



Ensuring Safe Child Care for Children Needing Medication:

Building a High Quality System of Medication Administration Training & Consultation



Child care provider competency in managing all aspects of medication administration is essential to ensuring a safe and healthy child care environment. Given that 10 percent of the more than 98,000 children enrolled in licensed child care centers, Head Start programs and family child care homes in Connecticut have diabetes, asthma, epilepsy, or other serious health concerns, and 85 percent of these children require medication administration while in their child care settings, this issue is of vital concern. Most providers care for at least one child needing medication. For the families of these children, finding a safe and healthy child care environment can be difficult.

Unfortunately, not all providers comply with State medication administration regulations designed to keep children safe. A 2009 study of health and safety concerns in Connecticut's licensed early care and education sites found alarming rates of medication administration regulation non-compliance. The study also revealed a correlation between medication administration compliance by child care providers and access to a nurse trainer who provided a high quality training and visited the center weekly.

Key results of the study, published in CHDI's 2009 IMPACT, [*Ensuring Health and Safety in Connecticut's Early Care and Education Programs*](#), included:

- One out of five centers lacked a provider trained to administer medication;
- Forty percent of centers administered medication without a written approved order from a prescriber;
- One out of ten centers had medications accessible to children.

These findings sparked a [multi-year effort](#) to develop a high quality system of medication administration training and consultation for child care providers.

The Development of a Training System

In response to the findings of the study, the Children's Fund of Connecticut (CHDI's parent organization) and Connecticut's Departments of Education and Social Services funded the [Yale University School of Nursing](#), under the direction of Angela Crowley, PhD, APRN, to make early care settings safer and more accessible for children needing medication.

These efforts have included the development of:

- **A best practice training curriculum**
The [CT Medication Administration in Early Care and Education](#) training curriculum is available in English and Spanish. It was developed using State and Caring for Our Children (CFOC) national best practice standards and was reviewed by Connecticut's Department of Public Health Licensing Division.
- **A statewide nurse consultant registry**
The Office of Early Childhood's [CT Charts-A-Course](#) system provides access to training curriculum materials. This year, more than 55 nurses have completed the program.
- **A blueprint for a training consortium**
A plan for Connecticut's nursing schools to create regional resource centers that would offer child care provider training and support for nurse trainers was developed. Seven schools expressed interest in the regional training hubs. Without a source of core funding, this model has not been able to be fully implemented.

Building Statewide Capacity

These efforts have established solid groundwork for a statewide system of medication administration training that builds provider competency and confidence in enrolling children with special health care needs. Legislation and regulatory change and a sustained source of funding for the core infrastructure of the system are crucial next steps.

The following are CHDI's recommendations for long-term systemic success:

1. Require at least one certified medication administration trainer be present in every Connecticut-licensed child care program during operating hours, as required in some other states.
2. Endorse the use of a common, standardized curriculum as best practice, which meets CFOC criteria, to be used in trainings for health care and child care providers. The *CT Medication Administration in Early Care and Education* curriculum meets the standards set forth by CFOC Basics,

which has been endorsed by the Administration for Children and Families and has been adapted specifically for Connecticut and clearly can serve that purpose.

3. Provide funding through professional development scholarships to support child care providers in obtaining the training. An attempt to charge child care providers a fee for the training was not successful, which is not surprising given their low salaries. There was an overwhelming uptake when the training costs were covered by other sources.
4. Include competency in medication administration as part of the State's quality improvement system to assure the ability of all children, including those with special health needs, to access high quality early care and education.
5. Provide State funding for the core infrastructure to support medication administration training hubs where staff with appropriate health care expertise can respond to inquiries from providers, coordinate and provide training, and keep the curriculum up to date. The School of Nursing model is an attractive option and could be incorporated into the Office of Early Childhood's plans for broader regional training hubs.

These recommendations will set a much-needed standard for medication administration training and support Connecticut's investment in improving the quality of early care and education programs. Providing child care providers across Connecticut with easy access to high quality training and parents easy access to safe settings for their children will also ensure that children with special health care needs - and their classmates - are able to thrive in safe environments.

For additional information, visit www.CHDI.org, download *Issue Brief 15: Building a System of Safe Medication Administration in Child Care Settings* and the *IMPACT, Ensuring Health and Safety in Connecticut's Early Care and Education Programs*, or contact Judith Meyers at meyers@uchc.edu or 860-679-1519.