

Principles for Pharmacy-Based Medication Administration Services

Pharmacists and members of the pharmacy team have important roles and responsibilities in the provision of pharmacy-based medication administration services (MAS). MAS encompasses pharmacist administration of medications, supporting patient self-administration, and all related care coordination and care management services.

Principle 1—The Pharmacist’s Role

Improve patient health by implementing, advancing, and promoting pharmacy-based medication administration. Pharmacists should:

- (a) Offer MAS to any patient who may benefit from increased access to care, pharmacist education and support, and timely options for care.
 - (b) Establish the pharmacy as an accessible site of care for medication administration and related services, whenever feasible.
 - (c) Meet or exceed established practice standards, guidelines, and expectations for health care professionals providing similar MAS.
 - (d) Provide MAS in coordination and partnership with other stakeholders.
 - (e) Align MAS delivery with the Joint Commission of Pharmacy Practitioners (JCPP) Pharmacists’ Patient Care Process.
 - (f) Deliver MAS in an environment that promotes patient comfort and safety while respecting patient privacy and confidentiality.
- (a) Collect relevant information from patients, families, other caregivers, and the health care team to assess patient well-being and individual needs before administering any medication.
 - (b) Discuss with patients, families, and other caregivers the risks and benefits of medications to be administered and the associated services, before medication administration.
 - (c) Collaborate with patients, families, other caregivers, and the health care team to set shared expectations regarding MAS, the details of the patient care plan, and plan implementation.
 - (d) Work with patients, families, and other caregivers to enhance the quality of care by serving as a trusted resource for medication-related issues or questions.

Principle 2—Empowerment of Patients, Families, and Other Caregivers

Engage patients, families, and other caregivers to determine medication administration preferences and respect care delivery decisions. Pharmacists should:

Principle 3—Pharmacist Education and Training

Achieve and maintain competence to administer medications. Pharmacists should:

- (a) Be properly trained and knowledgeable in disease pathophysiology, medication characteristics, disease and patient management, administration technique, emergency responses, patient and societal concerns, and related topics before administering a medication.
- (b) Actively engage in a process of continuous professional development to maintain competency and proficiency in the provision of MAS.



Principle 4—Documentation and Communication

Document MAS utilizing a standardized, consistent, thorough procedure, and communicate information to the patient's other health care providers as appropriate. Pharmacists should:

- (a) Establish a system of documentation and record retention related to MAS that follows established guidelines, standards, privacy regulations, and best practices.
- (b) Obtain informed consent, consistent with state law, before the administration of any medication.
- (c) Maintain medication administration records and offer an electronic or printed personal record to patients, families, other caregivers, and members of the patient's health care team, as authorized by the patient.
- (d) Inform patients, families, and other caregivers that applicable documentation of medication administration will be shared with the patient's identified medical provider and other appropriate administrative entities (e.g., Risk Evaluation and Mitigation Strategy reporting, payers, manufacturer programs in which the patient has elected to participate).
- (e) Document and report adverse events following medication administration to any appropriate members of the patient's health care team and adverse event monitoring programs.
- (f) Implement and utilize follow-up mechanisms to determine and respond to patient satisfaction concerns, issues and questions related to the MAS, deviations from the care plan, and any problems with the administered medication.

Principle 5—Collaboration and Coordination

Work with patients, families, other caregivers, members of the health care team, public health departments, and community support services to assess patient well-being, achieve positive patient outcomes, and ensure access to and coordination of care. Pharmacists should:

- (a) Collaborate with patients, families, other caregivers, and members of the health care team in the provision of pharmacy-based MAS.
- (b) Collaborate with other health care providers to assure seamless care transitions for MAS.
- (c) Facilitate overall care coordination, including benefits coverage, service scheduling, assessment of patient clinical status, provision of medication administration and patient education, and assessment of socioeconomic status and other unmet needs (e.g., immunizations, smoking cessation, comprehensive medication review).
- (d) Appropriately refer patients to other providers for treatment, follow-up, or other services.
- (e) Work with communities, public health authorities, and advocacy groups to provide outreach, information, and education that support population health initiatives.