ST. CLAIR COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

ADMINISTRATIVE PROCEDURE

Date Issued <u>5/23</u>

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Health/Medical			04	003	0075	
SECTION		SUBJECT				
Residential and Day Programs Standing Misse			ed Medication Orders (SMMO)			
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	SCCCMHA Board
\boxtimes	SCCCMHA Providers & Subcontractors
\boxtimes	Direct Operated Programs
	Community Agency Contractors
\boxtimes	Residential Programs
\boxtimes	Specialized Foster Care

II. <u>PURPOSE STATEMENT</u>:

St. Clair County Community Mental Health Authority (SCCCMHA) to ensure accurate and safe administration of all medications. If a medication is missed, corrective action should be taken, as appropriate.

III. <u>DEFINITIONS</u>:

A. <u>Standing Missed Medication Order (SMMO)</u>: An order completed by a Prescriber for each medication listed on the form, procedures to be followed if the medication is missed (refused or omitted).

IV. <u>STANDARDS</u>:

None Available.

V. <u>PROCEDURES</u>:

Home Supervisor/Designee/ Foster Care Provider

- 1. Obtains initial Standing Missed Medication Order (SMMO) (CMH form #0029) from a Prescriber.
- 2. Obtains update from the Prescriber when a medication, dosage, or frequency is changed and annually.
- 3. Retains original in home record; sends a copy to the Prescriber, assigned Registered Nurse or Case Manager, and Community Based Program (if medications are administered at the program).

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Drugs and Medication	S	Standing Missed Medication Orders (SMMO)					

Registered Nurse

- 4. Receives SMMO order.
- 5. Assigns SMMO to correct Prescriber.
- 6. Obtains SMMO signed back from Prescriber.
- 7. Faxes signed SMMO to group home.
- 8. Places a copy into folder.
- 9. Writes process in chart of individual served.

Home Supervisor/Designee/Foster Care Provider/Day Program Staff

- 10. Registers initials for omissions, and held medications in the appropriate box on the Medication Administration Record (MAR) and circles in ink. Enters "R" on the MAR for refused doses and initials this notation in ink. (Some Electronic Medication Administration Records (eMAR) systems may automatically circle refused or omitted medications.)
- 11. Documents on the individual's Health Care Chronological (Progress Note for Community Based Programs), what took place and the action taken.
- 12. Follows policy #04-001-0045 Medication Errors, (form #0051) if omission constitutes an error.
- 13. Follows policy #04-003-0060 Refused or Omitted Medications, if an SMMO is utilized.

VI. <u>REFERENCES</u>:

None Available.

VII. <u>EXHIBITS</u>:

None Available.

VIII. REVISION HISTORY:

Dates issued 09/94, 03/98, 02/00, 02/02, 02/04, 02/06, 02/08, 02/10, 12/11, 03/13, 03/14, 03/15, 03/16, 03/17, 03/18, 01/19, 01/20, 01/21, 05/22.