**Section 220.2500 Medication Administration**

a) Except for medications allowed in subsection (f), the only medications allowed in the residence are those for particular individual participants. The medication of each participant shall be kept and stored in the original container received from the pharmacy or as packaged by the nurse, when preparing unit dose packages from multi-dose containers.

1) Each multi-dose medication container shall indicate the participant's name, physician's name, prescription number, name, strength of dose, route of administration, frequency of dose and quantity of drug, date this container was last filled, the initials of the pharmacist filling the prescription, the identity of the pharmacy, the refill date and any necessary special instructions.

2) Each single unit or unit dose package shall contain the proprietary and nonproprietary name of the drug and the strength of the dose. The name of the participant and the physician do not have to be on the label of the package, but they must be identified with the package in a straightforward method to assure the drug is administered to the correct person.

3) When the unit dose system is used for packaging oral medication, house staff trained in administering medication may assist participants in the self-administration or in taking their medication by carrying the medication from the locked area where it is stored and handing it to the participant. If the participant is unable to receive or open the container, staff may open the container for the participant and assist him or her in consuming or applying the medication. If cognitive or behavioral limitations result in poor compliance, staff may open the container for the participant.

b) All oral medication packaged in multi-dose containers, prescribed medication given through a feeding tube, and all parenteral medication must be administered by a licensed nurse or physician, and all intravenous parenteral medication must be administered by a registered nurse or physician, unless the medication is self-administered by the participant.

c) All participants shall be evaluated by the rehabilitation team to determine their self-medication capability. Each participant determined to have the capability to learn to administer his or her own medications shall have written objectives developed by the team based on this evaluation and stated in specific behavioral terms that permit the progress of the resident to be assessed and recorded.

d) The licensee shall provide, either directly or through arrangements with a consultant nurse, training and supervision necessary for identified participants to gain independence in self-administering their own medications as approved in writing by the participant's physician, and documented in the participant's individual plan.

e) To be considered "capable of self-administering their own medications," participants must, at a minimum, be able to identify their medication by size, shape, or color and know when they should take it, and the amount to be taken each time.

f) A licensee may stock a small supply of medications regularly available without prescription at a commercial pharmacy, such as over-the-counter cough syrups, laxatives, and analgesics. These shall be given to a participant only upon the order of a physician.

g) The licensee shall have in each residence a first aid kit that contains items appropriate to treat minor cuts, burns, and abrasions.

h) All medications shall be properly stored in a secured location not accessible to unauthorized individuals.

(Source: Amended at 42 Ill. Reg. 16740, effective August 30, 2018)