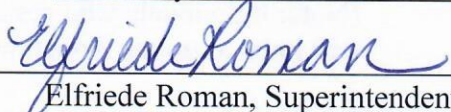


LAKE COUNTY BOARD OF DD/DEEPWOOD

BOARD POLICY

Reviewed and Adopted by the Board:

Date: February 28, 2022



Elfriede Roman, Superintendent

I. SUBJECT: EMERGENCY MEDICAL TREATMENT AUTHORIZATION (EMTA) AND AUTHORIZATION TO ADMINISTER MEDICATION

II. PURPOSE:

To establish a policy for timely completion of the EMTA for all individuals served by Board operated facilities and recreation programs, and provide authorization for administration of medication by Board employees.

III. REFERENCE:

O.R.C. 3313.712 Emergency Medical Authorization

O.A.C. 5123-4-01 Administration and Operation of County Boards of Developmental Disabilities

LCBDD Policy H-4 Emergency Medical Treatment/Intervention and Do Not Resuscitate ("DNR") Orders

LCBDD Policy A-28 Advance Directives

IV. POLICY:

Within 30 days of enrollment and annually all individuals must have on file appropriate authorization (attached) for emergency medical treatment and administration of medications. If an individual, parent, or guardian does not wish to give written permission for medical care, Part II, Refusal to Consent shall be completed indicating actions preferred to be taken. If applicable, a properly executed DNR identification form will be attached to the EMTA. The primary program area will keep the original EMTA on file and distribute copies to other program areas as necessary. A copy of this EMTA will be presented to the hospital, physician, or other emergency health care provider in the event of a medical emergency. All reasonable attempts will be made by Board employees to contact/notify parents or guardians and when appropriate, other persons having care of the individual including residential services supports providers in the case of medical emergency. Each Program Director will develop procedures to address and insure completion to this policy.

**EMERGENCY MEDICAL TREATMENT AUTHORIZATION (EMTA) AND
AUTHORIZATION TO ADMINISTER MEDICATION**

Page 2

The appropriate EMTA's are as follows:

Attachment A - All individuals

Attachment B - Broadmoor School Students

Attachment C - Adult Program Areas and Residential

(Note: individuals who reside at LCBDD/Deepwood ICF's and attend Broadmoor School will only complete Attachment A & B)

Information received shall be treated as protected health information and be secured and disclosed in accordance with the Health Insurance Portability Act of 1996.

V. DISTRIBUTION:

Board Members

All Management Staff

All Staff (via Department Managers)

LEADD President

VI. REVIEWED:

02/22, 02/20, 02/18, 02/17, 02/16, 02/15, 02/14, 03/13, 02/12, 02/10, 06/08, 06/06, 05/04,
05/03, 08/01, 06/99