



Medication Policy for Child Care Providers

Parent/Guardian Consent

1. Medication will only be given with prior **written** consent of the child's parent/legal guardian. This consent (The Medication Authorization Form) will include the child's name, the name of the medication, reason for the medication, dosage, method of administration, frequency, duration (start and stop dates), special storage requirements and any possible side effects (use package insert or pharmacist's written information).
2. A parent/legal guardian will be the sole consent to medication being given, without the consent of a health care provider, **if and only if** the medication meets all of the following criteria:
 - The medication is over-the-counter and is one of the following:
 - Antihistamine
 - Non-aspirin fever reducer/pain reliever
 - Non-narcotic cough suppressant
 - Decongestant
 - Ointments or lotions intended specifically to relieve itching or dry skin
 - Diaper ointments and non-talc powders intended for use with "diaper rash"
 - Sunscreen for children over 6 months of age
 - The medication is in the original container and labeled with the child's name; *and*
 - The medication has instructions and dosage recommendations for the child's age; *and*
 - The medication is not expired; *and*
 - The medication duration, dosage and amount to be given does not exceed label-specific recommendations for how often or how long to be given.

3. For sunscreen and diaper ointment, the written consent may cover an extended time period of up to 6 months. For all other medications the written consent may only cover the course of the illness.
4. For liquid oral medications: A measuring device specifically designed for oral liquid medications must be used (parent/guardian provided).

Health Care Provider Consent

1. A licensed health care provider's consent, along with parent/legal guardian consent, will be required for prescription medications and all over-the-counter medications that do not meet the above criteria (Including vitamins and supplements).
2. A health care provider's written consent must be obtained to add medication to food or liquid.
3. A licensed health care provider's consent may be given in 3 different ways:
 - The provider's name is on the original pharmacist's label (along with the child's name, name of the medication, dosage, duration and expiration date); *or*
 - The provider signs a note or prescription that includes the information required on the pharmacist's label; *or*
 - The provider signs a completed Medication Authorization Form.

Medications for chronic conditions such as: Asthma or allergies

For chronic conditions (such as asthma), the parent/legal guardian written consent must be renewed monthly. An individual care plan must be provided that lists symptoms or conditions under which the medication will be given.

Emergency supply of medication for chronic illness

For medications taken at home, we ask for a three-day supply to be kept with our disaster kit in case of an earthquake or other disaster.

Staff Documentation

1. Staff administering medications to children will be trained in medication procedure by the Director and record of training will be kept in staff's file.
2. Staff giving medications will document the time, date and dosage of the medication given on the child's individual medication form and will sign with their initials each time a medication is given (Staff's full signature will be at the bottom of the page).
4. Staff will report and document any observed side effects on the child's individual medication form.
5. Staff will provide a written explanation why a medication was not given.
6. Outdated individual medication forms and documentation will be kept in the child's file.
7. Staff will only administer medication when all conditions listed above are met.
8. "As Needed" medication authorizations not accepted.

Medication authorization and documentation is considered confidential and must be stored out of general view.

Medication Storage

1. Medication will be stored as follows:
 - Inaccessible to children
 - Separate from staff or household medication
 - Protected from sources of contamination
 - Away from heat, light and sources of moisture
 - At temperature specified on the label (refrigerated if required)
 - So that internal (oral) and external (topical) medications are separated
 - Separate from food
 - In a sanitary and orderly manner

2. Controlled substances (i.e. Ritalin) will be stored in a locked container
Only the Director(s) will administer controlled substances.
3. Medications no longer being used will promptly be returned to parents/guardians or discarded.

Medication Administration Procedure

1. **Wash hands** before preparing medications.
2. Carefully read labels on medications, noting:

Child's name

Medication name

Amount to be given

Time and dates to be given

How long to give

How to give (e.g. by mouth, to diaper area, in ear, etc.)

Information on the label must be consistent with the individual medication form.

3. Prepare medication on a clean surface away from diapering or toileting areas.
4. **Do not add medication to the child's bottle or food.**
5. For *liquid* medications, use clean medication spoons, syringes, droppers or medicine cups that have measurements on them (not table service spoons) provided by parents.
6. For *capsules/pills*, medication is measured into a paper cup and dispensed as directed by the parent/health care provider.
7. **Wash hands** after administering medication.
8. Observe the child for side effects of medications and document on the child's individual medication form.

