



**MONTANA STATE HOSPITAL  
MENTAL HEALTH GROUP HOME  
POLICY AND PROCEDURE**

**MEDICATION MANAGEMENT AND SELF  
ADMINISTRATION -- MSH MENTAL HEALTH GROUP HOME**

**Effective Date:** April 17, 2019

**Policy:** MSH MHGH-05

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- I. PURPOSE:** To ensure the safe handling, proper administration/self-administration and documentation of medications. To prepare residents for discharge from Montana State Hospital (MSH) Mental Health Group Home (MHGH) by increasing their level of knowledge related to their prescribed medication and enhancing their skills/abilities to responsibly self-administer medication, discuss medication related issues with health care providers and to obtain medication prescriptions/refills from the pharmacy.
- II. POLICY:** MSH has the responsibility to provide each resident, consistent with their abilities, medication education and to ensure the safe handling and storage of medications. MSH is responsible for assessment and documentation of the effects/side effects of prescribed medications.
- III. DEFINITIONS:** None.
- IV. RESPONSIBILITIES:**
- A. Licensed Independent Practitioner:
1. Assessment/evaluation of patient medication efficacy every 90 days or more frequently if warranted.
  2. Written orders/prescriptions for medication.
  3. Consultation with Medical Clinic Licensed Independent Practitioner as needed regarding non-psychiatric medication and treatment.
- B. Licensed Nursing Staff:
1. Receive and transcribe Licensed Independent Practitioners' orders.
  2. Supervise resident setting up own medication box and approve medication box as set up by the resident.
  3. Observe and report medication side effects, adverse reactions, efficacy, and administration adherence.
  4. Conduct medication education groups.
  5. Report and record medication education.
  6. Ensure the level of medication management/self administration is defined on the resident's treatment plan.

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7. Educate MHGH staff in observing for and reporting side effects and adverse reactions.
8. When scheduled nurse is unavailable, the house supervisor will be notified for requested PRN administration.
9. Documenting and reporting any medication errors.

#### C. MSH MHGH staff:

1. Prompt and observe resident self-administration of medications.
2. Report medication adherence.
3. Observe medication boxes to determine if medications are present.
4. Observe and report effects and side effects of medications.
5. Assist with medication education.

#### D. Pharmacy:

1. Provide medication education information.
2. Dispense medication.

## V. PROCEDURES:

#### A. Self-Administration of Medication:

1. Resident will complete medication education/self-administration classes prior to transfer to the MSH MHGH. These classes will include education about the effects, side effects, contraindications and principles of medication management and safe handling.
2. Licensed Nurse providing medication education classes, in conjunction with the resident and treatment team, will determine resident's capability in regard to established levels of medication management upon transfer to the MSH MHGH.
3. Licensed Nurse, in conjunction with the treatment team, will periodically assess the resident to ensure the resident is at the highest level of medication management consistent with their abilities.

#### B. Administration of Medications (setting up med boxes):

1. All residents of MSH MHGHs will demonstrate the ability to set up self-medication under the supervision of a licensed nurse.

#### C. Documentation and Reporting:

1. All resident education will be documented in the progress notes.
2. A Medication Administration Record (MAR) will be maintained for each resident which will include all prescribed medications, documentation of medication doses administered/self-administered. In the event a medication is

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not taken the reason for omission of the scheduled dose will be documented on the MAR.

3. Transcription of the Licensed Independent Practitioners' orders and documentation on the MAR will be in accordance with established MSH guidelines.
4. The resident's response to medications, including effects and side effects, will be documented in the progress notes.
5. All medication errors and adverse drug reactions will be reported and recorded in accordance with established MSH policy/procedure.

### D. Medication management assessment:

1. The Licensed Independent Practitioner will meet with each resident every 90 days and more frequently as warranted to discuss/assess the need for medication adjustments and/or new medication prescriptions.
2. A licensed nurse will meet with each resident no less than weekly and more frequently as warranted to discuss/assess their response to and the effects/side effects of prescribed medications and to assist with self medication set-up. The licensed nurse will communicate all pertinent information to the Licensed Independent Practitioner.
3. Each resident will be observed/monitored daily by the staff assigned to the MSH MHGH for effects/side effects of prescribed medications, and staff will report pertinent information to the assigned licensed nurse.
4. The MSH MHGH staff will contact the assigned licensed nurse, program manager, or nursing house supervisor to report any unusual behavior, symptoms of physical illness, increased symptoms of mental illness or potential side effects of medications. The licensed nurse will assess the resident and make the decision to notify the licensed Independent Practitioner when necessary.

### E. Storage and safe handling:

1. All medications will be kept in a locked secured area in the MSH MHGH.
2. All medications requiring refrigeration will be stored in a locked area of a refrigerator segregated from all food items. The refrigerator temperature will be monitored and recorded daily by the unit staff as assigned.
3. All medication is dispensed by the pharmacy weekly in bubble packs. Medication removed from bubble packs will be appropriately placed in medication organizers by the resident under the supervision of a licensed nurse.

## VI. REFERENCES: MSH Policies: PH-10, Adverse Drug Reaction Reporting, NS-02, Medication Administration & Safe Handling; the MSH Medication Manual; and Administrative Rules of Montana, Mental Health Center: Medication Management 37.106.1950.

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- VII. COLLABORATED WITH:** Hospital Administrator, Medical Director, Director of Clinical Services, Director of Nursing, Director of Quality Improvement, and MSH MHGH Program Manager.
- VIII. RESCISSIONS:** MHGH-05, Medication Management and Self-Administration dated December 9, 2015; TCU-05, *Medication Management and Self-Administration – Transitional Care Unit* date November 20, 2013; TCU-05, *Medication Management and Self-Administration – Transitional Care Unit* dated November 7, 2011; TCU-05, *Medication Management and Self Administration – Transitional Care Unit* dated April 9, 2009; TCU-05, *Medication Management & Self Administration – TCU* dated January 18, 2006; TCU-05, *Medication Management & Self Administration – TCU* dated January 10, 2003; H.O.P.P. TCU-05-99-N, Medication Management and Self Administration – Transitional Care Unit dated July 28, 1999.
- IX. DISTRIBUTION:** MSH Electronic Policy and Procedure Manual and MSH Website <https://dphhs.mt.gov/amdd/MSH>.
- X. ANNUAL REVIEW AND AUTHORIZATION:** This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per ARM § 37-106-330.
- XI. FOLLOW-UP RESPONSIBILITY:** Program Manager of the Montana State Hospital Mental Health Group Homes.
- XII. ATTACHMENTS:** None.

Signatures:

Kyle Fouts  
Interim Hospital Administrator

Thomas Gray, MD  
Medical Director