Section C

Legal and Ethical Responsibilities

Section C Legal and Ethical Responsibilities

Objectives:

At the completion of this section of study, the student should:

- 1. Recognize legal implications of negligence, fraud and diversion.
- 2. Recognize issues around medication administration errors.
- 3. Explain the resident's rights to privacy, confidentiality and refusal.

Advance Preparation – In General

- Review curriculum
- Add examples or comments
- Make copies of student manual for each student

Supplies

- Handouts
 - o C-1 Medication Errors
 - o C-2 Good Medication Administration Practice Habits
 - C-3 Resident's Refusal to Take Medications

NOTE:

Medication aides may be faced with making decisions about the consequences of an action or behavior. Some decisions involve the moral right or wrong of an action. Others involve the legality of the action. At times decisions may have both ethical and legal implications. Medication Aides should have the knowledge to make sound decisions about a particular action or behavior.

Refer to the handouts and the content for Section C for discussion of definitions, medication errors, resident's rights and legal implications.

Section C – Legal and Ethical Content

Legal and Ethical Standards

- Ethical standards are guides to moral behavior
 - An example would be every person deserves respect and every person has her/his own beliefs
- Legal Standards are guides to legal behavior
 - An example is performing her/his job according to the facility policy and state regulations

Legal Implications

Negligence

- When a person does not provide the standard of care that a person trained in the same way would do in a certain situation
- Example failing to give medications that have been ordered and transcribed onto the MAR
- Remember
 - We, as citizens of the United States, have certain rights
 - o Additionally, there are resident rights, which include being free from neglect

Fraud

- When a person is dishonest or cheats the system
- Misrepresentation of any aspect of the job
- Possible disciplinary action by the facility and may involve legal charges
- Example if a medication is documented as having been administered, but was not administered

Diversion

- Knowingly giving a medication to someone other than the resident the medication was prescribed for, but documenting that the medication was given to the right resident
- Stealing medications
- Never give medications to people whom the medications are not intended for, even when it seems harmless

- Subject to disciplinary action and may involve legal charges
- Examples
 - If the Medication Aide takes medication intended for a resident and uses it for any other reason
 - Giving a resident's pain medication to a co-worker who has shoulder pain

HANDOUT: C-1 Medication Errors

Distribute the handout or locate in the Student Manual. Discuss the information on the handout and below and the importance of reporting when a medication error is discovered.

Medication Errors

- **Definition:** when a medication is administered in any way other than how it was prescribed; administering a medication that is not prescribed for a resident is also a medication error
- When the Medication Aide does not transcribe a physician's orders correctly, does not compare the instructions on the medication administration record (MAR), and the directions on the bottle, or the approved ways to administer the medication an error may occur
- Medication errors often have serious outcomes
- Administering medications carries a great responsibility including a need for being extremely careful and methodical
- Mistakes in giving medications are one of the most common causes of harm to residents under the care of others
- Giving the medication to the wrong resident can be a dangerous error
- Potentially serious types of errors that can occur and cause harm to the resident or residents include
 - \circ $\;$ Giving a medication to the wrong resident
 - Giving a medication at the incorrect time
 - o Omitting a dose
 - Giving the wrong dosage
 - Giving an extra dose
 - Giving a medication by the wrong route
 - Giving the wrong medication
 - o Or giving an expired medication

Medication Administration – March 2021 10/15-Hour Training Course for Adult Care Homes

- Medication Aide is to report errors immediately to supervisor and/or resident's physician
- Medication Aide is to document medication errors after notifying supervisor of error
- Ways to prevent medication errors
 - o Always use the SIX Rights of medication administration
 - If the you cannot read or understand any part of the instructions on the MAR or what needs to be done to give a medication, ask supervisor before giving the medication
 - Wait to give any medication that has raised any questions or concerns until talking with supervisor or health care professional or resident's physicians; it is better to be safe than sorry
- Remember that once medication is swallowed or administered, it is too late to get it back

REMEMBER if in DOUBT – DON'T

TEACHING TIP: HANDOUT C-2 Develop Good Medication Administration Practices

Distribute the handout or refer to student manual and discuss the information in the handout on good medication administration practices. Discuss how these practices can prevent medication errors and legal issues.

Borrowing Medications

- Do not borrow medication from unit stock or another resident's medication supply, <u>unless an</u> <u>emergency</u> and your supervisor and a health care professional have been notified and directed you to borrow a medication
 - For a new medication, it would bypass the checks and balances needed, such as having the pharmacist check a new medication against what the resident is already taking to see if the new medication reacts with the medications the resident is already taking, if the medication is in the right dosage form or if there are allergies; these checks are done prior to the ordered medication being placed in the resident's medication supply
 - Your efforts to speed up the process by borrowing a medication from another resident may indeed cause costly negative effects for the resident, the facility, and yourself
 - Additionally, the resident you borrow from may not have the medications they need at the time they need them

HANDOUT: C-3 Resident's Refusal to Take Medications

Distribute the handout or locate in the Student Manual and discuss reasons a resident may refuse medications, resident's right to refuse medications or treatments, what to report, involvement of the resident's designee, responsible party or legal guardian when a resident with cognitive impairment refuses a medication.

Independence and Refusal

- Encourage all residents to be as independent and participate in their medication and treatment administration, as much as can safely be done
- Occasionally, a resident will not or cannot take a medication
 - If a medication is not administered as ordered, whether refused or not given, report to supervisor and follow facility's policy
 - If a resident chooses to refuse medications, Medication Aide documents the medication was not taken
 - There will be a place to document the missed dose either on the back of the MAR or some other designated place
 - It is important that the Medication Aide documents why the medication was not administered as ordered
- Some Medication Aides will be administering medications to residents who are mentally impaired
 - If a resident is mentally impaired, they may not understand the benefits of their medications and may refuse them
 - If a resident is not capable of making informed decisions about their medications and they refuse to take medications, seek advice from supervisor about strategies for encouraging the resident to take medications
 - Never do anything that would be considered forcing a resident to take medication
 - For residents who are not able to give consent for medication, such as an incompetent resident, the legal guardian will provide consent
 - For residents with cognitive impairment, it is important to involve the family or resident's designee when the resident refuses a medication

Medication Administration and Resident's Rights

- Respect how the resident is addressed
 - Do not interrupt a resident while eating for the administration of medications, such as oral inhalers and eye drops
 - Do not awaken resident to administer a medication that could be scheduled or administered at other times
 - \circ $\;$ Inform resident about the procedure that is about to be performed
 - Answer resident's question about medication and refer to supervisor, nurse or other health care provider when you do not know

- Refusal resident has the right to refuse medications
 - o Never force a resident to take a medication
 - Follow the facility's policy and procedure when a resident refuses medications (policy and procedure ensures that the primary physician or prescribing practitioner is notified in a timely manner based on resident's physical and mental condition and the medication)
- **Privacy** being away from the public
 - Knock on closed doors before entering
 - Do not administer medications when resident is receiving personal care or in bathroom
 - Administer injections in a private area, when a resident is outside of the resident's room
 - Do not administer medications outside the resident's room that require privacy and removal of clothing, such as vaginal and rectal administrations, dressing changes and treatments
- **Chemical restraints** means a drug that is used for discipline or convenience and not used to treat a medical symptom
 - Do not administer medications for staff convenience

Proceed to Section D