

Medication Administration

POLICY/APPROACH:

SOCFC strives to meet the needs of each child who is served, including those with health-related disabilities or special needs. For this reason, and in compliance with Head Start Performance Standards and Health Department and Child Care Licensing Regulations, the Medication Administration Policy clearly defines procedures for administering medication and performing medical procedures.

Medication will only be administered to children with chronic illness and specific disabilities or when required and only with an Individual Care Plan (ICP) in place. Every effort will be made for children to receive medication from their parent/guardian in the home environment. When circumstances require, specific health procedures will be completed only by a licensedhealth professional.

POLICY COUNCIL APPROVAL 2/18/2014 BOARD APPROVAL 2/20/2014

HEAD START PROGRAM PERFORMANCE STANDARDS:

1302.47 (b)(7)(iv) – Safety Practices – Administrative safety procedures

OREGON STATE OFFICE OF CHILD CARE:

OAR 414-300-0230 - Medications

Our procedures are subject to adjustment based on Public Health needs or advisory from either our local, state or federal governing bodies. Any temporary modifications to procedures in this event will be documented and shared with staff.

PROCEDURE:

- 1. Center Staff will **notify Health Services** whenever they discover that a child is required to take a prescribed medication while attending class/center activities.
- 2. Center Staff will request a Specialist ROI, if one is not already in place, be sent to the family by Health Services.

- 3. Health Services will then send a Medication Administration form, to the child's medical provider to fill out.
- 4. The **Health Care Provider will provide** the following information and return it to Health Services:
 - Reason for the medication to be given
 - Name of the medication
 - Dosage, route, and duration of medication required
 - Administration schedule
 - Possible side effects of the medication
 - Special instructions or precautions or asthma triggers
 - Health care provider signature
- 5. Once the form is received from the health care provider, Health Services will document the information in the agency database.
- 6. Health Services will then fax/scan/send/bring an Individual Care Plan (ICP) with instructions to center staff. The ICP may just be the Medication Administration Form, or it may be that form along with a separate plan outlining additional needs.
- 7. Center staff who will be administering the medication will print and sign the form as they are trained on it. The ICP will be reviewed with staff working directly with that child (SiteManager, Head Teacher, Teacher, EHS Specialist, etc.).
- 8. Center staff will review the ICP with the parent and have the parent sign the form to approve the plan, and give staff permission to administer the medication indicated.
- 9. Center Staff will request that the parent share the medication administration routine they use with their child.
- 10. All staff are trained annually in medication administration, and individually asneeded, to meet the health and safety needs of children with whom they work. Staffwill receive additional training if they request it.
- 11. For EHS Parent/Child groups, the parent/guardian will be responsible for administering their child's medication.
- 12. The Site Manager will review and accept the medication from the parent and the ICP to ensure that they match, then review it with the classroom team, and sign the form as received. This must be completed before a child can receive medication from center staff.
- 13. Center staff will ensure that the completed (signed) copy of the ICP is emailed or faxed to Health Services and a copy is kept with the medication itself.

- 14. The child will not be given medication while at the center until the parent/guardian hassigned the ICP, provided the medication indicated by the provider, and staff are trained and have signed the ICP.
- 15. A child needing "**rescue medications**" (Epi-pen, Diastat, etc.) will be excluded from attending class until the parent/guardian provides the medication, all of the above process steps have been completed, and the ICP is fully executed and trainedon, and the license reflects the unlocked medication.
- 16. The Teacher/EHS Specialist must review and become familiar with all information in the Child's Health Record in the electronic files for children on their caseload, to become familiar with children's possible symptoms, to clearly understand if/when medication is needed, what specific medication instructions are to be followed, and any potential side effects of the medication.
- 17. Staff will contact Health Services if they are unclear about the medication instructions or have any concerns regarding the administration of any medication prior to administering.
- 18. The parent must bring the medication <u>directly</u> to the Site Manager or properly trained delegate assigned by the Manager, in its **original childproof container** that is **labeled** with:
 - The child's first and last name;
 - The name and strength of medication;
 - The date the prescription was filled;
 - The name of the health care provider who wrote the prescription;
 - Medication's expiration date; and
 - Prescription label with specific, legible instructions for administration (dose, route, frequency), storage, and, if applicable, disposal.
 - If it is a prescribed over-the-counter medication (has no pharmacy label), let Health Services know so a label can be generated.

19. If a parent is unable to bring the medication directly to the center, then a plan will be put into place by the Health Manager.

20. Medication Bags will include:

- A label on the outside including: child's name, medication expiration date, lock combination
- Medication (see #18 for details)
- Dispensing devices (spacer, nebulizer, etc.)
- Medication Log
- Copy of completed ICP (Medication Administration Form) with a photograph of the child attached
- 21. **Medication must be kept out of the reach of children**. Medications must be locked up at all times (except emergency medications, such as epi-pens). The Health Manager will contact the Office of Child Care and request an exemption to locking rescue medications. If medication requires refrigeration, a container will be provided by Health Services.

22. Emergency medications need to be near the child at all times (kept in the classroom, taken outside and on trips, stored in the first aid backpacks).

- 23. Staff will **administer the medication** according to the following protocol:
 - Wash hands
 - Assemble supplies
 - Put gloves on
 - Check the "5 Rs":
 - ✓ Right Child
 - ✓ Right Medication
 - ✓ Right Time
 - ✓ Right Dose
 - ✓ Right Route
 - Using the child's name, let the child know it is time to take his/her medication.
 - When administering, make sure the entire dose (liquid, pill/capsule, inhaler, etc.) is given.
 - Confirm with the child that the medication was given.

- Recognize the child's success in completing the task.
- **Document** on the child's Medication Log (see below, #24) in Playground
- When done, return items to medication bag and lock it;
- Remove gloves and throw them away;
- Wash hands
- 24. Staff will record the following child information on the **Medication Log activity in Playground:**
 - Date and Time of Administration
 - Name of the Medication
 - Dosage
 - Comments
- 25. Staff will initial the Medication Log activity in the appropriate space showing they have reviewed the log if they are not signed in as themselves on Playground.
- 26. Staff will notify parent/guardian of administration and ensure they know they can see the medication administration history in Playground.
- 27. The Teacher or Specialist will watch for medication side effects and will report the occurrence of such side effects to the parent/guardian, Site Manager, and Health Manager.
- 28. Whenever the medication is not administered within 30 minutes of the scheduled time, the Teacher or Specialist will notify the parent/guardian, Site Manager, and Health Manager. The Teacher or Specialist will record the reason for not meeting the scheduled administration time on the Medication Log. Staff will request the parent/guardian follow up with the child's health care provider.
- 29. Site Managers will ensure the required medication administration paperwork is completed, medication is being stored according to the procedure, and staff is documenting all medication administration. This will be reviewed and signed monthly by Site Managers.
- 30. Center Staff (Site Manager/Family Advocate/EHS Specialist) will notify the parent when a medication is within 30 days of expiring and request a refill (60 days is best practice). Staff must never administer medication that has expired. A child may be excluded until an expired medication is refilled if it is an emergency medication.
- 31. The Safety Resource Manager will monitor for proper medication storage with required paperwork during Safety Walk-Throughs. Center Staff will also monitorfor

compliance with the medication administration guidelines during their Safety Walk-Throughs.

- 32. After the course of medication is completed, the child leaves the program, or at the end of the year; the ICP, Medication Administration form, and Medication Log will be returned to the MO Health staff (even if the medication was never administered) along with the medication bag and lock. The Health team will upload the medication log into database.
- 33. A parent/guardian may administer medication to their own child at any time.

34. Over the Counter Products:

- If child needs an over the counter product that is not medicated (ex. Hand soap, Chapstick, lotion, sunscreen, toothpaste, water wipes), the parent/guardian will complete the OTC Note including the brand of product they intend to provide. Product cannot be brought to class until Health notifies all steps are complete.
- Note will be emailed or faxed to Health Services to be processed.
- Health will create medication bag, label and ICP.
- Health will train classroom staff as outlined above (steps 6-9)
- Center staff will follow above procedure as if product was a medication and document via Playground when used.

35. Disposal of Medications:

- Center staff will give any unused medications directly to parents/guardians at the end of the year, when a child drops, or when expired.
- If medications are not picked up by parents/guardians, send them in their red bags via interoffice mail to Health Services. Ensure proper handling and storage is maintained, such as for refrigerated medications.