

**Medication Administration Train the Trainer Program Scholarship
Purpose and Instructions
January 1, 2016**

Purpose

The Medication Administration Train the Trainer Scholarship fund allows eligible personal care homes to send one individual to the Department-approved Medication Administration Train the Trainer course every three years free of charge. This scholarship applies to initial certification only and does not cover recertification.

Instructions

In accordance with § 2600.190(a) (relating to medication administration training), prior to administering medications to residents, a staff person must successfully complete the Department-approved medication administration course. The Medication Train the Trainer program exists for the purpose of certifying trainers to provide this training to unlicensed staff. For a personal care home to be eligible for the scholarship, the following criteria must be met:

- The personal care home applying for the scholarship must be licensed under 55 Pa. Code § 2600.
- Twenty-five percent (25%) of the residents currently served by the personal care home applying for the scholarship must receive Supplemental Security Income (SSI).
- The trainer candidate must currently be employed by the personal care home and must have been employed by the personal care home for at least 6 months at the time of application.
- The trainer candidate must have successfully completed the Department-approved medication administration course if he or she is not a licensed medical professional and must be familiar with the policies and procedures of the home relating to medication administration.
- The attached application must be completed by the licensed personal care home and returned to the following address. Or, in lieu of mailing, the application may be faxed to (717) 783-5662 or emailed to ra-pwarlheadquarters@pa.gov.

Department of Human Services
Bureau of Human Services Licensing - Training Director
Room 631 Health and Welfare Building
625 Forster Street
Harrisburg, Pennsylvania 17120

If the application is approved, an approval letter will be sent to the personal care home with a copy sent to the administrator of the Medication Administration Train the Trainer program.

Applications will be reviewed on an individual basis. The scholarships are not an entitlement and are dependent upon budget availability.

If you have questions you may call the Operator Support Hotline at (866) 503-3926 or email your question to ra-pwarlheadquarters@pa.gov.

Commonwealth of Pennsylvania
Department of Human Services
Bureau of Human Services Licensing
Medication Administration Train the Trainer Program Scholarship

Application Form

1. **Personal Care Home Name:** _____
2. **Personal Care Home Address:** _____

3. **Personal Care Home Phone Number:** _____
4. **Personal Care Home License Number:** _____
5. **Legal Entity Name:** _____
6. **Legal Entity Address:** _____

7. **Legal Entity Phone Number:** _____
8. **Personal Care Home Administrator:** _____
9. **Name of Trainer Candidate:** _____
10. **Licensed capacity of personal care home:** _____
11. **Number of residents currently served by the personal care home:** _____
12. **Number of residents who currently receive Supplemental Security Income (SSI):** _____

For Department use only

Percentage of residents receiving SSI: _____

Approved _____ Denied _____

Signature _____ Date _____