

**Medication Administration Question and Answer Document**

**Version #1**

<b>6100.461 Self-Administration</b>	
1. Should recipients of an unlicensed service who receive a monthly/weekly shot administered by a physician be considered unable to self-administer medications? In this case, what requirements must the agency fulfill in terms of training provider staff (this individual could self-administer their oral/topical medications on a daily basis).	Injections or intravenous infusions that are provided by a health care practitioner as a standard practice do not factor into the determination of an individual's ability to self-administer medications.
<b>6100.465 Medication Record</b>	
2. For recipients of unlicensed services who receive medications on days when they don't receive services, how are medications to be documented? We use an electronic system and the staff's schedule fluctuates based on the individual's needs.	Medication records are only required to be kept during times when services are rendered for which §6100.465 apply. To determine whether this section applies see §6100.469 for exceptions. In addition, unpaid activities or assistance provided to an individual that is not planned or arranged by a provider generally do not fall under the scope of Chapter 6100 and are not required to meet regulatory requirements, including requirements to keep a medication record.
<b>6100.468 Medication Administration Training and 6100.469 Exceptions</b>	
3. Is the Medication Administration Training Course required for staff if individuals self-administer their medications?	No, medication administration training is not required when individuals self-administer their medications as specified in §2380.121, §2390.191, §6100.461, §6400.161 and §6500.131. Assistance in the self-administration of medication may include: helping the individual to remember the schedule for taking the medication, offering the individual the medication at the prescribed times, opening a medication container and storing the medication in a secure place. This assistance can be provided by a staff person without the medication administration training.  It is best practice for all staff, consultants and contractors to take the modified medication administration training course, even when they do not currently administer medications as part of a service, as it would enable them to administer medications to an individual should an unanticipated need arise in the future.
4. Will current medication administration trainers be able to provide the Modified Medication Administration Training Course?	The Modified Medication Administration Course is a self-paced online course. There is not a trainer requirement or option.
5. Do staff have to be medication trained when going into a private home and the parents put medication into a pill box and the only thing the staff does is give it to the individual to take themselves?	The Individual Support Plan must identify if the individual is unable to self-administer medications. If the individual is unable to self-administer medications the provider is responsible for determining whether staff will be performing medication administration activities which require medication

<p>Are providers required to have staff take medication administration training if staff are responsible for medication monitoring in an unlicensed setting?</p>	<p>administration training. Medication administration includes the following activities, based on the needs of the individual:</p> <ol style="list-style-type: none"> <li>(1) Identify the correct individual.</li> <li>(2) Remove the medication from the original container.</li> <li>(3) Prepare the medication as ordered by the prescriber.</li> <li>(4) Place the medication in a medication cup or other appropriate container, or into the individual's hand, mouth or other route as ordered by the prescriber.</li> <li>(5) If indicated by the prescriber's order, measure vital signs and administer medications according to the prescriber's order.</li> <li>(6) Injection of insulin and injection of epinephrine in accordance with regulation.</li> </ol> <p>Assistance in the self-administration of medication may include helping the individual to remember the schedule for taking the medication, offering the individual the medication at the prescribed times, opening a medication container, and storing the medication in a secure place. This assistance can be provided by a staff person without the medication administration training.</p>
<p>6. If an agency already has a robust medication training for staff in private homes (not including Life Sharing), do we have to send them for state training?</p>	<p>As per § 6100.468 (a), a person who has successfully completed a Department-approved medication administration course, including the course renewal requirements, may administer the medications, injections, procedures and treatments as specified in § 6100.462(b)(2) (relating to medication administration). To further clarify, people will not have to be “sent” for training for the Modified Medication Administration Training Course, as it is completed online.</p>
<p>7. Will parents who are Life Sharers be required to take the medication administration training?</p>	<p>Yes, parents who administer medications as part of the Life Sharing service are required to take the modified medication administration training.</p> <p>It is best practice for all Life Sharers to take the modified medication administration training course, even when they do not currently administer medications as part of the Life Sharing service, as it would enable them to administer medications to an individual should an unanticipated need arise in the future.</p>
<p>8. Will parents who are employees of an agency providing In-Home and Community Support or Companion services be required to take the medication administration training?</p>	<p>No, medication administration requirements in Sections 6100.461-6100.468 do not apply to adult relatives who render In-Home and Community Support or Companion services through the ID/A waivers or base-funding or Community Support in the Adult Autism Waiver. A relative is any of the following by blood, marriage or adoption: a spouse, a parent of an adult, a stepparent of an adult child, grandparent, brother, sister, aunt, uncle, niece, nephew, adult child or stepchild of a participant or adult grandchild of a participant.</p>
<p>9. Please explain the medication administration requirements for a participant that goes on a home visit. What is required by the family</p>	<p>An adult relative who administers medications during a visit home is not required to take the course. Unpaid activities or assistance provided to an individual that is not planned or arranged by a provider generally do not fall under the scope of</p>

<p>member? Does the less than 30 days rule apply?</p>	<p>Chapter 6100 and are not required to meet regulatory requirements, including medication administration requirements.</p>
<p>10. Is the Modified Medication Administration Training Course applicable for unlicensed Supported Living services?</p>	<p>Yes, any staff, contractor or consultant who will administer medications as part of the Supported Living service is required to take the Modified Medication Administration Training course. It is best practice for all direct service professionals rendering Supported Living services to take the Modified Medication Administration Training course, even when they do not currently administer medications as part of the Supported Living service, as it would enable them to administer medications to an individual should an unanticipated need arise in the future.</p>
<p>11. Can you please elaborate on medication training for those providing job coaching? If the individual receives more than 30 days of job coaching the staff must complete the Modified Medication Administration Training Course?</p>	<p>Yes, the Modified Medication Administration Training course is required if medication is administered by the job coach and job coaching is provided 30 days or more in a 12-month period.</p> <p>A job coach who does not administer medication is not required to take the medication administration training, regardless of how many days of service is provided.</p>
<p>12. How are you defining the exception for job coaching provided for fewer than 30 days in a 12-month period? Does a half hour check in by a job coach at a job site count as a day?</p>	<p>When medication administration occurs as part of the service, each date that the service is delivered will be counted as 1 day in determining the exception status of fewer than 30 days in a 12-month period.</p> <p>If an individual does not need staff to administer medications during service provision; staff, consultants and contractors are not required to successfully complete the Modified Medication Administration Training Course.</p>
<p>13. Regarding medication administration training, what if the job coaching service provider doesn't administer medication - never has?</p>	<p>If no medications are administered during the service, the Modified Medication Administration Training Course is not required.</p>
<p>14. For the respite care provided for fewer than 30 days in a 12-month period exception to medication administration, is that 30 days per provider for all participants or 30 days per participant?</p>	<p>Per participant.</p>
<p>15. What is the certification period for the Modified Medication Administration course? I see the certificate is worth 6 hours but when does the training need completed again? If annually, does the training need completed anytime during the training year or 365 days from last certificate date?</p>	<p>Renewal is required every 2 years and must occur no later than the last day of the 24th month following the previous completion date.</p>

<p>16. Is there a practicum required with the Modified Medication Administration course?</p>	<p>No, at this time there is no practicum with the Modified Medication Administration Training course. There will be a requirement for renewal every 2 years. The renewal course for those who have successfully completed the Modified Medication Administration Training Course has not yet been finalized.</p>
<p>17. Will the modified medication administration course be required for Support Service Professionals (SSPs) who render services under the Vendor Fiscal/Employer Agent (VF/EA) model?</p>	<p>Since services rendered through the VF/EA model are not covered by Chapter 6100 regulations, the Modified Medication Administration Training course is not required for SSPs who render services through the VF/EA model at this time. Common law employers and SSPs are welcome to take the course if they choose to and believe it will be beneficial in ensuring each individual's health and wellness during the provision of services. If ODP decides to require SSPs in the VF/EA model to take the Modified Medication Training course, this will be communicated in an updated VF/EA bulletin which would be released for public comment.</p>
<p>18. Is the Modified Medication Administration Training course required for agency with choice SSPs?</p>	<p>The Agency with Choice FMS organization is responsible for ensuring that SSPs who provide assistance with medications receive training on medication assistance specific to the needs of the individuals whom the SSPs will be assisting. Training may be provided by the Managing Employer with assistance from the AWC if requested by the Managing Employer. The AWC may at its discretion require SSPs to complete a Department-approved medication administration course as described in § 6100.468.</p>
<p>19. Are current certified medication administration course trainers required to take the Modified Medication Administration Training Course?</p>	<p>Medication administration trainers are not required to successfully complete the Modified Medication Administration Training Course, as this is a self-paced course. Certified Medication Administration Trainers are welcome to take the course if they would like to familiarize themselves with the material.</p>
<p>20. Will the Modified Medication Administration Training Course be more accessible to providers and staff or happen face to face more often?</p>	<p>The course is available on MyODP.org and accessible at the convenience of those taking the course. There is no face-to-face component of the Modified Medication Administration Training Course.</p>
<p>21. Will the current CPR/First Aid training that now provides epi pen training be adequate for staff to now use the epi pen without medication administration training which is much more extensive?</p>	<p>Training for use of the epinephrine autoinjector is in addition to the requirement for the Medication Administration Training Course.</p>
<p>22. Can you please clarify if CPR/First Aid trainers are qualified to train staff on the use of epinephrine auto injectors or if the trainer must be licensed, certified or registered by the Department of State in the health care field?</p>	<p>ODP recognizes certified CPR/First Aid Trainers as qualified to train staff on the use of epinephrine auto injectors. Training for use of the epinephrine autoinjector is in addition to the requirement for the Medication Administration Training Course.</p>
<p>23. What is the definition of "service locations that are not licensed by</p>	<p>For medication administration training requirements, please refer to the document titled Medication Administration</p>

<p>the Department"" regarding medication administration? Does this apply to a private home setting?</p>	<p>Training Requirements by Service. As you will see, training requirements and all other medication administration requirements apply to some services rendered in private home settings, with exceptions as per 6100.469.</p>
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