Sec. 19a-428-6. Administration of Medications

(a) Youth camps are not required by this subsection to administer medications to children. If a youth camp permits the administration of medications of any kind by staff not licensed to administer medication, the youth camp shall comply with all requirements of this section and shall have written policies and procedures at the youth camp governing the administration of medications that shall include, but not be limited to, the types of medication that will be administered, parental responsibilities, staff responsibilities, proper storage of medication and record keeping. Such policies and procedures shall be available for review by the Office during inspections or upon demand and shall reflect current best practice. No staff member under eighteen years of age shall administer any medication at a youth camp.

(1) Administration of Nonprescription Topical Medications Only

(A) For the purposes of this subdivision, nonprescription topical medications shall include:

(i) Diaper changing or other ointments free of antibiotic, antifungal, or steroidal components;

(ii) Medicated powders; and

(iii) Gum or lip medications available without a prescription.

(B) Nonprescription Topical Medications Administration/Parent Permission Records

The written permission of the parent shall be required prior to the administration of the nonprescription topical medication and shall be kept on file at the youth camp for each child administered a nonprescription topical medication. The parent shall be immediately notified of any medication error, written notice of such medication error shall be sent to the parent not more than seventy two hours after the medication error occurred, and such medication error shall be documented in the child's health record.

(C) Nonprescription Topical Medications, Labeling and Storage

(i) The medication shall be stored in the original container and shall contain the following information on the container or packaging indicating:

(I) The individual child's name;

(II) The name of the medication; and

(III) Directions for the medication's administration.

(ii) The medication shall be stored away from food and inaccessible to children and unauthorized persons. External and internal medications shall be stored separately from each other.

(iii) Any unused portion of the medication shall be returned to the parent. Any expired medication shall be destroyed by the staff member in a safe manner or returned to the parent.

(2) Administration of Medications Other Than Nonprescription Topical Medications

(A) Training Requirements

(i) Prior to the administration of any medication by staff members, the staff members responsible for administering the medications shall first be trained by a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse in the methods of administration of medications and shall receive written approval from the trainer indicating that the trainee has successfully completed a training program as required under this subparagraph. A staff member trained and approved to administer medication shall be

present whenever a child who has written orders to receive medication by an authorized prescriber is enrolled and present at the youth camp, and the youth camp permits the administration of medication by staff not licensed to administer medication.

(ii) The training in the administration of medications shall be documented and shall include, but not be limited to, the following:

(I) Statement of objectives;

(II) A description of methods of administration including principles and techniques;

(III) Techniques to encourage children who are reluctant or noncompliant to take their medication and the importance of communicating the noncompliance to the child's parent and to the authorized prescriber;

(IV) Demonstration of techniques by the trainer and return demonstration by participants, assuring that the trainee can accurately understand and interpret orders and carry them out correctly;

(V) Recognition of side effects and appropriate follow up action;

(VI) Avoidance of medication errors and the action to take if a medication error or a significant medication error occurs, or if a dosage is missed or refused;

(VII) Abbreviations commonly used;

(VIII) Required documentation including parent permission, written orders from authorized prescribers, and the record of administration;

(IX) Safe handling, including receiving medication from a parent, safe disposal, and universal precautions; and

(X) Proper storage including controlled substances, in accordance with section 21a-262-10 of the Regulations of Connecticut State Agencies.

(iii) In addition to the training requirements described in clauses (i) and (ii) of this subparagraph, before a staff member may administer oral, topical or inhalant medications, the staff member shall have successfully completed a training program on the administration of oral, topical and inhalant medications. The trainer, who shall be a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse, shall assure that the staff member understands the indications, side effects, handling, and methods of administration for oral, topical and inhalant medication. After completing such training, the staff member shall have his or her skills and competency in the administration of oral, topical and inhalant medication reviewed and validated by a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse every three years. The youth camp shall have staff trained in the administration of oral, topical and inhalant medication on-site during all hours when a child with a prescription for an oral, topical or inhalant medication, is on-site.

(iv) In addition to the training requirements described in clauses (i) and (ii) of this subparagraph, before a staff member may administer injectable medications by a premeasured commercially prepared auto-injector, the staff member shall have successfully completed a training program on the administration of injectable medications by a premeasured, commercially prepared auto-injector. The trainer who shall be a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse, shall assure that the staff member understands the indications, side effects, handling and methods of administration for injectable medication. After completing such training, the staff

members shall annually have his or her skills and competency in the administration of injectable medication reviewed and validated by a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse. Injectable medications by a premeasured commercially prepared auto-injector shall only be given in emergency situations. The youth camp shall have staff trained in the use of a premeasured commercially prepared auto-injector used to treat an allergic reaction on-site during all hours when a child with a prescription for a premeasured commercially prepared auto-injector used to treat an allergic reaction is on-site.

(v) In addition to the training requirements described in clauses (i) and (ii) of this subparagraph, before a staff member may administer rectal medications, the staff member shall have successfully completed a training program on the administration of rectal medications. The trainer, who shall be a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse, shall assure that the staff member understands the indications, side effects, handling, and the methods of administration for rectal medication. After completing such training, the staff member shall have his or her skills and competency in the administration of rectal medications reviewed and validated by a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse every three years. The youth camp shall have staff trained in the administration of rectal medication on-site during all hours when a child with a prescription for rectal medication is on-site.

(vi) In addition to the training requirements described in clauses (i) and (ii) of this subparagraph, before a staff member may administer injectable medications other than by a premeasured commercially prepared auto-injector, the staff member shall have successfully completed a training program on the administration of injectable medications other than by a premeasured commercially prepared auto-injector. The trainer, who shall be a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse, shall assure that the staff member understands the indications, side effects, handling, and the methods of administration for injectable medication. After completing such training, the staff member shall have his or her skills and competency in the administration of injectable medication other than by a premeasured commercially prepared auto-injector reviewed and validated by a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse every three years. The youth camp shall have staff trained in the administration of injectable medication other than by a premeasured commercially prepared auto-injector on-site during all hours when a child with a prescription for injectable medication other than by a premeasured commercially prepared auto-injector is on-site.

(vii) A staff member currently certified by the State of Connecticut Department of Developmental Services or the State of Connecticut Department of Children and Families to administer medications shall be considered qualified to administer medications for the modalities in which they have been trained at youth camps.

(B) Training Approval Documents and Training Outline

(i) Upon completion of the required training program or the review and validation of the required training, the pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse who conducted the training shall issue a written approval

to each staff member who has demonstrated successful completion of the required training or the review and validation of the required training. Approval for the administration of oral, topical, inhalant, rectal medications and injectable medications other than by a premeasured commercially prepared auto-injector shall remain valid for three (3) years. Approval for the administration of injectable medications by a premeasured commercially prepared auto-injector shall be valid for one (1) year. A copy of the approval shall be on file at the youth camp for a period of three (3) years and shall be available to the Office upon request.

(ii) The written approval shall include:

(I) The full name, signature, title, license number, address and telephone number of the pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse who gave the training;

(II) The location and date(s) the training was given;

(III) A statement that the required curriculum areas listed in subparagraph (A) of this subdivision when applicable were successfully mastered, and indicating the route(s) of administration the trainee has been approved to administer;

(IV) The name, date of birth, address and telephone number of the staff member who completed the training successfully; and

(V) The expiration date of the approval.

(iii) The trainer shall provide the trainee with an outline of the curriculum content, which verifies that all mandated requirements have been included in the training program. A copy of said outline shall be on file at the youth camp for a period of three (3) years for Office review. The Office may require at any time that the licensee obtain the full curriculum from the trainer for review by the Office.

(C) Order From An Authorized Prescriber and Parent's Permission

(i) Except for nonprescription topical medications described in subparagraph (A) of subdivision (1) of this subsection, no medication, prescription or nonprescription, shall be administered to a child without the written order of an authorized prescriber and the written permission of the child's parent which shall be on file at the youth camp. Such medications may include:

(I) Oral medications;

(II) Topical medications, including eye and ear preparations;

(III) Inhalant medications;

(IV) Injectable medications by a premeasured commercially prepared auto-injector, to a child with a medically diagnosed condition who may require emergency treatment;

(V) Rectal medications; or

(VI) Injectable medication other than by a premeasured commercially prepared auto-injector.

(ii) The written order from an authorized prescriber shall contain the following information which may be on the prescription label or on supplemental information provided by the authorized prescriber or pharmacist:

(I) The name, address and date of birth of the child;

(II) The date the medication order was written;

(III) The medication or drug name, dose and method of administration;

(IV) The time of the day the medication is to be administered;

(V) The date(s) the medication is to be started and ended as applicable;

(VI) Relevant side effects and the authorized prescriber's plan for management should they occur;

(VII) Notation if the medication is a controlled drug;

(VIII) A listing of any allergies, reactions to, or negative interactions with foods or drugs;

(IX) Specific instructions from the authorized prescriber who orders the medication regarding how the medication is to be given;

(X) The name, address and telephone number of the parent;

(XI) The name, address and telephone number of the authorized prescriber ordering the drug; and

(XII) The authorized prescriber's signature.

(iii) If the authorized prescriber determines that the training of the staff member is inadequate to safely administer medication to a particular child, or that the means of administration of medication is not permitted under this subsection, that authorized prescriber may order that such administration be performed by licensed medical staff with the statutory authority to administer medications.

(iv) The staff member shall administer medication only in accordance with the written order of the authorized prescriber. The parent shall be notified immediately of a significant medication error or a medication error, and notified in writing not later than seventy-two hours after the medication error occurred, and the error shall be documented in the medication administration record. Significant medication errors shall also be reported immediately to the Office by telephone and in writing not later than the next business day.

(D) Required Medication Administration Records

(i) Except for nonprescription topical medications described in subparagraph (A) of subdivision (1) of this subsection, individual written medication administration records for each child shall be maintained, reviewed prior to administering each dose of medication and kept on file at the youth camp for at least two (2) years after the child is no longer enrolled in the youth camp. The medication administration record shall become part of the child's health record when the course of medication has ended.

(ii) The individual written medication administration record for each child shall include:

(I) The name, address, and date of birth of the child;

(II) The name, address, telephone number, signature and relationship to the child of the parent(s) giving permission for the administration of the medication by the staff member;

(III) The name of the medication;

(IV) The dosage ordered and method of administration;

(V) The date, time, and dosage at each administration;

(VI) The signature in ink of the staff member giving the medication at the time of each administration; and

(VII) Any refusal by the child in accepting the medication, and any follow-up action taken as a result of the refusal.

(iii) Medication errors shall be logged and recorded in the individual written medication administration record of the child. The youth camp physician or advanced practice registered nurse shall review all logs of medication errors on a weekly basis. A written record of the

review and any recommendations made shall be kept on file at the youth camp, in accordance with the provisions of this subparagraph.

(E) Storage and Labeling

(i) Medication shall be stored in the original child-resistant safety container. The container or packaging shall have a label which includes the following information:

(I) The child's name;

(II) The name of the medication;

(III) Directions for the medication's administration; and

(IV) The date of the prescription.

(ii) Except for nonprescription topical medications described in subparagraph (A) of subdivision (1) of this subsection, premeasured commercially prepared auto-injectors used to treat an allergic reaction, injectable equipment used to administer glucagon, a rectal medication used to control seizures, an inhalant medication used to treat asthma or over the counter medications prescribed as an emergent first line of defense medication against an allergic reaction or a diabetic reaction, medication shall be stored in a locked area or a locked container, in a refrigerator in keeping with the label or manufacturer's directions, away from food and inaccessible to children and unauthorized personnel. External and internal medications shall be stored separately from each other. Keys or the locking mechanism to the locked area or container shall be accessible only to personnel authorized to administer medication. Controlled drugs shall be stored in accordance with section 21a-262-10 of the Regulations of Connecticut State Agencies.

(iii) Equipment and medications prescribed to treat asthma, administer glucagon, control seizures, or as an emergent first line of defense medication against an allergic response or a diabetic reaction shall be stored in a safe manner, inaccessible to other children, to allow for quick access in an emergency.

(iv) All unused or expired medication, except for controlled drugs, shall be returned to the parent or disposed of by the youth camp director, or the youth camp director's designee, and in the presence of at least one witness, if it is not picked up after seven days after the camper's departure at the end of camp. The licensee shall contact the Department of Consumer Protection for direction on the proper method of disposing of a controlled drug, and shall carry out the direction as required. The licensee shall keep a written record of the contact made and direction received from the Department of Consumer Protection and the medications destroyed for three (3) years which shall be signed by the person disposing of the medication and the witness.

(F) Request For Special Medication Authorization

(i) The licensee may request to administer medication to a child attending the youth camp by a modality that is not specifically permitted under this subsection by submitting a written request to the Office including the following information:

(I) A written order from an authorized prescriber containing the information for the specific child set forth in clause (ii) of subparagraph (C) of this subdivision and a statement that the administration by the requested modality is the only reasonable means of providing medication and that the administration must occur during hours of the child's attendance at the youth camp;

(II) A written training plan including the full name, signature, title, license number,

address and telephone number of the physician, advanced practice registered nurse, physician assistant, registered nurse, or pharmacist who will provide the training, a detailed outline of the curriculum areas to be covered in the training, and a written statement by the authorized prescriber that the proposed training is adequate to assure that the medication will be administered safely and appropriately to the particular child;

(III) The name, date of birth, address and telephone number of the person(s) who shall participate in the training;

(IV) Written permission from the child's parent; and

(V) Any other information that the Office deems necessary to evaluate the request.

(ii) After reviewing the submitted information, if the Office determines that the proposed administration of medication for the particular child can be provided in a manner to assure the health, welfare and safety of the child, it may grant the request. The Office may grant the request with any conditions or corrective measures the Office deems necessary to assure the health, safety and welfare of the child. The Office shall specify the curriculum that the training program shall cover and the expiration date of the authorization provided in granting the request. If the Office grants the request, no medication may be administered until after the proposed training program has been successfully completed and a written approval from the physician, advanced practice registered nurse, physician assistant, registered nurse or pharmacist who provided the training is submitted to the Office. Such written approval shall include:

(I) The full name, signature, title, license number, address and telephone number of the pharmacist, physician, advanced practice registered nurse, physician assistant, registered nurse or pharmacist who provided the training;

(II) The location and date(s) the training was given;

(III) A statement that the curriculum approved by the Office was successfully mastered by the participant. The statement shall also include the modality of administration of medication that the participant has been approved to administer; and

(IV) The name, date of birth, address and telephone number of the person(s) who successfully completed the training.

(iii) Unless otherwise specified in this subdivision, copies of all documentation required under this subsection shall be maintained for a period of two (2) years at the youth camp. The requirements of subparagraphs (D) and (E) of this subdivision shall apply to the administration of medication authorized by request.

(b) Children enrolled at youth camps may self-administer medications with documented permission from the parent(s) and authorized prescriber. Children may request and receive assistance from staff in opening containers or packages or replacing lids. Medication to be self-administered shall be stored in accordance with subparagraph (E) of subdivision (2) of subsection (a) of this section.

(c) Notwithstanding any other provisions of the Regulations of Connecticut State Agencies, during a public health emergency declared by the Governor pursuant to section 19a-131a of the Connecticut General Statutes and if authorized by the Commissioner of Public Health pursuant to section 19a-131k of the Connecticut General Statutes via the emergency alert system or other communication system, a youth camp located within a ten mile radius of the Millstone Power Station in Waterford, Connecticut shall notify parents

and guardians of enrolled minors, youth camp staff and other persons present of the statutory requirement to provide potassium iodide, and shall designate staff members to distribute and administer potassium iodide to adults present or to a child in attendance at the youth camp during such emergency. Such distribution of potassium iodide shall comply with the following:

(1) Prior to distribution, each youth camp shall notify parents and guardians of minors currently enrolled, and youth camp staff currently employed, of the requirement to distribute and administer potassium iodide. Such notification shall also be made upon enrolling a new minor or hiring a new staff member;

(2) Upon notification made pursuant to subdivision (1) of this subsection, the youth camp shall obtain written permission or written objection for such administration. Documentation of such notification and written permission or written objection shall be kept at the youth camp;

(3) Prior to obtaining written permission or written objection, the youth camp shall advise each such person, in writing, that the ingestion of potassium iodide is voluntary;

(4) Prior to obtaining written permission or written objection, the youth camp shall advise each such person, in writing, about the contraindications and the potential side effects of taking potassium iodide, according to current guidelines on exposure, dosage, contraindications and side effects issued by the Food and Drug Administration;

(5) Youth camps shall designate staff members to distribute and administer potassium iodide to minors, staff, and other persons present at the youth camp when directed by the Commissioner of Public Health during a public health emergency. Such designated staff members shall be eighteen years of age or older and shall have been instructed by the youth camp in the administration of potassium iodide. Such instruction shall include, but is not limited to, the following:

(A) The proper use and storage of potassium iodide; and

(B) The recommended dosages of potassium iodide to be administered to children and adults as prescribed by the Food and Drug Administration; and

(6) Potassium iodide shall be stored in a locked storage area or container, inaccessible to children.

(Effective September 25, 2017; Amended June 13, 2022; Amended August 10, 2023)