



"Where Kids Count"

Drug and Medication Administration Policy and Procedures

Edited on October 20th, 2021



Drug and Medication Administration Policy and Procedures

Purpose

This policy's purpose and the procedures outlined within are to provide clear direction for staff, students, and volunteers to administer drugs or medication to children at the child care centre and appropriate record-keeping.

Used in this policy are the terms drugs or medications. The term refers to any product with a Drug Identification Number (DIN), except for sunscreen, lotion, lip balm, bug spray, hand sanitizer, and diaper cream not used for acute, symptomatic treatment. For this policy, drugs and medications fall into the following two categories, unless otherwise specified:

- Prescription, intended for acute, symptomatic treatment
- Over-the-counter, intended for acute, symptomatic treatment

Drug Identification Number (DIN): An eight-digit number assigned by Health Canada to a drug product before being marketed in Canada. It uniquely identifies all drug products sold in a dosage form in Canada and located on the label of prescription and over-the-counter drug products that have been evaluated and authorized for sale in Canada.

The policy and procedures support children's health, safety, and well-being by setting out measures to:

- Ensure children receive only those drugs or medicines deemed necessary and appropriate by their parents
- Reduce the potential for errors
- Ensure medicines do not spoil due to improper storage
- Prevent accidental ingestion
- Administer emergency allergy and asthma drugs or medications quickly when needed
- Safely administer drugs and medications according to established routines

This policy intention is to fulfill the obligations set out under Ontario Regulation 137/15 to administer drugs and medication in a child care centre.



Policy

Parental Authorization to Administer Medication

Whenever possible, parents will be encouraged to administer drugs or medications to their children at home if it doesn't affect their treatment schedule.

We will only administer prescription and over-the-counter medications for acute, symptomatic treatment to a child where a child's parent has given written authorization; to do so by completing the child care centre's Medication Information and Consent Form (Appendix A).

There must be one Medication Information and Consent Form for each medication; complete all pertinent sections. There must be one form for each child taking the prescribed medication; in the case of siblings prescribed the same medicines, parents must complete separate medication administration forms. The medication container must have the name of the child who required the prescribed medication.

Where a Medication Information and Consent Form for over-the-counter completed for medication and symptoms have been persistent for more than three days in the case of fever, colds, teething, etc., further follow-up with the parent will occur. We may request authorization from a medical professional.

The Medication Information and Consent Form must include a schedule that sets out the times the drug or medication is given and the correct dosage.

When a drug or medication is to be administered to a child on an "as needed" basis (i.e., there is no specific schedule or time of the day for administration), the drug or medication must include a Medication Information and Consent Form. Appropriate dosage, signs, and reactions will be disclosed and outlined on the form.

The Medication Information and Consent Form must also clearly indicate the situations under which the medication administered as outlined in the doctor's note, including observable symptoms.

Examples may include:

- When the child has a fever of 39.5 degrees Celsius
- When the child has a persistent cough or difficulty breathing
- When red hives appear on the skin

Completed Medication Information and Consent Forms reviewed with parents each time the staff portion of the current medication form is complete, or annually in the case where we did not give the "as needed" medication. This procedure will ensure the dosage continues to be accurate (i.e., based on the child's age or weight).



As long as lotion, lip balm, bug spray, hand sanitizer, and diaper cream are non-prescription and are not for acute (symptomatic) treatment, and due to their longer-term daily usage, these products:

- Must have a blanket authorization from a parent on the enrollment form
- Can be administered without an Authorization for Medication Administration form
- Do not require record-keeping

Ongoing Illness:

In the case of an ongoing illness such as asthma, wheezing may develop without notice, and the child requires bronchodilators' administration to assist in their breathing. The parent must bring in the needed puffers and specify the Medication Information and Consent Form that medication administered when they begin to wheeze. The parent may also sign a Self-Carry Acknowledgement and Permission Form for the child to carry their puffers on their person in a belt or fanny pack.

Parents will complete the explicit directions in case of an asthma attack. Renewed authorization is necessary if requirements around administration change.

If an illness develops while the child is at the center, staff will call the parent immediately. Centre staff will NOT take direction from a parent or guardian over the telephone to administer medication from another source.

In the case where a fever develops, and the parent or guardian has completed no medication form, the centre will:

- Remove some of the child's clothes
- Urge the child to drink fluids liberally
- Sponge child with tepid water

Staff will not administer Aspirin (ASA) unless a physician has given recommended written consent for its use on each occasion. Children under the age of 19 who have a fever and are given ASA may develop Reye's Syndrome.



Drug and Medication Requirements

All drugs and medications to be administered to children must meet the following requirements:

All drugs and medications must be stored in their original containers as supplied by a pharmacist or their original packages. ***Medications that have been removed from their original package or transferred into a different container will not be accepted or administered to children.***

Must have clearly labelled drug or medication containers with:

- The child's full name
- The name of the drug or medication
- The dosage of the drug or medication
- Instructions for storage
- Instructions for administration
- The date of purchase of the medicines for prescription medications
- The expiry date of the medicine, if applicable

The information provided on the written Medication Information and Consent Form must match all the requirements listed above.

When information is missing on a drug or medication label, or the Medication Information and Consent Form does not match the labeled container label, the child care centre will not accept or administer it. Staff will not administer until the label and the Medication Information and Consent Form accurately contains all the required information.

Epinephrine purchased over-the-counter for a specific child must be administered to them with an Individualized Plan for a Child with Medical Needs Form (Appendix B) and emergency procedures for an anaphylactic allergy. It must be clearly labeled with the child's name, the name of the drug or medication, the dosage, the date of expiration, and the instructions for storage and administration.

Drugs or medications belonging to staff, students, or volunteers for their use will be kept inaccessible (i.e., stored in a locker versus left in a purse in the classroom) to children and will not be administered to children at any time.

Drug and Medication Handling and Storage:

All drugs or medications will be kept inaccessible to children at all times in a locked container and stored out of reach (i.e., in a refrigerator, cabinet, cupboard, or drawer).

There are exceptions for emergency medications as outlined below:

Emergency medications are prescription drugs/medications used in case of an urgent medical reaction that requires immediate treatment. Emergency medications include medications used to treat asthma (i.e., puffers) and anaphylactic allergies (i.e., epinephrine).



- Emergency medications will never be locked up and will be made easily accessible to all staff while being kept out of the reach of children, including during outdoor play periods and off-premises activities
- A child has written permission to carry their emergency allergy or asthma medication; it will take precautions to ensure that these medications are not accessible to other children
- Parents must complete a Self-Carry Acknowledgement with a Permission Form for their child to carry their emergency medications in their backpacks for transportation to and from school or on their person in either a belt or fanny pack
- Ensure that a Self-Carry Acknowledgment and permission Form has been completed before carrying their emergency medications on their person in either a belt or fanny pack

In case of an emergency, all staff, students, and volunteers will be made aware of the location of children's emergency medications at all times.

Staff must bring all emergency medications on all field trips, evacuations, and off-site activities.

Any topical products or drugs/medication in the first aid kit will not be used on children to clean or treat wounds. We will disinfect Children's cuts and wounds following local public health recommendations and Standard First Aid practices.

Staff will store all drugs and medications safely for children, following the instructions for storage on the label. We will store medicine requiring refrigeration in the refrigerator in a locked container. The locked container should only contain current medications for children attending the centre and nothing else.

When drugs or medications are past their expiry date, they will return them to the child's parent and document this on the Medication Information and Consent Form.

Staff will return any drugs or medications remaining after the treatment period will be returned to a child's parent; where possible, staff must document on the Medication Information and Consent Form after medications are returned.

Parents do not have access to medicine stored in the medicine box. Staff is responsible for depositing and retrieving all medications from the storage box.

After attempting to return a drug or medication to a parent and the parent has not taken the medication home, the person in charge of medicines will ensure that efforts to return the drug or medication are documented in the appropriate staff communication book (i.e., daily written record). The staff must return the medicine to a pharmacist for proper disposal.



Drug and Medication Administration:

Drugs or medications will be administered according to the label's instructions and only with written parental authorization on the Medication Information and Consent Form.

One staff member in each program should administer all medications. No other staff member will administer medicines without approval from the Program Manager or their designate. Designated person(s) in charge of medications will deal with all drugs and medications to reduce the potential for errors, whether on or off the premises.

A drug or medication will only be administered from its original container as supplied by a pharmacist or its original package. The container is clearly labelled as outlined under the Drug and Medication Requirements section of this policy.

A drug or medication will only be administered using the appropriate dispenser (i.e., syringe, measuring spoon/cup, etc.).

Centre staff will not administer medications that are considered intrusive to the child; medications involving excessive demands, which would interfere with staff supervision duties. Invasive medications are defined as but are not limited to suppositories, such as Gravol or those that correct constipation. Intrusive procedures are described as but not limited to taking a child's temperature rectally.

To support the prompt administration of emergency medication:

- Emergency medications may be administered to a child by any person trained on the child's Individualized Plan for a Child with Medical Needs at the child care centre
- Children will be allowed to carry their asthma or emergency medication under this policy, the drug and medication administration procedures, and the child's Individualized Plan for a Child with Medical Needs, where applicable

Drugs or medications that are expired (including epinephrine) will not be administered at any time.

Before giving each dose:

- Read both the medication sheet and the label, twice
- Check the expiry date. Do not give expired medications
- Use a proper measuring spoon or other measuring devices (obtainable from a pharmacy) for measuring liquids; clean thoroughly between uses
- Report at once any condition which might be a side effect of a medication

Record all medications given on the Medication Information and Consent Form (except sunscreen, diaper cream, etc.). located in the attendance binders of each program:

- Use one sheet for each medication for each child
- Enter sheet number if you require more than one page per child and sign your name
- Insert all dates from the consent form
- Write STOP after the last date and draw a line down all other boxes
- Initial each box after giving the medication
- After completion, return to the office to be put in the child's file



Must retain all Medication Information and Consent Forms in the children's files.

Staff will enter information concerning the illness or medication administered into the child's RECORD OF ILLNESS kept in the Record of Illness Binder. Can later use compiled data to track diseases and medications in consultation with the parents and medical personnel.

Record-Keeping:

We will complete Records of medication administration on the Medication Information and Consent Form every time drugs or medications are administered. Completed records will be kept in the child's file.

A child's Medication Information and Consent Form includes a schedule setting out specific times to administer the medication. Should the child be absent one day, document the absence on the form and daily logbook. Doing this will account for all days during the treatment period (excluding weekends, holidays, and planned closures).

Suppose a dose is missed or given late. In that case, we will document reasons on the record of medication administration and notify a parent as soon as possible to impact the treatment schedule or the child's health.

A drug or medication is administered on an "as needed" basis to treat specific symptoms (asthma, febrile seizure, or an allergic reaction) outlined in a child's Medication Information and Consent Form. We will document the administration and the reason for administering in the appropriate staff communication book (e.g., daily written record). It will also be reported on the child's Record of Illness form. We will then notify the parent of this administration of medication.

Confidentiality

We will treat information about a child's medical needs confidentially. Every effort will be made to protect the privacy of the child, except when we must disclose information to implement the procedures in this policy and for legal reasons (e.g., to the Ministry of Education, College of Early Childhood Educators, law enforcement authorities, or a Children's Aid Society).



“Where Kids Count”

APPENDIX A

**Medication Information And
Consent Form**



More Than Just Babysitting Child Care Centre Inc.

"Where kids count"

Medication Information and Consent Form

To be completed by parent/guardian — One for each medication.

Child's Name:	Reason for Medication: _____ Medication: _____
Doctor's Name:	Medication Expiry Date: _____ (As per date on the medication label)

This medication form is in conjunction with the child's Individualized Plan __Yes __No

1. Prescription Drugs: We will give these exactly as shown on the label only.
2. Other Drugs: We will give these only with a doctor's note with the exception of teething when a dr. note is not necessary.

Indicate physical symptoms under which the medication should be given:

Dose: (From medication label)	Method of Administration:
Start on: _____ Last Day: _____	Time of Day: (ex 12:30pm)
Other Instructions:	
Side Effects to be Aware of:	

I authorize this day nursery to administer the medication named above to my child and I certify that the instructions given are as recommended by a physician.

_____ Date

_____ Parent/Guardian Signature

Sheet prepared by:				Sheet No:
Date	Time	Amount Given	Child's Name Printed	Staff Signature

Instructions for staff:

- 1) Write STOP after last date/time. 2) File at the office after completion

Medication Returned to the Parent/Guardian _____ (Staff Signature) _____ (Date)



More Than Just Babysitting Child Care Centre Inc.

“Where Kids Count”

Medication Sheet

Sheet prepared by:				Sheet No:
Date	Time	Amount Given	Child's Name (Printed)	Staff Signature

Instructions:

- 1) One sheet per medication per child.
- 2) Insert all dates, using start and stop dates from the front of the sheet.
- 3) Write STOP after the last date/time.
- 4) File after completion.



APPENDIX B

**INDIVIDUALIZED PLAN
FOR A CHILD WITH MEDICAL
NEEDS**



More Than Just Babysitting Child Care Centre Inc.

INDIVIDUALIZED PLAN FOR A CHILD WITH MEDICAL NEEDS

This form must be completed for a child who has one or more acute* or chronic **medical conditions such that he or she requires additional supports, accommodation or assistance.

Child's Full Name: _____

Child's Date of Birth: (dd/mm/yyyy) _____

Date Individualized Plan Completed: _____

Photo of Child
(Recommended)

Medical Condition(s):

Diabetes

Asthma

Seizure

Other: _____

Prevention and Supports

STEPS TO REDUCE THE RISK OF CAUSING OR WORSENING THE MEDICAL CONDITION(S): *[Include how to prevent an allergic reaction/other medical emergency; how not to aggravate the medical condition (e.g. Pureeing food to minimize choking)]*

Click here to enter text.

LIST OF MEDICAL DEVICES AND HOW TO USE THEM (if applicable): *(e.g. feeding tube, stoma, glucose monitor, etc.; or not applicable (N/A))*

Click here to enter text.

LOCATION OF MEDICATION AND/OR MEDICAL DEVICE(S) (if applicable): *(e.g. glucose monitor is stored on the second shelf in the program room storage closet; or not applicable (N/A))*

Click here to enter text.

SUPPORTS AVAILABLE TO THE CHILD (if applicable): *(e.g. nurse or trained staff to assist with feeding and/or disposing and changing of stoma bag; or not applicable (N/A))*

Click here to enter text.

Symptoms and Emergency Procedures

SIGNS AND SYMPTOMS OF AN ALLERGIC REACTION OR OTHER MEDICAL EMERGENCY: *[include observable physical reactions that indicate the child may need support or assistance (e.g. hives, shortness of breath, bleeding, foaming at the mouth)]*

Click here to enter text.

PROCEDURE TO FOLLOW IF CHILD HAS AN ALLERGIC REACTION OR OTHER MEDICAL EMERGENCY: *[Include steps (e.g. Administer 2 puffs of corticosteroids; wait and observe the child's condition; contact emergency services/parent or guardian, parent/guardian/emergency contact information; etc.)]*

Click here to enter text.

Special Instructions:

- *Acute: a condition that is severe and sudden in onset that, if left untreated, could lead to a chronic syndrome
- **Chronic: a long-developing syndrome that can develop or worsen over an extended period of time
- Each child with medical needs requires their own individualized plan. If significant changes and updates are required to this individualized plan, a new individualized plan must be completed
- An additional individualized plan is not required for a child with an anaphylactic allergy, if the child does not otherwise have a medical need, as these children must already have an individualized plan under the anaphylactic policy



- Children's personal health information should be kept confidential

PROCEDURES TO FOLLOW DURING AN EVACUATION: (e.g. ice packs for medication and items that require refrigeration; how to assist the child to evacuate)

Click here to enter text.

PROCEDURES TO FOLLOW DURING FIELD TRIPS: (e.g. how to plan for off-site excursion; how to assist and care for the child during a field trip)

Click here to enter text.

Additional Information Related to the Medical Condition (if applicable):

Click here to enter text.

This plan has been created in consultation with the child's parent / guardian.

Parent/Guardian Signature:

<p>Print name:</p> <p>Click here to enter text.</p>	<p>Relationship to child:</p> <p>Click here to enter text.</p>
<p>Signature:</p>	<p>Date: (dd/mm/yyyy)</p> <p>Click here to enter text.</p>

The following individuals participated in the development of this individual plan (optional):

First and Last Name	Position/Role	Signature
Click here to enter text.	Click here to enter text.	

Frequency at which this individualized plan will be reviewed with the child's parent/guardian: _____

Special Instructions:

- *Acute: a condition that is severe and sudden in onset that, if left untreated, could lead to a chronic syndrome
- **Chronic: a long-developing syndrome that can develop or worsen over an extended period of time
- Each child with medical needs requires their own individualized plan. If significant changes and updates are required to this individualized plan, a new individualized plan must be completed
- An additional individualized plan is not required for a child with an anaphylactic allergy, if the child does not otherwise have a medical need, as these children must already have an individualized plan under the anaphylactic policy



Regulatory Requirement - Ontario Regulation 137/15:

Children with medical needs

- 39.1 (1) Every licensee shall develop an individualized plan for each child with medical needs who,
- (a) receives child care at a child care centre it operates; or
 - (b) is enrolled with a home child care agency and receives child care at a premises where it oversees the provision of home child care or in-home services. O. Reg. 126/16, s. 27.
- (2) The individualized plan shall be developed in consultation with a parent of the child and with any regulated health professional who is involved in the child's health care and who, in the parent's opinion, should be included in the consultation. O. Reg. 126/16, s. 27.
- (3) The plan shall include,
- (a) steps to be followed to reduce the risk of the child being exposed to any causative agents or situations that may exacerbate a medical condition or cause an allergic reaction or other medical emergency;
 - (b) a description of any medical devices used by the child and any instructions related to its use;
 - (c) a description of the procedures to be followed in the event of an allergic reaction or other medical emergency;
 - (d) a description of the supports that will be made available to the child in the child care centre or premises where the licensee oversees the provision of home child care or in-home services; and
 - (e) any additional procedures to be followed when a child with a medical condition is part of an evacuation or participating in an off-site field trip. O. Reg. 126/16, s. 27.
- (4) Despite subsection (1), a licensee is not required to develop an individualized plan under this section for a child with an anaphylactic allergy if the licensee has developed an individualized plan for the child under section 39 and the child is not otherwise a child with medical needs. O. Reg. 126/16, s. 27.

Intent: This provision requires that an individualized plan be developed for each child with medical needs and that licensees take all necessary steps to support the child's medical needs and ensure his or her inclusion in the program.

The review of each individualized plan (by employees, students and volunteers) supports the child(ren)'s ability to participate in the child care program, and provides staff with all necessary information to deal with any medical situation pertaining to the child.

Disclaimer: This document is a template that has been prepared to assist licensees in understanding its obligations under the CCEYA and O. Reg. 137/15. It is the responsibility of the licensee to ensure that the information included in this document is appropriately modified to reflect the individual circumstances and needs of each home child care agency it operates and each premises where the licensee oversees the provision of home child care.

Please be advised that this document does not constitute legal advice and should not be relied on as such. The information provided in this document does not impact the Ministry's authority to enforce the CCEYA and its regulations. Ministry staff will continue to enforce such legislation based on the facts as they may find them at the time of any inspection or investigation.



It is the responsibility of the licensee to ensure compliance with all applicable legislation. If the licensee requires assistance with respect to the interpretation of the legislation and its application, the licensee may wish to consult legal counsel.

“Where Kids Count”

APPENDIX C

**Self Carry Asthma Inhaler Signed Permission
and Acknowledgment Form**



“Where Kids Count”

Self Carry Asthma Inhaler Signed Permission and Acknowledgment Form

This written permission and acknowledgement form has been developed as per the MTJB Drug and Medication Policy in coordination with the requirements of the Child Care Early Years Act.

[Asthma](#) is an inflammation and obstruction of the bronchial tubes — the passages that allow air to enter and leave the lungs. During an asthma attack, the muscles that surround the bronchial tubes constrict, narrowing the air passages and making it extremely difficult to breathe. Other common symptoms are wheezing and a rattling sound in the chest.

An asthma attack can be a terrifying experience. It can feel as if someone is sitting on your chest. You struggle to draw in a full breath. Your chest tightens. Your breathing quickens.

Typically, a quick-acting inhaler is used for treatment of asthma symptoms.

This form must be completed fully in order for a school aged child to self-carry his/her prescribed asthma inhaler/puffer in a belt or fanny pack while enrolled at MTJB Child Care Centre Inc.

I, the undersigned, certify that _____
(Child's Name)

has asthma or another potentially life-threatening illness.

I, the undersigned, acknowledge/give written permission for _____
(Child's Name)

to self-carry his/her asthma inhaler/puffer.

(Parent/Guardian Signature)

(Date)