

**DDS/DMH-DCF MAP Trainer/Provider Representative Minutes**  
Devens Common Center, 31 Andrews Parkway, Devens MA  
May 7, 2014 9:30am-12:00pm DDS

**Present:** There were 243 attending, a combination of MAP Trainers and Provider Representatives. The names of MAP Trainers attending were forwarded to Melissa Touadjine, DMH, to update the statewide database of DDS/DMH-DCF MAP Trainers.

The schedule of this meeting was unique in an attempt to meet the needs of all nurses statewide who work with different populations by separating the groups into a DDS morning meeting and a DMH-DCF afternoon meeting. 86 attended the afternoon meeting. Both agendas were the same. DDS specific agenda items were not covered at the afternoon meeting and vice versa. MAP Trainers working with ABI/MFP programs were welcomed.

Before, during and after a multinational pharmaceutical company, SANOFI displayed their product, the Auvi-Q, <http://www.auvi-q.com> adjacent to the meeting room.

### **Maintaining MAP Trainer Status**

MAP trainers were reminded to attend required meetings; conduct a Certification training at least once yearly; a Recert training/testing every 6 months (if that is all you do) and use the most current MAP related materials.

### **Train the Trainer Registration Process**

The process now includes completing a registration form and including a nurses' resume. Once the completed registration form and resume are received by a MAP Coordinator registration for the date of choice can be confirmed.

### **DDS Technical Assistance Tool Revision**

The most current revision is dated 4-17-14. (See attachment.) This is in process of replacing the older version currently online. DDS was added to the header to differentiate from the DMH-DCF tool. Revisions to a statement or a new addition are below in bold print:

A.3. now states "All HCP orders (including new orders and telephone orders) are posted and verified (**includes signature, date and time**) below HCP signature.

A.6. **On HCP order forms listing multiple meds, after med(s) are DC'd; staff indicates in the margin-DC, date, initials and see new order, if applicable.**

A.13. **There is an internal monitoring system.**

C.3. Now says only, Reason why each med is ordered is present on the med sheet; "**and/or HCP order**" was removed. MAP policy specifies the reason must be on the med sheet [Policy 13-2 2g]. The HCP advises staff of the reason as documented on HCP order or consult form. The reason does not have to be on subsequent HCP orders.

E.3. A second sentence was added. "**If PT/INR self-testing is managed in the program setting, it is not being done by MAP Certified staff.**"

F.3 now says only, "Liquid countables are packaged such that once used, no liquid remains in the container." "**Vimpat and Roxanol may NOT be re-packaged**" was removed as the expectation is that still only a single dose would be used and the remainder disposed.

F.6. **It is recommended these schedule VI meds be added to count: Ultram, Fioricet and Gabapentin (Neurontin).** Due to the potential for abuse, the DPH Drug Control Program made the recommendation.

G.6. The word "**site**" was added before the word supervisor in 2 different sentences.

I.2. "**and/or properly completed LOA form**" was added to the end of the sentence.

L.3. The word "**site**" was added before the word supervisor.

M.1. The word "**current**" was added.

M.2.; M.3. "**Current (dated less than 2 years)**" was added to the statements.

### **New Acceptable Code**

"S" for school is now allowed to be used on a med sheet in addition to the other approved codes.

### **Additional Supervisor Medication Education Modules**

In addition to the topics of countables, disposal, drug loss, discharge orders and LOA, there are two new modules available online, PRN Medications <http://www.mass.gov/eohhs/docs/dph/quality/drugcontrol/map/supervisors/med-edu-module-6-prn-medications.pdf> and Over-the-Counter Medication and Preparation <http://www.mass.gov/eohhs/docs/dph/quality/drugcontrol/map/supervisors/med-edu-module-7-over-the-counter-medications-labels.pdf>.

### **Adjunct MAP Training Material**

Homework with Complimentary Trainer Notes was revised. (See attached). If you use the 4 day Certification training PowerPoint, the homework was updated. The sample test was removed from the website at the request of DDS; it included no DBQ's. The staff homework revision includes earlier exposure to accessing the [www.hdmaster.com](http://www.hdmaster.com) website and the 30 question pretest [https://www.dandsdiversifiedtech.com/MP/MPCNA\\_LoginPretest.html](https://www.dandsdiversifiedtech.com/MP/MPCNA_LoginPretest.html). The "Notes to the Trainer" (at the very bottom) include required pretest components (30 question test, med pass, transcription) and where to access. For Trainers who use some form of review during their training, Carolyn Whittemore, RN demonstrated a new option in the form of a "Jeopardy" game developed in a portable format for those not having the equipment to use the electronic version. (See attached.) Please feel free to change categories and questions to reflect your training style and program.

### **Administering OTCs without a Pharmacy Label**

Providers managing OTC meds using MAP Policy 06-6 Option B, in addition to developing a Provider policy, must train staff. Training was developed by Beth Steele, RN, Fidelity House. (See attached.)

### **Additional Handouts**

- **HCP Order Guidelines** were developed by the southeast area office nurses and used to educate physicians. (See attached.)
- **Acetaminophen Safe Practice** guidelines were developed by DPH based on new recommendations by the makers of Tylenol. All Providers should be reviewing Tylenol orders, if applicable and consult with PCPs in regard to possible changes needed based on new frequency and maximum dosage guidelines. (See attached.)
- **MAP Friendly Pharmacies** there is an addition of Diversified Specialty Pharmacy located in Framingham; service is provided from Northampton to Plymouth to Haverhill (See attached). During the meeting, information was provided on another MAP friendly pharmacy; Green Street Pharmacy located at 25 Green St. Melrose MA 02176; 781.665.0022 telephone; 781.665.9461 fax. Green St. pharmacy uses the OPUS system; cross checks HCP orders with prescriptions and obtains prescription refills.

### **DDS MOR Stats 01/01/2013-12/21/2013**

DDS Provider Agencies 171; Active DPH registered sites 2607; Average # Doses per Day per Consumer 12; Total # MORs 5774; Hotlines # reported 78; % of Occurrences that were Hotlines 1.4%; Wrong Time 74.6% followed by Wrong Dose 19.7%, Wrong Medication 3.9%, Wrong Individual 1.8% and Wrong Route <1.0%;

### **Medical Marijuana**

Any questions should be directed to 617-624-5062 and/or [medicalmarijuana@state.ma.us](mailto:medicalmarijuana@state.ma.us)  
To date there is no MAP policy regarding its use.

### **Reminders**

- Blank spaces on med sheets are not MORs (and should not be entered in HCSIS) unless staff says they did not give the med or the occurrence is determined through corresponding blister pack monitoring. Otherwise the blank space should be addressed as a documentation issue.
- DPH has noted some staff are not starting with the HCP orders when giving meds and some meds are being missed due to the HCP order not being used as reference point prior to med administration.

### **Issues in the Field**

#### **Day Programs (DP) and HCP Orders 105 CMR 700.003 (F)(6)(e)**

Although there is no policy statement there is a regulation that states copies of all HCP orders for meds whether they are administered there or not must be supplied to day program staff. However, any HCP order that also applies to the DP (like remaining upright for 30 minutes after eating or food consistency) must be sent to the DP as well. Organize them so the pertinent ones are on top. DP Staff only transcribe orders for those meds given at the DP.

### **Best Practice**

-Use a zero in front of a decimal point. This is being requested due to med occurrences where ".5mg" was interpreted to give 5 tablets instead of 1 half tablet. This would have been less likely to occur if written as "0.5mg".

-Use "mL" instead of "cc"

-Use "less than" or "greater than" instead of the symbols

-Write out the word instead of abbreviating. i.e., "4 times a day" instead of "QID"

-When the HCP orders a generic med and the pharmacy sends the generic med, as staff transcribe, they can write the generic name twice or leave the space next to brand name empty. This is being requested due to staff trying to locate a brand name online and the name they choose was not an equivalent of the generic med ordered.

## **Leave of Absence**

This topic was presented by Mary Rota, RN, BSN, MA, Clinical Reviewer, Medication Administration Program. (See attached.)

## **D&SDT Diversified Technologies**

WebETest modifications were reviewed by Kelly Buerger, TN Nurse Aide & MAP Program Manager, D&SDT. (See attached) The following was included:

### **Social security numbers**

Now only D&SDT designated state agency staff and whoever initially enters demographic information can see a trainee's SSN.

### **Contacting D&SDT about a specific candidate**

If contacting D&S about a specific candidate you will need to provide either a Test ID number or SSN to obtain information.

### **Verification form**

The form was created due to the large number of staff ID names not matching the information entered into WebETest. (Names were different, not spelled the same, additional suffix like Jr., etc. resulting in the candidate being unable to test.) As a Trainer, please print verification forms prior to a class. Have staff take out their government issued, non-expired ID, such as a driver's license and have staff compare to see if what is on their DL is the same as the Verification form, if not, update their demographics prior to testing. The signed forms should be retained with your training paperwork.

You can also use the staff demographic screen for verification. (The verification form is easier to read and includes test history also.)

**Jim DiPaolo, SANOFI Representative** introduced and demonstrated the **Auvi-Q** product. Literature and a mock Auvi-Q device were provided to all interested trainers.

## **Handouts**

*Agenda*

*Minutes of 10-31-13 meeting*

*Org Chart*

*DDS MAP Tool Revision*

*Homework Revision*

*Jeopardy Notes pages*

*OTC Training*

*HCP Order Guidelines*

*Acetaminophen Safe Practice*

*MAP Friendly Pharmacies*

*Contact Hours by name of attendee*

**Next Meeting**  
**October 29, 2014 Webinar Format**  
**Registration Details to Follow**