

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

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 free of charge. This scholarship can only be granted to a Personal Care Home (PCH) every three years. The 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 PCH 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.

Email:
ra-pwarlheadquarters@pa.gov

Fax:
717-783-5662

US Mail:
Department of Human Services
Bureau of Human Services Licensing
Health & Welfare Building, Room 631
625 Forster Street
Harrisburg, PA 17120

If the application is approved, an approval letter will be sent to the PCH, 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.

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Application Form

1. **Full Name of Applicant:**

2. **Job Title of Applicant:**

3. **Date of Hire of Applicant:**

4. **Qualifications of Applicant:**

Original Medication Administration Training documents and (if applicable)
Current Annual Practicum is attached.

5. **Legal Entity Name:**

6. **Legal Entity Address:**

7. **Legal Entity Phone Number:**

8. **PCH Name:**

9. **PCH Address:**

10. **PCH Phone Number:**

11. **PCH Email:**

12. **PCH Administrator:**

13. **PCH License Number:**

14. **PCH Licensed Capacity:**

15. **PCH Current Census:**

16. **Number of residents who currently receive Supplemental Security Income (SSI):**

17. **PCH Administrator:**

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Percentage of residents receiving SSI:

Approved

Denied

Signature

Date