

This rule was initially drafted by DEL staff with input from stakeholders. The tracked changes show revisions made to language and weights through negotiations by early learning providers (centers, Head Start/ECEAP, and family homes), parents, and DEL Licensing staff. These rules are still in development/negotiation and your comments will be given to negotiators.

Key to edits and terms:

~~example~~ = deleted

example = inserted

example = rewritten by DEL at request of negotiators

consensus reached = negotiators agree to the draft rule language & weight

in queue for consensus = negotiated by subset of negotiators, scheduled to be reviewed by all

tabled = negotiators reviewed, did not reach agreement, and are contemplating next steps

170-300-0215- **Consensus Reached**

~~Managing and storing medication.~~ Medication

(1) Managing medication.

~~(1) An early learning provider must not give medication to any child without written and signed consent from that child's parent or guardian, and must administer medication pursuant to directions on the medication label. Weight #8~~

~~(2)~~ An early learning provider must have and follow~~implement~~ a medication management policy that includes, but is not limited to, policies on safe medication storage, reasonable accommodations for giving medication, mandatory medication documentation, and forms pursuant to WAC 170-300-0500 (Health policy). **Weight #7-3**

(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; and

(b) The department standardized training course in medication administration that includes a competency assessment pursuant to WAC 170-300-0106(10) or other DEL-approved training ~~by DEL.~~

(c) Parents and guardians, or an appointed designee, must provide training to early learning providers 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 parent or guardian, or the designee. Weight #6

(3) Medication Administration. An early learning provider ~~must~~^{CT3} 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 ~~(7)~~ using appropriate cleaned and sanitized medication measuring devices.

~~An early learning provider must not give or allow 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.~~ Weight #88

~~(13) An early learning provider must keep a current written medication log that includes:~~

- ~~(a) A child's first and last name;~~
 - ~~(b) The name of the medication that was given to the child;~~
 - ~~(c) The dose amount that was given to the child;~~
 - ~~(d) Notes about any side effects exhibited by the child;~~
 - ~~(e) The date and time of each medication given or reasons that a particular medication was not given; and~~
 - ~~(f) The name and signature of the person that gave the medication.~~
- Weight #6

~~(14) 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.~~ Weight #5

~~(11) Parents or guardians must provide to early learning providers appropriate medication measuring devices.~~ Weight #6

~~(3(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. ~~A medication authorization form that allows a provider to give prescription medication to a child must be signed by the child's parent or guardian.~~ Prescription medication must be labeled with:

- (i) A child's first and last name;
- (ii) The date the prescription was filled;
- (iii) The name and contact information of the prescribing health professional;
- (iv) The expiration date, ~~medical need~~, dosage amount, and length of time to give the medication;
- (v) Instructions for the administration, storage, ~~and disposal of the medication;~~ and
- ~~(vi) The possible side effects of the medication.~~

and accompanied with medication authorization form that has the medical need and the possible side effects of the medication.
Weight #7

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

~~_(i) A parent or guardian must label non-prescription medication with their child's first and last name, the expiration date, medical need, dosage amount, and length of time to give the medication;_~~

(i) Non-prescription (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

(ii) Non-prescription medication must only be given to the child named on the label provided by the parent or guardian;_and_

~~(iii) A medication authorization form allowing a provider to give non-prescription medication to a child must be signed by that child's parent or guardian._Weight #7~~

(iii) **Other non-prescription medication:**^[AL4] An early learning provider must ^[CT5] 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). Weight #6

(iv) **Non-medical items.**^[CT6] A parent or guardian may authorize an early learning provider to administer the following non-medical items annually:

(a) Diaper ointments used as needed and intended only for the diaper area of children;

(b) Sunscreen

(c) Lip balm or lotions;

(d) Hand sanitizers or hand wipes with alcohol, which may be used only for children over 24 months old; and

(e) Fluoride toothpaste for children two or above. Weight #2

(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. Weight #7

(vi) An early learning provider must not give ~~or allow another~~^[AL7]^[AL8] to give^[AL9] 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. Weight #8

(b) Medication Documentation (excluding non-medical items). An early learning provider must keep a current written medication log that includes:

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

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

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

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

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

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

Weight #6

~~(4) An early learning provider may allow children to take his or her own medication if the provider and parent or guardian complies with the following requirements:~~

~~(a) The parent or guardian must give the provider a written statement, signed and dated by the parent or guardian, that authorizes the child to take his or her own medication;~~

~~(b) The parent or guardian must give the provider a signed and dated written statement from the child's health care provider that has prescriptive authority stating that the child is physically and mentally capable of taking his or her own medication; and~~

~~(c) An early learning program staff member must observe and document that the child took the medication. Weight #7~~

(c5) Medication must be stored and maintained as directed on the packaging or prescription label, including applicable refrigeration requirements.

~~Medication must be maintained in a manner that prevents cross contamination.~~ An early learning provider must comply with the following additional medication storage requirements:

(a) Medication must be inaccessible to children;

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

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

~~(d) Medication must be kept away from sources of moisture, heat, or light; and~~

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

~~External medication includes medicated ointments, lotions, or liquids applied to the skin or hair. Weight #7~~

(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. Weight #5