

Administration of Medications: Center's Policies & Procedures

Colorado Child Care Licensing Rule 2.212.N and 2.507.N.

May 2024

Dear Center Director,

Every staff member is required to read and receive training on the center's medication administration policies and procedures before working with children. They must sign the end of this statement affirming they have been trained on these policies and procedures.

A. Any unexpired routine medication, prescription or non-prescription (over the counter), must be administered only with a current written order of a health care provider with prescriptive authority and with written parental consent. Home remedies, homeopathic medication, vitamins, and supplements must not be administered to children in child care.

B. The written order by the person with prescriptive authority shall include:

1. Child's name;
2. Licensed prescribing practitioner name, telephone number, and signature;
3. Date authorized;
4. Name of medication and dosage;
5. Time of day medication is to be given;
6. Route of medication;
7. Length of time the medication is to be given;
8. Reason for medication (unless this information needs to remain confidential);
9. Side effects or reactions to watch for; and
10. Special instructions.

C. Medications must be kept in the original labeled bottle or container. Prescription medications must contain the original pharmacy label.

D. Over-the-counter medication must be kept in the originally labeled container and be labeled with the child's first and last name.

E. In the case medication needs to be given on an ongoing, long-term basis, the authorization and consent forms must be reauthorized on an at least annual basis. Any changes in the original medication authorization require a new written order by the prescribing practitioner and a change in the prescription label.

F. Staff designated by the director to give medications must complete the Department-approved medication administration training and have current annual delegation or more often as determined by the Department-approved child care health consultant. Delegation must be from the center's current Department-approved child care health consultant who must observe and document the competency of each staff member involved in medication administration. All staff administering medication must have current cardiopulmonary resuscitation (CPR) and first aid training prior to administering medication without any exceptions.

G. All medications, except those medications specified in the Department-approved medication administration training as emergency medications, must be locked and inaccessible to children, but available to staff trained in administering medication. Controlled medications must be counted and safely secured, and specific policies regarding their handling require special attention in the center's policies. Access to these medications must be limited.

1. Emergency medications are not required to be locked but must be stored in an area inaccessible to children, and easily accessible and identifiable to staff. Emergency medications must be stored in accordance with the Department-approved child care health consultant's recommendation.
2. When away from the classroom, staff assigned to supervise the child must carry the

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emergency medication.

H. The center must have a written policy on the storage and access of inhalers and epinephrine carried by school-age children. The policy must include a written contract with the parent(s)/guardian(s) and child acknowledgement assigning levels of responsibility of each individual. This contract includes orders for the medication from a health care provider, along with confirmation from the health care provider and the Department-approved child care health consultant that the student has been instructed and is capable of self-administration of the prescribed medications.

I. Children are not allowed to bring medications to child care unless accompanied by a responsible adult.

J. If a medication is out of date or left over, the parent(s)/guardian(s) is responsible for picking up the medication. If the parent(s)/guardian(s) do not respond, the center must dispose of the medications as required by the Colorado Department of Public Health and Environment.

K. Topical preparations such as petroleum jelly, diaper rash ointments, sunscreen, insect repellent, and other ointments may be administered to children with written authorization from the parent(s)/guardian(s). These preparations may not be applied to open wounds or broken skin unless there is a written order by the prescribing health care provider.

L. A written medication log must be kept for each child. This log is part of the child's records. The log must contain the following:

1. Child's name and birthdate.
2. name of the medication, dosage, and route;
3. time medication is to be given by written medication authorization;
4. time medication is administered to child;
5. Special instructions;
6. Name and initials of the individuals giving the medication; and
7. Notation if the medication was not given and the reason.

M. The following policies are written by Bryan Maki, RN and your staff are required to follow these procedures.

1. Staff delegated to give medications must use the "Checklist for Accepting Medications" when accepting medications from the child's parents.

2. According to the "Checklist for Accepting Medications," if there are any discrepancies with the medication or the health care plan, staff must decline the medication. In the case of emergency medication, the child will be unable to attend school until the errors in the medication or health care plan are resolved unless the child is currently attending the school.

3. Staff will need to complete the Colorado Shines PDIS Medication Administration Part 1 and receive delegation by the Child Care Health Consultant before giving any medications.

4. The Child Care Health Consultant has the authority to decide whether the completion date of the Colorado Shines PDIS Medication Administration Part 1 certificate falls within the acceptable time frame for completing Medication Administration Part 2 and delegation.

5. The Child Care Health Consultant signatures on asthma and allergy health care plans are not required. The Nurse will only sign the health care plans if the health care plans and medication labels meet the requirements of the Checklist for Accepting Medication. The Nurse will sign the health care plans when we visit in-person.

6. All staff giving any medications must have a current CPR/AED & Basic First Aid certification from an approved Colorado child care licensing vendor. 100% online CPR certifications (ex. National CPR Foundation) are NOT accepted.

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7. Lock up all meds except epinephrine and albuterol.
8. Children who self-carry must have a contract signed by the child, parent, and the Nurse. The child needs to be > 12-years-old, demonstrate the correct technique, and communicate with you anytime they take their medicine. Staff will document on the medication log if a self-carry child takes their medicine.
9. The most current and up to date medication forms are located at ColoradoCPRpros.com. These policies and procedures were created by Bryan Maki, RN, CCHC on 5/24/2024.

I have reviewed and completed training on the center's policies and procedures for administering medications.

Name _____

Signature _____

Date _____