

Dispensing and Self-Administration of Medication

Policy

It is the Park District's policy that the dispensing of medication and self-administration of medication should be discouraged unless necessary to allow a child or patron to participate in a Park District program, or in the event of an emergency. Parents or guardians should be asked if the person can be medicated before they enter the program. The Park District's medical dispensing program should only be used when it is absolutely necessary to administer medication to or allow self-medication by a child or patron during program hours. The guidelines set out below will better prepare Park District staff to safely dispense medication or monitor self-administration.

Procedure

A. Parental Procedures and Responsibilities

The parent/guardian must:

1. Complete and sign the following forms: (a) *Permission To Dispense/Self-Administer Medication*, (b) *Waiver and Release*, and (c) *Medication Dispensing Information*;
2. Where appropriate, provide a *Self-Administration* form from the medication prescriber;
3. Deliver all medication to the Park District or program office. The Park District shall retain possession of the medication unless a note from the prescriber authorizes otherwise. Where appropriate, parents shall count out the number of pills/tablets delivered to the Park District in the presence of Park District staff. Prescription medication shall be in the original prescription bottle with label intact. Non-prescription medication shall be in the original unopened bottle which includes the person's name, medication, dosage, and time of day medication is to be given. In cases of field trips, the parent/guardian must provide an adequate storage device for the medication, *i.e.*, an insulated bag/cooler for insulin; and
4. Communicate with Park District staff regarding specific instructions for medication including self-administration where appropriate.

B. Staff Medication Dispensing Procedures

Park District staff must:

1. Ensure that the *Permission To Dispense/Self-Administer Medication*, *Waiver and Release*, *Medication Dispensing Information*, and, where appropriate, a *Self-Administration Form*, are fully completed before any medication is dispensed or self-administered;

2. Ensure that only authorized staff accepts medication. Park District staff must verify with the parent the quantity of medication delivered, *i.e.*, number of pills/tablets delivered by the parent. A specific staff employee(s) shall be designated to accept, dispense and record the dispensation of medication;
3. Communicate with the parent or guardian regarding any specific instructions regarding the dispensing, storage, and self-administration (where appropriate) of the medication. It is also the responsibility of the authorized staff who receives medication to properly store medication in a manner as secure as reasonably possible. For example, medication should be stored in a locked storage device, *i.e.*, cabinet, drawer, etc. Controlled substances must be stored in a locked storage device that cannot easily be removed from the facility. If the medication is a controlled substance and is stored in a locked cabinet, the cabinet must be secured to a wall. If medication must be refrigerated, it must be in a locked refrigerator (or a locked container within a refrigerator) separate from food products. **It is extremely important that stored medication is out of the reach of other patrons and particularly children;**
4. Obtain copies of all waivers, internal procedures, medical information forms, and medication logs when obtaining the prescription medication to be transported to the program site. All medication stored at a program site must be secured and only available to authorized program staff. In some cases, a prescriber may authorize the patron/child to maintain possession of his/her medication—this will be reflected on the *Self Administration* form;
5. Program staff responsible for dispensing medication must strictly follow all written instructions on the medical information form, individual dose containers, and any information contained on original prescription container labels. In the event that conflicting dispensing information exists, medication should not be administered until the parent, guardian, or physician is reached by phone to obtain specific instructions. **Under no circumstances are Park District staff to determine the amount or timing of medication to be dispensed based on any subjective factor(s), *i.e.*, whether or when a child has eaten and/or how much the child ate, or any factor(s) not contained in written instructions;**
6. Only authorized Park District staff will be allowed to dispense medication. Park District staff shall witness the taking or self-administration of medicine and shall document on the medication log that they witnessed the taking or self-administration of medicine;
7. Park District staff responsible for dispensing medication will fully complete the medication log form. Medication dispensing logs should be completed until medication dispensing has ceased and completed medication logs should be turned into the Park District's office and kept in a permanent file for at least three years at the conclusion of the program.

Medication Dispensing Information

This form must be completed for each program session or when medication changes.

BACKGROUND INFORMATION:

Participant's Name: _____ Age: _____

Address: _____

Parent's/Guardian's Name(s) _____

Daytime Phone: _____ Other Phone: _____

Program Name: _____

Doctor's Name: _____ Phone: _____

MEDICATION INFORMATION:

1. Name: _____ Dose: _____ Time: _____

Quantity supplied: _____

Dispensing & Storage Instructions: _____

Possible Side Effects: _____

2. Name: _____ Dose: _____ Time: _____

Quantity supplied: _____

Dispensing & Storage Instructions: _____

Possible Side Effects: _____

3. Name: _____ Dose: _____ Time: _____

Quantity Supplied: _____

Dispensing & Storage Instructions: _____

Possible Side Effects: _____

OTHER INFORMATION: _____

MAY CHILD/PATRON SELF-ADMINISTER MEDICATION?

CIRCLE YES NO
(If yes, *Self-Administration* form must be completed)

Waiver and Release of All Claims

I understand that it is my responsibility to give the medication directly to program staff with full instructions in unopened individual dosage containers, unopened non-prescription medication containers, or in original prescription bottles. I further understand that, in the case of a program field trip, it is my responsibility to provide a satisfactory storage container. *i.e.*, a portable cooler for insulin.

In all cases, medication dispensing can only be changed or modified by completing another Permission and Waiver to Dispense Medication Form and Medication Information Form.

I hereby acknowledge that the above information provided for the dispensing of medication for my minor child, guardian, ward, or other family member is accurate. I also understand that it is my responsibility to inform the Park District if any changes in the dispensing of medication change.

I understand that I have the primary responsibility for administering medication to my child. I further understand that if it is necessary for my child to take medication, or to allow my child to self-administer medication, during Park District program hours, I recognize and acknowledge that there are certain risks of physical injury in connection with the administering of medication to or self-administration by my child. Such risks include, but are not limited to, failing to properly administer the medication, failing to observe side effects, failing to assess and/or recognize an adverse reaction, failing to assess and/or recognize a medical emergency, and failing to recognize the need to summon emergency medical services.

In consideration of the Park District administering medication to my child, I do hereby fully release or discharge the Park District, and its officer, agents, volunteers and employees from any and all claims from injuries, damages and losses I or my child may have (or accrue to me and my child), and arising out of, connected with, incidental to, or in any way associated with the administering/dispensing of medication or self-administered medication.

Signature of Parent or Guardian

Date

Permission To Dispense/Self-Administer Medication

The Park District will not dispense medication to or allow self-medication by a child or other participant until the Permission and Waiver to Dispense/Self-Administer Medication and Medication Information Form have been fully completed by a parent or guardian.

NAME OF PROGRAM: _____ **DATE:** _____

I _____ the parent/guardian of _____
(Print Name) (Print Name)

give permission to the staff of the Park District to administer to my child or to allow my child to self-administer

(Name of Medication)

I understand that it is my responsibility to give the medication directly to program staff with full instructions in unopened individual dosage containers, unopened non-prescription medication containers, or in original prescription bottles. I further understand that, in the case of a program field trip, it is my responsibility to provide a satisfactory storage container. *i.e.*, a portable cooler for insulin.

PARTICIPANT'S NAME: _____

NAME OF MEDICINE AND COMPLETE DOSAGE INSTRUCTIONS: _____

In all cases the recommended dosage of any medication will not be exceeded. If after administering medication there is an adverse reaction, I give my permission to secure from any licensed hospital physician and/or medical personnel any treatment deemed necessary for immediate care. I agree to be responsible for payment of any and all medical services rendered.

Signature of Parent or Guardian

Date

