



# Medication Assistance Program (MAP) BASICS

For Unregulated Health Care Providers

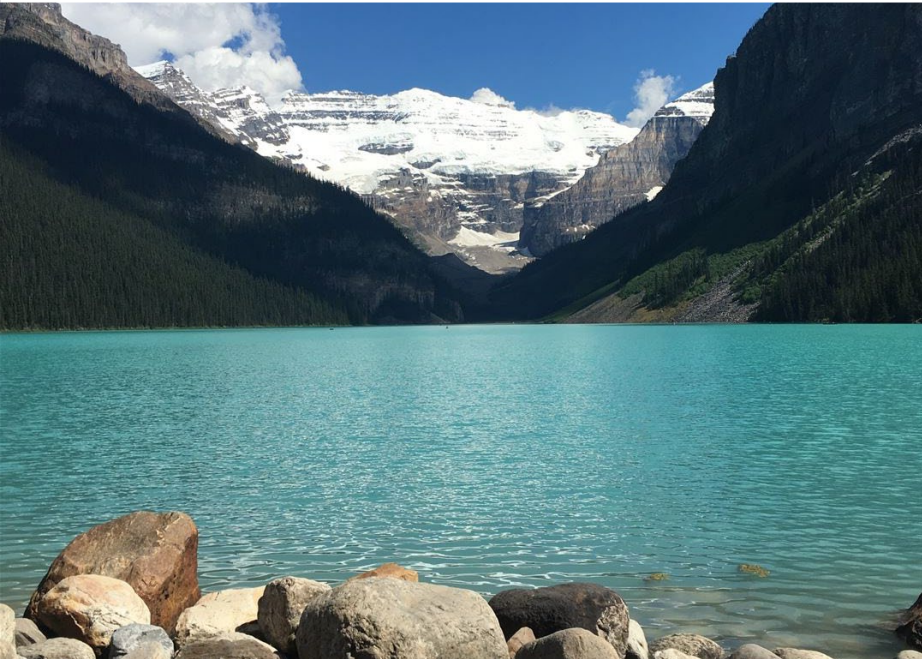


**Seniors Health &  
Continuing Care**



Policy, Practice, Access  
& Case Management

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# Land Acknowledgement

Provincial Seniors Health and Continuing Care would like to recognize that our work takes place on historical and contemporary Indigenous lands, including the territories of **Treaties 6, 7 & 8** and the homeland of the Métis.



This education is intended for unregulated health care providers performing medication assistance in continuing care.



## Learning Objectives

By the end of this session, the learner will:

- recognize the importance of client & family-centred care
- acknowledge team member roles and responsibilities
- apply learnings when assisting with oral, transdermal, topical, ophthalmic, otic, nasal, inhaled medications and client self-administration of prepared insulin
- identify how to observe & report
- adhere to documentation requirements
- follow foundational medication safety practices





# Medication Assistance Program (MAP)





# Client & Family Centred Care

- Respect and Dignity
- Information Sharing
- Participation
- Collaboration





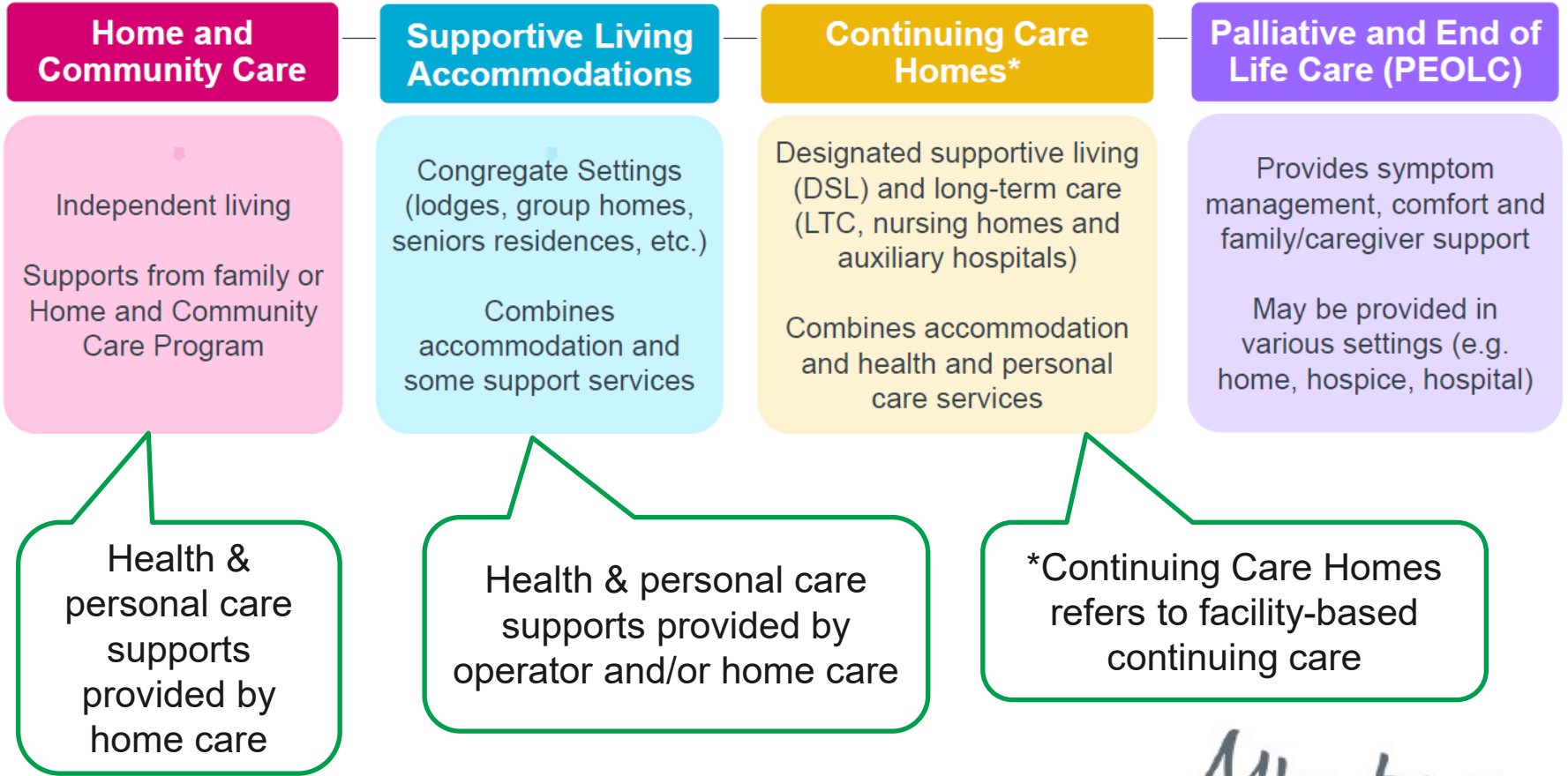
# Working with Diverse Populations

- Older adults
- Pediatrics
- Persons living with dementia
- Persons experiencing mental illness
- Clients with disabilities



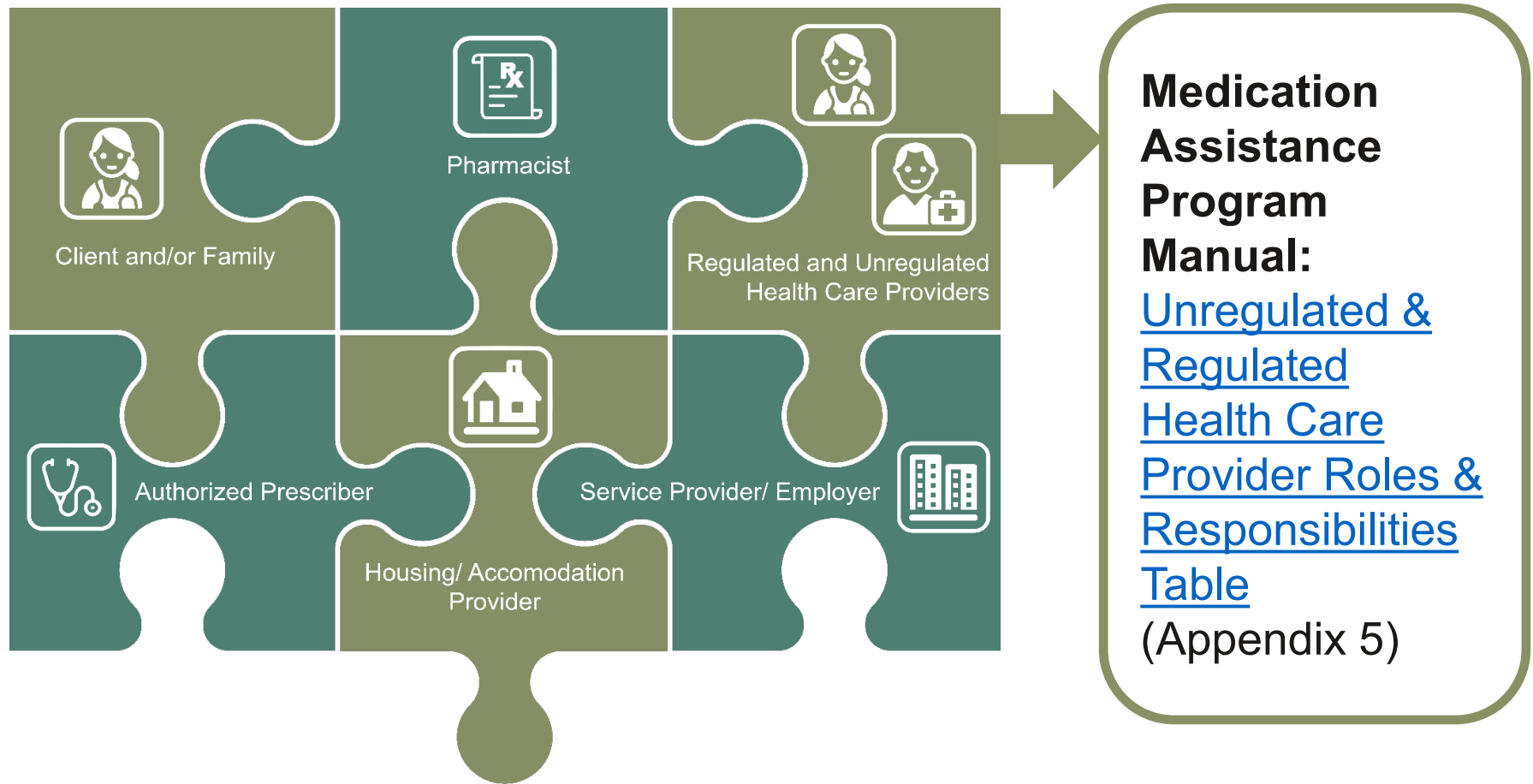


# Continuing Care System



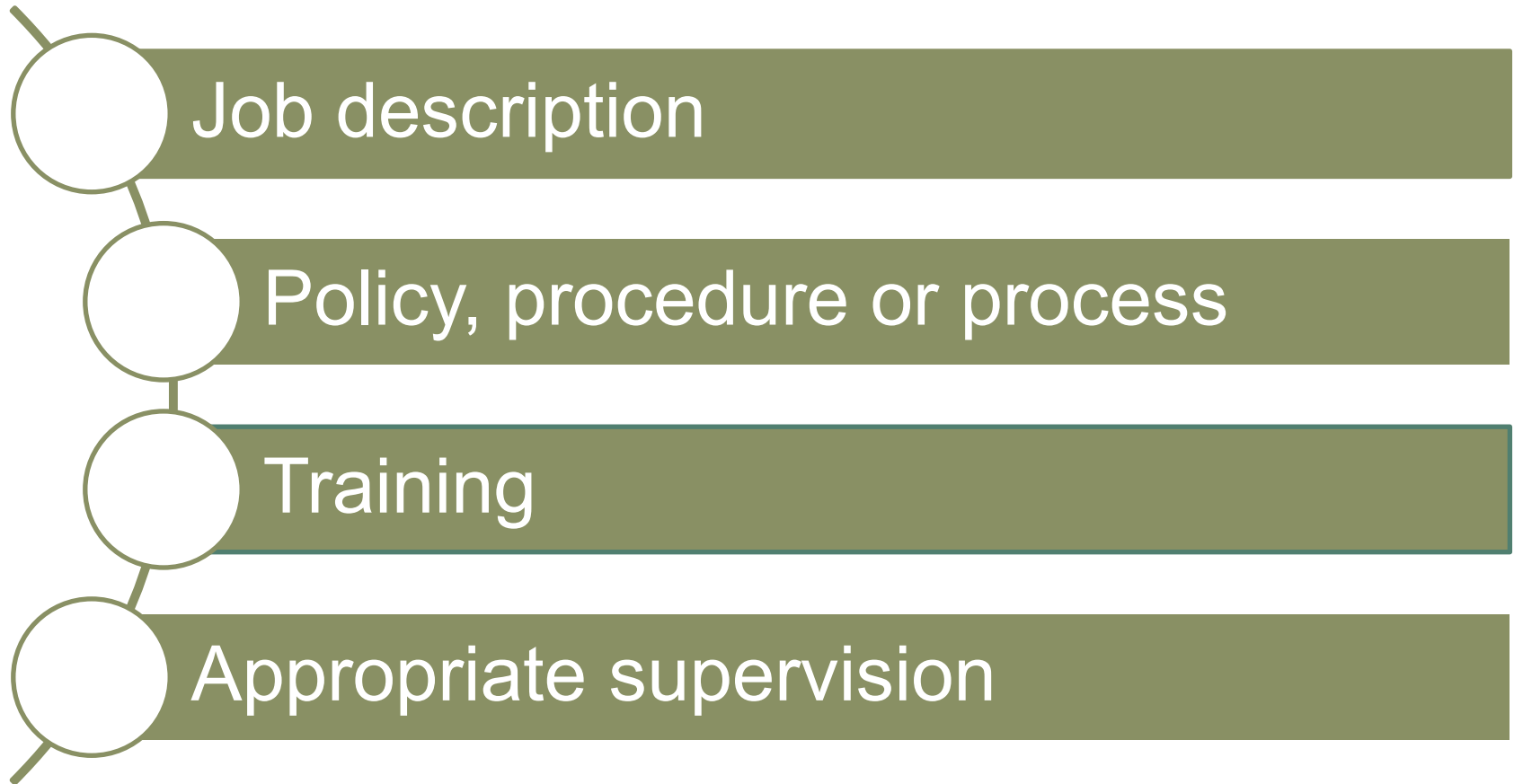


# Roles and Responsibilities





# Four conditions: Medication Assistance





# Supervision



- Direct: at point of care
- Indirect: available in the care setting
- Indirect remote: available via technology (e.g., telephone)

You must know how to contact the supervisor



# MAP Education & Resources

- MAP Videos
- Medication Assistance Activity Sheets
- Optional:
  - MAP Training Record
  - MAP Competency Record

<https://www.albertahealthservices.ca/info/Page10406.aspx>

## MAP Manual:



For more information  
[continuingcare@ahs.ca](mailto:continuingcare@ahs.ca)







# Medication Assistance: Key Points

- Privacy and confidentiality
- Client identification
- Medication times
- Client positioning
- Infection, prevention and control (IPC) practices
- Client outings (pass medication)



**See: [Module 1: Medication Safety Video](#)**



# Medication Assistance Activities

- oral medication (e.g., solid, liquid, powder)
  - sublingual and buccal medication (e.g., solid, spray, liquid)
- transdermal medication (e.g., medicated patches)
- topical medication (e.g., lotion, cream, shampoo, ointment, powder, spray)
- ophthalmic medications (e.g., drops, ointment)
- otic medication (e.g., drops, ointment)
- nasal medication (e.g., drops, spray)
- inhaled medication (e.g., Metered Dose Inhaler [MDI], dry powder, nebulized)
- assisting the client with self-administration of prepared insulin



# Oral Medication

- Solid
  - Sublingual: under the tongue
  - Buccal: lining of the cheek
- Liquid
  - Swallowed
  - Rinse
- Powder

Assist with medication as directed by the care plan, including when to:

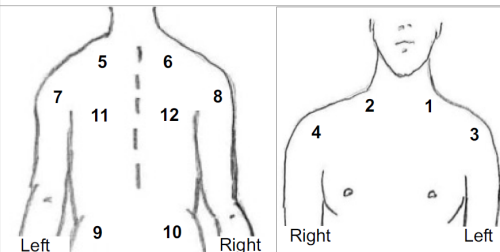
- crush medication
- measure liquid or powder medication

**See:** [Module 2: Assisting with Oral Medications Video](#) & [Medication Assistance Activity Sheet-Oral Medication](#)

# Transdermal Medication

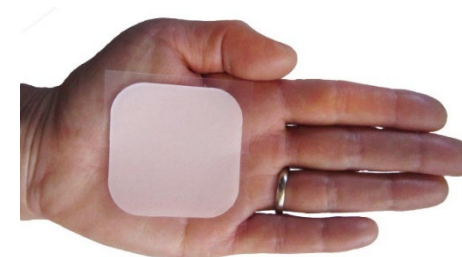
- Medicated skin patch

- Application
- Date
- Removal
- Cut only when directed

Recommended Skin Patch Rotation for Home Care		Skin Patch Sites Diagram	
Sunday	1		Medication Patch Record
Monday	2		
Tuesday	3		
Wednesday	4		
Thursday	5		
Friday	6		
Saturday	7		

09369(Rev2015-08)

**See:** [Module 3: Assisting with Transdermal Patches Video](#) & [Medication Assistance Activity Sheet-Transdermal Medication](#)





# Topical Medication

- Lotion
- Cream
- Ointment
- Shampoo
- Powder
- Spray

**See:** [Module 4: Assisting with Topical Medications Video](#) & [Medication Assistance Activity Sheet-Topical Medication](#)







# Ophthalmic & Otic Medication

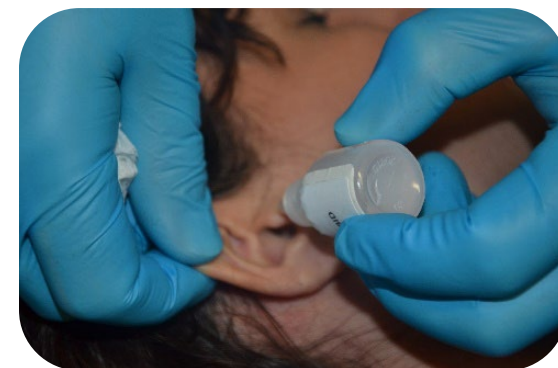
- Ophthalmic: eye

**See:** [Module 5: Assisting with Ophthalmic Medications Video & Medication Assistance Activity Sheet-Eye Medication](#)



- Otic: ear

**See:** [Module 6: Assisting with Otic Medications Video & Medication Assistance Activity Sheet-Ear Medication](#)





# Nasal Medication

**See:** [Module 7: Assisting with Nasal Medications Video](#) & [Medication Assistance Activity Sheet-Nasal Medication](#)



# Inhaled Medication

- Various Types
  - Dry powders
  - Metered dose inhalers (MDIs)
  - Liquids



PPE required: see care plan

**See:** [Module 8: Assisting with Inhaled Medications Video & Medication Assistance Activity Sheet-Inhaled Medication](#)



# Using a Spacer with MDI



- [MDI Spacer - Adult Video](#)
- [How to use an MDI with spacer and mask for an infant](#)
- [How to use a spacer and mask for preschoolers](#)



# Assisting with Prepared Insulin

Client prepares insulin at time of self-administration

**See:** [Module 9: Assisting a Client with Insulin Video & Medication Assistance Activity Sheet: Assist with Prepared Insulin](#)

Assistance with prepared insulin does not include:

- Dialing or preparing a dose for injection
- Verifying a dose
- Injecting insulin

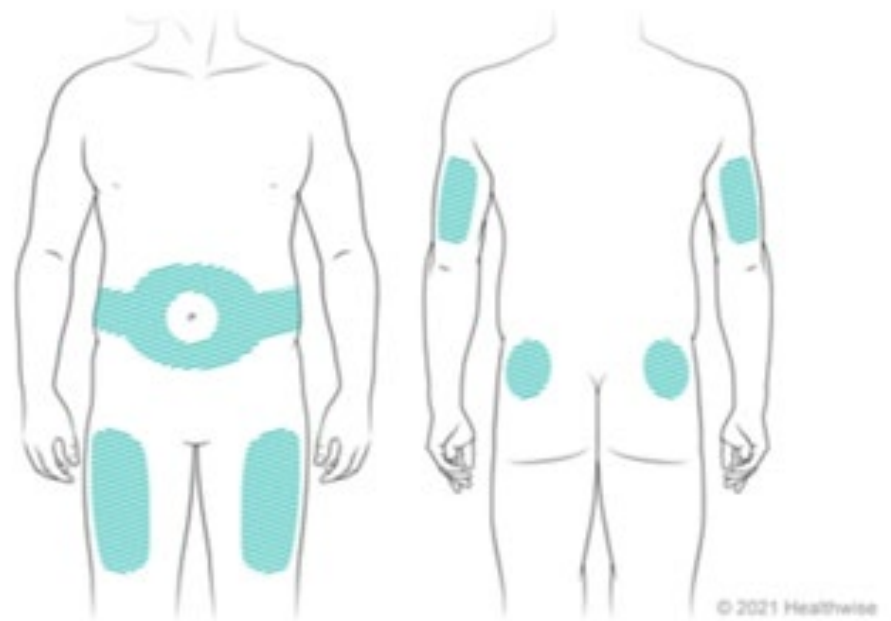
These are client specific restricted activities that required additional training before assignment



# Assisting with Prepared Insulin

- Always check the care plan and/or medication record for instructions
- Report observations and/or concerns
- Document

## Common insulin injection sites




Healthwise (2021). [Insulin injection areas \(alberta.ca\)](https://www.healthwise.com/insulin-injection-areas)




# Hypoglycemia & Hyperglycemia

## Hypoglycemia

- **Low** blood sugar 
- Caused by:
  - Eating less than needed or later than usual
  - Too much medication
  - Activity level
  - Effect of alcohol

Hypoglycemia can happen quickly, so it is important it be treated right away

## Hyperglycemia

- **High** blood sugar 
- Caused by:
  - Eating more than needed or close to the blood glucose testing time
  - Not enough medication
  - Illness or stress



## MAP Basics for Unregulated Health Care Providers

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### Hypoglycemia



signs include:

- Shaky, light-headed, nauseated
- Nervous, irritable, anxious
- Hungry, confused, weak
- Sweaty, headachy, drowsy

<https://guidelines.diabetes.ca/docs/patient-resources/hypoglycemia-low-blood-sugar-in-adults.pdf>

### Hyperglycemia



signs include:

- Thirsty
- Urinate more often than usual, especially at night
- Feeling tired
- Dizziness

[low-and-high-blood-sugar-levels.pdf](https://guidelines.diabetes.ca/docs/patient-resources/low-and-high-blood-sugar-levels.pdf)



# Hypoglycemia & Hyperglycemia: What do I do?

- Observe
- Report
- Follow instructions on the care plan and/or from the supervisor
- Document





# Assisting Clients with Dementia

Optional video:

[Module 10: Medication Assistance for Clients with Dementia](#)





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# Knowledge Check 1





# Match the Activity with the Example

Transdermal	Solid pill, liquid or powder taken by mouth
Ophthalmic	Sprays or drops instilled in the nose
Nasal	Lotion, cream, powder, or spray on the skin
Inhaled	Applying a medicated skin patch
Otic	Bringing the client their insulin pen
Oral	Dry powder, liquid or MDI inhaled into lungs
Assist with Prepared Insulin	Drops and ointment instilled into the ear
Topical	Drops and ointment applied to the eyes



# What are the Medication Rights?

Choose all that apply

- Right medication
- Right to leave
- Right client
- Right dose
- Right to choose
- Right time
- Right route
- Right to stay up late
- Right reason\*
- Right documentation
- Right to refuse

*\*Right reason:* Unregulated health care providers are not responsible to know what medication is prescribed for. They are accountable to follow directions on the client care plan.



## Medication Safety Checks: True or False

The unregulated health care provider must complete medication safety checks when providing MAP Level 1.

**True or False?**

**False**

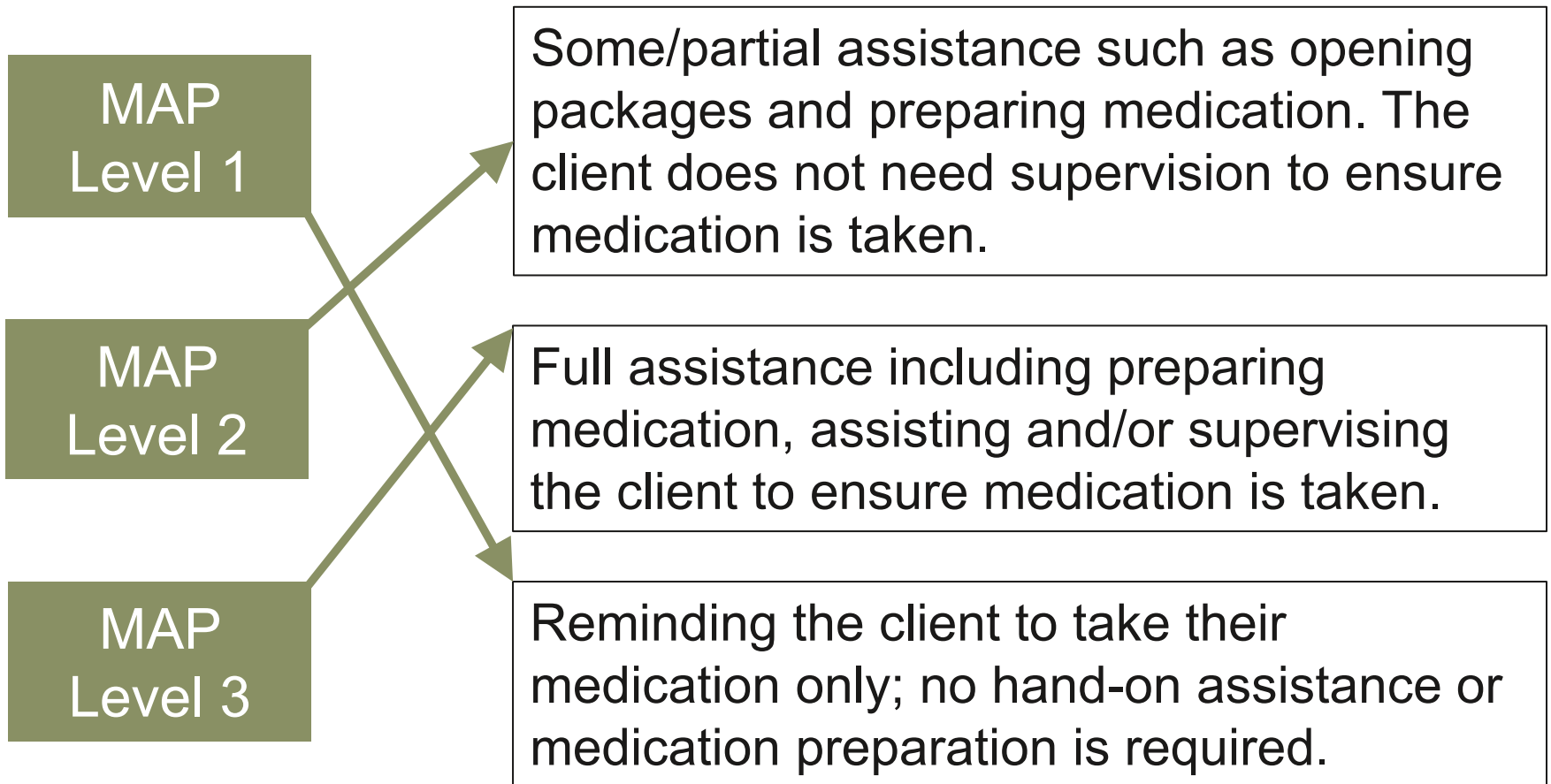
The unregulated health care provider must complete medication safety checks when providing MAP Level 2 and 3.

**True or False?**

**True**



# Match the MAP Levels





# Medication Safety Checks

Place the number beside the steps below to show the order of safety checks

1

2

3

2

Done just before preparing the medication, while it is still in the package.

- medication label is verified with the care plan or medication record
- expiry date and beyond-use date is checked
- medication rights are reviewed

3

Done just before medication assistance is provided.

- medication is prepared according to instructions (e.g., crush and mix with applesauce)
- medication rights are reviewed

1

Done by the regulated health care provider (e.g., dispensing pharmacy or nurse) who verifies the completeness and appropriateness of the prescriber's order.





# Medication Effects

## **Therapeutic**

**effect:** the intended or predicted response to the medication

- Example: blood pressure reduced to normal range

## **Side effect:**

unintended effect ranging from mild to life-threatening reaction

Examples: nausea, bleeding, hives, difficulty breathing



# Observing & Reporting

- Observe and report as directed in the care plan
- Communicate client concerns or changes in client status or function
- Report medication issues
- Request help when needed and discuss when assignment of care exceeds competence or ability
- Immediately report urgent or emergent concerns and clinical adverse events



# Importance of Documentation

## Care Plan

- Identifies client unmet needs, goals and interventions

## Medication Record

- Documents medication assistance provided

## Notes

- Observations

Each setting has different documentation requirements



# MAP Documentation Basics

- Keep records private and secure
- Records available for safety checks
- Document at point of care and time of care
- Health care provider performing activity documents
- Additional documentation when needed
- Clear, factual descriptions

In accordance with Clinical Documentation Directive & Clinical Documentation Process Directive



# PRN Medication

Associated with individual client assessment and is **non-transferrable**

Client must:

- be able to self-direct and/or display an observable indication
- be in stable health
- have predictable outcomes from medication

Medication Assistance Program Manual: Quick Reference for Assigning Assistance with PRN Medication (Appendix 4)



# What About...

- Over-the-Counter (OTC) medication
- Natural health products
- **Hazardous medication**
- Treatments: Cannabis, Sunscreen, Insect Repellant

**Only provide assistance when assigned!**

Any medication or health product has the potential to have risks



# Reporting of Adverse Risks

- **Clinical Adverse Event:** *an event that reasonably could or does result in an unintended injury or complications arising from health care management, with outcomes that may range from (but are not limited to) death or disability to dissatisfaction with health care management, or require a change in patient care*
- **Close Call:** *an event that has potential for harm and is intercepted or corrected prior to reaching the patient*
- **Hazard:** *a situation that has potential for harm and does not involve a patient*

Follow the established process  
in the care setting

AHS employees



**Patient Event**  
Reporting & Learning System  
for Patient Safety





# Medication-related Clinical Adverse Events

X	Missed providing a dose of medication	X	Lack of competence with medication assistance
X	Applied medication via the wrong route	X	Expired medication provided to the client
X	Forgetting to remove existing transdermal patch	X	Failure to document medication assistance
X	Client received medication intended for a different client	X	Applied topical medication to open area instead of skin fold as directed
X	Assisting with medication when not assigned to do so	X	Assistance provided at the wrong time
X	Crushing a medication when not directed to do so	X	Amount of medication in package incorrect



# Strategies to Reduce Errors

- Eliminate/reduce distractions
- One client at a time
- Complete medication safety checks
- Be organized & plan ahead
- Only do what you are assigned and trained to do
- Ask for help when needed





### What do I do...

- Expired medication
- Client refuses medication
- Spilled medication
- Client vomits
- Medication discrepancies
- Emergency situations

Contact the  
supervising  
regulated health  
care provider

Refer to  
Unexpected/  
Unusual Events in  
the MAP Manual

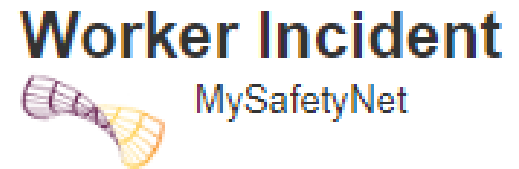


# Worker Injury

- Take Action: First Aid or Emergency Response
- Tell your supervisor Immediately
  - Blood and Body Fluid Exposure (BBFE)
  - Communicable Disease Exposure (CDE)
- Document before you leave

Follow the established process in the care setting

AHS employees





# Orientation

- Equipment
- Client identification
- Medication system
- Client outings or “pass”
- Communication
- Care plan
- Forms





# Competency Assessment

- Observed by a Regulated health care provider competent in the activity (e.g., RN, LPN, RPN)
  - Medication Assistance Activity Sheets
- Documentation of Competency
  - Medication Assistance Competency Record (optional) or record used in the care setting
- MAP Training Record (optional)

<https://www.albertahealthservices.ca/info/Page10406.aspx>

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# Knowledge Check 2







# Knowledge Check - True or False?

Question	T	F
Oral medication may be liquid or solid.	X	
Ophthalmic medication is given into the ear canal.		X
Medicated ointments or creams in a jar are topical medications.	X	
A nebulizer is a machine that delivers an inhaled medication.	X	
All oral medication is meant to be swallowed.		X
Medicated skin patches are a type of topical medication.	X	
Otic medication is commonly referred to as ear medication.	X	
Assisting the client with self-administration of prepared insulin does not include injecting the insulin.	X	
Once you are used to providing medication assistance, you only need to refer to the client's care plan once in awhile		X



### Knowledge Check: Ear Drops

You are assigned to provide MAP Level 3 assistance with a client. When you arrive, you see the care plan and medication record indicate the client now needs assistance with medicated ear drops. It's been a while since you have assisted with ear drops. What should you do?

- a) Ask the client what the pharmacist said to do
- b) Do not assist with that medication, contact the supervisor for directions
- c) Follow directions from the pharmacist and inform the client
- d) Call your friend for help

**Remember:** *Request help when the activity assigned exceeds level of competence, for questions or client concerns*



### Knowledge Check: Medication Package

The client's family provided medication assistance when they took the client for lunch yesterday. You arrive at the client's home to provide MAP Level 2 assistance at bedtime and notice the blister pack has been opened for the bedtime pills, and then sealed up. There are pills in the package but there is no label or information that says what changes were made, if any. What should you do?

- a) Call the family
  - b) Call the pharmacist for medication
  - c) Ask the client what to do
  - d) Do not assist with that medication, contact the supervisor for directions
- Remember: Modifications to a blister pack or other controlled dosage system must be labeled to reflect changes made by Pharmacist or Nurse.*



### Knowledge Check: Topical Medication

Diclofenac 10% topical cream, applied to both knees twice a day (morning and bedtime) is listed on the client's care plan and medication record, but you are unable to find that cream when you arrive to assist the client this morning. The client has IcyHot® gel and asks you to apply that instead. What should you do?

- a) Apply the IcyHot® gel
- b) Google the IcyHot® gel and apply
- c) Do not assist, contact the supervisor for directions
- d) Double check with the pharmacy

*Remember: Contact the supervising regulated health care provider to communicate medication issues/concerns*



### Knowledge Check: Client Identification

You are assigned to provide MAP level 2 assistance with 2 clients whose names are very similar. You mistakenly provided Paul Jones with medication intended for Paul James. What should you do?

- a) Contact the supervisor for directions
- b) Call the family to let them know what happened
- c) Call the client's physician to let them know
- d) Call 911

**Remember:** *Contact the supervising regulated health care provider to communicate medication issues/concerns*



### Knowledge Check-Medication Concerns

You are assigned to provide MAP Level 1 (Reminder) to a client. You notice the client seems confused about what medications to take and has trouble opening pill bottles. She states, “I think these are the ones they told me to take now.” What should you do?

- a) Read the medication labels and help sort out the client's medication
- b) Ask the client about the medication issues/concerns
- c) Call the client's pharmacy to package the medication
- d) Do not assist, contact the supervisor

*Remember: Contact the supervising regulated health care provider to communicate medication issues/concerns*



### Knowledge Check-Assist with Insulin (Part 1)

You are assigned to assist a client with self-administration of prepared insulin. When you arrive, you observe the client is shaking, sweating, states they have a headache and feels nauseated.

- 1) What could the client be experiencing?
  - a) Hypoglycemia (low blood sugar)
  - b) Hyperglycemia (high blood sugar)





### Knowledge Check-Assist with Insulin (Part 2)

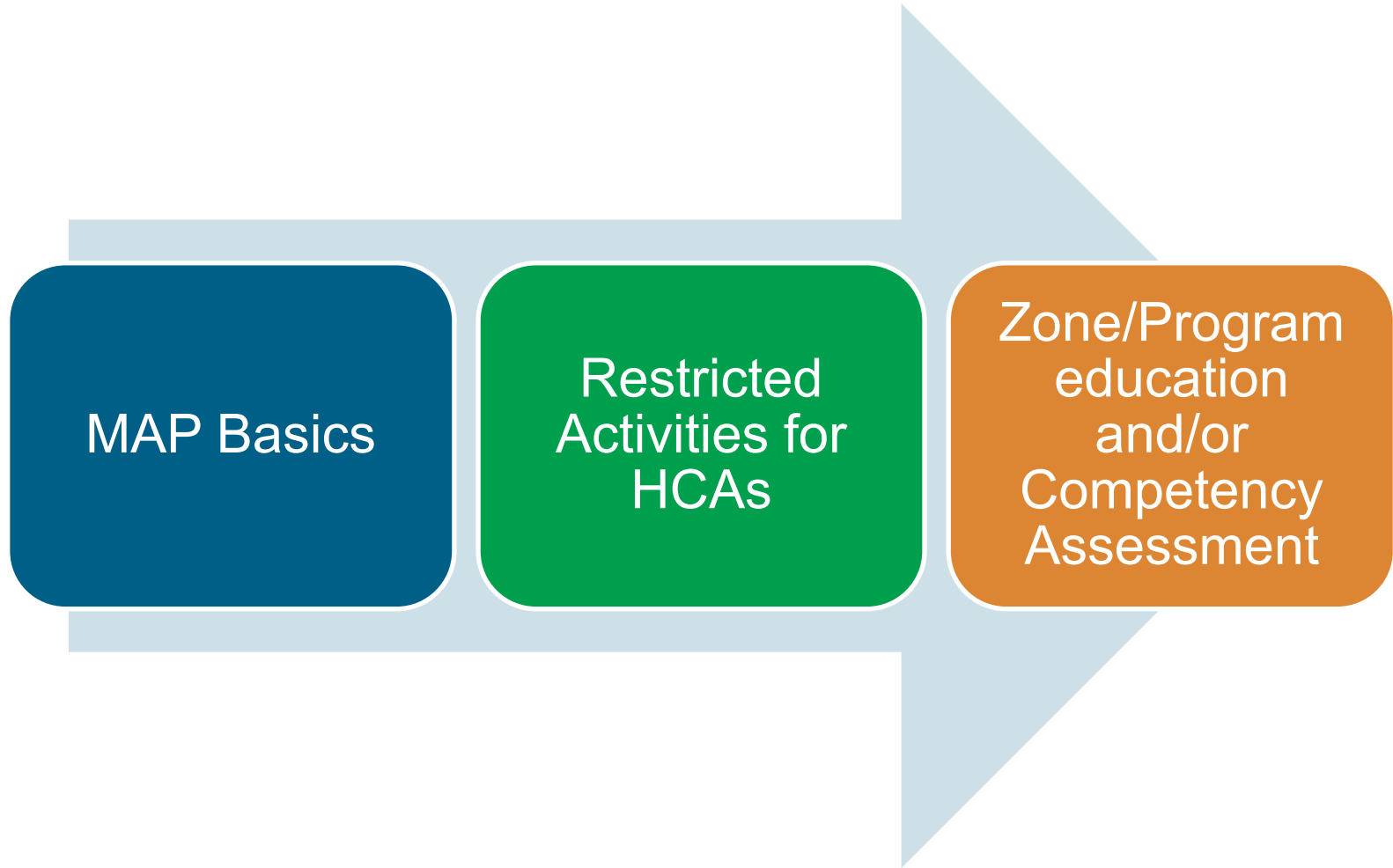
You are assigned to assist a client with self-administration of prepared insulin. When you arrive, you observe the client is shaking, sweating, states they have a headache and feels nauseated.

2) What should you do? (Choose all that apply)

- Provide care as per care plan
- Report to supervisor
- Call the pharmacy
- Document in the health record



## Next Steps: Unregulated Health Care Providers



# References

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# MAP Basics for Unregulated Health Care Providers

## Image and Video Attributions

- Slide 8: Government of Alberta: Ministry of Health Bill 11 The Continuing Care Act [PowerPoint Presentation]
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- Slide 18:
  - Shampoo: <https://www.maxpixel.net/Isolated-Bottle-Shampoo-Shampoo-Bottle-1860642> (Author: MaxPixel) CC0 1.0 <https://creativecommons.org/publicdomain/zero/1.0/deed.en>
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  - Inhaler: <https://pixabay.com/photos/inhaler-breath-asthma-breathing-2520471/> (Author: coltsfan) Free for commercial use
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  - Canadian Lung Association. (Sept 9, 2012). *How to use a puffer with a spacer (adult)* [Video]. Youtube.
  - Canadian Lung Association. (Sept 9, 2012). *How to use an MDI with a spacer and mask for an infant* [Video]. Youtube.
  - Canadian Lung Association. (Sept 9, 2012). *How to use an MDI with a spacer and mask for preschoolers* [Video]. Youtube.
- Slide 24: Healthwise (2021) Insulin injection areas. <https://myhealth.alberta.ca/Health/Pages/conditions.aspx?hwid=aa128295>

# Questions?

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Policy, Practice, Access  
& Case Management