

WORKFORCE SOLUTIONS CAPITAL AREA STAFF
PRESENTED ON 4.27.2021



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OBJECTIVES – PART 1, MEDICATION

1. Locate CCR Minimum Standards measures regarding medication
2. List “The 5 Rights” for medication administration
3. Define critical aspects of documentation required by Minimum Standards
4. Demonstrate safe practices for receiving, storing, preparing, and administering medicine

TEXAS CHILD CARE REGULATION MINIMUM STANDARDS

Subchapter S, Safety Practices

Division 2, Medication and Medical Assistance

Measures 746.3801-3811 (**centers**) or 747.3601-3611 (**homes**)

School-Age Programs

Subchapter L

Division 2

Measures 744.2651-2663

- “Medication” means prescription and non-prescription medicines but does not include topical ointments.
- Topical ointments still require authorization !

FORMS

<https://hhs.texas.gov/laws-regulations/handbooks/ccrh/forms>

> DFPS

> Child Care

> Forms


**USE INTERNET EXPLORER,
NOT CHROME**

The screenshot shows the Texas Health and Human Services website. The header includes the Texas state seal and the text "TEXAS Health and Human Services". A search bar is present with the placeholder text "What can we help you find?". Below the header is a navigation menu with links: ABOUT HHS, SERVICES, DOING BUSINESS WITH HHS, LAWS & REGULATIONS, and CONTACT. The main content area is titled "Forms" and includes a breadcrumb trail: Home / Laws & Regulations / Handbooks / Child Care Regulation Handbook / Forms. The "Child Care Regulation Handbook" section is highlighted, and a list of forms is displayed. A note indicates that a Spanish version is available for forms 2551 and 2760.

Form	Title	ES
1099	Operational Discipline and Guidance Policy	
1100	Daily Buildings and Grounds Checklist	
2550	Operational Policy on Infant Safe Sleep	ES
2551	Licensed and Registered Home: Caregivers, Assistants, Substitutes and Household Members Information Record	ES
2760	Controlling Person – Child Care Regulation	ES

CHILD ASSESSMENT FORM

Form 2935



TEXAS
Health and Human
Services

Form 2935
January 2019-E

Admission Information

Use this form to collect all required information about a child enrolling in day care.

Directions: The day care provider gives this form to the child's parent or guardian. The parent or guardian completes the form in its entirety and returns it to the day care provider before the child's first day of enrollment. The day care provider keeps the form on file at the child care facility.

Form 2935
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Child's Additional Information Section

List any special needs that your child may have, such as environmental allergies, food intolerances, existing illness, previous serious illness, injuries and hospitalizations during the past 12 months, any medication prescribed for long-term continuous use, and any other information which caregivers should be aware of:

Does your child have diagnosed food allergies? ☐ Yes ☐ No Plan Submitted on

Child day care operations are public accommodations under the Americans with Disabilities Act (ADA), Title III. If you believe that such an operation may be practicing discrimination in violation of Title III, you may call the ADA Information Line at (800) 514-0301 (voice) or (800) 514-0383 (TTY).

Signature — Parent or Legal Guardian

Date Signed

MEDICATION POLICIES

*Subchapter B, Administration & Communication
Division 4, Operational Policies
746.501(4)*



If you will not administer any medications to children in care, this policy must be communicated to parents/guardians, in writing, before a child is enrolled.



MEDICATION AUTHORIZATION

*Subchapter S, Safety Practices
Division 2, Medication and Medical Assistance
746.3803*

Authorization may be given:

- In writing, signed and dated
 - In an electronic format capable of being viewed and saved
 - By telephone, *for a single dose only*
- Not required in a medical emergency if using medication as prescribed, directed, or intended.

MEDICATION AUTHORIZATION

Subchapter S, Safety Practices
Division 2, Medication and Medical Assistance
746.3803

Authorization to administer
medication *expires*
on the first anniversary
of the date the authorization
is provided.



MEDICATION AUTHORIZATION

Subchapter S, Safety Practices
Division 2, Medication and Medical Assistance
746.3803


Each medication authorization must include:

- Name of child
- Name of medication
- Dose to be given
- Time(s) to be given
- Parent's signature and date of authorization

Not required, but good practice:

- Any special instructions
- Any reactions to watch for

Form 7255

 **TEXAS**
Health and Human
Services

Medication Authorization

Providers may use this form to document the administration of medication at their operation.
Directions: Complete this form when staff administer medications, as applicable in Texas Administrative Code 744.2655, 746.3805, and 747.3605.

Facility Name: _____ Month: _____

Date	Child	Name of Medication	Dosage	Time to be Given	Parent's Signature	Dosage Given	Time Given	Employee's Full Name
				<input type="radio"/> AM <input type="radio"/> PM			<input type="radio"/> AM <input type="radio"/> PM	
				<input type="radio"/> AM <input type="radio"/> PM			<input type="radio"/> AM <input type="radio"/> PM	

TOPICAL OINTMENTS

*Subchapter R, Health Practices
Division 2, Diaper Changing
746.3501*

- You **MUST** have authorization from the child's guardian before using topical ointments such as diaper creams.
- Make sure any lotions, diaper creams, sunscreen, bug spray, etc. are labeled with child's FULL name.



TOPICAL OINTMENTS

*Subchapter B, Administration & Communication
Division 4, Operational Policies
746.501(18)*

- You must have a program policy regarding sunscreen and other non-medicated lotions and ointments
- Parents providing non-medicated lotions serves as implicit permission for use



ADMINISTERING MEDICATION

Subchapter S, Safety Practices
Division 2, Medication and Medical Assistance
746.3805

Medication must be in its original container.

CHECK **PRESCRIPTION** MEDICATIONS FOR:

- Name of child
- Name of medication
- Name of prescribing health professional
- Date prescription was filled
- Date medication expires
- Directions for giving medication
 - Dose
 - Time
 - Number of days
 - Delivery route – given by mouth, eye/ear drops, topically, inhaler



ADMINISTERING MEDICATION

Subchapter S, Safety Practices
Division 2, Medication and Medical Assistance
746.3805

Medication must be in its original container.

CHECK **OVER-THE-COUNTER** (OTC) MEDICATIONS FOR:

- Full name of child (added by child's guardian or by you)
- Name of medication
- Date medication expires
- Directions for giving medication
 - Dose
 - Delivery route – given by mouth, eye/ear drops, topically, inhaler



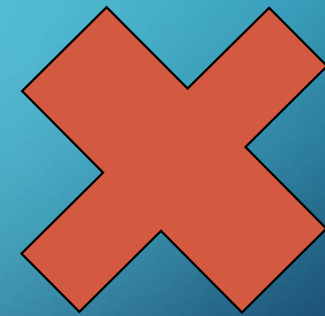
ADMINISTERING MEDICATION

*Subchapter S, Safety Practices
Division 2, Medication and Medical Assistance
746.3805*

Medication (prescription or OTC)
can NOT be administered:

- in excess of label directions or
- past the expiration date

EVEN IF the child's guardian gives authorization.



BEFORE ADMINISTERING MEDICATION

1. Check all information on the permission form for administering medication.
2. Take the medication from the secure storage.
3. Wash hands before giving medication to each child. Wear gloves for applying topical medications, eye drops, and ear drops.
4. Prepare dose. Do not touch medication with hands. Use labeled medicine dropper, cup or spoon for accurate measuring of liquid medications.
5. Re-check child's name, date, time, dose, how medication is to be given on both the medication container and permission slip.

ADMINISTERING MEDICATION

When to refuse administering medication:

- Never give a medication without a parent/guardian's permission.
- Never give the first dose of a medication.
- Never give a medication someone else has prepared.
- Never give a medication you do not know how to administer.

Ask for help when you need it!

ADMINISTERING MEDICATION



6. Re-check child's name, medication, time, dose, how medication is to be given.
7. Follow any special instructions.
8. Give prepared dose to child. (Wash hands after administering medication)
9. Return medication to secure storage.
10. Document date, time, dose, medication, route and signature on the medication log.

ADMINISTERING MEDICATION

Common medication devices:

[How to use a nebulizer with facemask - YouTube](#)

[How to use an Epi-Pen - YouTube](#)

AFTER ADMINISTERING MEDICATION



11. Observe child's response to the medication. Record and report any side effects or reactions. Seek medical care as needed.

- If an allergic reaction occurs, notify the parent immediately.
- If a life-threatening reaction occurs, call 911 immediately.

12. If an error is made, document what was given. Inform child's guardian and your director **immediately**. Seek medical care as needed.

AFTER ADMINISTERING MEDICATION



13. If child does not get all the medication, refuses to take it, or vomits/spits, **do not give another dose**. Inform child's guardian and director. Seek medical advice as needed. Document.
14. After giving last authorized dose of medication, return unused medication to the parent.



REMEMBER THE 5 RIGHTS!


1. Right Drug
2. Right Patient
3. Right Dose
4. Right Route (inhaler, injection, liquid, etc.)
5. Right Time

MEDICATION RECORDS

Subchapter S, Safety Practices
Division 2, Medication and Medical Assistance
746.3803

Must include:

- Full name of child
- Name of medication
- Dosage
- Date/time given
- Full name of staff member administering medication



TEXAS
Health and Human
Services

Form 7255

Form 7255
April 2018-E

Medication Authorization

Providers may use this form to document the administration of medication at their operation.

Directions: Complete this form when staff administer medications, as applicable in Texas Administrative Code 744. 2655, 746.3805, and 747.3605.


Facility Name: _____ Month: _____

Date	Child	Name of Medication	Dosage	Time to be Given	Parent's Signature	Dosage Given	Time Given	Employee's Full Name
				<input type="radio"/> AM <input type="radio"/> PM			<input type="radio"/> AM <input type="radio"/> PM	
				<input type="radio"/> AM <input type="radio"/> PM			<input type="radio"/> AM <input type="radio"/> PM	

MEDICATION RECORDS

Subchapter S, Safety Practices
Division 2, Medication and Medical Assistance
746.3803

Keep medication records for 3 months after administration.



TEXAS
Health and Human
Services

Form 7255
April 2018-E

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				<input type="radio"/> AM <input type="radio"/> PM			<input type="radio"/> AM <input type="radio"/> PM	

STORING MEDICATION

Subchapter S, Safety Practices
Division 2, Medication and Medical Assistance
746.3807

Medication must be stored out of reach of children!

- Store out of sight and out of reach and/or locked away.
- Store on a separate shelf away from food, hazardous chemicals, or cleaning supplies
- For medication that require refrigeration, store in a container on a separate shelf in the refrigerator not accessible by children.



STORING MEDICATION

*Emergency medication should be stored
UNLOCKED for quick administration!*

Emergency medications are needed in life-threatening situations such as:

- severe allergic reaction
- severe asthma reaction
- severe asthma attack
- blood sugar reaction in a child with diabetes.

STORING MEDICATION

Children must not have access to any medications.

Safety tips:


- ✓ Check diaper bags and cubbies for medications left behind.
- ✓ Adult medications must be stored properly out of reach of children (**including purses**)

OBJECTIVES – PART 2, ALLERGIES

1. List common allergies
2. Locate CCR Minimum Standards measures regarding allergies
3. Define critical aspects of documentation required by Minimum Standards
4. Demonstrate safe practices for avoiding cross contact
5. Name resources for finding more information about allergies

CHILD ASSESSMENT FORM

Form 2935



TEXAS
Health and Human
Services

Form 2935
January 2019-E

Admission Information

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Does your child have diagnosed food allergies? ☐ Yes ☐ No Plan Submitted on

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Signature — Parent or Legal Guardian

Date Signed

COMMON ALLERGIES AMONG CHILDREN



MILK



WHEAT



EGGS



SOY



SHELLFISH



PEANUTS



TREE NUTS



FISH

Top 8 Allergens

But over 170 foods have caused food allergy reactions

FOOD ALLERGY EMERGENCY PLANS

*Subchapter C, Record Keeping
Division 1, Records of Children
746.605
Subchapter S, Safety Practices
Division 2, Medication and Medical Assistance
746.3817, 746.3819*

- Required with enrollment for any child with a diagnosed food allergy
- Prepared by the child's health care professional
- Signed and dated by health professional and child's guardian
- Include:
 - A list of each food the child is allergic to
 - Possible symptoms if exposed to a food on the list
 - The steps to take if the child has an allergic reaction

FARE FOOD ALLERGY & ANAPHYLAXIS EMERGENCY CARE PLAN
Food Allergy Research & Education

Name: _____ D.O.B.: _____

Allergy to: _____

Weight: _____ lbs. Asthma: ☐ Yes (higher risk for a severe reaction) ☐ No

NOTE: Do not depend on antihistamines or inhalers (bronchodilators) to treat a severe reaction. USE EPINEPHRINE.

Extremely reactive to the following allergens: _____








THEREFORE:

☐ If checked, give epinephrine immediately if the allergen was **LIKELY** eaten, for **ANY** symptoms.

☐ If checked, give epinephrine immediately if the allergen was **DEFINITELY** eaten, even if no symptoms are apparent.

FOR ANY OF THE FOLLOWING:





SEVERE SYMPTOMS

 LUNG Shortness of breath, wheezing, repetitive cough	 HEART Pale or bluish skin, faintness, weak pulse, dizziness	 THROAT Tight or hoarse throat, trouble breathing or swallowing	 MOUTH Significant swelling of the tongue or lips
 SKIN Many hives over body, widespread redness	 GUT Repetitive vomiting, severe diarrhea	 OTHER Feeling something bad is about to happen, anxiety, confusion	OR A COMBINATION of symptoms from different body areas.

1. **INJECT EPINEPHRINE IMMEDIATELY.**

2. **Call 911.** Tell emergency dispatcher the person is having _____

MILD SYMPTOMS

 NOSE Itchy or runny nose, sneezing	 MOUTH Itchy mouth	 SKIN A few hives, mild itch	 GUT Mild nausea or discomfort
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FOR MILD SYMPTOMS FROM MORE THAN ONE SYSTEM AREA, GIVE EPINEPHRINE.

FOR MILD SYMPTOMS FROM A SINGLE SYSTEM AREA, FOLLOW THE DIRECTIONS BELOW:

1. Antihistamines may be given, if ordered by a healthcare provider.
2. Stay with the person; alert emergency contacts.
3. Watch closely for changes. If symptoms worsen, give epinephrine.

FOOD ALLERGY EMERGENCY PLAN

FOOD ALLERGY RESEARCH & EDUCATION

[HTTPS://WWW.FOODALLERGY.ORG/](https://www.foodallergy.org/)

FOOD ALLERGY EMERGENCY PLANS

*Subchapter B, Administration and Communication
Division 3, Required Postings
746.401, 746.403(b)
Subchapter N, Field Trips
746.3001(5)*

- Allergies requiring an emergency plan must be posted.
 - ✓ All rooms where food is prepared and where children spend time
 - ✓ Easily viewable by staff, but maintain child's privacy if parent's request it
- All employees who prepare and/or serve food must be aware of each child's food allergies
- Emergency plans must be taken with the class on a field trip.

POSTING ALLERGY INFORMATION

*Subchapter C, Record Keeping
Division 1, Records of Children
746.605*

*Subchapter B, Administration & Communication
Division 3, Required Postings
746.403(b)*



If I were a
substitute in your
classroom, how
would I know who
has allergies?

Bulletin Board Teacher Cabinet



Notes on Meal Records

Color-Coded Placemats

blue = no restrictions

green = vegetarian

red = allergies, CHECK RECORDS

Child Name 

Child Name 

Child Name 

*Subchapter Q, Nutrition and Food Service
746.3301(h)*

THIS IS A NO-BRAINER...

Don't serve a child a
food they are allergic to!



AVOID CROSS CONTACT

Source of Cross-Contact	Example:
Hands	<ul style="list-style-type: none"> Handling shrimp and then preparing a salad Touching almonds and then making pasta
Utensils, cutting boards, baking sheets, pots & pans	<ul style="list-style-type: none"> Using the same spatula to flip a hamburger after a cheeseburger Slicing cheese and then vegetables on the same cutting board
Preparation and cooking surfaces	<ul style="list-style-type: none"> Preparing different kinds of sandwiches on the same countertop Cooking fish and chicken on the same flat top grill
Steam, splatter, flour dust and crumbs	<ul style="list-style-type: none"> Steam from cooking fish or shellfish touches nearby foods Baking flour from pancake mix splatters onto bacon
Refrigerators, freezers and storage areas	<ul style="list-style-type: none"> Ranch dressing drips onto a vinaigrette stored on a lower shelf Milk leaks onto margarine stored on the same shelf
Deep fryers and cooking oils	<ul style="list-style-type: none"> Making french fries in a deep fryer after chicken tenders Reusing cooking oil to sauté green beans after sautéing fish
Condiments, nut butters and jelly/jams	<ul style="list-style-type: none"> Dipping a knife used to spread peanut butter into a jelly jar Touching the tip of a squeeze ketchup bottle to a breaded chicken breast
Shortcuts	<ul style="list-style-type: none"> Picking croutons off a salad Scraping eggs off a plate

AVOID CROSS CONTACT

- Don't take shortcuts when preparing or serving!
- Watch your kids! They may be too young to know how serious their allergy is.

RESOURCES

https://www.dfps.state.tx.us/Child_Care/

North Carolina Child Care Health &
Safety Resource Center

www.healthychildcarenc.org



FARE – Food Allergy Research
and Education

www.foodallergy.org