MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH BUREAU OF HEALTH PROFESSIONS LICENSURE DRUG CONTROL PROGRAM 250 Washington Street Boston, MA 02108-4619

MEDICATION ADMINISTRATION PROGRAM (MAP) COMMUNITY PROGRAM INSPECTION FORM (Medication Security)

Service Provider Name and Registered Site Addr	ess:	Date of Inspection: Time of Arrival: Time of Departure: Inspection Conducted with:				
		Type of Site:	Group Hor Day Progra		Staff. Apt Other	
		Type of Inspection:	RoutineRe-ins.		Complaint Other	
Telephone Number:	Site Supervisor:	Inspector:				
Registrant: MassAbility DMH DDS DCF Current Census:	Pharmacy Service:	Massachusetts Controlled Substance Registration MCSR Number:				
NOTE: Massachusetts Regulations at 105 CMR 70 A Drug Incident Report (DIR) must be submitted t	00.008 require that any theft or loss of controlle to the Drug Control Program via the DCP webs	ed substances must be repo ite within twenty-four hours	rted to the Drug of discovery.	Control Pr	ogram (DCP).	

Key:

- C Item in compliance with policy and/or regulations
 V Item in violation of policy and/or regulation
 N/A Item not applicable at time of inspection

		_			Citation 105 CMR 700	Correction Timelines
ltem	С	V	N/A	Standard		
Sta	ff Certifi	cation				
1.				Program maintains a current list of Certified staff members, with documentation of current certification and expiration date.	003(E)(1)(c)	10 Days
Cor	nsultant	S				
2.				Program maintains written policies and procedures which ensure staff twenty-four-hour access to MAP Consultant(s).	003(E)(1)(g)	IMMEDIATELY
3.				Program maintains a readily retrievable list of available MAP Consultant(s) (i.e., Licensed Practitioner, Registered Nurse, and Registered Pharmacist) with telephone numbers. Consultant is available to assist staff twenty-four hours per day.	003(E)(1)(g)	IMMEDIATELY
Mee	dication	Emerge	ncies			
4.				Program maintains a detailed policy specifying administrative procedures for medical emergencies related to medication administration.	003(E)(5)(c)	IMMEDIATELY
5.				Program utilizes a DPH approved medication occurrence report for documenting medication administered in a manner inconsistent with the Health Care Provider order or in violation of regulations where staff have determined there was risk to the individual.	003(E)(1)(f)	IMMEDIATELY
6.				Completed medication occurrence reports are kept on file at the program site.	003(E)(1)(f)	IMMEDIATELY
7.				Information on an individual's specific medication is available in the individual's record and on a DPH approved medication administration record form which includes: name and dosage of medication, indication for prescription, contraindications or allergic reactions, possible side effects, and appropriate staff response with special instructions, including steps to be taken if a dose is missed.	003(E)(6)(a)	IMMEDIATELY
8.				Program maintains written, medication-specific drug information for medications administered on site.	003(E)(6)(b)	10 Days
Lea	ve of Al	osence				_
9.				Program maintains a written LOA policy that is in conformance with DPH guidelines	003(E)(4)(b)	30 Days

ltem	С	v	N/A	Standard	Citation 105 CMR 700	Correction Timelines
10.				Program maintains a written policy for obtaining properly labeled containers when an individual receives medication in two or more locations.	003(E)(4)(c)	30 Days
11.				Program maintains a policy for identifying and educating persons responsible for off-site medication administration.	003(E)(5)(g)	30 Days
Po	icy and	Procedu	ires	1		
12.				Program maintains a copy of the DPH MAP Policy Manual on site, which is accessible to all staff.	003(E)(6)(b)	10 Days
13.				Program maintains a copy of the Service Providers Policy and Procedure Manual on site, which is accessible to all staff.	003(E)	10 Days
14.				Administration of PRN Health Care Provider orders are according to specific target signs, symptoms, and parameters.	003(E)(5)(a)	IMMEDIATELY
15.				Administration of medications is documented on the individual's medication administration record form.	003(E)(6)(a)	IMMEDIATELY
Me	dication	Security	<u> </u>	-		
16.				Program maintains written policy on access to medication area.	003(E)(3)(a)	10 Days
17.				Unauthorized personnel cannot gain access to medication area and only Certified or licensed staff have access to controlled substances (i.e., items that require a prescription to obtain).	003(E)(3)(a)	IMMEDIATELY
18.				Medication storage area is clean of debris, clutter, and personal items.	005(A)	30 Days
19.				Internal and External medications are stored separately.	003(E)(3)	IMMEDIATELY
20.				All schedule II-VI controlled substances, including discontinued medications, are stored in a locked and, where appropriate, refrigerated container or area.	003(E)(3)(a)	IMMEDIATELY
21.				Countable Controlled Substances (CCS), (i.e., any federally controlled substances in Scheduled II – V and any Scheduled VI controlled substance identified by DCP as having a high potential for abuse), are stored in a substantially constructed double-locked dedicated storage area.	005(A)	IMMEDIATELY
22				Countable Controlled Substance storage area access key is adequately secured when Certified staff is not available.	005(A)	IMMEDIATELY

ltem	С	v	N/A	Standard	Citation 105 CMR 700	Correction Timelines
23.				Adequate security is maintained of medications for individuals who are self-administering.	003(E)(3)(b)	30 Days
24.				All Scheduled VI medications are not intermingled with the countable controlled substances.	005(A)	IMMEDIATELY
25.				All Scheduled II-VI medications and OTC items are properly labeled and in-date at time of site visit.	006(A)	30 Days
26.				All Countable Controlled Substances are received directly from pharmacy in a properly labeled, tamper-resistant container.	005(A)	IMMEDIATELY
27.				All Scheduled II – V Controlled Substances requiring refrigeration are stored in a dedicated locked box within a refrigerator.	005(A)	IMMEDIATELY
28.				Medication count book page numbers are not written on medication cards.	006(A)	IMMEDIATELY
29.				Medication card is absent of tape or glue.	006(A)	IMMEDIATELY
30.				Unless the individual's prescription plan requires otherwise, no more than a 37-day supply of medication is stored at the program.	003(E)(5)(f)	IMMEDIATELY
31.				Medication count found to be correct at time of inspection.	003(E)(6)(g)	IMMEDIATELY
32.				No evidence of tampering or diversion at time of inspection.	003(E)(6)(g)	IMMEDIATELY
33.				All thefts or losses of controlled substances have been reported immediately to DCP upon discovery.	003(E)(1)(e)	IMMEDIATELY
Ме	dication	Count E	Book			
34.				Program has a DPH approved medication count book.	003(E)(6)(g)	IMMEDIATELY
35.				All schedule II-V controlled substances, including discontinued medications are on count.	003(E)(6)(g)	IMMEDIATELY
36.				Countable controlled substances are charted in medication count book as given by staff.	003(E)(6)(g)	10 Days
37.				Count conducted whenever control of the medication key is passed (i.e., at the start and end of each shift/assignment).	003(E)(6)(g)	IMMEDIATELY

ltem	с	v	N/A	Standard	Citation 105 CMR 700	Correction Timelines
38.				All countable controlled substances are counted by two Certified and/or licensed staff at least once every twenty-four hours.	006(A)	IMMEDIATELY
39.				Index of medication count book is up-to-date, complete and used when count is conducted.	006(A)	IMMEDIATELY
40.				All Countable Controlled Substances received from the pharmacy are signed into the medication count book properly. Prescription information is complete and accurate at the top of each individual's count page.	006(A)	IMMEDIATELY
41.				Count book pages contain no evidence of crossing out, marking over, ink eradicator, paperclips, tabs, or elastics.	006(A)	10 Days
42.				Entries in medication count book are neat, legible, and are not squeezed in between lines.	006(A)	10 Days
43.				If error is made, word "error", explanation and staff's signature are present.	006(A)	10 Days
44.				Continuation pages are referenced correctly.	006(A)	10 Days
45.				Signatures are present for each count, transfer to a new page and medication disposal	006(A)	10 Days
46.				PRN Medications do not appear to be charted excessively by one staff person.	006(A)	10 Days
47.				Proper count procedure used which would deter diversion or tampering.	006(A)	IMMEDIATELY
Me	dication	Dispos	al			
48.				All discontinued or expired medications are rendered unusable.	003(E)(3)(c)	10 Days
49.				Medications rendered unusable are properly documented in the Countable Controlled Substance Book.	003(E)(3)(c)	IMMEDIATELY
50.				Date medication is discontinued is noted in medication book with date and staff's signature.	003(E)(3)(c)	IMMEDIATELY
51.				All discontinued or expired medications are rendered unusable in an approved manner by two Certified/licensed staff persons, one of which must also be a supervisory staff.	003(E)(3)(c)	IMMEDIATELY

ltem	С	v	N/A	Standard		Citation 105 CMR 700	Correction Timelines
52.				All contaminated, refused or dropped medications are rendered unusable by two Certified/licensed staff persons, one of which is a Certified supervisory staff.		003(E)(3)(c)	IMMEDIATELY
53.				Program maintains a properly executed disposal record on site when discon rendered unusable.	tinued medications are	003(E)(3)(c)	10 Days
	nents	and Re	ecomm	endations:			. <u> </u>
Signatu	ire of Ins	spector:				Date:	
Copy R	eceived	By:			NOC Issued:		
			Printed N	lame:		Yes 🗌 No	
			Sign	ature:			