## 10A NCAC 70G .0510 HEALTH SERVICES

- (a) The agency shall have written policies and procedures regarding foster parents administering medications to children placed in their home that shall be discussed with each child and the child's parents, guardian, or legal custodian prior to or upon placement.
- (b) These policies and procedures shall address medication:
  - (1) administration;
  - (2) dispensing, packaging, labeling, storage, and disposal;
  - (3) review;
  - (4) education and training;
  - (5) documentation, including medication orders, Medication Administration Record (MAR), orders and copies of lab tests, and medication administration errors and adverse drug reactions; and
  - (6) record in a medical administration record (MAR), provided by the supervising agency, all medications administered to each child. The MAR shall include the following: child's name; the name, strength, and quantity of the medications; instructions for administering the medications; the date and time the medication is administered, discontinued, or returned to the supervising agency or the person legally authorized to remove the child from foster care; the name or initials of the person administering or returning the medications; the child's request for changes or clarifications concerning medications; and the child's refusal of any prescribed medications.
- (c) Upon discharge of a child from foster care, the foster parents or the agency shall return prescription medication to the person or agency legally authorized to remove the child from foster care. Unwanted, out-dated, improperly labeled, damaged, adulterated, or discontinued prescription medications shall be disposed in accordance with the Federal Drug Administration guidelines found at: http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm101653.htm, incorporated by reference with subsequent amendments and editions.
- (d) The agency shall ensure that each child started or maintained on a medication by a licensed medical provider receives either oral or written education regarding the prescribed medication by the licensed medical provider or his or her designee. In instances where the ability of the child to understand the education is questionable, as determined by a licensed medical or mental health provider, the agency shall ensure that a responsible person receives either oral or written education regarding the prescribed medication by the licensed medical provider or his or her designee and provides either oral or written instructions to the child. The agency shall ensure that the medication education provided is sufficient to enable the child or other responsible person to make an informed consent, to safely administer the medication and to encourage compliance with the prescribed regimen.
- (e) The agency shall ensure that each child shall have a current medical examination. Medical examinations completed by a licensed medical provider (physician, physician's assistant or nurse practitioner)(in this Rule, "licensed medical provider") within 12 months prior to the admission of the child in foster care shall be considered current. If a child has not had a medical examination by a licensed medical provider within 12 months prior to admission, the agency shall arrange a medical examination for the child within two weeks after admission or sooner if indicated by the child's health condition. The medical examination report shall include a signed statement by a licensed medical provider specifying the child's medical condition and medications prescribed and indicating the presence of any communicable disease which may pose a risk of transmission in the foster home. If a child is in the custody of a county department of social services, is already scheduled to have a medical examination completed annually, and is entering a foster home the schedule of annual medical examinations are not required to be changed. A copy of the most recent medical examination report shall be obtained from the responsible county department of social services by the agency.
- (f) The agency shall obtain and record a developmental history for each child.
- (g) Children shall have had a dental examination by a licensed dentist within one year prior to admission or arrangements shall be made for an exam within six weeks after admission and annually thereafter. The agency shall document dental services in the child's record.

History Note: Authority G.S. 131D-10.5;

*Eff. October 1, 2008;* 

Amended Eff. August 1, 2017;

Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. October 3,

2017.