

WAC 110-300-0215 Medication. (1) **Managing medication.** A medication management policy must include, but is not limited to, safe medication storage, reasonable accommodations for giving medication, mandatory medication documentation, and forms pursuant to WAC 110-300-0500.

(2) **Medication training.** An early learning provider must not give medication to a child if the provider has not successfully completed:

(a) An orientation about the early learning program's medication policies and procedures;

(b) The department standardized training course in medication administration that includes a competency assessment pursuant to WAC 110-300-0106(10) or equivalent training; and

(c) If applicable, a training from a child's parents or guardian (or an appointed designee) for special medical procedures that are part of a child's individual care plan. This training must be documented and signed by the provider and the child's parent or guardian (or designee).

(3) **Medication administration.** An early learning provider must not give medication to any child without written and signed consent from that child's parent or guardian, must administer medication pursuant to directions on the medication label, and using appropriate cleaned and sanitized medication measuring devices.

(a) An early learning provider must administer medication to children in care as follows:

(i) **Prescription medication.** Prescription medication must only be given to the child named on the prescription. Prescription medication must be prescribed by a health care professional with prescriptive authority for a specific child. Prescription medication must be accompanied with medication authorization form that has the medical need and the possible side effects of the medication. Prescription medication must be labeled with:

(A) A child's first and last name;

(B) The date the prescription was filled;

(C) The name and contact information of the prescribing health professional;

(D) The expiration date, dosage amount, and length of time to give the medication; and

(E) Instructions for administration and storage.

(ii) **Nonprescription oral medication.** Nonprescription (over-the-counter) oral medication brought to the early learning program by a parent or guardian must be in the original packaging.

(A) Nonprescription (over-the-counter) medication needs to be labeled with child's first and last name and accompanied with medication authorization form that has the expiration date, medical need, dosage amount, age, and length of time to give the medication. Early learning providers must follow the instructions on the label or the parent must provide a medical professional's note; and

(B) Nonprescription medication must only be given to the child named on the label provided by the parent or guardian.

(iii) **Other nonprescription medication:** An early learning provider must receive written authorization from a child's parent or guardian and health care provider with prescriptive authority prior to administering if the item does not include age, expiration date, dosage amount, and length of time to give the medication:

(A) Vitamins;

(B) Herbal supplements;

(C) Fluoride supplements;

(D) Homeopathic or naturopathic medication; and
(E) Teething gel or tablets (amber bead necklaces are prohibited).

(iv) **Nonmedical items.** A parent or guardian must annually authorize an early learning provider to administer the following nonmedical items:

(A) Diaper ointments (used as needed and according to manufacturer's instructions);

(B) Sunscreen;

(C) Lip balm or lotion;

(D) Hand sanitizers or hand wipes with alcohol, which may be used only for children over twenty-four months old; and

(E) Fluoride toothpaste for children two years old or older.

(v) An early learning provider may allow children to take his or her own medication with parent or guardian authorization. The early learning staff member must observe and document that the child took the medication.

(vi) An early learning provider must not give or permit another to give any medication to a child for the purpose of sedating the child unless the medication has been prescribed for a specific child for that particular purpose by a qualified health care professional.

(b) Medication documentation (excluding nonmedical items). An early learning provider must keep a current written medication log that includes:

(i) A child's first and last name;

(ii) The name of the medication that was given to the child;

(iii) The dose amount that was given to the child;

(iv) Notes about any side effects exhibited by the child;

(v) The date and time of each medication given or reasons that a particular medication was not given; and

(vi) The name and signature of the person that gave the medication.

(c) Medication must be stored and maintained as directed on the packaging or prescription label, including applicable refrigeration requirements. An early learning provider must comply with the following additional medication storage requirements:

(i) Medication must be inaccessible to children;

(ii) Controlled substances must be locked in a container or cabinet which is inaccessible to children;

(iii) Medication must be kept away from food in a separate, sealed container; and

(iv) External medication (designed to be applied to the outside of the body) must be stored to provide separation from internal medication (designed to be swallowed or injected) to prevent cross contamination.

(d) An early learning provider must return a child's unused medication to that child's parent or guardian. If this is not possible, a provider must follow the Food and Drug Administration (FDA) recommendations for medication disposal.

(e) An early learning provider must not accept or give to a child homemade medication, such as diaper cream or sunscreen.

[WSR 18-15-001, recodified as § 110-300-0215, filed 7/5/18, effective 7/5/18. Statutory Authority: RCW 43.215.070, 43.215.201 and chapter 42.56 RCW. WSR 18-14-079, § 170-300-0215, filed 6/30/18, effective 8/1/19.]