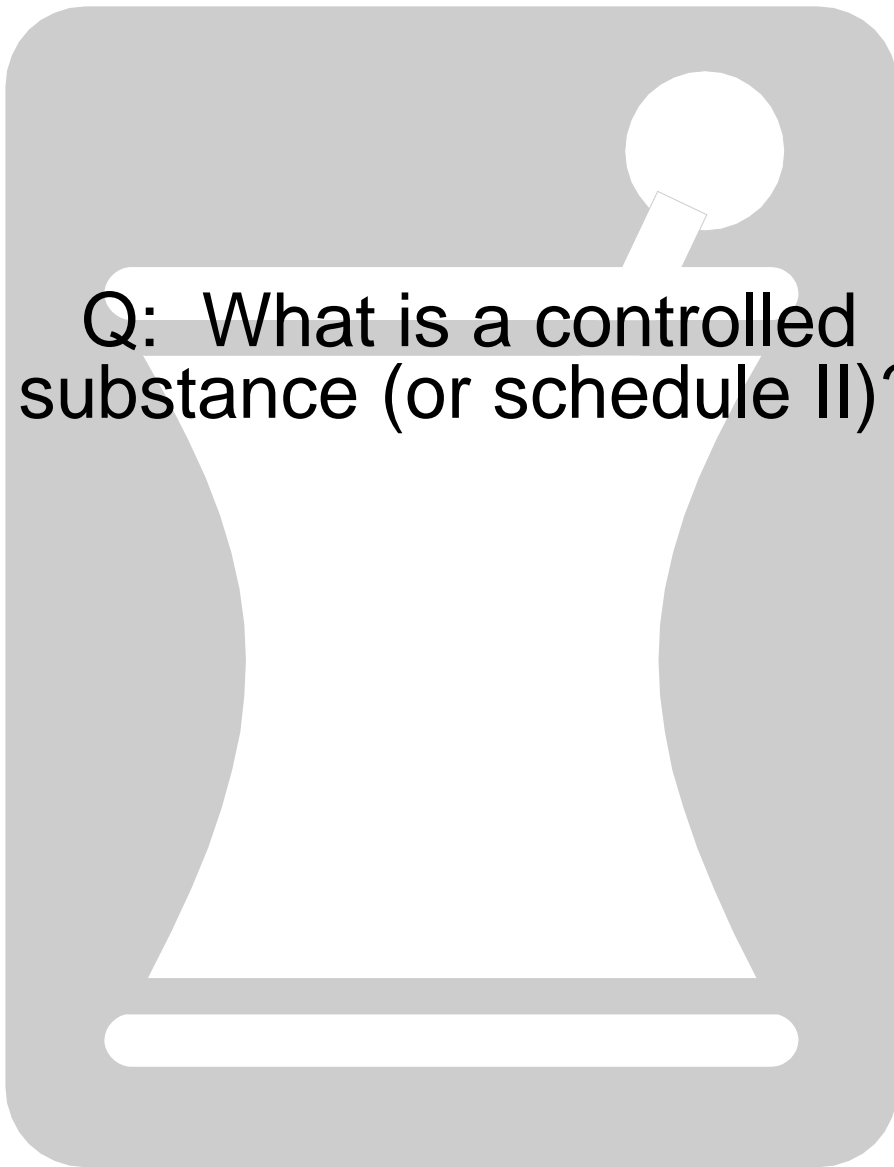
A: Refer to DQA  
Memos 05-003  
(Destruction of  
Medication) and 07-  
008 (Medication  
Returned, Donation,  
and Disposal.)

A large, light grey rounded square background contains a white question mark icon. The question mark is composed of a circular top and a vertical stem that ends in a small hook. The text is centered over the question mark.

**Q: What is a  
chemical restraint?**

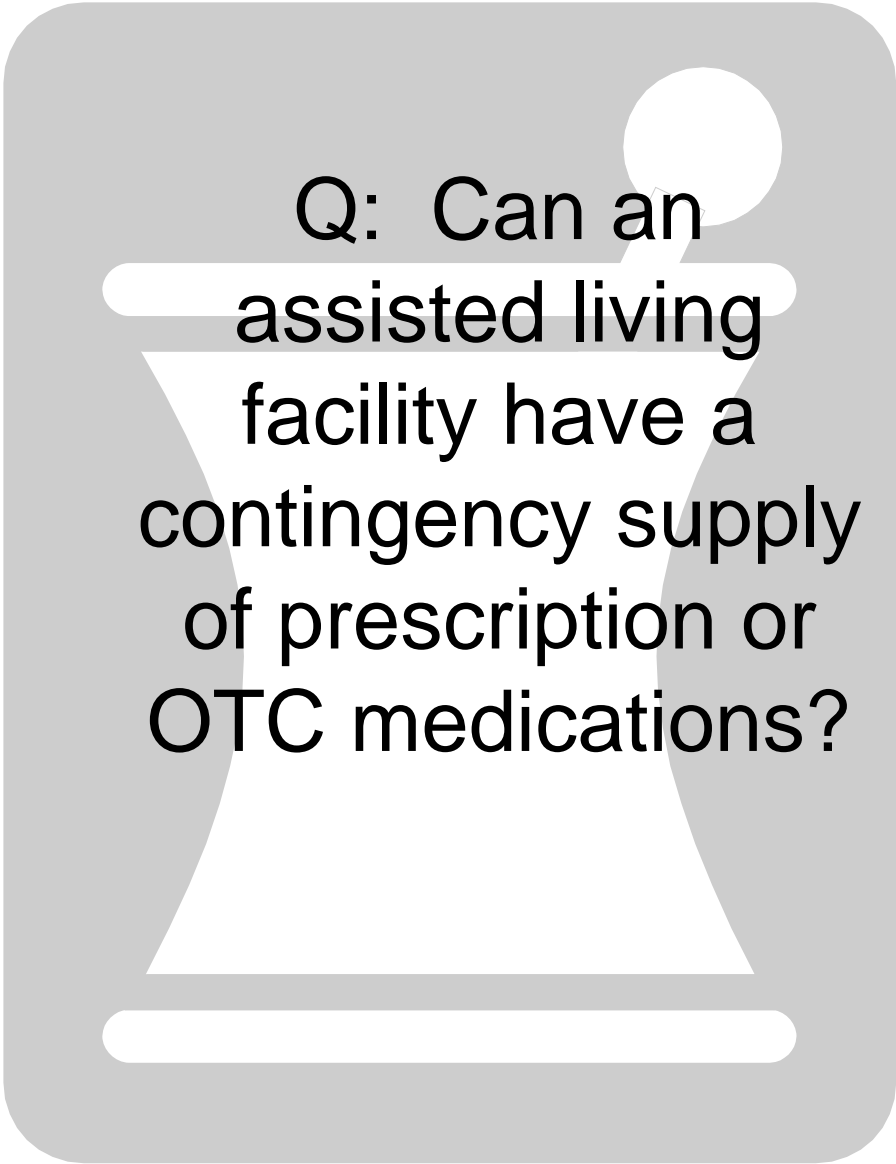


A: Use of a medication to restrict movement of a resident, used to punish residents or for staff convenience are considered chemical restraints and are not allowed.



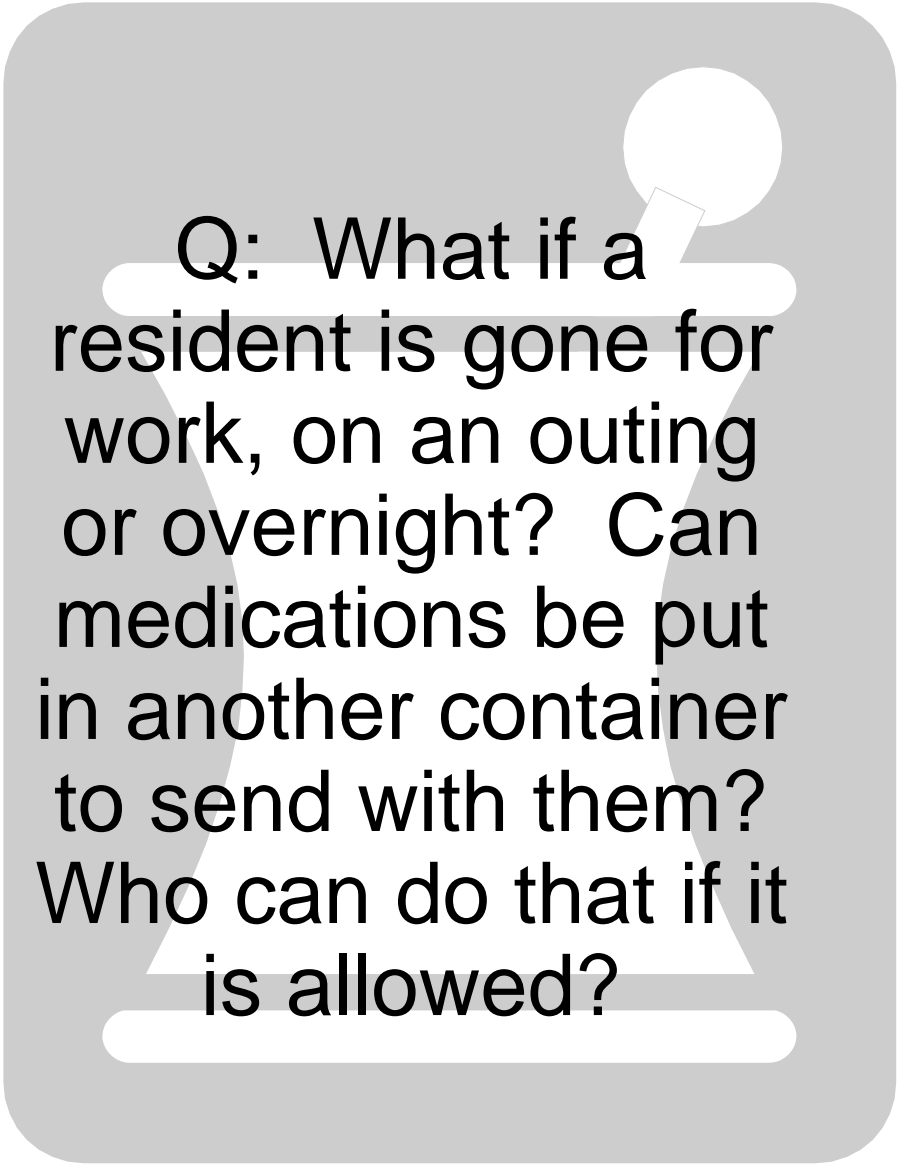
Q: What is a controlled substance (or schedule II)?

A: A controlled substance or schedule II refers controlled medications. The Drug Enforcement Administration labels medications at schedule I, II, III, IV and V. Each level corresponds to the potential for the medication to be abused. Schedule II medications typically require special handling in some assisted living facilities.



**Q: Can an assisted living facility have a contingency supply of prescription or OTC medications?**

A: A contingency supply for prescription medications is not allowed for any assisted living types. In some cases for over-the-counter medications there may be some facility situations where a stock supply of tylenol or other OTC medications may be used.



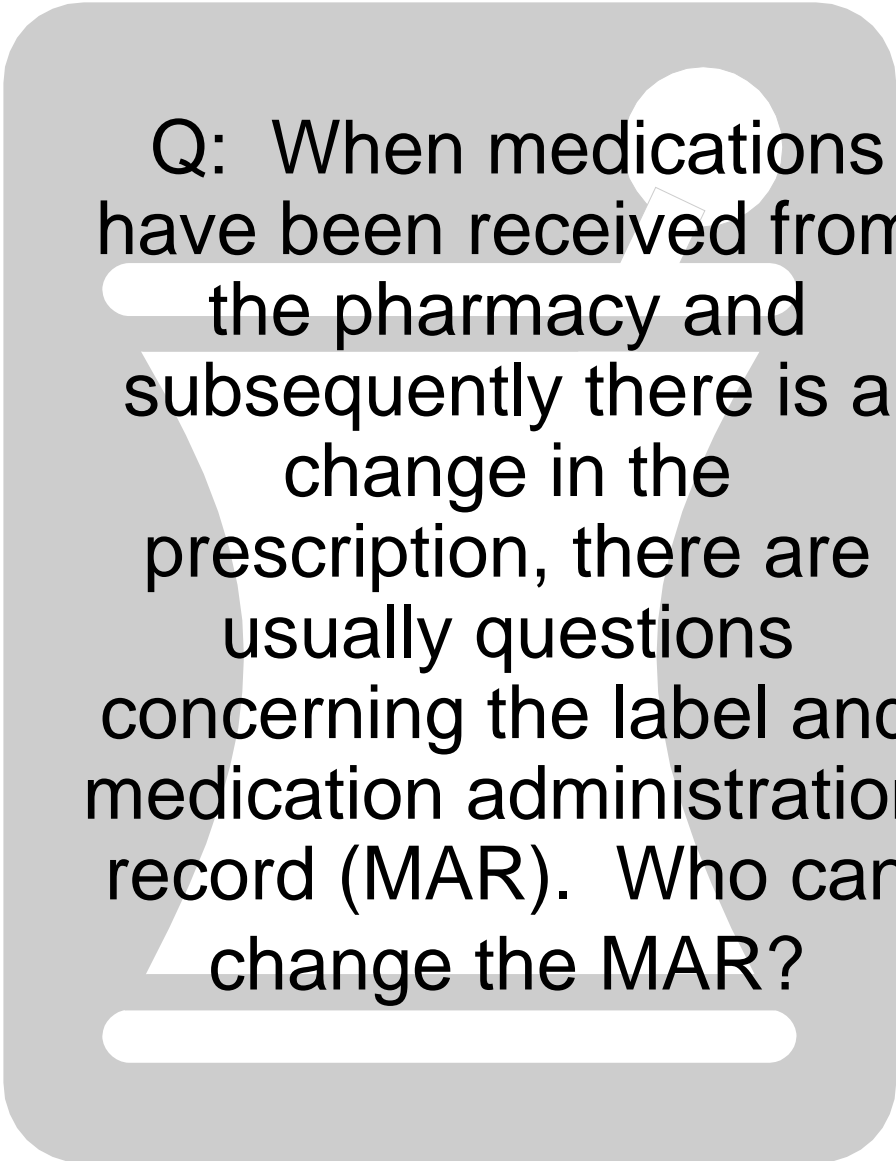
Q: What if a resident is gone for work, on an outing or overnight? Can medications be put in another container to send with them? Who can do that if it is allowed?

A: When residents leave facilities decisions need to be made about sending medications with them. In some cases medications may need to be repackaged. See DQA Memo 04-006 (Medication Set Up in Assisted Living) for information on repackaging.

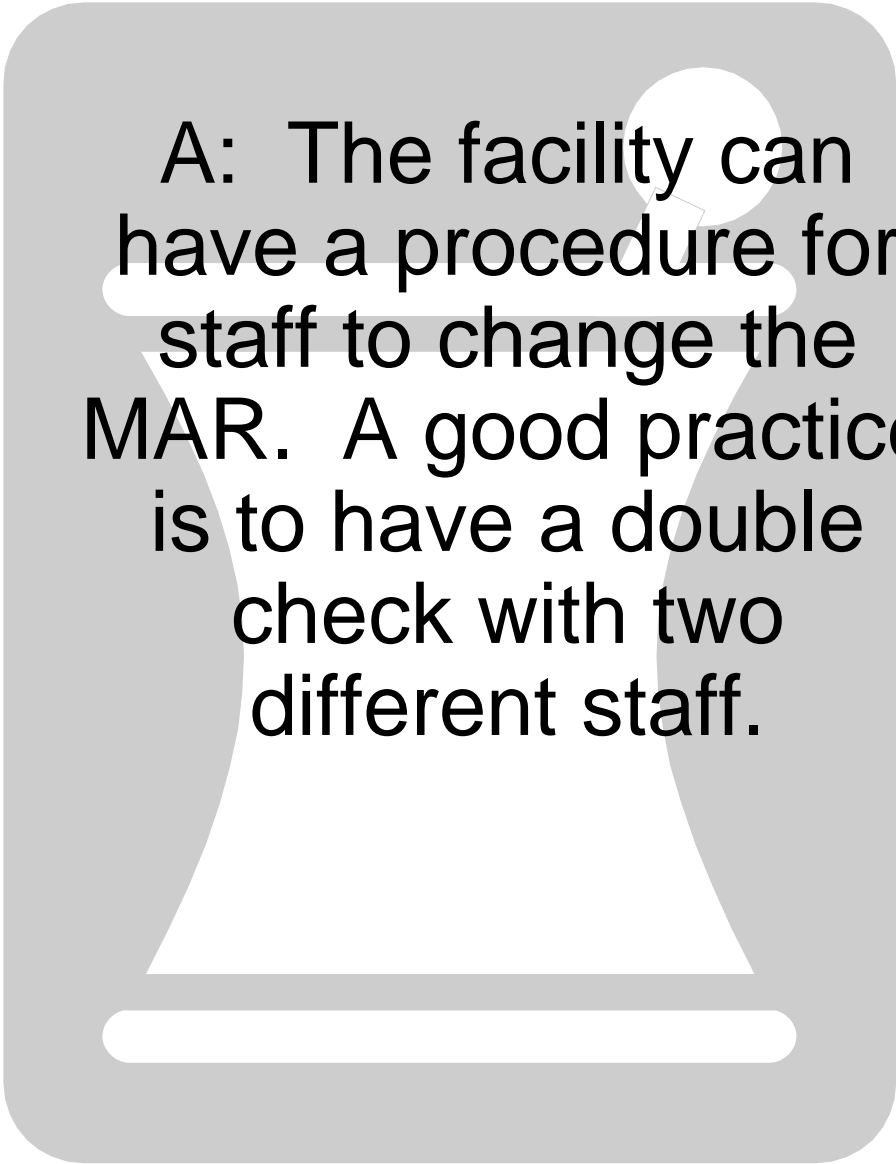
Q: When medications have been received from the pharmacy and subsequently there is a change in the prescription, there are usually questions concerning the label and medication administration record (MAR). Who can change the label?

A: Label changes to a pharmacy label need to be made by the pharmacy.

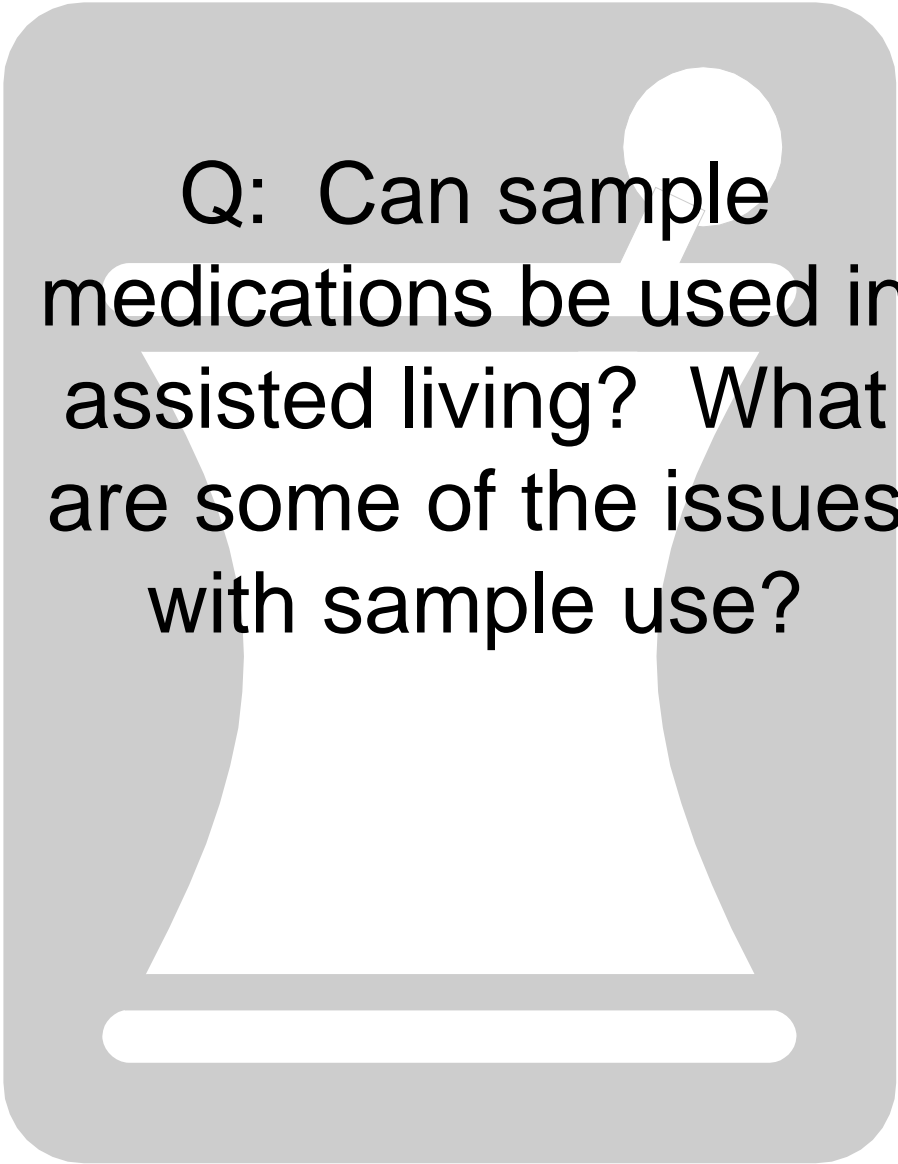
However, if a new supply of medication will be coming within 30 days, the facility may decide to have a procedure in place to inform staff that the medication label is incorrect and staff should look at the order or MAR instead. Ways to accomplish this include highlighting the label or placing a void label on the package, etc.



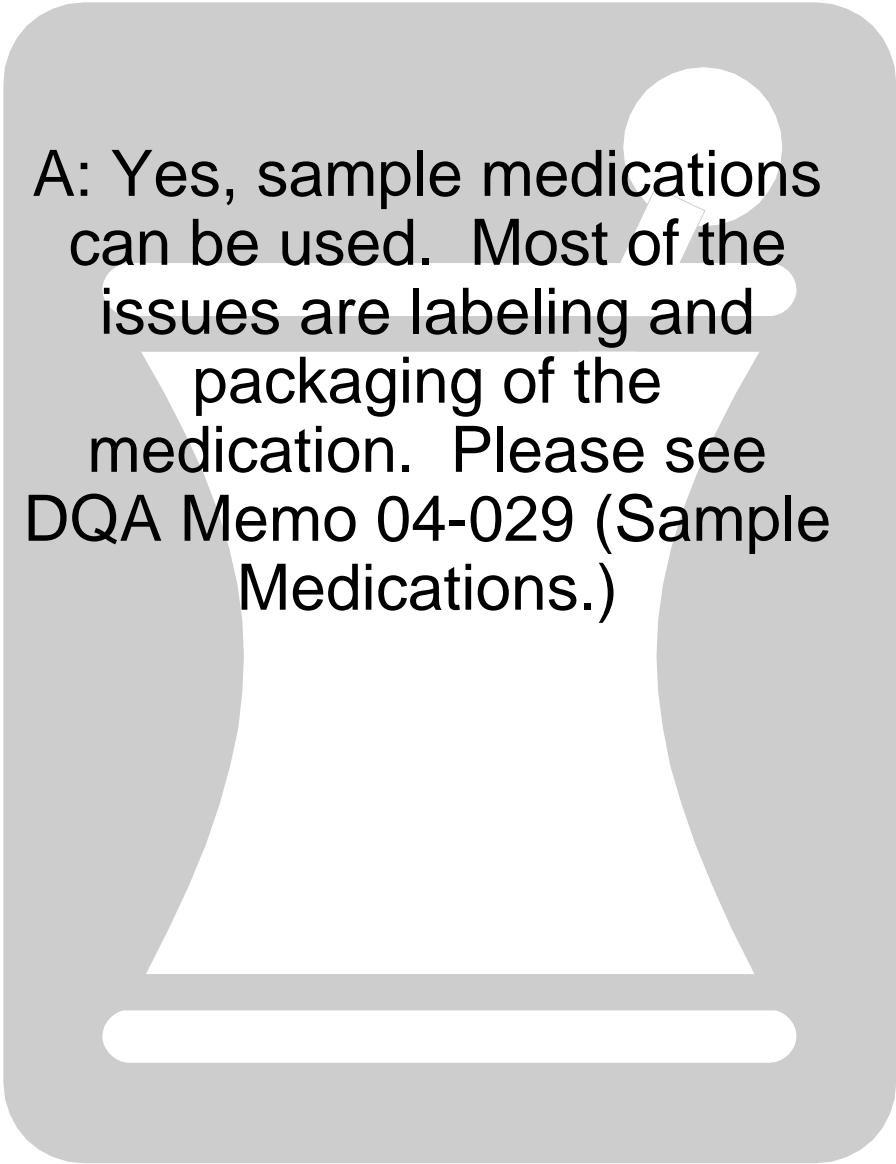
Q: When medications have been received from the pharmacy and subsequently there is a change in the prescription, there are usually questions concerning the label and medication administration record (MAR). Who can change the MAR?



A: The facility can have a procedure for staff to change the MAR. A good practice is to have a double check with two different staff.



Q: Can sample medications be used in assisted living? What are some of the issues with sample use?



A: Yes, sample medications can be used. Most of the issues are labeling and packaging of the medication. Please see DQA Memo 04-029 (Sample Medications.)