

Introduction to Medication Administration in Early Education and Child Care Settings

Module 2: Preparation and Documentation

Add name

Add date





Objectives

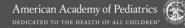
- Forms
- Policies
- Confidentiality Objectives
- Receiving and storing medication
- Disposing of medication
- Documentation, forms, and records





Disclaimer

- Curriculum provides education for personnel in the child care setting who give medication to children but are not licensed health care professionals
- Curriculum is not a substitute for written policy and professional medical guidance and not a certification of competency
- Each program must review state laws, regulations, and resources, and adapt accordingly





What forms are needed?

- 1. Child Health Assessment
- 2. Medication Administration Packet
 - Authorization to Give Medicine
 - Receiving Medication
 - Medication Log
- 3. Emergency Contact Form
- 4. Health Care Professional's Order



American Academy of Pediatrics

68



Child Health Assessment

- Physical examination results
- Immunization record
- Medical conditions
- Preventive health screenings, if required







Care Plans or Individualized Health Plans for Children with Special Health Care Needs

- The usual Child Health Assessment might not be detailed enough to allow the best care for the child
- Completed by a health care professional



American Academy of Pediatrics dedicated to the health of all children-



Medication Administration Packet: Authorization to Give Medicine



- To be completed by parent or guardian
- Child's Information
- Prescriber's Information
- Permission to Give Medication





Medication Administration Packet: Receiving Medication



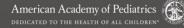
- Receiving an storing medication checklist
- To be completed by child care staff





Medication Administration Packet: Medication Log

- Completed by child care staff
- Should include the following:
 - $\circ \quad \text{Name of child} \quad$
 - o Medication
 - \circ $\,$ Day, time, dose, route, and staff signature
 - Comments and observations
 - o Return or disposal of medication notation
- Prescription and OTC medication must all be logged





Emergency Contact Form

- How to contact the family
- Permission to speak with the health care professional regarding a specific child's health needs







Health Care Professional's Orders

- Prescription medication
- OTC medication
 - o State requirements
 - o Under 24 months of age
- Know the length of time order is valid.
- Standing orders





Health Care Professional's Orders continued

- "As needed" or "prn" orders
- State regulations vary for telephone orders





Health Care Professional's Orders, continued

Must be clear and specify:

Child's first and last name Date of order Name of medication Amount (dose) Time, route, and frequency Signature of licensed health care professional Expiration date of medication

Might list:

Reason for medication Possible side effects or adverse reactions



Medication Policy: What It Should Include

- A written policy should state:
- Who will give medication
- What medication will be given
- Where will medication be given and stored
- When medication will be given
- How confidentiality will be maintained
- What procedures and forms are to be used for permission and documentation
- *What* procedures are used when giving medication (5 Rights)
- What procedure should take place in the event of a medication error or incident

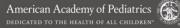




Policy: Who Will Give Medication?

- Who is designated?
- Know qualifications
- Know state requirements







Policy: What Medications Will Be Given & Why?

- Why medications are given
- What types of medications?
 - \circ prescription
 - OTC medications
 - o Off-label, folk remedies
 - Homeopathic & herbal medications





Policy: Procedures

- Step-by-step procedures
- 5 Rights
- What forms are needed
- How health care professional's orders are handled
- The first dose of medication
- Errors or incidents







Confidentiality

- Right to privacy
- Establish and follow a written policy on confidentiality
- Know your state or local statutes or regulations







Federal Law States...



- All medical records MUST be kept confidential
- Health Insurance Portability and Accountability Act (HIPAA)
- Family Educational Rights and Privacy Act (FERPA)





Receiving Medication: Prescription

- Pharmacy name and number
- Prescriber's name and number
- Prescription number
- Date prescription was filled
- Child's first and last name
- Name of medication
- Strength of medication
- Refills
- Quantity (QTY)
- Manufacturer (MFG)
- Expiration date
- Instructions for administration, dose, etc.
- Instructions for storage







Receiving Medication: Over-the-Counter

- Verify that the strength of the medication is appropriate for the child's age
- Make sure nothing blocks the label
- Know what information should be the medication packaging







Process to Receive Medication



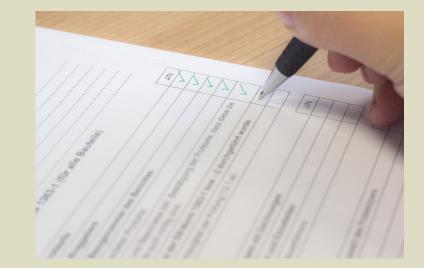
- Receive medication
- Match label
- Log medication with Receiving Medication form
- Ask parent/guardian questions
- Store medication





Receiving Medication Form

- Child's name
- Name of medication
- Date medication received
- Safety Check List for medication
- Controlled substances need special tracking



American Academy of Pediatrics dedicated to the health of all children-



Safe Storage and Handling

- Child resistant caps
- Store in out-of-reach places
- Observe for signs of tampering
- Check for special storage instructions
- Be aware of product look-alikes





Tips for Parents/Guardians

- Ask pharmacist to divide medication into 2 bottles, each with its own label
- Have a discussion between parents, physicians, and child care providers ahead of time to discuss how to handle medication needs during field trips





Medication Storage

Medication needs to be stored in a designated area.

Over 90% of emergency room visits for unintentional medication overdoses among children under the age of 5 involve children who get into medicine on their own without caregiver oversight.

Source: Centers for Disease Control and Prevention. https://www.cdc.gov/MedicationSafety/protect/protect_Initiative.html



Staff Medication

- Staff medication should be stored safely and should not be accessible to children
- Staff medication should not be kept in unsecure purses or bags







Visitor and Volunteer Medication

- Visitor belongings should be stored safely
- It is easy to forget what might be in our purses or pockets.







Exceptions to Locked Storage

- Non-prescription diaper creams
- Non-prescription sunscreen
- Emergency medications
- Store out of the reach of children





Create a Safe Medication Administration Area

A safe medication area is:

- Situated where the designated medication administration person is able to concentrate on administering medication
- Stocked with medication and supplies within easy reach
- Clean, well lit, and free of clutter
- Confidential and quiet





Disposing of Medication

- Return to parent for disposal
- If medication cannot be returned to parents, dispose of the medication in a secure trash container that children cannot access
- Controlled medication needs special disposal procedures
- Contaminated medication should be disposed of and replaced promptly





Scenario 1: Nick

Nick needs a noon time dose of amoxicillin suspension for this week and part of next week. The medication requires refrigeration and it must be shaken before being given. Nick has already received several doses of amoxicillin at home.





Scenario 2: Maria

Maria is 3-years-old and has eczema. She needs hydrocortisone cream applied to her arms at noon time. There are moisturizer creams that look similar to the hydrocortisone cream. Maria has used the hydrocortisone medication before.





Medication Administration Packet: Medication Log

- Completed by staff who administered the medication
- "As needed" medication
- Check your state regulations



American Academy of Pediatrics dedicated to the health of all children-

6



Medication Log, continued

If you don't write the dose down, no one will know that it was given.

- Prompt recording is a safety issue.
- Delays can result in double dosing





Medication Log continued

- Always write legibly and in **ink**
- Fill in all blanks
- Sign with a witness if necessary
- Keep records
- Parents should be able to get a record of medication given





Observations

- Make notations of possible side effects
- Record incidents
- Note successful techniques that helped the child to cooperate





Recording the Dose of Medication Activity

		PAGE	з—то	Medio BE COMPLI	catior		og Egivei	R/TEACHE	R			
ame of chil	d b						w	eight of child	I			
		Monday		Tuesday		Wednesday		Thursday		y Friday		
Medicine												
Date		1 1		1 1		7	/	1	1		1	/
Actual time given		АМ	^	M	AM			АМ		_	АМ	
		PM	P	'M	PM			PM			PM	
Dosage/am	ount											
Route												
Staff signate	ire											
		Monday		Tuesday		Wednesday		Thursday			Friday	
Medicine				rationaly					Juny			
Date		1 1		/ /		7	7	1	7		7	7
Actual time given		AM		M	AM			AM			AM	
Actual time	given	PM	F	M	PM			PM			PM	
Dosage/am	ount											
Route												
Staff signate	are											
Sescribe erro	or/proble	m in detail in a .	Medica.	l Incident Form	n. Observa	ations	can be n	oted here.				
Date/time Error/problem/reaction to medication			an .	Action taken		Name of parent/guar notified and time/dat						
RETURNED to parent/guardian			Date		Parent/guardian signature		Caregiver/teacher signature					
			/ /									
DISPOSED of medicine		Date		Ca	Caregiver/teacher signature		Witness signature					
Dita Collab of medicine				7 7								

Adapted with permission from the NC Division of Child Development to the Department of Maternal and Child Health at the University of North Carolina at Chapel Hill, American Academy of Pediatrics, Connecticut Department of Public Health, Healthy Child Care Pennsylvania, and Healthy Child Care Colorado, 2011





Recording the Dose of Medication Activity continued

Medication Log PAGE 3-TO BE COMPLETED BY CAREGIVER/TEACHER Weight of child 26 165								
ame of child <u>NUC Somple</u> <u>Monday</u> Tuesday			We Wednesday	Friday				
Medicine	Amoxi allin							
Date	X /X /20xx	/ /	/ /	/ /	/ . /			
Actual time given	AM	AM	_ AM	AM	AM			
	PM 12:00	PM	PM	PM	PM			
Dosage/amount	One terspoon							
Route	One terspoon By Mouth							
Staff signature	CSTAD							

Adapted with permission from the NC Division of Child Development to the Department of Maternal and Child Health at the University of North Carolina at Chapel Hill, American Academy of Pediatrics, Connecticut Department of Public Health, Healthy Child Care Pennsylvania, and Healthy Child Care Colorado, 2011





Recording the Dose of Medication Activity

Medication Log PAGE 3—TO BE COMPLETED BY CAREGIVER/TEACHER								
Name of child	Juria Tes	<u>f</u>	Weight of child 30 1bs					
	Monday Tuesday		Wednesday	Thursday	Friday			
Medicine	Hydrocontisone Cream 10/0							
Date	X /X /200x				· · · · / · · · / · · · ·			
Actual time given	AM PM <u>\: Od</u>	AM		AM PM	AM PM			
Dosage/amount	Thin Layer							
Route	Thin Layer on skin							
Staff signature	C. Staff							

Adapted with permission from the NC Division of Child Development to the Department of Maternal and Child Health at the University of North Carolina at Chapel Hill, American Academy of Pediatrics, Connecticut Department of Public Health, Healthy Child Care Pennsylvania, and Healthy Child Care Colorado, 2011





PediaLink: Medication Administration in Early Care and Education Settings

ONLINE COURSE

Medication Administration in Early Care and Education Settings

For more information, an online course is available through PediaLink.





To sign up please visit: <u>https://shop.aap.org/medication-administration-in-</u> early-care-and-education-settings/



Resources

- State Specific Policy Information at <u>https://childcareta.acf.hhs.gov/licensing</u>
- Caring for Our Children at <u>http://nrckids.org/CFOC</u>



Summary & Questions







Disclaimer

- Curriculum provides education for personnel in the child care setting who give medication to children but are not licensed health care professionals
- Curriculum is not a substitute for written policy and professional medical guidance and not a certification of competency
- Each program must review state laws, regulations, and resources, and adapt accordingly





Acknowledgements

- This curriculum has been developed by the American Academy of Pediatrics (AAP). The authors and contributors are expert authorities in the field of pediatrics.
- The recommendations in this curriculum do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate.
- Listing of resources does not imply an endorsement by the AAP. The AAP is not responsible for the content of resources mentioned in this curriculum.
- Website addresses are as current as possible but may change at any time.
- Support for the Heathy Futures curricula has been provided through funding from Johnson & Johnson Consumer Inc.



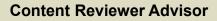


Acknowledgements

- **Colorado:** Guidelines for Medication Administration: An Instructional Program for Training Unlicensed Personnel to Give Medication in Out-of-Home Child Care, Schools, and Camp Settings, Fifth Edition, 2008, developed by Healthy Child Care Colorado
- New Jersey: Medication Administration in Child Care developed by Healthy Child Care New Jersey
- North Carolina: Medication Administration in Child Care in North Carolina developed by the Quality Enhancement Project for Infants and Toddlers, with funding from the NC Division of Child Development to the Department of Maternal and Child Health at the University of North Carolina at Chapel Hill
- West Virginia: Medication Administration: An Instructional Program for Teaching Non-Medical Personnel to Give Medication in Child Care Centers in West Virginia developed by Healthy Child Care West Virginia and the West Virginia Department of Health and Human Services



Acknowledgments



Andrew N. Hashikawa, MD, MS, FAAP AAP Early Childhood Champion (Michigan) University of Michigan Injury Center

Curriculum Content Consultant

Kelly Towey, M.Ed.









Copyright©2019 American Academy of Pediatrics. All rights reserved. Specific permission is granted to duplicate this curriculum for distribution to child care providers for educational, noncommercial purposes.

