



**In-Home Care Program**  
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To: Oregon In-Home Care (IHC) Agencies  
From: IHC Program  
RE: **IHC Services - Medication Reminding, Medication Assistance and Medication Administration Guidance**

The purpose of this memo is to address the differences between the IHC services of Medication Reminding, Medication Assistance and Medication Administration. Oregon Administrative Rules (OARs) [333-536-0005](#), [0045](#), [0070](#) & [0075](#) are referenced.

Each service is independently and distinctly defined in the Oregon Administrative Rules for IHC licensure.

### **Medication Reminding**

This is a personal care service and must not include touching medication or medication containers. Medication reminders means “providing a client with an audio, visual or oral reminder to take his or her medication when a client is able to self-direct” (see 333-536-0005(24)).

The required client self-direct evaluation documentation must be completed on the OHA prescribed form titled the “[Medication Self-Direct Evaluation Tool Form](#)”. The self-direct evaluation tool must be completed and included with the client’s record upon the start of medication reminder services, and at least every 90 days thereafter. If the client cannot self-direct their medication (e.g. cannot answer “yes” to or checks “no” to any of the evaluation questions on the form), an agency CANNOT provide medication reminders to the client (see 333-536-0005(24) and 333-536-0045(3-6)).

No medication training is required for caregivers to provide this service. However, the caregiver must have completed compliant orientation and caregiver training to provide this service to clients independently (see 333-536-0070(5-7 & 9)).

## **Medication Assistance**

This is a medication service that allows a caregiver to assist with the client's medication regimen. Medication Assistance means "assistance with self-administration of medication rendered by a non-practitioner to a client receiving in-home care services from an agency licensed under these rules and the client is able to self-direct in accordance with OAR 333-536-0045" (see 333-536-0005(23)). Medication assistance does not include putting medication in the client's mouth, eyes, ears, nose, applying medicated lotions/cremes/salves, or crushing or modifying the medication.

The required client self-direct evaluation documentation must be completed on the OHA prescribed form titled the "[Medication Self-Direct Evaluation Tool Form](#)". The self-direct evaluation tool must be completed and included with the client's record upon the start of medication assistance services, and at least every 90 days thereafter. If the client cannot self-direct their medication (e.g. cannot answer "yes" to or checks "no" to any of the evaluation questions on the form), an agency CANNOT provide medication assistance to the client (see 333-536-0005(23), 333-536-0045(3-6) and 333-536-0075).

Caregivers must have completed the medication training listed in 333-536-0070(8-9), conducted by a qualified entity\* or qualified individual\* AND have their competency evaluated through a return demonstration conducted by a qualified individual\* prior to providing medication assistance.

\* As defined in OAR 333-536-0070(36) and (37)(b)

## **Medication Administration**

This is a medication service that allows for the caregiver to administer non-injectable medications to the client. Medication Administration "means the direct application of a medication, whether by injection, inhalation, ingestion, or other means, to the body of a client by an individual legally authorized to do so.

Medication administration includes but is not limited to taking the client's medications from original containers and putting the medications into closed secondary containers designed and manufactured for this purpose" (see 333-536-0005(22)). Self-direct evaluation forms are not required for medication administration services but may be used to determine the need for such services.

Medication administration to provide injectable medication to clients must include a delegation from an Oregon licensed Registered Nurse (RN) prior to administration and can only be provided by Comprehensive IHCs.

Medication administration requires a RN evaluation every 90 days, signed physician orders and the required medication administration record documentation listed in 333-536-0075(3). Medication Set-up, moving medication from the original container into a secondary container, is medication administration, and the agency must comply with the medication administration rule requirements to provide medication set-up services (see 333-536-0005(22) and 333-536-0075(3)).

Caregivers must have completed the medication training listed in 333-536-0070(8-9), conducted by a qualified entity\* or qualified individual\* AND have their competency evaluated through a return demonstration conducted by a qualified individual\* prior to providing medication administration.

\* As defined in OAR 333-536-0070(36) and (37)(b)

### **Medication Services Compliance Guidelines**

Agencies are often cited for failing to meet requirements related to Medication Reminders, Assistance, and Administration. Many instances of non-compliance can be addressed by accurately identifying, documenting, and communicating the type of medication services provided in the client's service plan. Misidentification can lead to lapses or confusion in documentation requirements. It is essential for agency administrators, nurses, and caregivers to understand both the differences between these three categories and their unique requirements.

If you have any questions or would like this memo in an alternative format, please email the IHC survey team at [mailbox.inhomecare@odhsoha.oregon.gov](mailto:mailbox.inhomecare@odhsoha.oregon.gov).

	Medication Reminding	Medication Assistance	Medication Administration
<b>What are the applicable rules?</b>	333-536-0005(24) & 333-536-0045(3-6)	333-536-0005(23), 333-536-0045(3-6), & 333-536-0075 excluding 0075(3)	333-536-0005(22) & 333-536-0075 including 0075(3)
<b>What service type is it?</b>	Personal Care Service	Medication Service	Medication Service
<b>What Licensure Classification is required?</b>	All classifications can provide these services	Basic, Intermediate or Comprehensive	Intermediate or Comprehensive
<b>Can Caregiver touch medication containers</b>	No	Yes, after completion of medication training requirements listed in 333-536-0070(8-9)	Yes, after completion of medication training requirements listed in 333-536-0070(8-9)
<b>Can Caregiver touch medicine</b>	No	Yes, after completion of medication training requirements listed in 333-536-0070(8-9)	Yes, after completion of medication training requirements listed in 333-536-0070(8-9)
<b>Can Caregiver put medicine on or in client</b>	No	No	Yes, after completion of medication training requirements listed in 333-536-0070(8-9)
<b>Can Caregiver take medication from original container and put in a secondar container (aka fill Medi-set)</b>	No	No	Yes, after completion of medication training requirements listed in 333-536-0070(8-9)
<b>Is Caregiver Medication Training/Return Demo Required?</b>	No	Yes, see 333-536-0070(8-9) for medication training requirements	Yes, after completion of medication training requirements listed in 333-536-0070(8-9)
<b>Is a 90 Day Self-Direct required at start of services and every 90 days thereafter?</b>	Yes, see 333-536-0045 for self-direct requirements	Yes, see 333-536-0045 for self-direct requirements	No

<b>Is a list of medications required?</b>	Yes	Yes	Yes
<b>Does the medication list or physician orders have to be signed by a LIP**?</b>	No	No	Yes, see 333-536-0075(3)(d) for signature requirements
<b>Is a documented, 90-day RN client medication regimen evaluation required?</b>	No	No	Yes, see 333-536-0075(3)(e) for evaluation requirements
<b>Is agency RN supervision required to provide the service?</b>	No	No	Yes, see 333-536-0075(3) for RN requirements
<b>Are specific Medication Administration Records (MARs) required?</b>	No	No	Yes, see 333-536-0075(3)(g) for MAR requirements
<b>Does the agency have to secure and maintain the integrity of narcotics and controlled substances (aka NARC count)?</b>	No	No	Yes, see 333-536-0075(3)(c)(G) for Narcotic Medication requirements
<b>Must the service be documented?</b>	Yes	Yes	Yes

\*\*Per OAR 333-536-0005(18) "Licensed independent practitioner (LIP)" means a physician, nurse practitioner, or naturopathic physician.