Administrative Procedure 606

Child Care Centre Drug and Medication Policy and Procedures

Name of Child Care Centre: _____

Date Policy and Procedures Established: September 1st, 2026

Date Policy and Procedures Updated: September 15th, 2026

1. Purpose

The purpose of this policy and the procedures outlined within is to provide clear direction for staff, students and volunteers to follow for administering drugs or medication to children at the Before and After School Program and for appropriate record-keeping.

Where the term drugs and/or medications is used in this policy, the term refers to any product with a drug identification number (DIN). For the purpose of this policy, drugs and medications fall into the following two categories:

- Prescription, intended for acute, symptomatic treatment; and
- Over-the-counter, intended for acute, symptomatic treatment

Note: The following items are not considered drugs or medication for the purposes of this policy, except where the item is a drug, as defined in the *Drug and Pharmacies Regulation Act*, prescribed for a child by a health professional:

- Sunscreen
- Moisturizing skin lotion
- Lip balm
- Insect repellent
- Hand sanitizer
- Diaper cream

These over-the-counter products may only be administered in accordance with the following rules:

- Must have written authorization by a parent.
  - This can be in the form of a "blanket authorization" on the enrolment form. It does not require an Authorization for Medication Form, described in this policy.
  - If a parent does not provide written authorization for the use of these items at the child care centre, licensees must communicate this to their staff (e.g. information will be included on the centre's allergy list where applicable or a separate list of names of the children where written authorization was not given by the parent will be provided).
- Must be stored in accordance with the instructions for storage on the label and the container or package must be clearly labelled with the child's name and the name of the item.
- A container or package does not need to be labelled with a child's name where items are shared (if appropriate), such as hand sanitizer located at entrances and exits.
- Must be administered to a child only from the original container or package and in accordance with any instructions on the label and any instructions provided by the parent of the child.

This policy and Procedures document supports children's health, safety and well-being by setting out measures to:

- ensure children receive only those drugs or medications deemed necessary and appropriate by their parents;
- reduce the potential for errors;
- ensure medications do not spoil due to improper storage;
- prevent accidental ingestion;
- administer emergency allergy and asthma drugs or medications quickly when needed; and
- safely administer drugs and medications according to established routines.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for the administration of drugs and medication in a child care centre.

Note: definitions for terms used throughout this policy are provided in a Glossary at the end of the document.

2. Policy

Parental Authorization to Administer Medication:

- Whenever possible, parents will be encouraged to administer drugs or medications to their children at home if this can be done without affecting the child's treatment schedule.
- Prescription and over-the-counter medications for acute, symptomatic treatment will only be administered to a child where a parent of the child has given written authorization to do so by completing the Before and After School Program's Authorization for Medication Administration (the form in Appendix A may be used). The Authorization for Medication Administration form must be accompanied by a doctor's note for over-the-counter medications.
- The authorization must include a schedule that sets out the times the drug or medication is to be given and the amounts to be administered.
- Where a drug or medication is to be administered to a child on an "as needed" basis (i.e. there is no specific schedule or time of the day for administration), the drug or medication must be accompanied with a doctor's note outlining signs and symptoms for administering the drug or medication and the appropriate dosage. In addition, the Authorization for Medication Administration Form must clearly indicate the situations

under which the medication is to be given as outlined in the doctor's note, including observable symptoms. Examples may include:
    - 'when the child has a fever of 39.5 degrees Celsius';
    - 'when the child has a persistent cough and/or difficulty breathing'; and
    - when red hives appear on the skin', etc.
- Prescription/over-the-counter skin products (with a DIN) that need to be administered for acute or symptomatic treatment will only be administered to a child where a parent of the child has given written authorization to do so by completing the Before and After School Program's Authorization for Medication Administration.
- Authorization for Medical Administration Forms will be reviewed with parents annually to ensure the dosage continues to be accurate (e.g. based on the child's age or weight).

Drug and Medication Requirements

All drugs and medications to be administered to children must meet the following requirements:

- All drugs and medications must be stored in their original containers as supplied by a pharmacist, or their original packages. Medications that have been removed from their original package or transferred into a different container will not be accepted or administered to children.
- All drug or medication containers must be clearly labelled with:
    - The child's full name;
    - The name of the drug or medication;
    - The dosage of the drug or medication;
    - Instructions for storage;
    - Instructions for administration;
    - The date of purchase of the medication for prescription medications; and
    - The expiry date of the medication, if applicable.
    - The information provided on the written parental authorization must match with all the requirements listed above.
- Where information is missing on a drug or medication label and/or the written parental authorization does not match the label on the labelled container, the Before and After School Program will not accept or administer the medication until the label and/or written parental authorization accurately contains all the required information.
- Over-the-counter epinephrine purchased for a specific child can be administered to a child with an individualized plan and emergency procedures for an anaphylactic allergy as long as it is accompanied by a doctor's note and is clearly labeled with the child's name, the name of the drug or medication, the dosage, the date of expiration and the instructions for storage and administration.

- Drugs or medications purchased by staff, students or volunteers for their own use will be kept inaccessible (e.g. stored in locker versus left in a purse in the classroom) to children and will not be administered to children at any time.

Drug and Medication Handling and Storage:

- All drugs or medications will be kept inaccessible to children at all times in a locked container or area (e.g. in a refrigerator, cabinet, cupboard or drawer). There are exceptions for emergency medications as outlined below:
    - Emergency medications will never be locked up and will be made easily accessible to all staff while being kept out of the reach of children, including during outdoor play periods and off-premises activities.
    - Where a child has written permission to carry their emergency allergy or asthma medication, precautions will be taken to ensure that these medications are not accessible to other children (e.g., in cubbies or backpacks that are unattended).
- In case of an emergency, all staff, students and volunteers will be always made aware of the location of children's emergency medications.
- Emergency medications will be brought on all field trips, evacuations and off-site activities.
- Any topical products or drugs/medication in the first aid kit will not be used on children to clean or treat wounds. Children's cuts and wounds will be disinfected in accordance with local public health recommendations.
- All drugs and medications for children will be stored in accordance with the instructions for storage on the label. Medication requiring refrigeration will be stored in the refrigerator in a locked container.
- Where drugs or medications are past their expiry date, they will be returned to the parent of the child, where possible, and this will be documented on the Authorization for Medication Administration Form.
- Any drugs or medications remaining after the treatment period will be returned to a parent of the child, where possible, and this will be documented on the Authorization for Medication Administration Form.
- Where attempts have been made to return a drug or medication to a parent and the parent has not taken the medication home, the person in charge of drugs and medications will ensure that the efforts made to return the drug or medication have been documented in the appropriate staff communication book (e.g. daily written record), and the drug or medication m be returned to a pharmacist for proper disposal.

Drug and Medication Administration:

- Drugs or medications will be administered according to the instructions on the label and only with written parental authorization.
- Designated person(s) in charge of medications will deal with all drugs and medications to reduce the potential for errors, whether on or off the premises. Where the person(s) is absent, they will delegate this responsibility to another individual. The name of the individual who has been delegated and the duration of the delegation will be documented in the appropriate staff communication book (e.g. daily written record).
- A drug or medication will only be administered from its original container as supplied by a pharmacist or its original package, and where the container is clearly labelled as outlined under the Drug and Medication Requirements section of this policy.
- A drug or medication will only be administered using the appropriate dispenser (e.g. syringe, measuring spoon/cup, etc.).
- To support the prompt administration of emergency medication:
    - Emergency medications may be administered to a child by any person trained on the child's individualized plan at the Before and After School Program; and
    - Children will be allowed to carry their own asthma or emergency medication in accordance with this policy, the drug and medication administration procedures, and the child's individualized plan, where applicable.
- Drugs or medications that are expired (including epinephrine) will not be administered at any time

Record-Keeping:

- Records of medication administration will be completed using the Records of Medication Administration (the form in Appendix B may be used) every time drugs or medications are administered. Completed records will be kept in the child's file.
- Where a child's medication administration form includes a schedule setting out specific times to administer the medication and the child is absent on a day medication would have been administered, the child's absence will be documented on the medication administration record to account for all days during the treatment period (excluding weekends, holidays and planned closures).
- If a dose is missed or given late, reasons will be documented on the record of medication administration and a parent will be notified as soon as possible as it may impact the treatment schedule or the child's health.
- Where a drug or medication is administered 'as needed' to treat specific symptoms outlined in a child's medication administration form or individualized plan and emergency procedures for an anaphylactic allergy (e.g. asthma, fever, allergic reaction), the

administration and the reason for administering will be documented in the appropriate staff communication book (e.g. daily written record) and in the child's symptoms of illness record. A parent of the child will be notified.

3. Drug and Medication Administration Procedures

SCENARIO: A parent requests that a drug or medication (prescription or over-the-counter) be administered to their child and provides the drug or medication.

Roles and Responsibilities

1. Staff must:
    i. provide the parent with the appropriate form to complete to obtain written authorization to administer the medication from Appendix A as applicable;
    ii. verify that drug or medication:
        - is accompanied by a doctor's note (for over-the-counter medications);
        - is in its original container as prescribed by the pharmacist or in the case of over-the counter medications is in its original package; and
        - is not expired.
    iii. obtain the appropriate dispenser, where applicable;
    iv. review the medication administration form and (and doctor's note, where applicable), and the label to verify that all sections are complete and accurate, and that the information in the authorization matches the medication label.
        - Where errors are found on the form or the label is incomplete, the form/medication must be returned to the parent to make and initial corrections;
    v. sign the form once it is complete and accurate;
    vi. take the drug or medication and dispenser and store it in the designated locked storage space in accordance with the instructions for storage on the label; and
    vii. log the receipt of the authorization form and the drug or medication for the child in the appropriate staff communication book (e.g. daily written record).

SCENARIO: A child is authorized to carry their own emergency allergy medication.

Roles and Responsibilities

1. Staff must:
    i. ensure that written parental authorization is obtained to allow the child to carry their own emergency medication;
    ii. ensure that the medication remains on the child (e.g., fanny pack, holster) and is not kept or left unattended anywhere at the childcare centre (e.g. in the child's cubby or backpack);
    iii. ensure that appropriate supervision is maintained of the child while they are carrying their medication and children in their proximity so that other children do not have access to the medication; and

2. Where there are safety concerns relating to the child carrying his/her own medication (e.g. exposure to other children), notify the centre supervisor/designate and the child's parent of these concerns and discuss and implement mitigating strategies. Document the concerns and resulting actions in the appropriate staff communication book (e.g. daily written record).

SCENARIO: A prescription or over-the-counter drug or medication must be administered to a child.

ROLES AND RESPONSIBILITIES

1. **Where a non-emergency medication must be administered,** the person in charge must:
    i. prepare the medication dosage in a well-lit area in the appropriate measuring device, where applicable (e.g. do not use a household spoon for liquid medications);
    ii. where possible, remove the child from the activity area to a quiet area with the least possible interruption;
    iii. administer the medication to the child in accordance with the instructions on the label and the written parental authorization;
    iv. document the administration of the drug or medication and any comments/observations on the medication administration record after it has been administered (see Appendix B);

v. store the medication in the designated storage space in accordance with the instructions on the label and the parental authorization received on the medication administration form; and
vi. where applicable, document any symptoms of ill health in the child's records.
vii. Where a medication is administered on an "as needed" basis, notify a parent of the child.
viii. Where a child is absent, document the absence on the Record of Drug/Medication Administration (Appendix B).

2. **Where an emergency allergy medication must be administered due to a severe allergic reaction**, the staff who becomes aware of the emergency situation must immediately:

i. administer the emergency medication to the child in accordance with the emergency procedures on the child's individualized plan;
ii. administer first aid to the child, where appropriate;
iii. contact, or have another person contact emergency services, where appropriate; and
iv. contact, or have the supervisor/designate contact a parent of the child.

After the emergency situation has ended:

i. document the administration of the drug or medication on the medication administration record (see Appendix B);
ii. document the incident in the appropriate staff communication book (e.g. daily written record).; and
iii. document any symptoms of ill health in the child's records, where applicable.

3. **Where a child is authorized to self-administer their own drug or medication**, the person in charge must:

i. supervise and observe the child self-administer the drug or medication to ensure that the proper dosage and procedure for administration is being followed;
ii. where the child asks for help, assist the child in accordance with the parent's written authorization;
iii.document the administration of the drug or medication and any comments/observations on the medication administration record after it has been administered (see Appendix B);
iv.store the medication in the designated storage space in accordance with the instructions on the label and the parental authorization received on the medication administration form, unless the child is authorized to carry his/her

own emergency allergy medication (in such cases, follow the steps outlined in Scenario C [a child is authorized to carry their own emergency allergy medication]);
v. where applicable, document any symptoms of ill health in the child's records; and
vi.where there are safety concerns relating to the child's self-administration of drugs or medications, notify the program supervisor/designate and the child's parent of these concerns, and discuss and implement mitigating strategies. Document the concerns and resulting actions in the appropriate staff communication book (e.g. daily written record).

Scenario: A child has a reaction to an administered drug or medication

Roles and Responsibilities

1. Where adverse symptoms appear upon medication administration, the person in charge must immediately:

i. administer first aid to the child, where appropriate;
ii. contact emergency services, where appropriate and send the drug/medication and administration information with the child if they are leaving the premises to seek medical attention;
iii. notify a parent of the child;
iv. notify the supervisor/designate;
v. document the incident in the appropriate staff communication book (e.g. daily written record); and
vi. document any symptoms of ill health in the child's records, where applicable.

Where the reaction results in a life-threatening situation for the child, call emergency services and follow the serious occurrence policy and procedures.

SCENARIO: A drug or medication is administered incorrectly (e.g. at the wrong time, wrong dosage given).

ROLES AND RESPONSIBILITIES

1. The person in charge must immediately:
    i. where applicable, follow the steps outlined in Scenario D (a child has a reaction to administered medication); and
    ii. contact the parent of the child to report the error;
    iii. report the error to the supervisor/designate;
    iv. document the actual administration of the drug or medication on the medication administration record (see Appendix B); and
    v. document the incident in the appropriate staff communication book (e.g. daily written record).

Where any reaction to a drug or medication results in a life-threatening situation for the child, call emergency services and follow the serious occurrence policy and procedures.

SCENARIO: A drug or medication is administered to the wrong child.

Roles and Responsibilities

1. The person in charge must immediately:
    vi. where applicable, follow the steps outlined in Scenario D (a child has a reaction to administered medication); and
    vii. contact the parents of the children affected to report the error;
    viii. report the error to the supervisor/designate;
    ix. document the incident in the appropriate staff communication book (e.g. daily written record); and
    x. administer the medication to the correct child per Scenario B (a drug or medication must be administered to a child).

Where any reaction to a drug or medication results in a life-threatening situation for the child, call emergency services and follow the serious occurrence policy and procedures.

SCENARIO: Surplus or expired medication is on site.

Roles and Responsibilities

1. Where possible, the surplus or expired medication must be returned to a parent of the child.

2. Where attempts have been made to return a drug or medication to a parent and the parent has not taken the medication home, the person in charge of drugs and medications will attempt to return unused drugs or medications to a local pharmacist for proper disposal.

Do not flush any drugs or medications down the toilet or sink or throw them in the garbage.

4. Glossary

Drug Identification Number (DIN): An eight-digit number assigned by Health Canada to a drug product prior to being marketed in Canada. It uniquely identifies all drug products sold in a dosage form in Canada and is located on the label of prescription and over-the-counter drug products that have been evaluated and authorized for sale in Canada.

Drug or Medication: Any product with a drug identification number (DIN) Drugs and medications fall into the following two categories, unless otherwise specified in this policy:

- Prescription, intended for acute, symptomatic treatment; and
- Over-the-counter, intended for acute, symptomatic treatment.

Emergency Medication: Prescription drugs or medications that are used in case of an urgent medical reaction that requires immediate treatment. Emergency medications include medications used to treat asthma (e.g. puffers) and anaphylactic allergies (e.g. epinephrine).

Licensee: The individual or corporation named on the licence issued by the Ministry of Education responsible for the operation and management of the child care centre.

Parent: A person having lawful custody of a child or a person who has demonstrated a settled intention to treat a child as a child of his or her family (all references to parent include legal guardians, but will be referred to as “parent” in the policy).

Person who is in Charge of All Drugs and Medications (a.k.a. the ‘person in charge’): The individual at the child care centre who is responsible for administering medication to children. The person in charge may be one designated person per program room or age group. In the absence of the person in charge, they may temporarily delegate this responsibility to another person.

Extended Day Program Provider: An individual who is in charge of the children receiving care at the Extended Day Program premises. The Extended Day Program agency screens, approves, and monitors providers with whom it has established contractual agreements to provide child care.

5. Regulatory Requirements: Ontario Regulation 137/15

ADMINISTRATION OF DRUGS OR MEDICATIONS
40.
(1) Where a licensee agrees to the administration of drugs or medications, the licensee shall ensure that,

(a) a written procedure is established for,
(i) the administration of any drug or medication to a child receiving child care at a child care centre operated by the licensee or at a premises where it oversees the provision of home child care, and
(ii) the keeping of records with respect to the administration of drugs and medications
(b) all drugs and medications on the premises of a child care centre operated by the licensee or at a premises where it oversees the provision of home child care are,
(i) stored in accordance with the instructions for storage on the label,
(ii) administered in accordance with the instructions on the label and the authorization received under clause (d),
(iii) inaccessible at all times to children, and
(iv) in the case of a child care centre, kept in a locked container;
(c) one person in each child care centre operated by the licensee and in each premises where it oversees the provision of home child care is in charge of all drugs and medications and that all drugs and medications are dealt with by that person or a person designated by that person in accordance with the procedures established under clause (a);
(d) a drug or medication is administered to a child only where a parent of the child gives written authorization for the administration of the drug or medication and that included with the authorization is a schedule that sets out the times the drug or medication is to be given and amounts to be administered; and
(e) a drug or medication is administered to a child only from the original container as supplied by a pharmacist or the original package and that the container or package is clearly labelled with the child's name, the name of the drug or medication, the dosage of the drug or medication, the date of purchase and expiration, if applicable, and instructions for storage and administration.

(2) Despite subclauses (1) (b) (iii) and (iv) and clause (1) (c), the licensee may permit a child to carry his or her own asthma medication or emergency allergy medication in accordance with the procedures established under clause (1) (a).

(3) The following items do not constitute drugs or medication for the purposes of this section, except where the item is a drug, as defined in the Drug and Pharmacies Regulation Act, prescribed for a child by a health professional:
1. Sunscreen.
2. Moisturizing skin lotion.
3. Lip balm.
4. Insect repellent.
5. Hand sanitizer.
6. Diaper cream.

(4) In respect of an item described in subsection (3) that does not constitute a drug or medication for the purposes of this section, a licensee shall ensure that,
(a) the item is administered to a child only if a parent of the child has given written authorization for the administration of the item;
(b) the item is stored in accordance with the instructions for storage on the label and the container or package is clearly labelled with the child's name and the name of the item; and
(c) the item is administered to a child only from the original container or package and in accordance with any instructions on the label and any instructions provided by the parent of the child