I. PURPOSE

To define the scope of practice, and ensure safe and appropriate healthcare practice rendered by Medication Technicians.

II. POLICY

(a) Prior to performing medication administration tasks, the Medication Technicians shall have:

(1) Current, unrestricted credentials, which includes being listed on the Division of Health Service Regulation Nurse Aide I (NAI) Registry and the N.C. Board of Nursing’s Nurse Aide II (NAII) registry.

(2) Completed the Division of Prisons (DOP), Health and Wellness Medication Technician training course.

(3) Successfully completed an initial competency evaluation.

(4) Completed Health Care Electronic Records for Offenders (HERO) training which includes the electronic Medication Administration Record (eMAR) documentation.
(b) The Medication Technician shall be responsible for keeping current both NAI and NAII listings with the Board of Nursing and Division of Facility Services, and certifications in Healthcare Provider Cardiopulmonary Resuscitation (CPR) in accordance with Health and Wellness policy AD – 15 Emergency Response.

(c) Medication Technicians shall perform a narrowly defined set of tasks when administering medications.

(d) Administration of medication requires verification of person, drug, dosage, route, time to be given, and documentation of time administered.

(e) Licensed nurses shall only delegate the technical components of medication administration to Medication Technicians in accordance with the N.C. Board of Nursing rules 36 NCAC.0221(b).

(f) Nursing judgment and decision-making related to when or if a medication should be administered by a Medication Technician and monitoring of the offender’s response to medications are responsibilities of the licensed nurse, and shall not be delegated to the Medication Technician.

(g) The facility nurse manager is responsible for ensuring proper supervision of Medication Technicians by licensed nurses.

(h) Medication Technicians will have access to a licensed nurse at all times, which may include the telephone triage nurse.

(i) Medication Technicians shall only administer medications in the outpatient setting. They shall not administer medications in the inpatient, infirmary, or observation bed settings.

(j) Medication Technicians shall only administer, verify, and/or monitor the subcutaneous injection of insulin.

(k) Medication Technicians shall not administer any medication via subcutaneous, intradermal (including Tuberculin Skin Test), intramuscular, or intravenous injection route.
Medication Technicians shall not obtain medications from the Starter Dose Kits, documented, or stock narcotics.

Medication Technicians shall provide support to the Medical Records Assistant.

III. PROCEDURE

(a) Health and Wellness Nursing Education Director shall be notified immediately of all Medication Technicians hired to work for DOP, Health and Wellness.

(b) For inpatient facilities, the nurse manager shall notify the facility Nurse Educator.

(c) Health and Wellness Nursing Education Director shall set up and maintain a file on the Medication Technician. The file will include:

   (1) Medication Administration Course Skills Lab Competencies and quizzes.

   (2) Medication Administration Course post-test with a minimum passing score of 90%.

   (3) Copy of the Medication Administration Initial Competency Assessment.

   (4) Copy of the Six Week evaluation of medication administration skills.

   (5) Copy of the Annual Medication Administration Competency Assessment.

   (6) Copy of the Certificate of completion.

(d) Health and Wellness Nursing Education Director shall maintain files of Medication Technicians who have left DOP employment for five (5) years.

(e) The Regional ADON/designee or facility Nurse Educator shall schedule the Medication Technician for training and inform the nurse manager and the Health and Wellness Nursing Education Director.
Prior to class, the nurse manager shall verify NAI and NAII credentials, assess the staff member’s competency skills for Vital Signs and other pre-requisites of the Medication Technician Medication Administration Course.

The ADON/designee shall assign the NAI/NAII to attend HERO training prior to attending the medication technician training course.

Once there is successful completion of the training course and examination, the Medication Technician shall return to their unit for their competency evaluation.

A registered nurse designated by the nurse manager shall assess the Med Tech’s medication administration skills by using the Medication Administration Initial Competency Assessment.

The competency evaluation is to be completed within 30 days of finishing the training course.

The competency skills must be demonstrated a total of three times over three separate days with a successful passing score of 100%.

Upon completion of the initial competency evaluation, the nurse manager shall review and verify that the Medication Technician has successfully completed the competency evaluation.

A copy of the completed Medication Administration Initial Competency Assessment is to be forwarded immediately to the Nurse Education Director or facility Nurse Educator after review by the nurse manager.

The Medication Technician shall not independently administer medications until notified by the Nurse Education Director or facility Nurse Educator.

Upon receipt of the competency evaluation, the Nurse Education Director or facility Nurse Educator shall review the Medication Technician’s competency evaluation for completion of requirements to be a Medication Technician.
(8) Health and Wellness Nursing Education Director or facility Nurse Educator shall notify the nurse manager that the Medication Technician may function independently within the guidelines of policy under the delegation of the licensed nurse.

(9) The facility Nurse Educator will forward a copy of the Medication Administration Initial Competency Assessment to the Nursing Education Director.

(9) Upon receipt of the competency evaluation, the Nursing Education Director shall issue a certificate to the Medication Technician.

(10) Training credit shall be documented in LMS (Learning Management System) by the course instructor and/or LMS administrator after successfully completing the course and competency evaluation.

(i) The Medication Technician shall complete a Post-Class competency evaluation six (6) to eight (8) weeks after the initial competency evaluation has been completed.

(j) A six (6) to eight (8) week skills competency shall be assessed by a facility registered nurse designated by the nurse manager.

(k) Remedial training shall be provided if needed. Any remedial training, including re-taking the Medication Administration Course, shall include an NCVIP entry of unsatisfactory and a work plan discussion with the staff member. A copy of the competency evaluation shall be submitted to the Nursing Education Director.

(l) Each Medication Technician shall be required to obtain at least 5 hours of continuing education or in-service training annually pertaining to medication administration-related topics.

(m) The Health and Wellness Nursing Education Director shall be responsible for ensuring educational opportunities for the Medication Technicians. Continuing education training shall be documented in LMS at the facility.
(n) Each Medication Technician shall have an annual competency evaluation of medication administration skills using the Annual Medication Administration Competency Assessment.

(o) All Medication Technicians Annual competency assessments shall be due in February, March, or April of each year.

(p) The Annual Medication Administration Competency Assessment shall be done by a facility registered nurse designated by the nurse manager. This information should be included in the employee’s annual NCVIP evaluation.

(q) A copy of the Annual Medication Administration Competency Assessment shall be submitted to the Health and Wellness Nursing Education Director.

(l) The Medication Technician shall not be allowed to administer medications if:

(1) there is a lapse in listings with the Board of Nursing or Division of Facility Services, or

(2) there is an ongoing investigation dealing with a medication event or other clinical matter that has been identified.

___________________________ 11/2/20
Todd E. Ishee
Date
Commissioner of Prisons
### PRISONS

**Health and Wellness Services**

**Policies and Procedures**

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