

# Medication Administration in Early Education and Child Care Settings

## PARTICIPANT'S MANUAL

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(copied from AAP manual, with some abbreviations)

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- Introduction and reasons to give medicine
- ADA, IDEA. State regulations
- Responsibility Triangle
- Types of medication

#### Module 2: Preparation

- Forms
- Policies
- Confidentiality
- Receiving and storing medication
- Disposing of medication

#### Module 3: How to Administer Medication

- Introduction: most common errors
- 5 Rights
- Identifying “as needed” conditions
- Universal/standard precautions
- Preparing to administer medication
- Medication administration procedures
- Communicating with the child

#### Module 4: Documentation

- Medication Administration Packet
- Recording information
- Making and recording observations

#### Module 5: Problem Solving

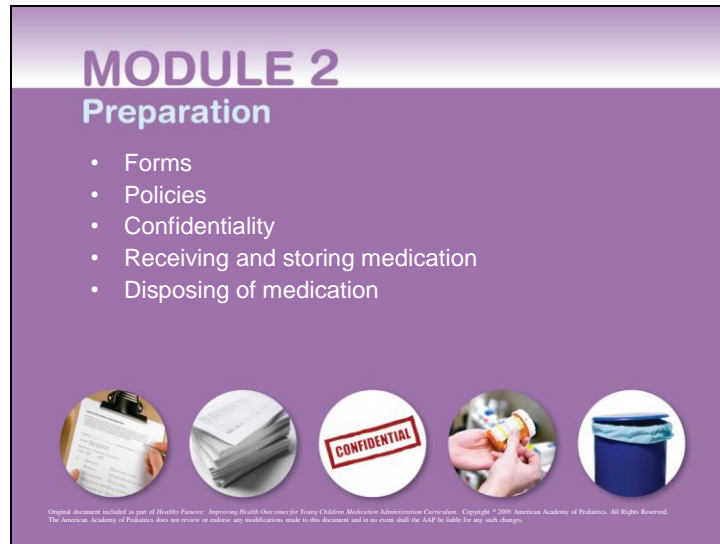
- Medication errors
- Medication side effects
- Medication incidents
- What to do for problems and how to document them
- Field Trips
- Self administration
- Problems with requests

### Additional Resources

- Glossary
- Emergency Info.Form: Children with Special Needs
- Asthma Action Plan, Children 0-5 years
- Asthma Action Plan, Children 6 Years or Older
- Care Plan, Children with Special Health Needs
- Instructions for Completing the Care Plan
- Info. Exchange: Children with Health Concerns
- Consent for Release of Information Form
- Daily Log of Controlled Med. Administered
- Medication Administration Packet
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- Washing Your Hands
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- Dear Parents/Guardians Letters
- Q&A: IDEA and Child Care
- Students Carrying & Self-Administering Meds
- EpiPen® Resources
- Candy or Medicine? – Look Alike Drugs
- Look Alike Products – Don't Be Fooled
- Certificate of Attendance

## Slides Selected from Module 2 as Examples of PowerPoint content in the AAP Curriculum

### Slide 1



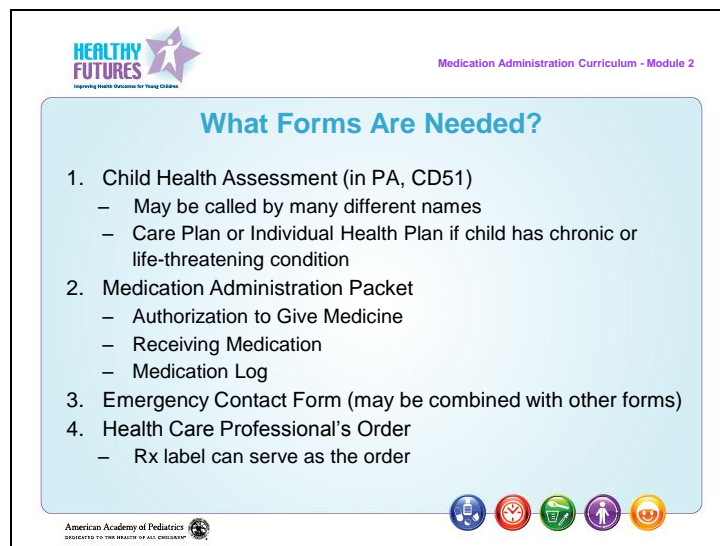
# MODULE 2

## Preparation

- Forms
- Policies
- Confidentiality
- Receiving and storing medication
- Disposing of medication

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### Slide 2



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### What Forms Are Needed?

1. Child Health Assessment (in PA, CD51)
  - May be called by many different names
  - Care Plan or Individual Health Plan if child has chronic or life-threatening condition
2. Medication Administration Packet
  - Authorization to Give Medicine
  - Receiving Medication
  - Medication Log
3. Emergency Contact Form (may be combined with other forms)
4. Health Care Professional's Order
  - Rx label can serve as the order

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### 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
- The care plan should:
  - Be completed by a health care professional
  - Provide information about any ongoing or emergency medication
  - Outline modifications to:
    - diet
    - environment
    - activities

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### Medication Administration Packet: Authorization to Give Medicine

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

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### Medication Administration Packet: Receiving Medication

- Checklist of steps to take to receive and safely store medication
- To be completed by child care staff
- Steps include:
  - checking labels and containers
  - ensuring that all forms are complete
  - questioning parent/guardian to gather necessary information

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### Medication Administration Packet: Medication Log

- To be completed by child care staff
- Should include the following:
  - Name of child
  - Medication
  - Day, time, dose, route, and staff signature
  - Comments and observations
  - Return or disposal of medication notation
- Prescription and OTC medication must all be logged

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### Health Care Professional's Orders

- For prescription medication
  - Pharmacy label = order for prescription medication
- For OTC medication
  - Parent's instructions are okay in most states if it matches dose given on the medication label
- A written order from a health care professional is helpful and is required in some states
- A written order from a health care professional is essential if:
  - The child is under 24 months and the dose is not on the label
  - Parent instructions do not match the dose on the label
- Check state regulations for the length of time that a health care professional's order is valid.

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### Health Care Professional's Orders, continued

- “As needed” or “prn” orders should have specific information about what symptoms qualify as needing medication
- State regulations vary about telephone orders
  - Check your state regulations carefully
  - All telephone orders should be followed by written documentation

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### 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

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### Policy: Procedures

- Step-by-step procedures: 5 Rights
- Which forms are necessary prior to administering medication
- How health care professional's orders will be handled:
  - telephone orders
  - child-specific orders
  - “as needed” orders
- The first dose of medication should be given by the parent/guardian at home
- Procedures for errors or incidents

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### Confidentiality

- Confidential information:
  - Information that someone may not want to share
  - Information that someone will give permission to share only on a “need to know” basis
- Establish and follow a written policy on confidentiality of the records of children
- Permission to share confidential information should be written, not just oral
- Policy may be further defined by state or local statute or regulation

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### Safe Storage and Handling

- Child resistant caps
- Store in out-of-reach places
- Observe for signs of tampering
  - Packaging that shows cuts, tears, slices, or other imperfections
  - Anything that looks suspicious
- Check for special storage instructions
- Be aware of product look-alikes

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### Medication Storage


**Designated area**

- Secured, locked cabinet
- Cool, dark place
- Limited access

**Refrigeration**

- If needed
- 36° F to 46° F
- Separation from food
- Spill-proof container

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### 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

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### 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

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### Disposing of Medication

- If medication or order is out-of-date or medication is left over, return to parent for disposal and record that on the permission or intake form
  - This is the preferred method
- 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

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### Scenario 1: Nick

- Nick is 15-months-old and has an ear infection. 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.

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