Sec. 19a-79-9a. Administration of medications

Group day care homes and child day care centers that administer medications of any kind shall comply with all requirements of this section and shall have written policies and procedures at the facility governing the administration of medications which shall include, but not be limited to, the types of medication that shall be administered, parental responsibilities, staff responsibilities, proper storage of medication and record keeping. Said policies and procedures shall be available for review by the commissioner during site inspections or upon demand and shall reflect best practice. A group day care home or child day care center shall not deny services to a child on the basis of a child's known or suspected allergy or because a child has a prescription for an automatic pre-filled cartridge injector or similar automatic injectable equipment used to treat an allergic reaction or for injectable equipment used to administer glucagon. A group day care home or child day care center shall not deny services to a child on the basis of a child's diagnosis of asthma or because a child has a prescription for an inhalant medication to treat asthma.

(a) **Administration of Nonprescription Topical Medications Only**

(1) Description

For the purposes of this section nonprescription topical medications shall include, but not be limited to:

(A) diaper changing or other ointments free of antibiotic, antifungal or steroidal components;

(B) medicated powders; and

(C) teething, gum or lip medications.

(2) Nonprescription Topical Medications Administration/Parent Permission Records

The written permission of the parent(s) shall be required prior to the administration of the nonprescription topical medication and a medication administration record shall be written in ink and kept on file at the facility for each child administered a nonprescription topical medication. The medication administration record and the parent(s) permission shall become part of the child's health record when the course of medication has ended. The parent(s) shall be notified of any medication administration errors immediately in writing and the error shall be documented in the record. The following information shall be included on a form as part of the medication administration record:

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

(B) the name of the medication;

(C) the schedule and site of administration of the medication;

(D) a statement indicating that the medication has been previously administered to the child without adverse effect;

(E) the signature in ink of the director, head teacher, program staff or group day care home provider receiving the parent permission form and the medication;

(F) the name, address, telephone number, signature and relationship to the child of the parent(s) authorizing the administration of the medication;

(G) the date and time the medication is started and ended;

(H) medication administration errors; and

(I) the name of the person who administered the nonprescription topical medication.

(3) Nonprescription Topical Medications/Labeling and Storage

(A) 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.

(B) The medication shall be stored away from food and inaccessible to children.

(C) Any unused portion of the medication shall be returned to the parent(s).

(b) **Administration of Medications Other Than Nonprescription Topical Medications**

(1) Training Requirements

(A) Prior to the administration of any medication, the director(s), head teacher(s), program staff or group day care home provider(s) who are responsible for administering the medications shall first be trained by a 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 which indicates that the trainee has successfully completed a training program as required herein. A director, head teacher, program staff or group day care home provider trained and approved to administer medication shall also be present whenever a child who has orders to receive medication is enrolled and present at the facility.

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

(i) objectives;

(ii) a description of methods of administration including principles and techniques, application and installation of oral, topical and inhalant medication, including the use of nebulization machines, with respect to age groups;

(iii) administering medication to an uncooperative child;

(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 an error occurs;

(vii) abbreviations commonly used;

(viii) documentation including parent permission, written orders from physicians and the record of administration;

(ix) safe handling including receiving medication from the parent(s), safe disposal and standard precautions; and

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

(C) The facility shall have staff trained in the administration of inhalant medication used to treat asthma on site during all hours when a child who has a diagnosis of asthma and who has a prescription for an inhalant medication to treat asthma is on-site.

(D) Injectable Medications

In addition to the above training, before a director, head teacher, program staff or group day care home provider may administer injectable medications, he shall have successfully

completed a training program on the administration of injectable medications by a premeasured, commercially prepared syringe. The trainer, who shall be a physician, physician assistant, advanced practice registered nurse or registered nurse, shall assure that the director, head teacher, program staff or group day care home provider understands the indications, side effects, handling and methods of administration for injectable medication. Thereafter, on a yearly basis, the director, head teacher, program staff or group day care home provider shall have their skills and competency in the administration of injectable medication validated by a physician, physician assistant, advanced practice registered nurse or registered nurse. Injectable medications shall only be given in emergency situations, by a premeasured commercially prepared syringe, unless a petition for special medication authorization is granted by the department. The facility shall have staff trained in the use of an automatic prefilled cartridge injector or similar automatic injectable equipment used to treat an allergic reaction on site during all hours when a child with a prescription for an automatic prefilled cartridge injector or similar automatic injectable equipment used to treat an allergic reaction is on-site.

(E) A program staff member currently certified by the State of Connecticut Department of Developmental Services, formerly the Department of Mental Retardation, to administer medications shall be considered qualified to administer medications for the modalities in which they have been trained at child day care centers or group day care homes.

(2) Training Approval Documents/Training Outline

(A) Upon completion of the required training program, the physician, physician assistant, advanced practice registered nurse or registered nurse who conducted the training shall issue a written approval to each director, head teacher, program staff or group day care home provider who has demonstrated successful completion of the required training. Approval for the administration of oral, topical and inhalant medications shall remain valid for three (3) years. Approval for the administration of injectable medications shall be valid for one (1) year. A copy of the approval shall be on file at the facility where the director, head teacher, program staff or group day care home provider is employed and shall be available to department staff upon request.

(B) The written approval shall include:

(i) the full name, signature, title, license number, address and telephone number of the 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 subparagraphs (B) and (D) of subdivision (1) of this subsection when applicable were successfully mastered, and indicating the route(s) of administration the trainee has been approved to administer;

(iv) the name, address and telephone number of the director, head teacher, program staff or group day care home provider who completed the training successfully; and

(v) the expiration date of the approval.

(C) 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 facility where the trainee is employed for department review. The department may require at any time that the operator obtain the full curriculum

from the trainer for review by the department.

(3) Order From An Authorized Prescriber/Parent's Permission

(A) Except for nonprescription topical medications described in section 19a-79-9a(a)(1) of the Regulations of the Connecticut State Agencies, 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(s) which shall be on file at the facility for at least two (2) years after the child is no longer attending the program. Such medications may include:

(i) oral medications;

(ii) topical medications;

(iii) inhalant medications; or

(iv) injectable medications, by a premeasured, commercially prepared syringe, to a child with a medically diagnosed condition who may require emergency treatment.

(B) The written order from an authorized prescriber shall be on one form that indicates that the medication is for a specific child and that contains the following information:

(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 the medication is to be administered;

(v) the date(s) the medication is to be started and ended;

(vi) relevant side effects and the authorized prescriber's plan for management if 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 authorized prescriber ordering the drug;

(xi) the authorized prescriber's signature; and

(xii) the name, address, telephone number, signature and relationship to the child of the parent(s) giving permission for the administration of the drug by the director, head teacher, program staff or group day care home provider.

(C) If the authorized prescriber determines that the training of the director, head teacher, program staff or group day care home provider is inadequate to safely administer medication to a particular child, or that the means of administration of medication is not permitted under these regulations, that authorized prescriber may order that such administration be performed by licensed medical personnel with the statutory authority to administer medications.

(D) The director, head teacher, program staff or group day care home provider shall administer medication only in accordance with the written order of the authorized prescriber and shall not administer the first dose of any medication, except in an emergency. The parent(s) shall be notified of any medication administration errors immediately in writing and the error shall be documented in the record.

(E) Investigational drugs shall not be administered.

(4) Required Records

(A) Except for nonprescription topical medications described in section 19a-79-9a(a)(1), individual written medication administration records for each child shall be written in ink, reviewed prior to administering each dose of medication and kept on file at the facility for at least two (2) years after the child is no longer attending the program. The medication administration record shall become part of the child's health record when the course of medication has ended.

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

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

(ii) the name of the medication or drug;

(iii) the dosage ordered and method of administration;

(iv) the pharmacy and prescription number if applicable;

(v) the name of the authorized prescriber ordering the drug;

(vi) the date, time and dosage at each administration;

(vii) the signature in ink of the director, head teacher, program staff or group day care home provider giving the medication;

(viii) food and medication allergies;

(ix) level of cooperation from the child in accepting the medication;

(x) the date and time the medication is started and ended; and

(xi) medication administration errors.

(5) Storage and Labeling

(A) 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.

(B) Except for nonprescription topical medications described in subdivision (1) of subsection (a) of this section, automatic prefilled cartridge injectors, or similar automatic injectable equipment used to treat an allergic reaction, injectable equipment used to administer glucagon or an inhalant medication to treat asthma and over the counter medications prescribed as an emergent first line of defense medication against an allergic reaction, medication shall be stored in a locked area or a locked container in a refrigerator in keeping with the label directions away from food and inaccessible to children. Keys 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.

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

(D) All unused or expired medication shall be returned to the parent(s) or disposed of if it is not picked up within one (1) week following the termination of the order, in the presence of at least one witness. The facility shall keep a written record of the medications destroyed which shall be signed by both parties.

(E) The facility shall require the parent(s) of a child who has a prescription for an automatic prefilled cartridge injector, or similar automatic injectable equipment used to treat an allergic reaction or injectable equipment used to administer glucagon or inhalant medication to treat asthma, to provide the injector or equipment labeled with the information from the prescriber upon enrollment and attendance of such child at the facility, and replace such medication and equipment prior to its expiration date.

(6) Children enrolled at the facility may self administer medications with documented parental and authorized prescriber's permission. Children may request and receive assistance from staff in opening containers or packages or replacing lids. Children who self administer medications shall be able to identify and select the appropriate medication by size, color, amount or other label identification; know the frequency and time of day for which the medication is ordered; and consume the medication appropriately. Medication to be self administered shall be stored in accordance with section 19a-79-9a(b)(5) of the Regulations of Connecticut State Agencies.

(7) Petition For Special Medication Authorization

(A) The operator of a child day care center or group day care home may petition the department to administer medications to a child cared for at the child day care center or group day care home by a modality which is not specifically permitted under these regulations by submitting a written application to the department including the following information:

(i) a written order from an authorized prescriber containing the information for the specific child set forth in subdivision (3)(B) of this subsection 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 facility;

(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 or registered nurse who shall provide the training, a detailed outline of the curriculum areas to be covered in training and a written statement by the authorized prescriber that the proposed training is adequate to assure that the medication shall be administered safely and appropriately to the particular child;

(iii) name, address and telephone number of the person(s) who shall participate in the training;

(iv) written permission from the child's parent(s); and

(v) such other information that the department deems necessary to evaluate the petition request.

(B) After reviewing the submitted information, if the department 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 petition. The department may grant the petition with any conditions or corrective measures which the department deems necessary to assure the health, safety and welfare of the child. The department shall specify the curriculum that the training program shall cover and the expiration date of the authorization provided in granting the petition. If the department grants the petition, no medication may be administered until after the proposed training program has been

successfully completed and a written certification from the physician, physician assistant, advanced practice registered nurse or registered nurse who provided the training is submitted to the department. The certification shall include:

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

(ii) the location and date(s) the training was given;

(iii) a statement that the curriculum approved by the department was successfully mastered and stating the modality of administration of medication that the trainee has been approved to administer; and

(iv) the name, address and telephone number of the person(s) who successfully completed the training.

(C) Copies of all documentation required under this subsection shall be maintained at the facility. The requirements of subsection (b) (4) and (b) (5) of this section shall apply to the administration of medication authorized by petition.

(c) **Cease and Desist Orders**

If the department determines that the health, safety or welfare of a child in the child day care center or group day care home imperatively requires emergency action to halt the administration of medications by a director, head teacher, program staff or group day care home provider in a child day care center or group day care home, the department may issue a cease and desist order requiring the immediate cessation of the administration of medications by a director, head teacher, program staff or group day care home provider in the facility. The department shall provide an opportunity for a hearing regarding the order within ten (10) business days of date the order is issued. Upon receipt of the order, the operator shall cease the administration of all medications and provide immediate notification to the parent(s) of all children under his care that no medications may be administered at the child day care center or group day care home until such time as the cease and desist order is terminated.

(d) **Emergency Distribution of Potassium Iodide**

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 via the emergency alert system or other communication system, a child day care center or group day care home licensed in accordance with section 19a-80 of the Connecticut General Statutes and located within a ten (10) mile radius of the Millstone Power Station in Waterford, Connecticut shall permit designated staff members to distribute and administer potassium iodide to adults present or to a child in attendance at the child day care center or group day care home during such emergency, provided that:

(1) prior written consent has been obtained by the child day care center or group day care home for such provision. Written consent forms shall be provided by the child day care center or group day care home to the parent(s) of each child currently enrolled or employees currently employed by the child day care center or group day care home promptly upon the effective date of this subdivision. Thereafter, written consent forms shall be provided by the child day care center or group day care home to the parent(s) of each minor child upon

enrollment and to each new employee upon hire. Such documentation shall be kept at the facility;

(2) each person providing consent has been advised in writing by the child day care center or group day care home that the ingestion of potassium iodide is voluntary;

(3) each person providing consent has been advised in writing by the child day care center or group day care home about the contraindications and the potential side effects of taking potassium iodide, which include:

(A) persons who are allergic to iodine should not take potassium iodide;

(B) persons with chronic hives, lupus or other conditions with hypocomplementemic vasculitis should not take potassium iodide;

(C) persons with Graves disease or people taking certain heart medications should talk to their physician before there is an emergency to decide whether or not to take potassium iodide; and

(D) side effects may include minor upset stomach or rash;

(4) child day care centers and group day care homes shall have designated staff members to distribute and administer potassium iodide to those individuals and minor children for whom prior written consent has been obtained. Such designated staff members shall be eighteen (18) years of age or older and shall have been instructed by the child day care center or group day care home in the administration of potassium iodide. Such instruction shall include, but not be limited to, the following:

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

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

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

(Adopted effective November 3, 1997; Amended March 8, 2004; Amended January 4, 2005; Amended November 6, 2008)