Independent Medication Administration

As children grow, they naturally want to increase their autonomy. This growing independence may include participating in taking their medication.

Most children are able to help take their medication in some way. They are able to help rub topical medication on their skin or use an inhaler with your supervision. This is called “active participation”.

However, if a child carries his own medication, decides when a dose is needed and takes the dose without supervision, this is considered Independent Medication Administration. Only programs approved to give medication are able to have children independently take medication.

Your program must also have an individual health care plan for each child who will independently administer his medication. The child’s plan will:

- state that staff approved to administer medication must be available when the child is in the program;
- explain how the child will carry the medication and make sure it is not accessible to other children in the program;
- explain how the child will tell program staff of any doses he administers;
- explain how staff will document each dose the child takes independently;
- explain how staff will recognize and respond to possible side effects; and
- list any additional training or competencies staff approved to give medication may need to care for the child and who will provide this training.

Emergency Medication Only:

When a program is approved to administer an inhaler to a child with asthma or other diagnosed respiratory condition, or an epinephrine auto-injector for anaphylaxis, a school-age child may carry and use these devices during day care hours if the program secures:

- written permission from the child’s health care provider;
- parental consent; and
- a completed special health care plan for the child.

The special health care plan, health care provider permission, and parental consent documents must state that the school-age child may carry the inhaler and/or auto-injector.
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