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**Announcements. –  
LIBERTY CHURCH– WIFI  
Name: LIBERTY\_GUEST  
Password:**

[WWW.THEGARRNETWORK.ORG](http://WWW.THEGARRNETWORK.ORG)

- Sign In At The Website For The Training
- Recovery Residence Workshop – Leadership Training – April 16, 2024
- Next Training Is May 7 @ J's Place In Gainesville, Ga.



**RECOVERY RESIDENCE  
MEETING/TRAINING**

**MAY 7, 2024  
Noon - 2PM**

**TRAINING**  
REINFORCING YOUR  
RESIDENTS & CLIENTS  
THROUGH RECOGNITION  
RITUALS  
INTERNET  
J'S PLACE 5G  
PW: Juanita1362

**TRAINING IS  
OPEN TO EVERYONE**

**LOCATION**  
  
664 Lanier Park Dr,  
Gainesville, GA 30501  
**Lunch included**

**In Person 2 CE  
Zoom Option 1 CE  
Zoom ID: 771 569 6056  
Zoom PW: training**

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# The Challenges of Medication Management In Recovery Residences

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## ***3.5 Billion Prescriptions Per Year in USA***

***2020 CDC Report – Between 2015 – 2018 – 13.2% adults over 18 took anti-depressants in last 30 days.***

# Medication TRIVIA

**What percentage of the US population takes prescription drugs?**

**OVER 66% OF THE POPULATION IN THE US TAKE PRESCRIPTION DRUGS**

**What's the worlds #1 most prescribed Anti-Depressant ?**

***ZOLOFT***

**What Country is the biggest consumer of antidepressants ?**

**AS OF 2022, THE COUNTRIES, ICELAND, PORTUGAL, AND THE UK WERE THE BIGGEST CONSUMERS OF ANTIDEPRESSANTS.**

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# GARR Medication Policy Requirement

- Medication policy

You are required to have a medication policy. This policy must cover the following elements

- Cover both prescription and non-prescription medication
  - What medications are allowed in the house
  - How medications must be stored
  - How residents may access their medication
  - Must not contain any indication that the residence dispenses medication
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# (YOUR PROGRAM NAME) POLICY AND PROCEDURES

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## MEDICATIONS

### POLICY

Residents may take certain medications under the supervision of a qualified physician.

### BASIS

A percentage of the residents who come to (Your Program Name) are on some type of medication either for a physical or psychiatric concern.

### PROCEDURE

- A. Residents may not take any mood-altering medications (e.g. opiate-based pain medications, benzodiazepines, barbituates, sedatives-hypnotics, sleeping pills, diet pills)
- B. Residents must inform staff of any prescriptions/medications they have when they are admitted to (Your Program Name) and any prescriptions/medications they receive while a resident at (Your Program Name). Failure to do so will result in disciplinary action and possible discharge.
- C. Residents may only take over the counter medications that are approved by (Your Program Name). All medications (Tylenol, Antihistamine, Benadryl, etc.) must be discussed and approved by (Your Program Name) staff
- D. Residents who are on medication must be able to self-administer their own medication without the aid of a health-care professional. If a resident is unable to do so, then they will be referred to a facility that can aid them.
- E. Residents who are on medication are responsible for the safe-keeping and proper dosage of their medication. Any deviation from the proper dosage will be investigated by the Clinical Director. Deliberate alteration of the dosage in an attempt to alter mood will result in disciplinary action and possible discharge. Deliberate alteration of the dosage in an attempt to commit suicide will result in a therapeutic discharge to the Crisis Center.

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**Are You Detail Oriented?**

MEDICATION LIST



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## The Challenges

- Medication management in recovery residences can present various challenges and issues that need to be addressed to ensure the well-being and recovery of residents.
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# Breakout Session 1

## Part 1



**Introduce Yourself – Name – Program –  
Population Served**

**What is the medication policy for your program?**

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## Lack of Qualified Staff:

- Recovery residences may lack staff with appropriate qualifications and training in medication management, leading to errors or inadequate supervision of medication regimes.
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# Breakout Session 1

## Part 2



**You have just hired a new staff member, they have worked in the Recovery Residence world before and assure you they are competent and know what & how to do things.**

**How would you train this individual about medication management in your program.**

**Give top 5 most important elements of training for medication management.**

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## Medication Mismanagement:

- Residents may forget to take their medications or may take them inconsistently, which can undermine their treatment outcomes.
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## Medication Theft and Diversion:

- There's a risk of medications being stolen or diverted for non-medical use by residents or staff, particularly if there's inadequate security or oversight.
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## Breakout Session #2

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**Scenerio:** A resident we will call JOHN has been with you for a couple of months and has been compliant is now accusing a new roommate of stealing some of John's medications. The roommate denies this accusation and actually accuses John of overdosing his meds.

**HOW DO YOU HANDLE THIS AND WHAT THINGS WOULD YOU PUT IN PLACE TO MAKE SURE IT DOESN'T KEEP HAPPENING?**

**AFTER ALL OF THE COMMOTION – 2 DAYS LATER JOHN FINDS HIS LOST MEDICATION IN HIS BACKPACK**

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## Inadequate Monitoring:

- Monitoring medication adherence and effectiveness is crucial for successful treatment. However, in some residences, there may be insufficient monitoring mechanisms in place.
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## Complex Medication Regimens:

- Some residents may have complex medication regimens involving multiple drugs, doses, and timings, which can be challenging to manage effectively.

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## Financial Constraints:

- Some residents may struggle to afford their medications or may lack health insurance coverage, leading to non-adherence or discontinuation of essential medications.
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## Limited Access to Healthcare Providers:

- Residents may face barriers in accessing healthcare providers for medication adjustments, consultations, or prescription refills, which can compromise their treatment.
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## Co-occurring Disorders:

- Many individuals in recovery residences may have co-occurring mental health disorders, complicating medication management due to potential interactions and side effects.
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## False Positives

- Many individuals in recovery residences may have medications or combinations of medications that cause false positives on drug screens, creating a situation of confusion and mistrust.
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# Breakout Session #2

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**Scenerio: A resident who has been with you for a few months and has passed all drug screens and is doing pretty well in your program suddenly pops for amphetamines on a drug screen. They deny using anything and can't believe they have a positive screen.**

**HOW DO YOU HANDLE THIS SITUATION? WHAT ARE THE PROCESSES YOU WOULD HAVE IN PLACE TO GET TO THE BOTTOM OF THIS?**

**#1 SCENERIO – THEY STARTED TAKING A PRESCRIPTION BUT DIDN'T TELL ANYONE**

**#2 SCENERIO – THEY HAVEN'T TAKEN ANY MEDICATIONS**

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# Challenge

- Review you medication policy and training

What are your policies and procedures around medication Management, client medication adherence and support For financial hardships in maintaining medications.

Continue to revisit and train your staff around medication management and awareness.

**What can you do to improve your program and services around Medication Management**

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