

## HEAD START- BIRTH TO FIVE- MEDICATION ADMINISTRATION POLICY

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### **HEAD START PERFORMANCE STANDARD OBJECTIVES:**

1302.47 Safety Practices- (a)(7)(iv)

### **Licensing Rules for Group Child Care Homes and Child Care Centers:**

19 CSR 30-62.192 Health Care, (3) Medication, (A)(I)

### **Caring for our Children: National Health and Safety Performance Standards:**

Medications- 3.6.3.1: (b)- Sunscreen

Procedures for Nasal Secretions and Use of Nasal Bulb Syringes 3.2.31

### **PROCEDURE:**

1. Medication should be given at home if possible. When the doctor's orders indicate it must be given during school hours, EHS/HS Staff/Childcare Partners must give medication to children while they are at the center. The first dose of a new medication should always be given at home.
2. HS/EHS Staff/Childcare Partners will never administer medication:
  - For non-medical reasons
  - If the child has a known allergy to the medication
  - If the permission form has expired
  - If the prescription or medication label does not match the permission form
  - If the instructions are unclear or incomplete
  - Without the proper measuring tool
  - If the medication has expired
  - Without proper training
  - If it is a homemade mixture or folk remedy
3. It is the EHS/HS Staff/Childcare Partner's responsibility to administer, handle, and store child medications as directed by the child's physician. All prescribed medications will be in the original container and labeled by the pharmacist with the child's name and instructions for administration, including the times and amounts for dosage and the amount of days the medication is to be given. All non-prescribed medications must also be in the original container and labeled by the parent(s) with the child's name and written physician's instructions and reason for giving the medication must be in the file. All medications that do not have an end date listed on the label must have physician instructions for length of time the medication is to be administered. (Exception: Non-prescription sunscreen always requires parental consent but does not require instructions from each child's prescribing health professional).
4. When administering medication, hands must be washed before and after medication is given.
5. Parents must submit a signed Bureau of Child Care Medication Authorization form for all medication, prescribed and non-prescribed, and sunscreens that will be administered at child care.
6. Medications which do not require refrigeration will be stored in a locked cabinet or container.
7. Medication requiring refrigeration will be kept in the refrigerator in a locked container.
8. Emergency medications such as an Epi-pen or rescue inhaler do not have to be in a locked container, but must be out of reach of the children at least five feet off the floor. They can be

stored in the fanny pack and taken on the playground and any other place the child may be during center hours.

9. All medication which is required by staff or volunteers must be labeled and stored under Lock and key, left at home, or in the individuals locked vehicle. In Family Child Care Homes, the provider's individual or family medications will be stored separately, in another locked cabinet or container.
10. Medication must be returned to storage immediately after use.
11. A record of administration (included on the Bureau of Child Care Medication Authorization Form) will be completed at time of administration. At completion of the medication, the form will be reviewed with the parent/guardian and filed in the child's file. Administrations should also be documented on the child's daily note, with the signature of the person who administered the medication.
12. The EHS/HS Staff/Childcare Partner is to record changes in a child's behavior or physical symptoms that have implications for drug dosage or type, and assisting parents in communicating with their physician regarding the effect of the medication on the child.
13. Medication will be returned to the parent/guardian when it is no longer needed.
14. The program will provide training to all new teaching staff on proper techniques for administration, handling, and storing of medication. Staff and Partners must attend this training before they can administer medication to EHS/HS children.
15. When a child requires specific equipment (inhaler, breathing machine, Epi-pen, feeding tube, etc) individual training will be provided to the EHS/HS Staff/Childcare Partner by a qualified medical professional.
16. Children who may have severe allergic reactions which may require the use of a bee sting kit or Epi-pen will have an Individualized Plan of Specialized Care completed by the physician. The plan will outline the procedures for handling emergency allergic reactions.
17. When Medication bottles or containers are empty, the container will be disposed of at the center. All other medications such as but not limited to, inhalers and EPI Pens, will be retrieved by the parent when they are no longer needed or it is the end of the program year.
18. Non-prescription ointments and medications such as teething gel and teething tablets will not be administered to EHS children.
19. Use of nasal bulb syringes is permitted on infants upon request from the parent or child's physician. Nasal bulb syringes will be purchased by the Health Services Coordinator. Each nasal bulb syringe will be labeled with the child's name. Nasal bulb syringes will not be shared by children. Staff will be required to watch a video and receive training on the correct use and proper cleaning procedures of a nasal bulb syringe prior to using one on a child.
20. Confidentiality will be maintained at all times.

### **Medications on the Head Start Bus**

1. Parent's must bring medication to the center and complete a Medication Authorization form.
2. Bus drivers and Monitors will not accept medication from a parent at the bus stop.
3. The only medications allowed on the bus are rescue medications which include an Epi Pen and or a Rescue Inhaler.
4. If there is a child on the bus with prescribed Epi Pen and or Rescue Inhaler, the medication will be stored in a fanny pack out of reach of the children. Upon bus return to the center, the fanny pack will be taken back to the classroom and stored out of reach of the children.

The length of time a written parental authorization is valid is as follows.

<b>Type of Medication</b>	<b>Permission Valid for</b>
Prescription medication	Dates medication is prescribed to be given
Over the Counter (OTC) medications	30 Days
Prescription or OTC medication for chronic medical conditions or allergic reactions	6 months

