



CHILDREN'S HEALTH

WHAT IS DIFFERENT?

The new requirements are designed to protect the health of the children in your care. They ask you to develop illness and medication administration procedures that are both broader, and more specific than earlier requirements. Under the NLCR, several of these points were generally covered, and some were more specifically identified in the OCCR.

Now:

- You are required to work with your local public health office to develop procedures related to illness and the administration of medication
- Staff are now required to check for injury as well as illness when children arrive for care.
- The CNCR provide for the possibility that a child will be administering his or her own medication for a life-threatening condition.
- If you offer a seasonal school-age program, you must develop a written plan for managing the administration of medication if a parent and child are not at the same site (i.e. the child is on a field trip)
- There are new requirements for keeping a record of medication administered by CNC staff or self-administered by a child in the program, and for informing a parent that medication has been given.
- The CNCR also address the storage of medication and follow-up care of medication that is to be administered by CNC staff, and have separate requirements for medication being stored for parents to administer.
- The requirements regarding immunization have also undergone a significant change, recognizing that public health expectations and standards vary from province to province. The CNCR ask that:
 - ◇ You work with your local public health office to develop standards and procedures for documenting the immunization information of a child receiving Long Term Care.
 - ◇ Immunization documentation received from parents should be on file within two weeks of a

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child starting to receive CNC, and made accessible to public health authorities, as necessary. Note that short-term children are not required to provide evidence of immunization.

- Give all parents, including parents of children receiving Short Term Care, information about immunization, and the importance of bringing their child's immunization up-to-date to Canadian standards.

WHY IS IT IMPORTANT?

Maintaining and supporting the health of the children in your program should be your primary concern.

Administering and storing medication come with risks to both children and your organization. So, it's important for staff to consistently follow written procedures. Improper storage of medication can endanger a child with a medical condition by reducing its effectiveness, and is also a threat to other children who might be harmed by taking the medication accidentally. Also, because of the risks associated with administering medication, it is important to follow professional advice. The CNC requirements also take into consideration the fact that some children with life-threatening conditions may administer their own medication. Examples include the use of a "puffer" by asthmatics or an insulin pump by diabetics. However, whether a child self-administers a life-threatening medication or staff administer the medication, record keeping is a key component to managing risk for children, parents, staff and the ISO. When it comes to immunization, the public health office and our CNC programs have mutual goals; we want newcomer children to be safe and health authorities want to reach as many newcomer families as possible. Without working together and striving for protection against illnesses, newcomer children may be exposed to vaccine-preventable illnesses here. We can help to prevent this by sharing accurate immunization information with parents.

IMPLEMENTATION

- Contact your local public health office for advice. Since you will also be relying on them in the future for information about such issues as when to exclude or re-admit a child, you will benefit from having a positive relationship with these health professionals.

Note: It is important to recognize that orders from the public health office (e.g. related to exclusion/re-admission of an individual child and general quarantine) override your organization's procedures and practices.

- Discuss advice given by the health office with others in your organization.
- Ensure staff know what to do if a child appears to have been injured. Check if your abuse reporting policies and procedures are being followed.



- Make sure parents are fully aware of your need to exclude a child who is ill with a communicable illness as stated on the CNC Registration Form.
- Update your procedures as necessary, including when a new health threat arises that may call for a different response.
- Follow prescription directions for the storing and administration of medication.
- Decide where medication can be stored safely and obtain appropriate containers that meet the requirements.
- When caring for a child with a life-threatening condition, it is of critical importance that the medication, along with instructions for using it, be immediately accessible. In such cases, the choice of container may be determined by the circumstances and location of the program. For example, a staff member can wear a fanny pack containing the medication.
- Develop procedures related to immunization with advice from the local public health office and share accurate immunization information with parents.

SUPPORTING DOCUMENTS

- Sample Public Health Consultation Documentation

WEB RESOURCES

Provincial Immunization Schedules - <http://www.phac-aspc.gc.ca/im/is-vc-eng.php>

Information for Parents A guide to Immunization - <http://www.phac-aspc.gc.ca/im/iyc-vve/pgi-gpv/index-eng.php>

REQUIREMENTS

4-4. ILLNESS

- a. The CNC program follows written illness procedures developed with advice from health professionals.
- b. The illness procedures required in section 4-4.a include, but are not limited to, the following:
 1. Checking children as they arrive for illness or injury;

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2. Excluding a child who is ill on arriving at the program;
 3. Responding when a child becomes ill while participating in the program to ensure that the child is comfortable until taken home, and to reduce the likelihood that the child's illness will be transmitted to other children; and
 4. Re-admitting a child who has been absent because of a communicable illness.
- c. CNC staff have access to information about communicable diseases and conditions likely to be experienced by children enrolled in the program.

4-5 ADMINISTERING MEDICATION

Procedures for Administering Medication

- a. The CNC program develops and follows written procedures for handling and administering medication, developed with advice from health professionals, including procedures to ensure that
 2. Except in a life-threatening circumstance, a parent administers all prescription or non-prescription medication.
 3. All medication remains with a parent except
 - A. Medication provided by a parent for administration by CNC staff in a life-threatening circumstance.
 - B. Medication that must be refrigerated that is provided by a parent for administration by the parent.
 - C. Medication that remains with the child that is prescribed by a medical practitioner for a life-threatening condition.
- b. When a CNC staff member is to administer medication to a child in a life-threatening condition,
 3. The child's parent provides the program with the medication and clear, written instructions for its administration.
 4. The program informs the parent that the medication was given.
- e. When a parent is not at the same site as his or her child, the ISO has a written plan for managing the administration of medication.



Records

- d. The program has a written record of the administration of any medication administered by CNC staff or self-administered by a child participating in a CNC program.
- e. The record required in section 4-5.d is signed with the name or initials of the CNC staff member who administered or supervised the administration of the medication.

Storage

- f. When medication is stored by the CNC program for administration by CNC staff in a life-threatening circumstance, it is
 - 7. Stored where CNC staff can reach it rapidly, without unlocking a container, in a location known to all staff, in the same space as the child, but inaccessible to the children.
 - 8. Stored in its original container according to directions from the manufacturer or pharmacy on the label.
 - 9. Clearly labelled with the child's name and the expiry date.
 - 10. Accompanied by specific directions for administration, the name of the prescribing medical practitioner, and any special instructions.
 - 11. Returned to a parent if it appears to be damaged or when the expiry date has passed.
- g. When medication that must be refrigerated is stored by the CNC program for administration by a parent, it must be
 - 8. Stored in a locked, non-porous container that is inaccessible to children.
 - 9. Provided in its original container.
 - 10. Clearly labelled with the child's name

4-6 IMMUNIZATION

- a. The ISO provides parents with information about immunization.
- b. When providing a long term CNC to a child, the ISO follows written procedures developed with advice from the local public health office for documenting the child's immunization information.

