

# Procedures for Handling Medications

It is of the utmost importance that the Program Managers of Extension-sponsored activities take precautions to ensure the safety of participants. The following forms apply to events that meet the definition of Programs for Minors. Such events are held for more than two consecutive days with the same group of minors with or without an overnight stay, and where Extension employees or volunteers have full supervisory responsibilities of minors.



## Responsibility of safety of participants



#### **Events that are:**

- More than 2 consecutive days with the same group of minors
- With or without an overnight stay
- Where Extension has full supervisory responsibilities of minors

#### **Ensure**

Ensure the parent/guardian name, signature, and date of signature are included on all forms. MUST also have an emergency contact name and phone number.

#### **Maintain**

These documents may contain information protected by the Health Insurance Portability and Accountability Act (HIPAA), and access to that information should be strictly controlled.

#### Retain

Forms should be retained at the County Extension Office for 3 years.

Note. If participating in an event or activity at the Texas 4-H Conference Center, follow their established protocol regarding the appropriate forms and distribution of medication to program participants. The 4-H Center follows a different procedure due to their designation and accreditation with American Camp Association.

### How to collect, store, and administer medications



Preferred to have nurse/designated first aid person



Collect, store, administer, document



Inhalers, epinephrine auto-injector, insulin, etc. be with youth at all times



Youth with SAP\* form may keep meds in room

The nurse/designated first aid person (preferred) will collect, store, and administer all medications for program participants. When the program does not have a nurse/designated first aid person, the medication(s) may be turned over to the designated program director, or their designee.

Stored medication should be out of reach of all participants or locked in storage that does not contaminate food. If medication requires refrigeration, it must be stored separate from food. Anytime program staff administers medication (prescription or OTC\*), it must be documented on the ADM\*.

Inhalers, epinephrine auto-injectors, insulin, or medications for lifethreatening conditions should be with the youth at all times.

\*SAP, OTC, and ADM are defined on following page.

#### Waiver, Indemnification, and Medical Treatment Authorization Form

**REQUIRED** 

Required form. Participation of a minor or adult in <u>any</u> Extension or 4-H sponsored activity requires completion of the Waiver, Indemnification, and Medical Treatment Authorization Form. While this form may be completed as part of 4HOnline enrollment, it is not required for membership. Therefore, Program Managers must either verify that it was completed during enrollment or must require the form to participate in the activity.

#### **Health and Safety Statement (HSS)**

**REQUIRED** 

Recommended form. 4-H members and/or their parents/guardians participating in an Extension or 4-H sponsored event or activity are expected to notify and disclose in detail any health issues, special needs, or allergies that may prevent them from fully participating or pose a risk to themselves and/or other participants. The HSS is used to gather this information. The Program Manager, along with the nurse or designated first aid person, should review the HSS and take any necessary action.

#### **Authorization to Dispense Medication (ADM)**

**REQUIRED** \*

\*Required form if medication is brought by the participant. The Authorization to Dispense Medication (ADM) must be collected for each youth who brings any medication to an event or activity, either prescription or over-the-counter. All medication must be in original containers. Any medication administered during the event or activity must be documented on the ADM (in the shaded staff use only area).

Parent/guardian authorization is NOT required for administering a medication to a participant in a medical emergency to prevent the death or serious bodily injury of the participant, provided that the medication is administered as prescribed, directed, or intended.

#### Parent Guardian Authorization, Waiver, & Consent for Over-the-Counter Medication (OTC)

**RECOMMENDED** 

Recommended form. While this form is recommended, not required, it is a best practice to utilize the OTC form. The Parent/Guardian Authorization, Waiver, and Consent for Over-the-Counter Medication Form (OTC) allows parents/guardians to provide permission for administration of over-the-counter medications. Extension employees or program volunteers may not administer any medications, including OTC medications, without permission from the youth's parent or guardian.

Program staff may use generic equivalents when available for the name brand over-the-counter medications. Administration may or may not be done under the supervision of medical personnel. The listed over-the-counter medications do not necessarily have to be kept on hand and available to be administered immediately.

#### Parent Guardian Authorization, Waiver, & Consent for Self-Administration of Prescription Medication (SAP) OPTIONAL

Optional form. This provides an opportunity for the parent/guardian to provide written permission for their child, 15 years of age or older, to be responsible for and administer their own medication under the condition that the participant can self-manage care and will be the only one who receives the medication. Consent must be provided by the parent/guardian of the participant using the SAP form. Program Managers reserve the discretion to use this form.

#### **Questions?**

https://texas4-h.tamu.edu/minors/

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For more information, see the Texas A&M AgriLife Extension Rule on Programs for Minors: https://agrilifeas.tamu.edu/documents/240106x1.pdf/

