

DDS Medical Advisory #14-1 (Revised #89-1, 93-1, 97-1, 99-3) September 2014

Interpretive Guidelines for the DDS Regulations Concerning The Administration of Medication by Non-licensed Personnel

Purpose

The intent of this advisory is to ensure consistency in the application of the regulations concerning the administration of medications by non-licensed personnel.

Applicability

This advisory applies to all day and residential programs and facilities as defined in the regulations, as well as individual and family homes where medications are administered by trained staff

→ Sec. 17a-210-1. Definitions

As used in section 17a-210-1 to [section 17a-210-10, inclusive, of the Regulations of Connecticut State Agencies](#):

- (a) “Administration” means the direct application of a medication by inhalation, ingestion or any other means to the body of a person, other than by injection.
- (b) “Authorized licensed practical nurse” means a licensed practical nurse who has successfully completed the department's authorization program and may be delegated responsibility to participate in certain aspects of the medication administration certification process.
- (c) “Certified non-licensed personnel” means any person who has successfully completed a training program approved by the department pursuant to [section 17a-210-3 of the Regulations of Connecticut State Agencies](#) and who has been issued a certificate authorizing him to be delegated the responsibilities to administer medication to individuals in specific programs operated and licensed by the department.
- (d) “Certificate” means written authorization issued by the commissioner that establishes the competency of a person to receive further specific training and be delegated the responsibility to administer medications by a registered nurse in accordance with sections 17a-210-1 to [17a-210-10, inclusive, of the Regulations of Connecticut State Agencies](#)
- (e) “Individual” means any person receiving services from or funded by the department.
- (f) “Community training home” means a private family home licensed by the department to provide residential supports and services pursuant to [section 17a-227 of the Connecticut General Statutes](#).
- (g) “Commissioner” means the Commissioner of Developmental Services or his designated representative.
- (h) “Controlled medication” means controlled substances, Schedules II-V, as defined in [section 21a-240 of the Connecticut General Statutes](#) and regulations adopted pursuant to [section 21a-243 of the Connecticut General Statutes](#).
- (i) “Day program” means the following programs operated or funded by the department: supported employment, sheltered employment, day support options and similar day programs funded by the department which are site-based or provided to a group of individuals.

- (j) “Delegation” means the transfer of responsibility for selected nursing tasks from the licensed nurse who is responsible for the overall plan of care for the individual to qualified non-licensed personnel.
- (k) “Department” means the Department of Developmental Services.
- (l) “Dwelling” means any building designed for human habitation.
- (m) “Employee” means, solely for the purposes of sections **17a-210-1** to **17a-210-10**, [inclusive, of the Regulations of Connecticut State Agencies](#), any individual employed by a residential facility operated, licensed or funded by the department; by a day program operated or funded by the department; or hired directly by a provider, the individual or the individual's family or guardian with department funding.
- (n) “Endorsed instructor” means a registered nurse who has successfully completed the department's endorsed instructor training program and is granted endorsement by the department to teach the approved curriculum.
- (o) “Error” means failure to administer medication to an individual, failure to administer medication within one hour of the time designated by the licensed prescriber or supervising nurse, failure to administer the specific medication prescribed for a consumer, failure to administer the correct dosage of medication, failure to administer the medication by the correct route or failure to administer the medication according to generally accepted standards of practice.
- (p) “Individual and family support” means, solely for the purposes of sections **17a-210-1** to **17a-210-10**, [inclusive, of the Regulations of Connecticut State Agencies](#), the support services provided or funded by the department through paid staff within an individual's home, or an individual's family home, or specialized day services that are self-directed. Such support services shall not include services provided in residential settings licensed or operated by the department or within day programs as defined in this section.
- (q) “Individual plan” means the department's document that guides the supports and services provided to an individual.
- (r) “Investigational drug” means any medication which is being scientifically tested and clinically evaluated to determine its efficacy, safety and side effects, and which has not yet received federal Food and Drug Administration approval.
- (s) “Licensed personnel” means a physician licensed under chapter 370 [\[FN1\]](#) of the Connecticut General Statutes, a dentist licensed under chapter 379 [\[FN2\]](#) of the Connecticut General Statutes, a registered nurse licensed under chapter 378 [\[FN3\]](#) of the Connecticut General Statutes, an advanced practice registered nurse licensed under chapter 378 of the Connecticut General Statutes, a licensed practical nurse licensed under chapter 378 of the Connecticut General Statutes practicing under the direction of a registered nurse or an advanced practice registered nurse, a physician's assistant licensed under chapter 370 of the Connecticut General Statutes or a pharmacist licensed under chapter 400j of the Connecticut General Statutes and acting in accordance with [section 19a-509d of the Connecticut General Statutes](#).
- (t) “Licensed prescriber” means a physician or other health care practitioner with applicable statutory authority to prescribe medication.
- (u) “Medication” means any medicinal preparation including controlled medication as defined in subsection (h) of this section and non-controlled medication as defined in subsection (w) of this section.
- (v) “Multiple doses” means the administration of more than one single dose, as defined in subsection (gg) of this section.
- (w) “Non-controlled medication” means those medicinal preparations that are available by prescription or over-the-counter that are not included in Schedules II-V, as defined in [section 21a-240 of the Connecticut General Statutes](#) and regulations adopted pursuant to [section 21a-243 of the Connecticut General Statutes](#).
- (x) “Original orders” means the written instructions from the licensed prescriber that provide authorization and direction regarding the administration of medication. The original orders shall either (1) contain the original signature of the licensed prescriber, or (2) be a direct facsimile transmission from the licensed prescriber, or (3) be an order taken by a registered nurse, licensed practical nurse or a pharmacist that is signed by the licensed prescriber not later than two weeks following the date the order is taken.

Discussion:

In instances where the prescriber is signing on a multipage order form, the carbon copy will be considered an original order if the following conditions are met:

- The nurse confirms that the prescriber's signature is present on the carbon copy **AND**
- The nurse confirms that the orders on the top copy are identical to the orders on the carbon copy **AND**
- The nurse co-signs the carbon copy confirming review and accuracy.

OR

If these conditions are not met the prescriber must sign each of the carbon copies for the order to be considered an original.

- (y) "Prohibited practices" means an action or inaction that violates state or federal statute or regulation, or generally accepted standards of practice.
- (z) "Provider" means a private agency, organization or individual from whom an individual, or an individual's family or guardian, purchases support services and from whom an individual receives these services.
- (aa) "Residential facility" means any campus or community-based dwelling, or respite center, funded or licensed by the department pursuant to [section 17a-227 of the Connecticut General Statutes](#) as a residence for the lodging of individuals excluding community training homes. A community-based dwelling, in which 16 or more persons reside, may be included only upon the written approval of the commissioner. Such approval shall be valid for an indefinite period subject to such terms and conditions deemed necessary by the commissioner to protect the health and safety of individuals. A dwelling that is not community-based in which eight or fewer residents reside may be approved by the commissioner for an indefinite period subject to such terms and conditions deemed necessary by the commissioner to protect the health and safety of individuals.
- (bb) "Regional director" means that person appointed by the commissioner to be directly responsible for the management of one of the three regions of the department.
- (cc) "Regional director of health services" means that person designated by the regional director to be directly responsible for the quality of individual health services in each of the three regions of the department and quality assurance provisions of the regulations concerning the administration of medication by certified non-licensed personnel and trained non-licensed personnel.

Discussion:

Director of Nursing for public programs in the regions may be utilized as the person designated in lieu of the Regional Director of Health Services

- (dd) "Revocation of certificate" means the removal by the commissioner, or the commissioner's designee, of the medication administration certification issued to certified non-licensed personnel.
- (ee) "Self-administration of medication" means that a individual is able to identify the appropriate medication by size, color, amount, or other label identification; knows independently, or with the prompting of an employee or adaptive device, the frequency and time of day for which medication is ordered; and takes responsibility for the administration of the medication as prescribed.
- (ff) "Serious medication error" means any error made by trained non-licensed personnel that requires an individual to receive medical care at a physician's office, medical facility or hospital; or that results in the injury or death of an individual.
- (gg) "Single dose" means one or more medications in the prescribed dosages that are scheduled to be administered at the same time, on the same day at a location other than a residential facility.
- (hh) "Supervisor" means an employee assigned by a residential facility, respite center or day program to be directly responsible for the management of the specific residential, respite or day program, including other persons employed by such program.
- (ii) "Supervising nurse" means a registered nurse assigned by a residential facility, respite center or day program to be directly responsible for the management of medical services provided to the individual in the specific residential, respite or day program, including the delegation of the task of medication administration to certified non-licensed personnel.
- (jj) "Suspension of certificate" means the temporary cessation by the commissioner, or the commissioner's designee, of the medi-

cation administration certification issued to certified non-licensed personnel.

- (kk) “Suspend the delegation” means the measure imposed by the delegating registered nurse to protect the health and safety of the individual following the identification of a single significant error or multiple errors committed by a certified non-licensed personnel. This measure means that certified non-licensed personnel are not permitted to administer medication until corrective action or sanction actions have been successfully completed and delegation resumed.
- (ll) “Trained non-licensed personnel” means any person who: (1) is a department-funded, paid employee; (2) is hired by an individual, the family or guardian of an individual, or a provider, to provide individual and family support services; (3) has successfully completed training required by the department, pursuant to [section 17a-210-3a of the Regulations of Connecticut State Agencies](#); and (4) has been approved to administer medication to individuals supported in their own home, family home or specialized day services.

→ Sec. 17a-210-2. Administration of medication

- (a) **Licensed personnel shall administer medication in any residential facility operated, licensed or funded by the department in which 16 or more persons reside except that certified non-licensed personnel may administer medications in these residential facilities with the prior approval of the commissioner.**

Discussion:

Regions may obtain a waiver of this section to allow certified, unlicensed personnel to administer medications in a residential facility which 16 or more persons reside as noted in Section 17a-210-1 (aa) of these regulations.

- (b) **Licensed personnel or certified non-licensed personnel may administer medication in any residential facility operated, licensed or funded by the department in which 15 or fewer persons reside, or in residential facilities approved in accordance with subsection (aa) of [section 17a-210-1 of the Regulations of Connecticut State Agencies](#), provided that investigational drugs shall be administered by licensed personnel.**

Discussion:

Regions seeking approval for the use of certified non-licensed personnel in facilities which require commissioner approval, shall submit documentation in writing to the central office director of health and clinical services stating the name of the facility and the reason for the request. The director shall confer with the Office of the Attorney General and make recommendations to the commissioner. The commissioner shall respond in writing with either a denial of request or approval with terms and conditions as appropriate.

- (c) **Licensed personnel or certified non-licensed personnel may administer medications to individuals who reside in non-community-based residential facilities as necessary for recreational activities occurring outside the residential facility in accordance with subdivisions (1), (2), (3) and (4) of subsection (n) of this section.**

Discussion:

Licensed personnel shall provide the necessary medications and directions to the certified non-licensed staff to administer medications during the recreational activity.

- (d) **Licensed personnel or certified non-licensed personnel may administer medication at any day program operated or funded by the department.**

Discussion:

There is no set limit to the number of individuals who may have medications administered at any day program. The Supervising Nurse, as defined in Section 17a-210-1 (ii) of these regulation, shall determine how the task shall be delegated based on the size of the program. Certified non-licensed personnel must have original orders available, as defined in Section 17a-210-1 (x) of these regulations, to administer medications.— Note: private day program has to have its own delegating nurse

- (e) **Licensed personnel or trained non-licensed personnel may administer medications to individuals receiving individual and family support services in accordance with the procedures and requirements established in [sections 17a-210-1 to 17a-210-10, inclusive, of the Regulations of Connecticut State Agencies](#).**

- (f) **Certified non-licensed personnel shall administer all medications in accordance with the written orders of the licensed prescriber. If a licensed prescriber determines that the training of certified non-licensed personnel is inadequate to safely administer medications to a particular individual, the licensed prescriber may order that such administration be performed by licensed personnel.**

Discussion:

Medications may be administered as ordered by other legally authorized prescribers licensed in the state of Connecticut such as a physician's assistant, an advance practice registered nurse, etc. Discussion throughout the remaining document shall include these additional practitioners.

Certified non licensed personnel must have orders that are confirmed to be accurate to administer medications. Agencies must have a policy that outlines how orders are confirmed accurate. (For example, RN reviews original and carbon copies and RN co-signs on each of the prescriber's carbon copy, have the prescriber sign the carbon copies etc). Agencies may have electronic signatures where deemed appropriate.

When a prescriber determines that training of certified non-licensed personnel is inadequate to administer medication safely to an individual, the following criteria shall be met:

- the order shall be on an individual-by-individual basis;
- the order shall be written as a doctor's order;
- the order shall be accompanied with physician rationale for medication administration only by licensed personnel; and
- the order and rationale shall be reviewed and renewed every 180 days by physician. ICF 90 days.

- (g) **Trained non-licensed personnel shall administer all medications according to written directions provided by the licensed prescriber.**

Discussion:

The directions for administration of medication shall be found on the prescription, manufacturer's label, or provided by the prescriber.

- (h) **No over-the-counter medication may be administered by certified non-licensed personnel or trained non-licensed personnel to an individual unless a licensed prescriber has previously approved of such administration.**

Discussion:

Over-the-counter is defined as any medicinal preparation which may be purchased without a written prescription presented to a pharmacist. All over-the-counter medications being administered to the individual by certified non-licensed personnel must have a written physician's order documented in the individual's record per Section 17a-210-6. Over-the-counter medications may be purchased in bulk supply as long as individual-specific physician orders are in place in the individual record. For individuals who self-administer medications, see Section 17a-210-4. Trained staff shall administer over-the-counter medications per the physician's directions per Section 17a-210-2 g. Trained staff can administer samples with labels per prescriber instructors.

- (i) **Prescribed medications shall only be administered to or taken by the person for whom the prescription has been written.**

Discussion:

Prescription medication for one individual cannot be borrowed for administration to another individual under any circumstances.

- (j) (1) **Any residential, respite or day program in which medications are administered by certified non-licensed personnel shall have a written policy which specifies the administrative procedures to be followed, the registered nurse and other employees to be notified, the local poison information center telephone number, and the physician, clinic, emergency room or comparable medical personnel to be contacted in the event of a medication emergency. Such policy shall include a list of employees and medical personnel to be contacted which is up-to-date, readily available to employees and clearly indicates who is to be contacted on a 24 hour a day, seven day a week basis.**
- (2) **Any trained non-licensed personnel who administers medications shall be aware of the emergency procedures and contact information appropriate to the individual they support.**

Discussion:

The agency's written procedures shall reflect actions relative to any medical emergency as a result of medication administration. Emergency numbers shall be readily available. All other information shall be readily available on site to all staff.

Agency procedures shall define the method of documenting a medication emergency and reporting to DDS when appropriate per DDS policy.

For trained staff the family must provide emergency contact numbers. Families shall report emergencies related to medication to DDS as appropriate.

- (k) **Certified non-licensed personnel and trained non-licensed personnel shall administer only oral, topical or inhalant medications; suppositories; medications given by gastrostomy or jejunostomy tube; or medications applied to mucous membranes. The licensed prescriber may require that the initial administration of suppositories, inhalants or medication instilled in the ears, nose, eyes, gastrostomy tube or jejunostomy tube be done under the direct supervision of licensed personnel. Injectable medications may not be administered by certified or trained non-licensed personnel except as necessary for emergency response using premeasured, commercially prepared syringe as provided for in subsection (s) of this section.**

Discussion:

The facility or Agency nurse shall provide and document additional training to certified unlicensed staff prior to staff administering vaginal or rectal medications other than suppositories.

The physician's request for supervision by licensed personnel of the initial medication administration shall accompany the prescription and/or be documented as part of the physician's written order. The agency's policy shall determine how the initial administration shall occur under the supervision of licensed personnel when required by the prescribing physician.

The facility or agency delegating nurse shall provide and document additional training to certified unlicensed staff prior to such staff administering medications via gastrostomy or jejunostomy tube (per agency policy and procedure).
For use of premeasured syringe for emergency response to allergic response see section 17a-210-2 (s)

Trained staff shall have such training provided by the family or community health care provider.

- (l) **Original orders from the licensed prescriber are required prior to the administration of medications by certified non-licensed personnel. A prescription for medication shall be limited to a ninety (90) day supply with one refill or a one hundred eighty (180) day supply. The licensed prescriber shall be notified of this requirement by the employee designated by the residential facility.**

Discussion:

Orders for prescription medication may be written for up to 180 days which includes refills except where stricter regulations apply, e.g. ICF/MR standards, or unless otherwise specified by the physician.

In instances where the prescriber is signing on a multipage order form, the carbon copy will be considered an original order if the following conditions are met:

- The nurse confirms that the prescriber's signature is present on the carbon copy **AND**
- The nurse confirms that the orders on the top copy are identical to the orders on the carbon copy **AND**
- The nurse co-signs the carbon copy confirming review and accuracy.

OR

If these conditions are not met the prescriber must sign each of the carbon copies for the order to be considered an original.

- (m) **The supervisor of any residential facility operated, licensed or funded by the department shall notify the individual's day supports and services provider of all medications the individual receives including those which the individual shall take on a regular basis during those hours the individual receives services.**

Discussion:

Agencies shall have a procedure that identifies the mechanism for communicating new orders or changes in medication regimens which occur during the day program. No medication may be administered at the day service without a current order, with an original signature, present. All medications, whether they are administered during day service hours or not, must be reported to the day service so accurate information is available in case of emergency.

- (n) (1) **When an individual who resides at a residential facility requires multiple doses of medication to be administered at a location other than a residential facility, one of the following procedures shall be utilized: (A) a licensed prescriber**

