

# Massachusetts Department of Public Health School Health Services Unit

## Medication Administration and Epinephrine Training Registration Guidance Document



All primary and secondary public school districts and non-public schools in the Commonwealth are required to comply with M.G.L. Chapter 94C: *The Controlled Substances Act* and 105 CMR 210.000: *The Administration of Prescription Medications in Public and Private Schools*. Only licensed healthcare professionals may administer prescription medications in Massachusetts primary and secondary schools/districts **unless** the school/school district completes the application for the delegation of administration of medications to unlicensed personnel and/or the application for training on administration of epinephrine by auto-injector by unlicensed school personnel.

This Guidance details the process by which primary and secondary public school districts and non-public schools in the Commonwealth can apply for authorization to allow a school nurse to delegate the administration of prescription medications to unlicensed school personnel. This Guidance also details the process by which primary and secondary public school districts and non-public schools in the Commonwealth can apply to train their staff on the administration of epinephrine by autoinjector.

All primary and secondary schools/districts delegating medications or training unlicensed personnel to administer epinephrine via auto-injector must also obtain a Massachusetts Controlled Substance Registration (MCSR) from the Massachusetts Department of Public Health (MDPH) Drug Control Program (DCP) in addition to approval from the MDPH School Health Unit (SHU). The MCSR approval will come to the Medication Manager (RN) automatically once their MDPH SHU application is approved. The process will take a few weeks to complete.

If you have any questions about the medication delegation or epinephrine training application process please email Lauren Cosby at [medication.delegation@mass.gov](mailto:medication.delegation@mass.gov).

## **Section 1: Registration Instructions for Medication Delegation & Epinephrine Training**

- Fill out the application and meet with the other signatories (a virtual meeting is acceptable) to review the school/district policies regarding health services, medication administration, and/or epinephrine training. All signatories must sign to have a complete application. Signatures can be scanned and emailed.
- Return applications via email to the School Health Unit at [medication.delegation@mass.gov](mailto:medication.delegation@mass.gov). If submitting an application for Medication Delegation, include certificates of attendance from the two mandatory BU SHIELD courses, *Medication Administration in a School Setting: School Nurse Practice in Massachusetts* and *Medication Administration in Schools: What School Nurse Managers Need to Know*.
- Once your application has been approved, you will receive a MCSR directly from MDPH SHU.
- The school/school district's registration expires one year (365 days) from the date on the MCSR. We recommend that you keep a copy of your School Health Medical Delegation application and your MCSR for your records.

## **Section 2: School/District Key Points for Registering for Medication Delegation & Epinephrine Training**

- 1) The Medication Manager (RN) is legally responsible for the management of the medication administration and/or epinephrine training program.
- 2) All registrations must be submitted annually and will expire one year (365 days) from the date on the MCSR. Please note the date your application was approved so that your ability to delegate does not lapse.
- 3) Please make sure your correct email address and phone number are on your application. Medication Managers (RN) may receive a phone call or email from the SHU seeking clarification on your application; all approvals will be sent by email. Any updates to your contact information should be submitted directly to the School Health Unit at [medication.delegation@mass.gov](mailto:medication.delegation@mass.gov).
- 4) The primary or secondary school/district must have policies for handling, storage, delegation, and disposal of prescription medications and these policies must comply with the laws of the Commonwealth and the regulations of the MDPH SHU and MDPH DCP.
- 5) If a primary or secondary school district/school opts to **not** delegate prescription medications to unlicensed personnel, and only practices direct administration by a licensed healthcare professional, registration with the MDPH SHU and a MCSR with MDPH DCP is not necessary. The handling, storage, administration, and disposal of medications will occur under the license of a healthcare professional.
  - a) A primary or secondary school district/school who is not registered for medication delegation must apply to MDPH SHU for registration to train unlicensed staff to administer epinephrine. This registration will also require an MCSR from MDPH DCP.

### **Section 3: Key Elements of a Complete Application**

#### 1) For Medication Delegation and Epinephrine Training

- a) **Dates and Signatures:** All required signatures and dates signed must be complete. Signatures can be scanned and emailed.
- b) **Printed Names:** Ensure that all names are printed legibly *with credentials*. This is especially important for the Medication Manager (RN) and the School Physician.
- c) **Completion of the Mandatory Courses:** *Medication Administration in a School Setting: School Nursing Practice in Massachusetts* and *Medication Administration in Schools: What School Nurse Managers Need to Know*. Registration for mandated trainings can be accessed at <https://shield.bu.edu>. Copies of these certificates of attendance within the last 3 years must be included when submitting the completed application.

#### 2) For Medication Delegation Only

- a) **School Building Profile:** Ensure that the "School Building/School Nurse Staffing Profile" is completed correctly with all fields accurately documented. (**Note:** Large districts may enter the School Building/School Nurse Staffing Profile information into a spreadsheet if all the data points from the building profile are present.) This profile is critical when evaluating whether your school or school district may delegate prescription medications. The School Building/School Nurse Staffing Profile should be a detailed document that reflects a school district's nursing coverage and should include:
  - i) All health services staff with their credentials, if applicable, including support staff that are assisting healthcare professionals, such as LPNs or clerical staff.
  - ii) Plans for delegation for before and after school programs and overnight and weekend.
  - iii) Documentation of on-call capabilities with an RN at all times when an RN is not physically available at a school for residential schools.
- b) **Sufficient Number of School Nurses:** Review staffing profile to ensure that there are sufficient number of school nurses based on the student population and medical needs of that population. While 105 CMR 210.000 allows a school committee or board of trustees, in consultation with the board of health, to seek authorization from DPH to delegate administration of prescription medications to unlicensed school employees, delegation to unlicensed school personnel is not intended to take the place of licensed school nurses but rather intended to add flexibility to the nurse's daily practice. 105 CMR 210.000 still requires that "The School Committee or Board of Trustees, in consultation with the Board of Health where appropriate, shall provide assurance that sufficient school nurse(s) are available to provide proper supervision of unlicensed school personnel."

The 1998 legislative report *Options for Developing School Health Services in Massachusetts* recommended the school nurse to student ratio be 1.0 fulltime equivalent (FTE) professional school nurse (RN) in each building with 250 to 500 students. In buildings with more than 500 students, an additional 0.1 FTE is recommended for each additional 50 students. For buildings with fewer than 250 students, the recommended ratio is 0.1 FTE: 25 students.

In addition to these guidelines, the SHU recommends that a needs assessment be completed with attention paid to those children with special health care needs, as well as emergency response time for each building. If an application indicates that the nurse to student ratios for any building are greater than 1:750, a letter will be sent to the school/district noting that the ratios are above recommended levels, and the SHU reserves the right to deny the application. **Note:** Any school building with less than 1 FTE RN that intends to delegate must have an RN on-call via telephone while school is in session and the nurse is not physically present.

## **Section 4: OPTIONAL Back-Up Medication Manager (RN) Form**

- 1) School districts/schools have an option to submit a back-up Medication Manager (RN) with their medication delegation registration application. In the event the primary Medication Manager (RN) leaves their position, or steps down from this registration, the back-up Medication Manager (RN) on this application can immediately fill in as the primary Medication Manager (RN), without lapse of registration.
  - a. The optional back-up Medication Manager (RN) must complete both *Medication Administration in a School Setting: School Nurse Practice in Massachusetts* and *Medication Administration in Schools: What School Nurse Managers Need to Know* and submit the certificates with the application.
  - b. The optional back-up Medication Manager (RN) must be a Registered Nurse in the Commonwealth of Massachusetts.
  - c. When the primary Medication Manager (RN) leaves their position, they must inform the Medication Program Coordinator via email at [medication.delegation@mass.gov](mailto:medication.delegation@mass.gov). The back-up nurse manager has seven business days to inform the Medication Program Coordinator via email at [medication.delegation@mass.gov](mailto:medication.delegation@mass.gov) that they will become the primary Medication Manager (RN). In the event there is no back-up Medication Manager (RN), or the back-up Medication Manager (RN) does not confirm their intention to become the primary Medication Manager (RN) within seven business days, the school district/school's registration will be null and void and the school district/school cannot delegate medication to unlicensed school staff.
- 2) If the school district/school chooses, they may submit more than one back-up nurse Medication Manager (RN).
  - a. The school district/school will be allowed to add an additional back-up Medication Manager (RN) as needed.
  - b. If the District chooses to have more than one back-up Medication Manager (RN), there should be a plan for who will be the next in line to be the primary Medication Manager (RN) if the primary Medication Manager (RN) leaves.
- 3) The optional back-up Medication Manager (RN) application must be submitted with the school district/school's annual application.
- 4) If the optional back-up nurse Medication Manager (RN) leaves their position, that person must inform the Medication Program Coordinator at [medication.delegation@mass.gov](mailto:medication.delegation@mass.gov).

**SCHOOL BUILDING/SCHOOL NURSE STAFFING PROFILE**  
**(public school example)**

Name of school building: <u>Henrietta Lacks Elementary School</u>			
Municipality where school building is located: <u>Kennebunkport</u>			
Grade levels/ages in school building: <u>K-5</u> Number of students in the building: <u>445</u>			
Maximum distance between any two school buildings (if the school is composed of multiple buildings): <u>N/A</u>			
Name and Credentials of school nurse(s) and other healthcare staff* employed by the school (do not include per diem or substitute nurses)	On-site schedule for school nurse/healthcare staff (indicate <b>days</b> and <b>times</b> staff will be physically present)	On-call schedule** for school nurse*** (indicate whether in person or by phone)	Estimated Number of unlicensed personnel being delegated medication administration on any given day
Keanna Reyes, RN	M-F 7AM – 3PM	M-F 3PM – 5PM <i>by phone</i>	2
Lauren Baily, LPN	M-F 10AM-1PM		
Jennette Powers, Health Clinic Support Staff (clerical)	M & F 9AM-12PM		

\*Please include all health clinic staff that contribute to the workflow of the health clinic. This will assist the department in assessing coverage.

\*\*On-call coverage is required for less than 1.0 FTE in any given building, before and after school programs, overnight and weekend delegation, and all residential schools.

\*\*\*LPNs cannot delegate or be on call for unlicensed staff consultation.

**SCHOOL BUILDING/SCHOOL NURSE STAFFING PROFILE  
(non-public school example)**

<b>Name</b> of school building: <u>Residents and School of Saint Francis</u>			
<b>Municipality</b> where school building is located: <u>Oakland</u>			
<b>Grade levels/ages</b> in school building: <u>12-17 years old</u> <b>Number</b> of students in the building: <u>105</u>			
<b>Maximum distance</b> between any two school buildings (if the school is composed of multiple buildings): <u>0.2 miles</u>			
<b>Name and Credentials</b> of school nurse(s) and other healthcare staff* employed by the school (do not include per diem or substitute nurses)	<b>On-site schedule</b> for school nurse/healthcare staff (indicate <b>days</b> and <b>times</b> staff will be physically present)	<b>On-call schedule**</b> for school nurse*** (indicate whether in person or by phone)	<b>Estimated Number</b> of unlicensed personnel being delegated medication administration on any given day
<b>Julie Johnson, RN</b>	<b>M-F 7AM – 3PM</b>	<b>M-F 3PM – 5PM by phone</b>	<b>2</b>
<b>Martha Franks, RN</b>		<b>M-F 3PM-7AM Sat &amp; Sun 24/7 Mon 12AM-7AM</b>	<b>5</b>

\*Please include all health clinic staff that contribute to the workflow of the health clinic. This will assist the department in assessing coverage.

\*\*On-call coverage is required for less than 1.0 FTE in any given building, before and after school programs, overnight and weekend delegation, and all residential schools.

\*\*\*LPNs cannot delegate or be on call for unlicensed staff consultation.