

Fast Facts on
Building a System of Medication Administration Training for CT Child Care Providers
Updated December 2012 by Angela A. Crowley

Background:

- Over 100,000 children are enrolled in 1,600 licensed child care centers/ Head Start programs and 2,700 family child care homes.
- Ten percent of children in each program have a special health care need and most require medication administration while enrolled in the program.
- CT Department of Public Health (DPH) Child Care regulations require that if a licensed child care program administers medication then the providers must be trained by an RN, APRN, physician or PA.
- Americans with Disabilities Act, prohibits programs from refusing admission or discontinuing enrollment of a child with a special health care need who requires medication. However, CT parents of children with special health care needs report difficulty in enrolling children in child care programs due to medication needs.
(<http://www.youtube.com/user/CHDICT#p/u/0/5VdKov6uVCE>)
- RNs and APRNs provide almost all the training in CT. However, the quality and availability of training is a problem.
- Child care providers pay on average \$50 (\$600 per 4 hour class of 12) for training required every three years and \$20 (\$360 per 1 hour class of 18) for selected annual updates.
- Findings of unannounced, routine inspections of child care programs by CT DPH Licensing Specialists found alarming rates of medication administration regulations non-compliance including¹:
 - 4 out of 10 child care centers did not have an approved written medication order,
 - 1 out of 5 centers did not have a trained provider,
 - 1 out of 10 centers had medications accessible to children.
- In spring 2011, through funding from the CT Dept of Social Services, Crowley and Yu created the new *Connecticut Medication Administration in Early Education and Child Care Settings* training curriculum. Over 80 nurses participated in a half-day Train-the-Trainer session.

Challenges:

- A large volume of center-based and family child care providers need training year round across CT.
- Despite a best practice curriculum and 80 nurses prepared to train providers, CT does not have a system to deliver training or regional sites to train providers

¹ Crowley, A. A. & Rosenthal, M. S. Ensuring the health and safety of Connecticut's early care and education programs. 2009. Farmington, CT: The Child Health and Development Institute of Connecticut.

Potential Solution: CT Schools of Nursing as Training Sites

Rationale for having a strong statewide network of training locations through CT Schools of Nursing

- Leadership
 - Nursing faculty are experts in medication administration and education and could provide leadership in addressing a critical child health need.
- Space
 - Schools of Nursing have classrooms and AV equipment, which could be utilized by nurse trainers to teach the medication administration training program for child care providers.
 - Medication training classes are typically conducted during the evening, weekends, and on staff development days during the summer months and throughout the year. Underutilized classrooms could be used for this purpose.
 - Demonstration kits and materials could be housed and maintained at schools of nursing and loaned to nurse trainers as part of the training fee.
- Clinical experience for nursing students
 - In a recent survey of schools of nursing across the US, 80% of the faculty reported that nursing students have clinical experiences in child care centers/ Head Start programs and/or receive didactic content on child care health and safety². Participation in planning and training could be a student clinical experience.
- Collaboration with Early Childhood Education faculty in CT colleges and universities
 - Many schools of nursing are in institutions that also offer an Early Childhood Education major.
 - Early childhood education majors could enroll in the course and be prepared to administer medications upon graduation.

Fall 2011-Summer 2012

A Crowley, PhD, APRN, PNP-BC, FAAN is awarded a grant from The Children's Fund of CT/ CHDI to build a system of medication administration training for CT child care providers.

Activities:

- Focus groups: Schools of Nursing, Child care providers/ parents, Prescribers/ primary care providers
- Two Train the Trainer Workshops for 39 nurses
- Collaboration with CT Charts-A-Course (CCAC) to enroll nurses trained in 2011 and 2012 into Registry
- Currently 60 nurses including 12 nursing faculty are approved for medication administration training in the CCAC Registry
- Two meetings to provide trainer supports/ updates

Summer 2012-Winter 2012

A Crowley, PhD, APRN, PNP-BC, FAAN is awarded a continuation grant from The Children's Fund of CT/ CHDI to build a system of medication administration training for CT child care providers.

Activities:

- Train the Trainer Workshop for 16 nurses including faculty
- Collaboration with CCAC to enroll and approve nurses in Registry- 71 nurses approved
- One Trainer meeting to support trainers
- Continued communication with Schools of Nursing who are planning implementation and piloting training

² Crowley, AA, Cianciolo, S., Krajicek, M, & Hawkins-Walsh, E. (2012). Child care health and health consultation curriculum: Trends and future directions in nursing education. *Journal for Specialists in Pediatric Nursing*, 17, 129-135.