Professional Development Program, Rockefeller College, University at Albany and Office of Children and Family Services

"Medication Administration Training Course (MAT)" Module 4: Handling of Medication Unit D. Medication Routine 4/3/14 FINAL with REG Changes

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Cell 1		CASEY: All children get sick at one time or another, and depending on the type of illness, they may need to take medicine. They may even need to get a dose while in your care. So let's take a closer look at what you need to do when a parent arrives at your program and asks you to give medication.
Cell 2	NEW B-roll: Close-up of medication container labeled with child's first and last names	NETTIE: The first thing you'll want to check is that the medication is labeled with the child's first and last names.
Cell 3	NEW B-roll: Close-up of prescription medication with legible pharmacy label	For prescription medication, make sure the pharmacy label is attached to the container and you can read the instructions.
Cell 4	NEW B-roll: Close-up of child resistant label on medication container	All medication should be in a child resistant container.
Cell 5	NEW B-roll: Close-up of dosing spoon, pill crusher, oral syringe	CASEY: Be sure parents give you any special tools you'll need to give the medication, like a dosing spoon, pill crusher or an oral syringe.
Cell 6	NEW B-Roll: Trainee/Provider1 writing child's full name on medication tool with Sharpie	Make sure to write the child's first and last names on the tool.
Cell 7	NEW B-roll: Pharmacy samples	NETTIE: Sometimes parents may bring in medication samples for you to give to their child.
Cell 8	NEW B-roll: Trainee/Provider1 and Parent1 talking	Be sure to let parents know that the health care provider must label these samples with the same

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		information that is required on the pharmacy label.
Cell 9		Now, once you know that the medication is properly labeled, check the written instructions.
Cell 10	NEW B-roll: Trainee/Provider1 reviewing written instructions Graphic (over B-roll): When reviewing the written instructions make sure they are: • Complete • Understandable • Signed by the health care provider	As you review the form, make sure the instructions are complete, understandable and signed by the health care provider.
Cell 11		CASEY: So if you don't understand something, work with the parents to get all the information you need so you can feel comfortable that you give the medication safely.
Cell 12	NEW B-roll: Trainee/Provider1 checking back of consent form for parent's signature	NETTIE: Once you feel comfortable with the instructions, make sure the parent has signed the back of the consent form giving you permission to give the child the medication.
Cell 13	NEW B-roll: Parent1 writing medication time on consent form	And if the health care provider didn't write the specific hour to give the medication on the front, have the parent do it.
Cell 14	NEW B-roll: Trainee/Provider1 matching written consent form to medication label/package	Next, match the instructions written on the consent form with the instructions written on the medication label or package.
Cell 15	NEW B-roll: Trainee/Provider1 telling Parent1 can't give meds (shaking head; handing meds back)	CASEY: If the instructions do not match, tell the parent you cannot accept the medication.
Cell 16	Graphic: Scan of BOX 13 of medication consent form (MAT handout 4.2)	NETTIE: However, there is one exception. Sometimes the child's doctor may decide to change the medication

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		dose and the pharmacy won't fill a new prescription until the current medication has been used. In this case, the new health care provider's instructions won't match what's written on the pharmacy label.
Cell 17	Graphic: Scan of Administration of Meds Regulations 3 Waiver Requests (Mathandout 4.8)	In this case, before you can accept the medication make sure your program has the Administration of Medication Regulations — 3 Waiver Requests approved by OCFS. This waiver allows you to accept medication from parents when the label doesn't match the instructions for dose, time or frequency.
Cell 18	Graphic: Scan of consent form with health care provider's date when parent must give pharmacy label that matches update instructions highlighted	In addition to the waiver, the health care provider must write on the consent form a date when the parent must give you a pharmacy label that matches the updated instructions.
	FULL SCREEN GRAPHIC The health care provider must write on the consent form a date when the parent must give you a pharmacy label that matches the updated instructions	NEW VO and GRAPHIC "The health care provider must write on the consent form a date when the parent must give you a pharmacy label that matches the updated instructions."
Cell 19		The parent must supply the updated pharmacy label by the date written or the consent form is no longer valid.
		Note: record this VO not sure if needed.
Cell 20	NEED TO REPLACE THIS GRAPHIC Graphic: Close up of third element on Administration of Meds Regulations 3 Waiver Requests (MAT handout 4.8)	Your program also needs to let the staff approved to give medication know both verbally and in writing that the instructions on the pharmacy label do not match the instructions the health care provider has written.
Cell 21	NEW B-roll: Trainee/Provider1 putting colored sticker on medication bottle near pharmacy label (HAVE: Colleen F)	CASEY: One way you can do this is by putting a colored sticker on the child's medication near the pharmacy label. That way you will know that any child's pharmacy label marked with a sticker does not have

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		the updated information, and you should follow the instructions on the consent form.
Cell 22	New B-Roll: Trainee/Provider1 filling in child care center section of consent form	NETTIE: Now that you have all the information you need from the parent, fill out the day care center section on the consent form, and tell the parent you are agreeing to give the medication.
Cell 23	NEW B-roll: Trainee/Provider putting medication in storage	Then put the medication away immediately.
Cell 24	NEW B-roll: Trainee/Provider1 filling out new Log of Medication Administration; filing it with consent form	Finally, fill out a new Log of Medication Administration and file the log with the consent form.
Cell 25		CASEY: You can see why it's so important to spend time with the parent confirming you have all of the information you need so you can safely give the medication.
Cell 26		NETTIE: And remember, it's important to make sure that not just you, but everyone accepting medication in the program knows these requirements.
Cell 27		CASEY: Now that you know the requirements for giving medication, here's how you can fit this into your day.
Cell 28	NEW B-roll: Trainee/Provider1 reviewing consent forms (focus on time and symptoms)	Every day, before the children arrive, review each child's Written Medication Consent form.
Cell 29	Graphic (full screen): Reviewing each child's Written Medication Consent form each day allows you to: • See what time you'll give medication throughout the day • Remind you of what symptoms you should look for when a	NETTIE: This will allow you to: • See what time you'll give medication throughout the day; • Remind you of what symptoms you should look for when a child may need medication; and

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	 child may need medication Make sure the consent is not expired 	Make sure the consent is not expired.
Cell 30	NEW B-roll: Trainee/Provider1 marking med admin times on daily schedule	CASEY: Sometimes there's more than one child that needs medication during the day, so you might find it helpful to write down the times that each child needs their dose or doses right on the daily schedule.
Cell 31	Graphic (full screen): Reviewing each child's medication each day allows you to: • Make sure it isn't expired • Check the amount of medication that is left	NETTIE: Also check the medication itself every morning to: • Make sure it isn't expired; and to • Check the amount of medication that is left.
Cell 32		CASEY: Doing this puts you in the know so you can give parents enough time to get new consents or medication if necessary.
Cell 33		NETTIE: You'll also need to think about where in your program you plan to give medication.
Cell 34	Graphic (full screen): A safe area should be:	A safe area should be clean, well lit, in a place where you can provide adequate supervision and be near all of the supplies you'll need to give the medication.
Cell 35		CASEY: Remember, it's very important to plan, but you'll also need to be flexible once the children arrive at your program because you may need to change your plan.

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Cell 36	NEW B-roll: Parent1 handing Trainee/Provider1 new meds	NETTIE: For example, the parents may arrive and let you know there is a change in the dose of medication or the medication is discontinued. The parent may also have a new medication for you to give.
Cell 37		By taking the time to make sure you have all the information you need to give the medication safely, you'll be able to plan for the medication needs of the children in your program.