

#### 430.160: Storage and Administration of Medication

(A) Medication prescribed for campers shall be kept in original containers bearing the pharmacy label, which shows the date of filling, the pharmacy name and address, the filling pharmacist's initials, the serial number of the prescription, the name of the patient, the name of the prescribing practitioner, the name of the prescribed medication, directions for use and cautionary statements, if any, contained in such prescription or required by law, and if tablets or capsules, the number in the container. All over the counter medications for campers shall be kept in the original containers containing the original label, which shall include the directions for use. (M.G.L. c. 94C, § 21).

(B) All medication prescribed for campers shall be kept in a secure manner (e.g., locked storage or in the controlled possession of the individual responsible for administering them, according to American Camp Association Standard HW 19). Medications requiring refrigeration shall be stored at temperatures of 36° to 46°F in accordance with Massachusetts Board of Registration in Pharmacy guidance regarding proper storage of refrigerated and frozen medications.

(C) Medication shall only be administered by the health care supervisor or by a licensed health care professional authorized to administer prescription medications. If the health care supervisor is not a licensed health care professional authorized to administer prescription medications, the administration of medications shall be under the professional oversight of the health care consultant. The health care consultant shall acknowledge in writing a list of all medications administered at the camp. Medication prescribed for campers brought from home shall only be administered if it is from the original container, and there is written permission from the parent/guardian. 105 CMR: DEPARTMENT OF PUBLIC HEALTH 430.160: continued

(D) A written policy for the administration of medications at the camp shall identify the individuals who will administer medications. This policy shall: (1) List individuals at the camp authorized by scope of practice (such as licensed nurses) to administer medications; and/or other individuals qualified as health care supervisors who are properly trained or instructed, and designated to administer oral or topical medications by the health care consultant. (2) Require health care supervisors designated to administer prescription medications to be trained or instructed by the health care consultant to administer oral or topical medications. (3) Document the circumstances in which a camper, health care supervisor, or other employee may administer epinephrine injections. A camper prescribed an epinephrine auto-injector for a known allergy or pre-existing medical condition may: (a) Self-administer and carry an epinephrine auto-injector with him or her at all times for the purposes of self-administration if: 1. the camper is capable of self-administration; and 2. the health care consultant and camper's parent/guardian have given written approval (b) Receive an epinephrine auto-injection by someone other than the health care consultant or person who may give injections within their scope of practice if: 1. the health care consultant and camper's parent/guardian have given written approval; and 2. the health care supervisor or employee has completed a training developed by the camp's health care consultant in accordance with the requirements in 105 CMR 430.160. (4) Document the circumstances in which a camper may self-administer insulin injections. If a diabetic child requires his or her blood sugar be monitored, or requires insulin injections, and the parent or guardian and the camp health care consultant give written approval, the camper, who is capable, may be allowed to self-monitor and/or self-inject himself or herself. Blood monitoring activities such as insulin pump calibration, etc. and self-injection must take

place in the presence of the properly trained health care supervisor who may support the child's process of self-administration.

(E) The camp's health care consultant shall train health care supervisors on the signs and symptoms of hypo or hyperglycemia, and appropriate diabetic plan management.

(F) The camp shall dispose of any hypodermic needles and syringes or any other medical waste in accordance with 105 CMR 480.000: Minimum Requirements for the Management of Medical or Biological Waste.

(G) The required training for health care supervisors and other camp employees designated to administer an epinephrine auto-injector pursuant to 105 CMR 430.160.(D)(3) shall: (1) be provided under the direction of the health care consultant; and (2) at a minimum, include content standards and a test of competency developed and approved by the Department;

(H) The health care consultant shall: (1) document the training and evidence of competency of unlicensed personnel designated to assume the responsibility for prescription medication administration; and (2) provide a training review and informational update at least annually for those camp staff authorized to administer an epinephrine auto-injector pursuant to 105 CMR 430.160(D)(3).

(I) When no longer needed, medications shall be returned to a parent or guardian whenever possible. If the medication cannot be returned, it shall be disposed of as follows: (1) Prescription medication shall be properly disposed of in accordance with state and federal laws and such disposal shall be documented in writing in a medication disposal log. (2) The medication disposal log shall be maintained for at least three years following the date of the last entry.