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OPINION: MA-C TRAINING AND COMPETENCY
EVALUATION COURSE
APPROVED DATE: November 5, 2013
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REVISED DATE:
ORIGINATING COMMITTEE:
Practice & Education Committee

An advisory opinion adopted by WSBN is an interpretation of what the law requires. While an advisory opinion is not law, it is more than a recommendation. In other words, an advisory opinion is an official opinion of WSBN regarding the practice of nursing as it relates to the functions of nursing. Facility policies may restrict practice further in their setting and/or require additional expectations related to competency, validation, training and supervision to assure the safety of their patient population and/or decrease risk.

Within the Scope of Practice/Role of ___APRN ___RN ___LPN _X_CNA

**ADVISORY OPINION
MEDICATION ASSISTANT-CERTIFIED (MA-C) TRAINING AND COMPETENCY
EVALUATION COURSE**

Introduction:

MA-C courses are offered after basic nursing assistant and CNA II education has been completed. Once approved for certification in Wyoming, the MA-C must practice within the scope of a MA-C as outlined in the *MA-C Role Advisory Opinion*. The purpose of this opinion is to establish acceptable standards for the basic knowledge and skills necessary in the role of MA-C.

Intent of Advisory Opinion:

In accordance with W.S. 33-21-122 (c) (iii) of the Wyoming Nursing Practice Act (NPA), the Wyoming State Board of Nursing (WSBN) has approved the following Advisory Opinion on MA-C Training and Competency Evaluation Course.

COURSE DESCRIPTION:

MA-C training prepares the CNA II to perform specific skills that a RN/LPN deems may be delegated. A predictable outcome is expected. Professional judgment or decision-making responsibility may not be delegated.

GENERAL COURSE OBJECTIVES:

Upon completion of the MA-C course, the student must be able to:

- Comprehend the policies, procedures, rules and regulations that govern the MA-C in Wyoming;

- Adhere to legal implications when functioning as a MA-C;
- Understand the principles of delegation that a registered professional nurse/licensed practical (RN/LPN) nurse must adhere to when making the decision to delegate a task to a MA-C; and
- Apply MA-C skills competently.

GENERAL COURSE REQUIREMENTS:

The student must have met the selection criteria for MA-C.

- The MA-C course must be offered and administered by facilities with adequate materials to provide skills instruction.
- Teaching methods to include classroom lectures, demonstration, simulation, return demonstration, supervised clinical practice, and classroom and clinical performance evaluations.
- The total length of the MA-C course shall be a minimum of 100 hours. There shall be a minimum of 60 hours of classroom instruction and 40 hours of supervised clinical practice.
- A comprehensive test over the content of the MA-C course must be completed with at least a 80% passing score.
- A practical exam demonstrating the skills inherent in the content of the MA-C course must be completed with 100% of the critical behaviors demonstrated.
- A final practicum examination must be administered. 100% of the critical criteria must be met on the practicum examination.
- Successful student must pass the National Medication Aide Certification Examination (MACE) through Pearson Vue to receive certification through WSNB.

FACULTY QUALIFICATIONS:

1. There shall be sufficient number of qualified faculty to meet the purposes and objectives of the program.
2. Program coordinators and faculty shall provide documented evidence of preparation for teaching adults as outlined in Chapter 6.
3. The ratio of faculty to students in clinical areas involving direct client care shall be one faculty member to six or fewer students (1:6).
4. The principle instructor who teaches in the MA-C program shall:
 - Hold a current, unencumbered license as a RN;
 - Have at least two (2) years full-time equivalent experience as a RN in a health care facility; and
 - Have at least one (1) year of clinical experience relevant to the area(s) of responsibility.
5. Have completed and passed the didactic portion of the MA-C educational program; and completed a medication safety course that addresses safe systems and processes for medication administration.

STUDENT QUALIFICATIONS:

In order to apply for a MA-C training program, the individual must:

- Be at least 18 years of age
- Have a high school diploma or a GED
- Have a current unencumbered CNA II certificate

COURSE CONTENT:

Units of Instruction:

Unit I: Medication Fundamentals

<i>Medication Orders, Documentation, Storage & Disposal</i>	<i>Mathematics, Weights and Measures</i>	<i>Forms of Medication</i>	<i>Medication Basics</i>	<i>Critical Criteria for Performance</i>
Medication prescription/order	MA-C does not convert medication dosages	Liquid	Terminology	Wash hands before
Medication documentation system	Systems of measurement	Solids and semi-solids	Abbreviations	Three safety checks
Medication storage			Dosage range	Six rights of medication administration
Disposal of outdated, contaminated or unused medications			Actions	Review medications that require checking of pulse or blood pressure before administering
			Implications for administration	Identify client
			Therapeutic effects	Identify yourself
			Side effects	Explain what you are going to do
			Precautions	Glove if necessary
			Contraindications	Position the client
			Allergic reactions	Do what you have explained
			Adverse reactions	Wash hands after
			Tolerance	Special Consideration
			Interactions	Document
			Additive (synergistic) or antagonist effect	
Idiosyncratic effect				
Paradoxical effect				

Unit II: Safety

<i>Prevention of Medication Errors</i>	<i>Critical Criteria for Performance</i>
What to know before administering medications	Failure to follow prescriber's orders
	Failure to follow manufacturer's directions
	Failure to follow accepted standards
	Failure to listen to client or family

	Follow policy to notify care providers
	Complete a medication error report

Unit III: Communication and Documentation

<i>Building Relationships</i>	<i>Role of the Delegating/Supervising Nurse</i>	<i>Critical Criteria for Performance</i>
Review the communication process	Nurse determines level of supervision, monitoring and accessibility to be provided for nursing assistive personnel	Observe, monitor, and report any change that is different from the client's normal condition
Review barriers to effective listening and communications	Nurse continues to have responsibility for the overall nursing care	Report any change from the Client's Normal Condition to include: Temperature Pulse Respirations Blood pressure Observe and report complaints of pain Other changes in condition
Setting boundaries	To delegate effectively, nurses need to be able to rely on nursing assistive personnel's credentials and job descriptions	Notify the nurse as soon as possible
Review team building	Nursing administration has the responsibility for validating credentials and qualifications of employees	Record changes
	Both nurse and MA-C need the appropriate interpersonal and communication skills, and organizational support	Identifying initials and time on medication administration record (MAR)
	Trust is central to the working relationship	Circle and document the reasons that a client may not take a medication
		PRN medication, delegated by the licensed nurse, per facility/agency policy

Unit IV: Medication Administration

<i>Routes of Administration</i>	<i>Factors Affecting How the Body Uses Medication</i>	<i>Classes of Medications Related to Body Systems and Common Actions</i>	<i>Critical Criteria for Performance</i>
Oral	Age	Antimicrobials	Review medication record to determine the medication to be administered.
Buccal	Size	Cardiovascular	Perform three safety checks: <ul style="list-style-type: none"> • When removing the medication package from storage (drawer/shelf) • When removing the medication from the

			package/ container it is kept in <ul style="list-style-type: none"> When returning the package to where it is stored
Sublingual	Family Traits	Dermatological	Administer medication: <ul style="list-style-type: none"> To right patient Using right medication In right dose By right route At right time Right documentation
Inhaler (metered dose)	Diet	Endocrine	Location of Resources and References: Nurse Pharmacist Physician Package/drug insert Drug reference manuals
Nebulizer	Disease	Gastrointestinal	
Nasal	Psychological issues	Musculoskeletal	
Eye (ophthalmic)	Gender and basic metabolic rate	Neurological	
Ear (otic)		Nutrients/vitamins/minerals	
Topical		Respiratory	
Dressings		Sensory	
Soaks		Urinary	
Transdermal (e.g. patch)			
Suppositories (rectal and vaginal)			

Unit V: Ethical and Legal Issues

<i>Role of MA-C</i>	<i>Specific Legal and Ethical Issues</i>	<i>Critical Criteria for Performance</i>
Task is a delegated nursing function under nursing supervision	Abuse and/or neglect	Not to accept a delegation that is beyond MA-Cs knowledge and skills
The following acts SHALL NOT be delegated to MA-Cs: a. Conversion or calculation of medication dosages b. Assessment of client	Exposure to legal claims/lawsuits	Delegation is client specific

<p>need for or response to medication c. Nursing judgment regarding the administration of PRN d. Medications to be given via parenteral routes and through nasogastric, gastrostomy or jejunostomy routes</p>		
<p>May perform a task involving administration of medications if: a. The MA-C's assignment is to administer medications under the supervision of a licensed nurse in accordance with provisions of this act and rules, and b. The delegation is not prohibited</p>	<p>Fraud</p>	<p>Task cannot be re-delegated by MA-C</p>
<p>SHALL NOT perform a task involving the administration of medication if: a. The medication administration requires an assessment of the client's need for medication, a calculation of the dosage of the medication or the conversion of the dosage b. The supervising nurse is unavailable to monitor the progress of the client and the effect on the client of the medication, or c. The client is not stable or has changing needs</p>	<p>Theft</p>	<p>Speak up, ask for training and assistance in performing the delegation, or request not to be delegated particular task</p>
<p>Follow medication administration policies</p>	<p>Diversion</p>	<p>Need the appropriate interpersonal and communication skills</p>
		<p>Maintain confidentiality Respecting client's rights Respecting client's privacy</p>

		Respecting client's individuality and autonomy
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Unit VI: Clinical Application of Skills

OBJECTIVE:

- Demonstrate performance of critical behaviors for medication fundamentals, safety, communication & documentation, medication administration and ethical & legal issues
- Perform hand hygiene for each skill
- Provide privacy for patient for each skill
- Make patient comfortable during and after each skill
- Communicate completion of each skill verbally and in written form
- Complete competency checklist for all skills in clinical setting.

CONTENT:

- Application of critical criteria of each skill
- Competency checklist

CRITICAL CRITERIA FOR PERFORMANCE:

- Performs skills independently or with minimal assistance from RN/LPN.
- Performs skills correctly and meets objectives.
- Follows delegation instructions.

REFERENCES:

- ANA and NCSBN Joint Statement on Delegation: www.ncsbn.org/Joint_statement.pdf
- CMS Web site: <http://www.cms.hhs.gov/Manuals/>
- Institute of Medicine's Fact Sheet on "What You Can Do to Avoid Medication Errors":
<http://www.iom.edu/Object.File/Master/35/945/medication%20errors%20fact%20sheet.pdf>
- Institute of Medicine's Report Brief on "Preventing Medication Errors":
<http://www.iom.edu/Object.File/Master/35/943/medication%20errors%20new.pdf>
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https://www.ncsbn.org/07_Final_MAC.pdf.
- Look-alike/Sound-alike drugs: <http://www.jcaho.org/NR/redonlyres/C92AAB3F-A9BD-431C-8628-11DD2D1D53CC/0/lasa.pdf>
- MEDMARX: <http://www.usp.org/patientSafety/medmarx/>
- National Coordinating Council for Medication Error Reporting and Prevention Recommendations:
www.nccmerp.org/council/council1999-06-29.html
- National Quality Forum Recommendations: <http://www.ahrq.gov/qual/nqfpract.htm>
- NCSBN Learning Extension course: "Respecting Professional Boundaries":
<http://www.learningext.com/products/generalce/boundaries/boundariesabout.asp>
- NCSBN Model Practice Act relating to nursing assistive personnel:
www.ncsbn.org/Model_Language_NAP.pdf
- NCSBN's "A Nurse's Guide to the Importance of Appropriate Professional Boundaries":
<https://www.ncsbn.org/ProfessionalBoundariesbrochure.pdf>
- Official JCAHO "Do Not Use List": http://www.jointcommission.org/NR/redonlyres/2329F8F5-6EC5-4E21-B932-54B2B7D53F00/0/06_dnu_list.pdf
- Patient education for a metered-dose inhaler:
<http://familydoctor.org/040.xml> and www.mayoclinic.com/health/asthmainhalers/HQ01081
- Working with Others: A Position Paper: https://www.ncsbn.org/Working_with_Others.pdf