

## **Guide to the MAP Policy Manual**

### **11-17-25 Updates and Changes**

**Manual Cover:** 11-17-2025

#### **Reminder:**

Throughout the new online policy manual, all references to policy, guidance and legislation are hyperlinked for improved navigation.

MAP service providers should ensure that access is always available to the online version of this policy manual as it is a required reference material. There is no requirement to maintain a paper copy of the policy manual at MAP registered sites although if you prefer to do so, please ensure it is the most updated version.

#### **Updates/Changes within Sections of Manual:**

##### **Definition of Terms:**

Acceptable Codes:

Acceptable code P (Packaged) language expanded so that the code can be used when a licensed staff is teaching an individual to self-administer an injectable medication.

Acceptable code MNA (Medication Not Administered) to replace a circled set of initials for a medication not administered.

##### **Section 4:**

Policy 04-1 reformatted and language edited removing the requirement that the TTT program must be completed in 3 months allowing the state agencies the ability to determine when the program must be completed.

##### **Section 5:**

Language added requiring a “refresher” training prior to recertification testing. *\*\*\*The requirement for refresher training will be implemented starting 5/1/26 (i.e., will be a required field to be completed in TMU).*

Recertification Form and Recertification Evaluation Guide were updated to reflect the requirement of recertification training.

##### **Section 11:**

Language edited to include that a stop date is only required to be completed on the medication administration record for time-limited medication orders.

Language edited to reflect the use of acceptable code MNA instead of circled initials on the medication administration record.

##### **Section 18:**

Language edited allowing trained MAP Certified staff to conduct blood glucose monitoring for individuals receiving other than just “oral” medication.

## **04-15-25** ***Updates and Changes***

### **Updates/Changes within Sections of Manual:**

#### **Section 13:**

Language was added to clarify that MAP Certified staff may not be assigned the task of medication administration to certain skin conditions i.e., open wounds.

#### **Section 19:**

Language was edited to reflect that the FDA has removed Clozapine from the REMS program. Clozapine remains a “high-alert” medication in MAP. The Clozapine required competency is now a single form titled ‘*Clozapine Therapy Training*’. The Clozapine Medication Sheet, ‘Individual Specific’ Competency form and the Clozapine Protocol form were removed from the Forms section as they are no longer applicable.

Language was added to include that a trained and competent LPN may provide **subsequent** G/J Tube Training. All G/J Tube forms have been updated to reflect this change.

## **12-2-24** ***Updates and Changes***

### **Updates/Changes within Sections of Manual:**

**MassAbility (formerly known as The Massachusetts Rehabilitation Commission) has been added to the MAP Policy Manual cover, throughout the manual, and to applicable forms.**

**Several policies with corresponding Competency Tools and Forms have been consolidated to include all links to the Tools and Forms onto the same page to reduce scrolling.**

#### **Section 04:**

Language added to clarify that MAP Certification Training must be presented as a hybrid model.

#### **Section 10:**

Language added to clarify that an “*agreement*” verses a “*contract*” is required with the pharmacy when utilizing multi-dose medication packaging.

Language added to clarify that any MAP Consultant, verses only the pharmacist, may be contacted to verify if the medication on-hand may be utilized when Exhausting the Current Supply.

**Section 12:**

A link was added to access the '[high-risk Schedule VI](#)' medication list.

Language was added recognizing that some programs (e.g., Day Programs) are not operational 24-hours per day/7-days per week (e.g., open Monday-Friday only).

**Section 14:**

Language was added to reflect additional Service Provider Polices and Site Record Keeping Requirements if a service provider chooses to train MAP Certified staff to administer injectable schedule VI medications as indicated in Section 19.

**Section 19:**

Policies and competency evaluation forms were added allowing MAP Certified staff, who meet the specified criteria and are successfully trained, to administer insulin and other schedule VI medications according to the HCP order, via a pharmacy labeled, prefilled auto-injector pen. ***Please know that sites may continue to utilize licensed staff to administer insulin and are not required to institute this policy; this policy is optional.***

**Section 23:**

'Policy 23-1 Administration of Injectable Medication' was removed from the policy manual as injectable schedule VI medications are now addressed in section 19.

Section 23 now contains contact information.

**3-1-24**  
***Updates and Changes***

**Update:** All Forms, required and sample, have been removed from the MAP Policy Manual and have been replaced with a link, in the policy, to the location of the form; the MAP Policy Manual and all Forms are located on the Department of Public Health (DPH) website, [www.mass.gov/dph/map](http://www.mass.gov/dph/map).

**Section 02:**

*The Annual Observation of Medication Administration* Form was updated to reflect the new Medication Administration Process.

**Section 05:**

The *MAP Recertification Evaluation Form* was updated to reflect the new Medication Administration Process.

The *MAP Recertification Evaluation Guide* was updated to reflect the new Medication Administration Process.

**Section 08:**

Expanded to include language that only the last page of a multi-page set of HCP orders require an HCP signature (wet or image) if established criteria is met.

**Section 12:**

Expanded to allow for a Biometric Medication Security System.

**Section 14:**

Language added for a required Service Provider Policy if a Biometric Medication Security System is utilized.

**11-15-23**  
***Updates and Changes***

**Section 04:**

The timeline requirement to complete the TTT Program has been changed from 6 months to 3 months.

MAP Trainer candidates with less than two (2) years of experience in their profession are subject to an 'admission review process' by the applicable state agency MAP Director.

**Section 08:**

Expanded to include language that a copied prescription meets criteria to be utilized as an HCP Order at the MAP Registered site.

**Section 17**

The reporting of hotline medication occurrences to DPH will now be completed through the [DPH Hotline Reporting System](#).

- *Hotline medication occurrences will no longer be faxed or called into the DPH; the reporting of hotline medication occurrences to DPH will be completed online only.*
- *Reporting timeline requirements remain unchanged.*
- *Reporting to the applicable state agency remains unchanged.*

**6-28-23**  
***Updates and Changes***

**‘MAP Modernization Project’**- In February 2022, the Massachusetts Drug Control Program and the Bureau of Health Professions Licensure contracted with Eastern Research Group, Inc. (ERG) to research the issues surrounding medication administration by unlicensed assistive personnel (UAPs) to individuals of MAP community residences and other associated MAP programs. Following the release of ERG’s recommendations, a stakeholder led advisory committee was formed to review ERG’s recommendations and many of the changes you will see in this new Policy Manual are a result of this collaboration.

**Manual Cover:** 6-28-23

**Table of Contents:** The entire Table of Contents and Reference pages were updated.

**Electronic Format:** Throughout the new online policy manual, all references to policy, guidance and legislation are hyperlinked for improved navigation.

Moving forward, when an Advisory is released, the update will be made, at the same time, to the online MAP Policy Manual, located on the Department of Public Health (DPH) website, [www.mass.gov/dph/map](http://www.mass.gov/dph/map). MAP service providers should ensure that access is always available to the online version of this policy manual as it is a required reference material. There is no requirement to maintain a paper copy of the policy manual at MAP registered sites although if you prefer to do so, please ensure it is the most updated version.

**General changes:** The entire MAP Policy Manual was revised, edited, and updated for clarity. The Massachusetts Rehabilitation Commission was added to the Medication Administration Program. The policy sections were reorganized for a more cohesive manual. Some policies were updated to reflect electronic and paper documents and references. All MAP policies were reviewed, edited, updated to reflect current MAP standards. The Trainings and Competency Tools were updated to include both ‘general knowledge’ and ‘individual-specific’ sections.

**Updates/Changes within Sections of Manual:**

**Section 01:** Now lists information specific to Department Guidance Requirements

**Definition of Terms:**

Terms Removed: ‘Nurse Monitor’.

New Terms added: ‘Site Supervisor’, ‘Licensed Staff’, ‘MAP Quality Assurance Monitor (MAP Monitor)’, ‘Administrative Staff’, ‘MAP Registered Site’, ‘Medication Administration Process’, ‘Protocol’, ‘Service Provider ‘Procedure’ ‘Service Provider Policy’, ‘Staff Signature’, ‘Department of Public Health (DPH)’, ‘Drug Control Program (DCP)’, ‘State Agencies’, and ‘Acceptable Codes’

New Policy 01-2 ‘MAP Waiver Request’ added.

**Section 02**

‘MAP Monitor’ information moved from Section 04 to new Section 02: Youth Community Programs. This is a new policy section dedicated to *only* DCF and DMH youth community programs.

The name was changed from ‘Nurse Monitor’ to ‘MAP Monitor’ and Policy 02-2 includes the requirements and duties associated with the quality assurance monitor role of the MAP Monitor.

New! Sample ‘Annual Observation of Medication Administration’ Form added.

### **Section 03**

Site Registration Requirements information moved from Section 01 to Section 03.

All policies in this section have been updated to reflect the new online process for obtaining and renewing a MAP Massachusetts Controlled Substances Registration (MCSR) through the DPH online eLicensing System.

New Policy 03-3 ‘Preparation for Site Registration’ (taken from MAP Advisory).

### **Section 04:**

Training and curriculum requirements moved from Section 03 to Section 04.

All policies in this section were updated to reflect that MAP Certification Training must now include the online MAP Certification course entitled ‘*Responsibilities in Action Massachusetts MAP Certification Training*’, including the Instruction and all Required Components.

New Policy 04-4 ‘Revocation of MAP Trainer Approval Status’. Contained within the policy are reasons why a MAP Trainer’s Approval status may be revoked

### **Section 05:**

Staff Certifications information moved from Section 02 to Section 05.

All policies in this section were updated to reflect the timeline to complete certification testing, following certification training, from 6 months to 3 months.

All policies in this section were updated to reflect that Transcription was removed from Certification Testing (MAP Advisory).

MAP Recertification Form updated to reflect the removal of the transcription test requirement.

### **Section 06:**

Role of Nursing information moved from Section 04 to Section 06.

New Policy 06-1 'Board of Registration in Nursing Guidance'.

Updated Policy 06-2 to reflect Board of Registration in Nursing Advisory Ruling Number 9401.

**Section 07:**

Role of Consultants in MAP information moved from Section 05 to Section 07.

**Section 08:**

Health Care Provider Orders information moved from Section 13 to Section 08.

Policy 08-1 'Required Components of Health Care Provider Medication Orders' was expanded to include acceptable HCP signatures (taken from Advisory).

Policy 08-2 'Health Care Provider Orders Received by Fax, Email, Telehealth, and Telephone' updated with added information when HCP Orders are received by email or telehealth (taken from Advisory).

Policy 08-5 'Monthly Accuracy Check of Health Care Provider Orders' was added to clarify the existing expectation that medication administration records are reconciled before the start of each new month for accuracy.

Policy 08-6 'Medication Reconciliation and Discharge Health Care Provider Orders' was updated to allow previous HCP orders at the MAP registered site to remain valid alongside discharge orders, where proper reconciliation has been performed.

**Section 09:**

Sample Medication information moved from Section 10 to new Section 09: 'Sample Medication'.

**Section 10:**

Pharmacy information moved from Sections 06, 12, and 13 and moved to new Section 10: 'Pharmacy'.

Policy 10-1 'Acceptable Prescription Medication Packaging' was updated to allow MAP registered sites to accept pharmacy packaged multi-dose medication packaging of schedule VI medications and OTCs, with suitable requirements.

Policy 10-06 'Over-the-Counter Medications and Dietary Supplements' was updated to provide language for exceptions to the requirement of HCP Orders and pharmacy labels for nonprescription personal hygiene products when deemed appropriate with the HCP, and flexibility for prescribed OTC medications to be stored and administered in MAP

registered sites without a pharmacy label if suitable training and verification procedures are followed.

**Section 11:**

Medication Administration Records information moved from Sections 06 and 13 to new Section 11: 'Medication Administration Records'.

Language was updated throughout to reflect the use of electronic MARS.

New Policy 11-3 'Service Provider Transcription of Medication Management System' (taken from MAP Advisory).

New Policy 11-3 'Medication Administration Record Documentation' was added to clarify existing expectation of medication administration documentation.

**Section 12:**

Medication Security information moved from Section 10 to Section 12.

Policy 12-2 'Schedule II-V Medication Security Measures' was expanded to include when a 'single count' may be conducted (taken from Advisory).

New Policy 12-3 'Countable Controlled Substance Book' was added to clarify existing expectation about the management and documentation of countable controlled substances.

New Policy 12-5 'Transportation of Medication' (taken from MAP Advisory).

New Policy 12-7 'Drug-Tampering and Suspected Drug-Tampering' (taken from MAP Advisory).

Policy 12-8 'Drug Loss' updated to include the new online process for reporting a drug loss via a Drug Incident Report available on the DCP Website.

**Section 13:**

Medication Administration information moved from Sections 06 and 09 to Section 13.

New Policy 13-2 'Medication Refusals' was added to clarify existing expectation when a medication is refused.

New Policy 13-3 'Day Program Medication Requirements' includes specific requirements for Day Programs that have an MCSR.

**Section 14:**

Policies, Procedures and Record Keeping information moved from Sections 1, 8, and 10 to new Section 14: 'Policies, Procedures and Record Keeping'.

New Policy 14-2 'Site Record Keeping Requirements' was added to clarify what records must be maintained at the site.

New Policy 14-3 'Retention Period for MAP Program Records' (taken from Advisory).

### **Section 15:**

Medication Disposal information moved from Section 10 to Section 15.

Policy 15-1 'Medication Disposal Guidelines' was updated to include information for when a medication is brought to a take-back program for disposal.

The Disposal Record Form was updated; outdated **empty** forms should now be discarded, and the new form (revision date 6/28/23) used.

### **Section 16:**

Off-Site Medication Administration, Certified/Licensed Staffed Vacation, Leave of Absence, Backpacking information moved from Sections 11 and 10 to Section 16.

New Policy 16-2 'Off-Site Administration of Medication' details when medication is administered by Certified/licensed staff at an off-site location (taken from Advisory).

New Policy 16-3 'Vacation Accompanied by Certified/Licensed Staff' was added to clarify prior policy when medication will be administered to the individual by Certified/licensed staff while the individual is on a vacation.

Policy 16-5 'Preparation of Medication for a Leave of Absence' was updated to include that if LOA medication is prepared by the pharmacy, multi-dose medication packaging may be used.

### **Section 17:**

Medication Occurrence information moved from Sections 09 and 10 to Section 17.

The DPH Medication Occurrence Report (MOR) Form was updated; when applicable, please start using the DPH MOR Form with the 6-28-23 Revision Date.

### **Section 18:**

Ancillary Practices by Certified Staff information moved from Section 08 to Section 18.

New! Sample (Optional) Competency Evaluation Tool for Vital Signs Training added.

New! Sample (Optional) Competency Tool for 'General Knowledge' of Blood Glucose Monitoring added.

New! Sample (Optional) Competency Tool for 'Individual Specific' Blood Glucose Monitoring added.

**Section 19:**

Specialized Training Related to Medication information moved from Sections 08 and 14 to Section 19.

All competency Evaluation Training Forms and Tools updated to reflect both 'general knowledge' and 'individual-specific' sections.

All Protocol Templates have been updated.

New! Sample (Optional) Competency Tool for 'General Knowledge' of Oxygen Therapy added.

New! Sample (Optional) Competency Tool for 'Individual Specific' Oxygen Therapy added.

New! Sample (Optional) Oxygen Therapy Protocol Template added.

**Section 20:**

Learning to Self-Administer Medication information moved from Section 07 to Section 20.

Section updated to provide clearer guidelines to promote self-administration of medications.

All Tools/Templates have been updated.

New Policy 20-2 'Definition and Criteria for Learning to Self-Administer Medication' was added to clarify the differences between 'self-administration of medication' and 'learning to self-administer medication'.

New Policy 20-7 'Ongoing Supports for Individuals Learning to Self-Administer their Medication'.

New Policy 20-8 'Change in Individual's Status Warranting a Reevaluation'.

**Section 21:**

DPH Clinical Review and Inspections information moved from Section 15 to Section 21

**Section 22:**

Hospice Care Services information moved from Section 16 to Section 22.

Section updated to remove all policies that had been rescinded through prior Advisories.

Existing policies expanded upon to provide clear guidelines for a service provider to follow if Hospice services are instituted at the site.

All Forms and Tools have been updated.

**Section 23:**

Administration of Injectable Medication information moved from Section 14 to Section 23.

**Section 24:**

Resources moved from Section 17 to Section 24.

Resources are now accessed through use of a link so that contact information will always be the most updated information available.

**MAP Advisories:**

The final section of the previous policy manual, which was reserved for advisories about updates made to the existing manual, has been removed. The new manual will be maintained electronically and updates to the manual will be made periodically as required. Once these updates are approved, they will supersede existing content immediately and be incorporated into the appropriate section of the policy manual.