

Youth Program Attendee Self-carry and Self-Administration of Medications Policy

All youth program attendees with chronic conditions that may require emergency medications (including, but not limited to, anaphylactic food allergies, asthma, diabetes, and seizures) are required to have an emergency action plan on file. Parents/guardians must provide a *General Medication, Self-Carry, and Self-Administration Medication Authorization Form* and a *General Medication and Self-Carry Medication Medical Provider Authorization Form* completed by a physician, physician assistant, or advanced practice nurse with prescriptive authority and any medication their child/ward may need while at the youth program.

At check in, youth program staff will review the medication information previously submitted to ensure it matches the medications that are turned in. If the previously submitted information has changed (new medications, altered dosage, etc.), a new form must be submitted at check in.

All prescription medications need to be in the original container from the pharmacy and the label must contain the following information:

- Child/ward's first and last name;
- Child/ward's date of birth;
- Medication name;
- Medication dosage;
- Administration route and/or other directions;
- Prescription number;
- Pharmacy; and
- Prescribing licensed practitioner's name.

Over-the-counter medication (OTC), as required under an emergency action plan, shall be provided in the original container with the manufacturer's label, with the ingredients listed and the youth program attendee's name on the container.

The parents/guardians shall inform youth program staff if the medication requires refrigeration.

Youth program attendees may possess and self-administer an epinephrine injector (EpiPen) and/or asthma medication prescribed for use at the youth program attendee's discretion, provided the youth program attendee's parent/guardian and licensed healthcare provider with prescriptive authority complete and sign the following forms:

- *General Medication, Self-Carry, and Self-Administration Medication Authorization Form*
- *General Medication and Self-Carry Medication Medical Provider Authorization Form.*

For the self-carry and/or self-administration of asthma medication, a copy of the prescription label that contains the name of the medication, the prescribed dosage and the time at which or circumstances under which the asthma medication is to be administered must be provided to the youth program.

For the self-carry and/or self-administration of an epinephrine injector, a written statement from the youth program attendee's physician, physician assistant or advanced practice registered nurse must contain the name and purpose of the epinephrine injector, the prescribed dosage and the time or times at which or the special circumstances under which the epinephrine injector is to be administered.

Self-administration of medication is defined as medication administered by the youth program attendee under the direct supervision of the trained youth program staff. Self-administration of medication also includes medication taken by the child/ward in an emergency situation not under the supervision of the

trained youth program staff and/or emergency medication carried on their person (e.g. asthma inhaler or EpiPen).

The trained youth program staff will ensure an Emergency Action Plan is developed by the youth program attendees medical provider (physician, physician assistant, or advanced practice nurse with prescriptive authority) for each self-administering youth program attendee.

A youth program attendee may self-administer other medication, including medication required under a qualifying emergency action plan, dispensed by trained youth program staff, provided the youth program attendee's parent/guardian and licensed healthcare provider with prescriptive authority complete and sign the following forms:

- *General Medication, Self-Carry, and Self-Administration Medication Authorization Form*
- *General Medication and Self-Carry Medication Medical Provider Authorization Form.*

A youth program attendee's self-administration of medication other than an epinephrine injector or asthma medication must be under the direct supervision of trained youth program staff.

A qualifying emergency action plan is one of the following: (1) an Asthma Action Plan; (2) an Individual Health Care Action Plan; (3) an Illinois Food Allergy Emergency Action Plan and Treatment Authorization Form; (4) a plan pursuant to Section 504 of the Federal Rehabilitation Act of 1973; or (5) a plan pursuant to the Federal Individuals Education Act.

Provided that the requirements of this section are fulfilled, a youth program attendee with asthma may self-administer and self-carry their asthma medication and/or a youth program attendee with allergies may self-administer and self-carry their epinephrine injector while attending a youth program.

Youth program administrators shall ensure training of at least one (1) youth program staff member to serve as the trained youth program staff member responsible for supervising the child/ward's self-carry and self-administration of medications and to complete the American Red Cross Standard First Aid Certificate or equivalent. The trained youth program staff member should be on the premises at all times when a youth program is in operation.

The youth program shall incur no liability, except for willful and wanton conduct, as a result of any injury arising from a youth program attendee's self-administration of medication, including asthma medication, epinephrine injector, or medication required under a qualifying plan, or the storage of any medication by the trained youth program staff.

All youth program attendees with conditions requiring emergency medication are required to have a qualifying emergency action plan on file. All medication will be returned to the youth program attendee's parents/guardians when the youth program is over. If the attendee will not be picked up by a parent or guardian, the parent or guardian must provide prior written permission for the medication to be returned to the youth program attendee.

Medication Administration Procedure

Medications administered at this Program must be stored in a secure, locked, and clean container under conditions as directed by the healthcare provider or pharmacist. Medications that require refrigeration should be stored in a leak-proof container (locked box) in a designated area of the refrigerator, separated from food, or in a separate and locked refrigerator used only for medication.

Medication that is a controlled substance must be in a locked cabinet securely affixed to the wall. Controlled substance medications requiring refrigeration must be kept in a locked refrigerator separate from food products.

Youth program staff shall count and record the quantity of controlled substances received from the parents/guardians, in the presence of the parent, upon drop off of the medication.

Once all requirements are met, the trained youth program staff will administer the medications utilizing the **5 Rights of Medication Administration:**

- 1. Right Child**
- 2. Right Medication**
- 3. Right Dose**
- 4. Right Time**
- 5. Right Route (how medication is given)**

Documentation

Each dose of medication shall be documented in the youth program attendee's Medication Log. Documentation should include the date, time, dosage, route by which the medication is to be administered, and the signature of the person administering the medication or supervising the attendee in self-administration.

A daily accounting (count) shall be maintained of any controlled substance prescribed for any youth program attendee.

Side effects shall be assessed with each administration and documented as necessary as well as contacting the youth program attendee's parent/guardian.

If a youth program attendee refuses the medication, the parent or guardian must be notified immediately.

Medication Incidents

A medication incident is any situation that involves any of the following:

- Forgetting to give a dose of medication
- Giving more than one dose of the medication
- Giving the medication at the wrong time
- Giving the wrong dose
- Giving the wrong medication
- Giving the wrong medication to the wrong child
- Giving the medication by the wrong route
- Forgetting to document the medication

Medication incidents will be documented on a Medication Incident Report and reported to the parent/guardian and/or health care provider (as appropriate). Medication incidents that involve medication given to the wrong child or an overdose of medication require consultation with Poison Control.

Nothing in this procedure prohibits any youth program staff from providing emergency assistance to youth program attendees.

First Aid Safety

First Aid Equipment. All youth programs shall have an area designated for emergency care equipped with at least one first aid kit which contains a minimum of the following:

- 1) 2 units- 3" bandage compress;
- 2) 2 units- triangular bandages;
- 3) 1 unit- scissors;
- 4) 1 unit- tweezers;
- 5) 2 units- eye dressing packet;
- 6) 1 unit- 1" adhesive tape;
- 7) 1 box- adhesive bandages of various sizes; and
- 8) 1 unit- antiseptic.

A minimum of one (1) person with a current American Red Cross Standard First Aid Certificate or equivalent should be on the premises at all times when a youth program is in operation.

Each youth program shall maintain and keep current a record of first aid cases treated by designated first aid personnel during the youth program's operating period.