STATE OF CALIFORNIA
CALIFORNIA DEPARTMENT OF AGING
CENTER ASSESSMENT TOOL – MEDICATION STORAGE AND ADMINISTRATION
CDA 7002 (REV 12/2023)

Center Name: _____

The California Department of Aging (CDA) Community-Based Adult Services (CBAS) Bureau developed this Center Self-Assessment Tool to help CBAS centers evaluate their compliance with program requirements for medication administration and documentation, self-administration compliance, and medication storage. The CDA survey team will focus on these program requirements during the center's certification renewal on-site survey; therefore, CDA encourages centers to complete this tool in preparation for their survey but it is not a requirement. We have provided active links to the relevant program authorities.

Medication Administration and Documentation			
1. All medications are listed in the participant's health record including drug name, strength, frequency of administration, and name of prescriber. *Title 22 California Code of Regulations (T-22) T-22 § 54211(b)(2)(A)(2), T-22 § 78317 (a)(d)*	☐ Yes	☐ No	☐ N/A
2. PRN drug orders include indications for use. *T-22 § 78317(d)*	☐ Yes	☐ No	☐ N/A
3. All medications administered by center personnel are properly labeled. *T-22 § 78317(b)*	☐ Yes	☐ No	☐ N/A
4. All medications are administered within one hour of the time prescribed, as indicated by the time scheduled and the time given documentation. *T-22 § 54323(a)(6)(A)(B)(C)(D)*	☐ Yes	☐ No	☐ N/A
5. The documentation of all injectable medications includes the site of the injection per manufacturer's recommendation. *T-22 § 54323(a)(6)(A)(B)*	☐ Yes	☐ No	☐ N/A
6. The documentation of all topical medications and transdermal patch medications include the site applied per manufacturer's recommendation. *T-22 § 54323(a)(6)(A)(B)*	☐ Yes	☐ No	☐ N/A
7. The documentation for all PRN medications includes why it was administered, and notes medications effectiveness. *Welfare and Institutions Code (WIC) § 14550.5(a)(2); T-22 § 78317(d)*	☐ Yes	☐ No	☐ N/A
8. The center retains a pharmacist who provides monitoring of policies and procedures related to medications at the center, communicates directly with participants, pharmacies, attending physicians, and center staff on matters pertaining to individual medication needs, and furnishes a written report on the status of medication related services at least quarterly. *T-22 § 78317(i)(4)(l)(1)(2)(3)(4)*	☐ Yes	☐ No	☐ N/A
Medication Self-Administration and Documentation			
1. The functional status of each participant who self-administers medications has been assessed. (e.g. using an industry standard self-administration of medication tool such as the Medi-Cog). *WIC § 14529 (d)(1) T-22 § 54319 (e) T-22 § 78317(f)(3)*	☐ Yes	☐ No	☐ N/A

2. Participants who self-administer medications are authorized by their physicians to self-administer medications at the center. *T-22 § 54319(e)*	☐ Yes	☐ No	☐ N/A
3. Participants who self-administer medications have been assessed as independent, and do not require supervision and/or reminders. *WIC § 14529 (d)(1) T-22 §54319(e)*; *T-22 § 78317(f)(3)*	☐ Yes	☐ No	☐ N/A
4. The health records of participants who self-administer their medications indicate which drugs are self-administered at the center. *T-22 § 78317(f)(3)*	☐ Yes	☐ No	☐ N/A
5. Training in self-administration of medications is provided to all participants based on the recommendation of the MDT. *T-22 § 54323(a)(7); T-22 § 78317(f)(3)*	☐ Yes	☐ No	☐ N/A
Medication Storage			
1. The center has written policies and procedures governing all aspects of medication storage, distribution, recording, and disposal in the center. *T-22 § 78317(k)*	☐ Yes	☐ No	☐ N/A
2. All prescription medications stored at the center or administered by nursing personnel are appropriately labeled with the pharmacist's label, including: prescription number, participant's name, drug name, drug strength, directions for use, name of prescriber, and expiration date. *T-22 § 78317(b)(d)(g)(5)*	☐ Yes	☐ No	☐ N/A
3. All over-the-counter medications are appropriately labeled with manufacturer's label, including drug name, strength, directions for use, and expiration date. *T-22 § 78317(b)*	☐ Yes	☐ No	☐ N/A
4. All medications are stored in clean lockable cabinets, drawers or rooms accessible ONLY to those licensed medical, nursing, or pharmaceutical personnel designated by the center. *T-22 § 78317(g)(1)*	☐ Yes	☐ No	☐ N/A
5. Medications are stored in an orderly manner with external use medications stored separately from drugs for internal use. *T-22 § 78317(g)(2)*	☐ Yes	☐ No	☐ N/A
6. ALL drugs stored at the center are within the expiration date. *T-22 § 78317(g)(4)*	☐ Yes	☐ No	☐ N/A
7. All medications requiring refrigeration are stored at a temperature of between 36F and 46F. *T-22 § 78317(g)(6)*	☐ Yes	☐ No	☐ N/A
8. If medications are stored in a refrigerator with food items, the medications are in a closed container or compartment clearly marked "Drugs" or "Medications". *T-22 § 78317(g)(6)*	☐ Yes	☐ No	☐ N/A

9. The overnight medication storage record includes the participant name, drug name, drug strength, prescription number, date received into the center, and date medication returned to participant, if applicable. *T-22 § 78317(g)(5)*	☐ Yes ☐ No ☐ N/A
10. All medications belonging to participants who have not visited the center for more than 30 days have been returned to the participant/family or destroyed. *T-22 § 78317(j)*	☐ Yes ☐ No ☐ N/A
11. The medication destruction record includes the participant's name, drug name, strength, quantity, and the prescription number, if applicable. *T-22 § 78317(j)(3)*	☐ Yes ☐ No ☐ N/A
12. The destruction record has been signed by the registered nurse *and* either another licensed nurse, the center administrator, pharmacist or physician as witness to the destruction. *T-22 § 78317(j)(1)(3)*	☐ Yes ☐ No ☐ N/A

Signatures

Registered Nurse (Print Name):	RN License #:
Registered Nurse Signature:	Date:
Program Director (Print Name):	
Program Director Signature:	Date: