

**Maryland General Assembly
Department of Legislative Services**

**Emergency Regulation
Department of Health and Mental Hygiene
(DLS Control No. 16-105)**

Overview and Legal and Fiscal Impact

The regulation clarifies health and medication requirements for youth camps including the administration of insulin, medication disposal, administration of emergency and routine medications, and annual approval for training programs.

The regulation presents no legal issues of concern.

There is no fiscal impact on State or local agencies.

Regulation of COMAR Affected

Department of Health and Mental Hygiene:

Housing: Health and Medication Requirements for Youth Camps: COMAR 10.16.07.14

Legal Analysis

Background

In April 2015, the Board of Nursing submitted COMAR 10.27.11.01 to the Joint Committee on Administrative, Executive, and Legislative Review. The regulation added youth camps to the list of persons that are exempt from the regulations governing the delegation of nursing tasks by registered nurses. The change allowed youth camp staff members and volunteers to administer medication without a nurse being required to oversee the administration. For an analysis of this regulation, see DLS Control No. 15-038.

In June 2015, the Department of Health and Mental Hygiene submitted to the committee COMAR 10.16.06.33, which allowed routine medications to be administered at a youth camp by an adult staff member or volunteer who has successfully completed a training course that was previously approved by the Office of Child Care of the Maryland State Department of Education and is acceptable to the department. The regulation had emergency status from July 1, 2015, until December 21, 2015. For an analysis of this regulation, see DLS Control No. 15-115.

In December 2015, the department submitted to the committee a reorganization of health and safety protocols to better clarify medication administration for youth camps by establishing a new chapter entitled Health and Medication for Youth Camps under COMAR 10.16.07 and moving provisions regarding the administration of nonprescription and prescription medications

at youth camps from COMAR 10.16.06.23 through .33 to the new chapter. For an analysis of these regulations, see DLS Control No. 15-386.

As originally submitted to the committee in December 2015, COMAR 10.16.07 included Regulation .14, which was an amended version of the former COMAR 10.16.06.33 regarding nonprescription and prescription medications and repealed the former regulation. However, concerns were raised by interested parties about the regulation and the Secretary of Health and Mental Hygiene withdrew Regulation .14, while finalizing the repeal of former COMAR 10.16.06.33 in anticipation of the revisions submitted to the committee in May 2016 as discussed in this analysis.

Summary of Regulation

The regulation clarifies health and medication requirements for youth camps including the administration of insulin, medication disposal, administration of emergency and routine medications, and training programs.

Administration of Insulin

The regulation clarifies who may administer insulin to a camper. A staff member may administer insulin to a camper if the staff member is a licensed or certified professional who is authorized to practice in Maryland and whose scope of practice includes medication administration. Additionally, a camper may self-administer insulin if both a parent or guardian and a licensed or authorized prescriber provide written consent and an adult staff member or volunteer designated by the health supervisor supervises the camper while the camper self-administers the medication.

Medication Disposal

The regulation clarifies the process for disposing medication. Within two weeks after the end of a camping session or when a medication is discontinued, medication is required to be (1) returned to a parent, guardian, or individual designated by the parent or guardian or (2) destroyed. The regulation also allows a parent or guardian to authorize an unaccompanied camper traveling by themselves to take their medication with them at the end of a camping session. A staff member or designated volunteer is required to document the final disposition of the medication using a specified form.

Administration of Emergency Medication

The regulation clarifies who may administer emergency medication and how emergency medication should be carried or stored. An adult staff member or volunteer may administer emergency medication to a camper if the staff member or volunteer has completed a specified training program or been trained by a health supervisor. Additionally, a camper may self-administer emergency medication if both a parent or guardian and a licensed or authorized prescriber provide written consent and an adult staff member or volunteer designated by the health supervisor supervises the camper while the camper self-administers the medication. The

regulation also requires that emergency medication be (1) carried by a camper if both a parent or guardian and a licensed or authorized prescriber provide written consent and the health supervisor has designated an adult staff member or volunteer to supervise the camper while the camper self-administers the medication; (2) carried by an adult staff member or volunteer designated by a health supervisor to supervise a camper; or (3) stored at a designated, easily accessible location.

Administration of Routine Medication

The regulation clarifies who may administer routine medication. A staff member or volunteer may administer insulin to a camper if (1) the staff member is a licensed or certified professional who is authorized to practice in Maryland and whose scope of practice includes medication administration or (2) the staff member or volunteer is an adult who has completed a specified training program. The regulation specifies that routine medication does not include insulin.

Training Program

The regulation clarifies the training program requirements a staff member or volunteer is required to complete before administering routine medication. The staff member or volunteer must complete a program on an annual basis. Additionally, the department is required to annually approve the training program.

Legal Issues

The regulation presents no legal issues of concern.

Statutory Authority and Legislative Intent

The department cites § 14-403 of the Health – General Article, and §§ 8-6A-01 through 8-6A-16 and 14-306 of the Health Occupations Article as statutory authority for the regulation. More specifically, § 14-403 of the Health – General Article requires the Secretary to adopt regulations for certifying youth camps, including provisions regarding personal health, first aid, and medical services. The remaining cited authority is not relevant to the regulation.

Although not cited by the department, § 2-104 of the Health – General Article authorizes the Secretary of Health and Mental Hygiene to adopt regulations to carry out the provisions of law that are within the jurisdiction of the Secretary.

With the addition of § 2-104, the relevant cited authority is correct and complete. The regulation complies with the legislative intent of the law.

Emergency Status

The department requests emergency status beginning June 1, 2016 and expiring November 27, 2016. This emergency period is within the normal time frames approved by the

committee. The department indicates the emergency status is necessary so that the regulation will be in effect for the 2016 camp season, which generally starts around Memorial Day.

Fiscal Analysis

There is no fiscal impact on State or local agencies.

Agency Estimate of Projected Fiscal Impact

The regulation clarifies health and medication requirements for youth camps. The department advises that the regulation has no impact on State or local governments. The Department of Legislative Services concurs.

Impact on Budget

There is no impact on the State operating or capital budget.

Agency Estimate of Projected Small Business Impact

Although the regulation largely clarifies current protocols and requirements related to health and medication for campers at youth camps, the department advises that the regulation has a meaningful economic impact on small business. This impact is due to the new requirements that youth camps send staff members or volunteers who will administer medication to annual department-approved trainings and for staff members to successfully complete the training course. Some youth camps may also determine that there is a need to hire a licensed medical professional to administer medications. The Department of Legislative Services concurs.

The department also notes that youth camps may realize some efficiencies due to the clarifications and expanded opportunities for youth camps to accept campers with chronic medical problems. The Department of Legislative Services concurs.

Contact Information

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