



**Five  
Rivers®**

Medication  
Policy &  
Procedure  
Park House  
School

*'Five Rivers is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment'*

Policy Owner	Headteacher
Authoriser	Head Of Education
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## 1. Medication Policy

### 1.1 Policy Statement

There may be occasions where school staff may be asked to administer medication, but they cannot be directed to do so.

The administration of medication to children remains the responsibility of the parent or those with parental responsibility.

Medication should only be taken to school when absolutely essential and with the agreement of the Headteacher.

Parents should be encouraged to request, where possible, that medication be prescribed in dose frequencies which enable it to be taken outside school hours e.g. medicines that need to be taken three times a day could be taken in the morning, after school hours and at bedtime.

Park House school is alerted to the particular risks for young persons in taking Aspirin and Ibuprofen and should not routinely administer these unless under clear medical guidance.

Most pupils will at some time have a medical condition that may affect their participation in school activities. For many this will represent a short term medical need; perhaps finishing a course of medication, as a result of an accident or recovering from illness. Some other pupils may require medication on a long term basis to keep them well, for example children with well controlled epilepsy or cystic fibrosis and, if this is not properly managed, they could be prevented from reaching their full potential. Such pupils are regarded as having medical needs. Most children with medication needs are able to attend school regularly and, with some support from the school, can take part in the majority of school activities. A positive response by the school to a pupil's medication needs will not only benefit the pupil directly, but can also positively influence the attitude of others.

Medication needs can be grouped into three categories:

- Pupils requiring short term prescribed medication for acute conditions, for example an ear or chest infection. Usually such children will have been off school, but may still be on medication when they return.
- Pupils with a long term condition requiring regular medication; the two biggest categories within this group would be children with asthma and those with ADHD.
- Pupils who may very rarely require medication to be given in an emergency: Two different types of medical emergency may arise within the school setting:
- Where the pupil has not previously been known to have a medical condition and the medical emergency arises "out of the blue".

- Where a pupil with a known medical condition and a Medication Plan experiences a medical emergency in the context of their condition, such as children with severe allergies who may need an adrenaline injection.

Within each of these categories medication may be self administered, supervised, or administered by a third party. The most challenging situations for schools are for the child on long term medication and the child requiring a drug in an emergency.

It is essential that policies are agreed and responsibilities understood by all parties: employers, Governance, Headteacher, teachers, parents, pupils, classroom assistants and other relevant staff.

## 1.2 Terms and Definitions

1.2.1 The below table sets out a number of terms and definitions used within this document:

Term	Definition

## 1.3 Data Protection

1.3.1 Five Rivers Child Care supports the objectives of the General Data Protection Regulation (GDPR) and the Data Protection Act 2018 and other legislation relating to Data Processing, including the Human Rights Act 1998, Regulation of Investigatory Powers Act 2000 and the Freedom of Information Act 2000. Five Rivers Child Care has a statutory obligation to process personal data in accordance with the provisions of the General Data Protection Regulation (GDPR) and the Data Protection Act 2018.

1.3.2 Every member of Five Rivers Child Care has an obligation to ensure that the information they process (use) is collected, maintained and disclosed in accordance with the General Data Protection Regulation (GDPR) and the Data Protection Act 2018 and the Five Rivers Child Care Data Protection Policy.

## 1.4 Disclosure of Information

- 1.4.1 Any use or disclosure of information held within Five Rivers Child Care, without there being a legitimate purpose or legal basis, will be classed as unauthorised and is a criminal offence under Section 55 of the Act Right of Access (Subject Access Requests).

## 1.5 Further Information

### SECTION 1.5: GENERAL ISSUES

This Section covers a range of issues general to all categories - legal duty; indemnity; confidentiality; special educational needs; risk assessment; and dealing with emergencies (responsibility).

#### *Legal Duty*

The headteacher and teachers are not contractually required to administer medicines to pupils. This is a voluntary role, although some non teaching staff are employed on contracts, which require them to carry out certain medical procedures. Staff who provide support for pupils with medical needs, or who volunteer to administer medication, need support from the Headteacher and parents, access to information and training, and reassurance about their legal liability.

#### *Indemnity Policy*

If a member of staff administers medication to a pupil, or undertakes a medical procedure to support a pupil and, as a result, expenses, liability, loss, claim or proceedings arise, the employer will indemnify the member of staff provided all of the following conditions apply:

- a. The member of staff is a direct employee.
- b. The medication/procedure is administered by the member of staff in the course of, or ancillary to, their employment.
- c. The member of staff follows:
  - the procedures set out in this guidance;
  - the school's policy;
  - the procedures outlined in the individual pupil's Medication Plan, or written permission from parents and directions received through training in the appropriate procedures.
- d. Except as set out in the Note below, the expenses, liability, loss, claim or proceedings are not directly or indirectly caused by and do not arise from fraud, dishonesty or a criminal offence committed by the member of staff.

*Note: Condition d. does not apply in the case of a criminal offence under Health and Safety legislation.*

### *Confidentiality*

Each pupil should be treated as an individual. Where medication will be required during the school day, parents should provide the school with full information about their child's needs and should be encouraged to forward any GP, consultant or nursing advice to ensure the needs can be met effectively. Staff noticing deterioration in a pupil's health over time should inform the headteacher who should let the parents know.

The headteacher and school staff should treat medical information confidentially. The Headteacher should consult with the parent, or the pupil if appropriate, as to who else should have access to records and other information about the pupil's medical needs. If information is withheld from staff they should not generally be held responsible if they act incorrectly in giving medical assistance, but otherwise in good faith.

The Headteacher should also consider how much other children within the school should know about a particular child's chronic condition. It can be helpful both educationally and emotionally for other children to be aware, for example, about diabetes or epilepsy and classmates can be very supportive if a child is known to be subject to, for example, hypoglycaemia. However, pupils with a medical condition are sometimes teased or bullied.

**It is important that a school does not disclose details of a child's condition to other pupils without the consent of the parent *and* the child him/herself, if appropriate. When consent is given the situation should be handled as sensitively as possible.**

### *Co ordinating Information*

If teachers volunteer to assist an individual pupil with medication needs and if the headteacher agrees to this, the headteacher should decide which members of staff will have specific responsibility for this co-ordination role. This "identified person" can be a first contact for parents and staff, and liaise with external agencies.

### *Special Educational Needs*

Pupils with medical needs do not necessarily have special educational needs. But for those who do, their needs are addressed by the guidance contained within the Code of Practice for the Identification and Assessment of Special Educational Needs 1998 and the supplement to the Code published in

September 2005. Health and Social Care authorities have a responsibility to provide advice and training for school staff in procedures which deal with a pupil's medication needs, which in turn should support that child's access to education. Education, Health and Social Care authorities and schools should work together, in close partnership with parents, to ensure quality support in school for pupils with medication needs.

### *Risk Management*

Dealing with medical conditions and medication needs must take into account the risks which arise from these and should aim to minimise probability of anything more serious happening to the child. Action taken should optimise opportunities to minimise risk.

## 2. Policy and Procedure

### **POLICY FOR THE ADMINISTRATION OF MEDICATION IN PARK HOUSE SCHOOL**

The Headteacher and staff of Park House School wish to ensure that pupils with medication needs receive appropriate care and support at school. The Headteacher will accept responsibility in principle for members of the school staff giving or supervising pupils taking prescribed medication during the school day **where those members of staff have volunteered to do so.**

**Please note that parents should keep their children at home if acutely unwell or infectious.**

- Parents are responsible for providing the Headteacher with comprehensive information regarding the pupil's condition and medication.
- Prescribed medication will not be accepted in school without complete written and signed instructions from the parent.
- Staff will not give a non prescribed medicine to a child unless there is specific prior written permission from the parents.
- Only reasonable quantities of medication should be supplied to the school (for example, a maximum of four weeks supply at any one time).
- Where the pupil travels on school transport with an escort, parents should ensure the escort has written instructions relating to any medication sent with the pupil, including medication for administration during respite care.
- Each item of medication must be delivered to the Headteacher or Authorised Person (Kristina Baker), in normal circumstances by the parent/carer , **in a secure and labelled container as originally dispensed**. Each item of medication must be clearly labelled with the following information:
  - Pupil's Name.
  - Name of medication.
  - Dosage.
  - Frequency of administration.
  - Date of dispensing.
  - Storage requirements (if important).
  - Expiry date.

**The school will not accept items of medication in unlabelled containers.**



- Medication will be kept in a secure place, out of the reach of pupils. Unless otherwise indicated all medication to be administered in school will be kept in a locked medicine cabinet.
- The school will keep records, which they will have available for parents.
- If children refuse to take medicines, staff will not force them to do so, and will inform the parents of the refusal, as a matter of urgency, on the same day. If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.
- It is the responsibility of parents to notify the school in writing if the pupil's need for medication has ceased.
- It is the parents' responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.
- The school will not make changes to dosages on parental instructions.
- School staff will not dispose of medicines. Medicines, which are in use and in date, should be collected by the parent at the end of each term. Date expired medicines or those no longer required for treatment will be returned immediately to the parent for transfer to a community pharmacist for safe disposal.
- For each pupil with long term or complex medication needs, the, Headteacher will ensure that a Medication Plan and Protocol is drawn up, in conjunction with the appropriate health professionals.
- Where it is appropriate to do so, pupils will be encouraged to administer their own medication, if necessary under staff supervision. Parents will be asked to confirm in writing if they wish their child to carry their medication with them in school.
- Staff who volunteer to assist in the administration of medication will receive appropriate training/guidance if appropriate
- The school will make every effort to continue the administration of medication to a pupil whilst on trips away from the school premises, or working in a community base even if additional arrangements might be required. However, there may be occasions when it may not be possible to include a pupil on a school trip if appropriate supervision cannot be guaranteed.
- All staff will be made aware of the procedures to be followed in the event of an emergency.

### 2.1: DEALING WITH MEDICINES SAFELY

#### *Safety Management*

All medicines may be harmful to anyone for whom they are not prescribed. Where a school agrees to administer this type of medicine the employer must ensure that the risks to the health of others are properly controlled. This duty derives from the Control of Substances Hazardous to Health Regulations 2002, (COSHH).

The Medicines Act 1968 places restrictions on dealings with medicinal products, including their administration. In the case of prescription only medicines anyone administering such a medicinal product by injection must be an appropriate medical practitioner, e.g. a doctor, or else must act in accordance with the practitioner's directions and authority.

There are exceptions for the administration of certain prescription only medicines by injection in emergencies (in order to save a life). An example of an exception is injection by a fully

assembled syringe and needle delivering a set dose of adrenaline by intramuscular injection in the case of anaphylactic shock. Examples are EpiPen® and Anapen®. There are also junior versions for use in children.

### *Storing Medication*

In a school where staff have volunteered to administer medication and where the Headteacher has agreed to this, the Headteacher is responsible for making sure that medicines are stored safely.

- Schools should not store large volumes of medication. Parents should be asked to supply weekly or monthly supplies of the doses to be taken at school. Schools should only store, supervise and administer medicine that has been prescribed for an individual child. Medicines should be stored strictly in accordance with product instructions, (paying particular note to temperature), and in the original container in which dispensed. Staff should ensure that the supplied container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration. This should be straight forward if medicines are only accepted in the original container as dispensed by a pharmacist in accordance with the prescriber's instructions.
- Where a pupil needs two or more prescribed medicines, each should be in a separate container. Non health care staff should never transfer medicines from their original containers.
- If the school locks away medication that a pupil might need in an emergency, **all staff should know where to quickly obtain keys to the medicine cabinet.**

Careful note should be taken of any requirements regarding the temperature at which the medication should be stored. Some medicines need to be refrigerated. Medicines can be kept in a refrigerator containing food, but should be in an airtight container and clearly labelled. The school should restrict access to a refrigerator holding medicines. The fridge should be fitted with a minimum and maximum thermometer.

### *Controlled Drugs*

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated Regulations. Some may be prescribed as medication for use by children, e.g. methylphenidate.

- Increasing numbers of children are taking methylphenidate, e.g. Ritalin®, Equasym®, Concerta®, for Attention Deficit Hyperactivity Disorder (ADHD). These are controlled drugs and therefore care must be taken regarding its storage.
- Any member of staff may administer a controlled drug to the pupil for whom it has been prescribed, provided they have received appropriate training. Staff administering medicine should do so in accordance with the prescriber's instructions.
- Park House school will look after a controlled drug, where it is agreed that it will be administered to the child for whom it has been prescribed.
- Park House School Schools will keep controlled drugs in a locked non portable container and only named staff should have access. A record will be kept for audit and safety purposes.
- A controlled drug, as with all medicines, should be returned to the parent when no longer required to arrange for safe disposal (by returning the unwanted supply to the local

pharmacy). If this is not possible, it should be returned to the dispensing pharmacist (details should be on the label).

- Misuse of a controlled drug, such as passing it to another pupil for use, is an offence.

### *Access to Medication*

Pupils must have access to their medicine when required. They should know where their own medication is kept and who holds the key.

Some medicines, such as inhalers for asthma, must be readily available to pupils and should not be locked away. Park House School allows pupils to carry their own inhalers.

If a pupil is likely to suffer a severe allergic reaction, the pupil may be old enough to carry his or her own medication (e.g. EpiPen®/ Anapen®) but if not, a suitable, safe, yet accessible place for storage will be found.

Other medicines will be kept in a secure place not accessible to pupils.

The school will make special access arrangements for emergency medication that it keeps. Medicines are only accessible to those for whom they are prescribed.

### *Disposal of Medicines*

- School staff will not dispose of medicines.
- Medicines, which are in use and in date, should be collected by the parent at the end of each term.
- Parents are responsible for disposal of date expired medicines. Date expired medicines or those no longer required for treatment should be returned to the parent immediately for transfer to a community pharmacist for safe disposal.
- Sharps boxes should always be used for the disposal of needles. Sharps boxes can be obtained by parents on prescription from the child's GP or paediatrician. Collection and disposal of the boxes should be arranged with local authority's environmental services.

### *Hygiene/Infection Control*

All staff will be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures. Staff have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment.

### *3.1 Children with a Short Term Need to take Medication in School*

Pupils generally require short term prescribed medication for acute conditions, such as an ear or chest infection. There is little if any need for the School to be involved in these cases. The "training" needed would be an explanation by the parents and the manufacturers leaflet supplied with every medication. Staff should be made aware of the need for written parental consent to be obtained and to keep accurate records of each time medication is administered.

Where pupils are on self medication, e.g. paracetamol or cough mixture, the responsibility for medication should be with the child, if of an appropriate age and understanding. Parental consent must be secured in writing.

### *3.2 Children Requiring Daily Long Term Medication*

This group includes pupils with a long term condition requiring regular medication. The two biggest categories within this group would be pupils with Asthma and those with ADHD. The Health Service can provide pre-printed leaflets on these conditions, including advice on emergencies. In difficult cases the Health Service would be involved.

This category also includes pupils who, because of an existing medication condition might have an emergency episode which could put their life at risk and so would demand immediate attention. The main groups here would be those with severe epilepsy, diabetes and anaphylaxis due to food allergies. Depending on the severity of their condition these children might require a Medication Plan, which itself may reveal the need for some school staff to have further information about a medical condition or specific training in administering a particular type of medication or in dealing with emergencies. In these instances, school staff should never give medication without appropriate training from health professionals.

For children with significant medication needs an individual programme of training will be devised. All training should be reviewed at least annually and be child specific.

Training should be arranged in conjunction with the Health and Social Services Boards/Community Paediatricians, School /Community Children's Nurse or other health professionals. Health Boards/Trusts have the discretion to make resources available for any necessary training. A health-care professional should confirm that any training has given staff sufficient understanding, confidence and proficiency in medical procedures and communicate this to the employer. A programme of refresher courses will ensure that competencies remain current.

Training should be for named staff member(s) in the specific procedure(s) for each named child or children. The training programme undertaken must be planned and recorded in detail for the named staff member(s).

The training in specific procedures should include:

- information on the individual child's Medication Plan;
- the requirement to maintain the child's confidentiality;
- instruction on the procedure required by demonstration, followed by supervised practice where appropriate, and supported by a written protocol. This protocol should include the actions necessary for the trained person to implement and will become part of the pupil's Medication Plan; and
- where appropriate, child protection or intimate care issues must be addressed.

Ideally, the staff will be trained before the child starts attending school, but, otherwise, parents must be aware that they will need to continue being responsible for the procedures until staff are trained.

When nominating the staff to be trained the school will consider what action should be taken if the trained person is absent. If no trained person is available on a particular day, the parents will be advised of this.

Members of staff who have been trained should be given a Certificate of Competency from the training provider stating that he/she has completed a training programme in a specified procedure in relation to the named child.

This Certificate will be kept in the school's personal file for the member of staff and a copy should be placed in the relevant pupil's personal file. This information should be updated on an annual basis or when the name of a trained individual changes.

If the pupil has a Statement of Special Educational Needs or an Education and health care plan (EHCP) under the the requirement for the procedures should be stated on medical, nursing or

therapy advice. This advice should state that the Health and Social Services Board is willing to train staff in the procedure required.

### *Training in Emergency Procedures*

All staff should know how to call the emergency services. All staff, whether they have volunteered to administer medication or not, should be given information about the most common conditions, which affect the pupils they may come into contact with during the course of a school day. This will help staff recognise symptoms and how to deal with an emergency should one arise. All staff should also know who is responsible for carrying out emergency procedures in the event of need and everyone should know how to contact these people in the event of an emergency occurring.

## 2.2 OTHER CIRCUMSTANCES WHEN A SCHOOL

### MAY NEED TO MAKE SPECIAL ARRANGEMENTS FOR PUPILS WITH MEDICATION NEEDS

#### *Educational Trips*

Reasonable steps will be taken by schools to encourage pupils with medication needs to participate in school trips, wherever safety permits. This might include reviewing and revising the visits policy and procedures so that planning arrangements will include the necessary steps to include children with medication needs. It might also include risk assessments for such children. It should be accepted, however, that there may be occasions when it may not be possible to include a pupil on a school trip if appropriate supervision cannot be guaranteed.

Sometimes the school may need to take additional safety measures for outside visits. Arrangements for taking any necessary medication will also need to be taken into consideration. If a child who needs medication is being taken on an overnight trip or journey the parent must provide detailed instructions and written consent for the administration of the medication for the period of the trip.

If the pupil has a Medication Plan this may be adapted through discussion with the pupil and parents, the school and health professionals, to identify the specific issues that need to be considered during the trip. Where possible the responsibilities of the pupil, parents and the school staff will be made explicit.

Staff supervising excursions will always be aware of any medication needs, and relevant emergency procedures. Sometimes an additional supervisor or parent might accompany a particular pupil. If staff are concerned about how they can provide for a pupil's safety, on a trip, they should seek medical advice from the child's GP or Paediatrician as to what steps should be taken to ensure the medical needs are met. This advice should be sought well in advance of the proposed trip.

**A copy of any Medication Plan should be taken on visits in the event of the information being needed in an emergency.**

#### *Sporting Activities*

Most pupils with medical conditions can participate in extra curricular sport or in the PE curriculum, which is sufficiently flexible for all pupils to follow in ways appropriate to their

own abilities. For many, physical activity can benefit their overall social, mental and physical health and well being. Any restrictions on a pupil's ability to participate in PE should be included in their individual Medication Plan. All adults should be aware of issues of privacy and dignity for children with particular needs.

Some activities, however, may need to be modified or precautionary measures may need to be taken, before or during exercise and pupils should be allowed immediate access to their medication if necessary. For example, children with asthma may need to take their reliever inhaler before exercise. Staff supervising sporting activities should consider whether risk assessments are necessary for some children and be aware of relevant medical conditions and emergency procedures.

## Appendix Forms to be used

**Park House School**

### MEDICATION PLAN FOR A PUPIL WITH MEDICAL NEEDS



Date \_\_\_\_\_ Review Date \_\_\_\_\_  
Name of Pupil \_\_\_\_\_  
Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Class \_\_\_\_\_  
National Health Number \_\_\_\_\_  
Medical Diagnosis \_\_\_\_\_  
\_\_\_\_\_

#### *Contact Information*

##### **1 Family Contact 1**

Name \_\_\_\_\_  
Phone No (home/mobile) \_\_\_\_\_  
(work) \_\_\_\_\_  
Relationship \_\_\_\_\_

##### **2 Family Contact 2**

Phone No \_\_\_\_\_ (home/mobile)  
\_\_\_\_\_ (work) \_\_\_\_\_  
Relationship \_\_\_\_\_

##### **3 GP**

Name \_\_\_\_\_  
Phone No \_\_\_\_\_

##### **4 Clinic/Hospital Contact**

Name \_\_\_\_\_  
Phone No \_\_\_\_\_ Plan \_\_\_\_\_

prepared by

Name \_\_\_\_\_  
Designation \_\_\_\_\_ Date \_\_\_\_\_ Describe  
condition and give details of pupil's individual symptoms

\_\_\_\_\_  
\_\_\_\_\_

Medication Policy and Procedure

\_\_\_\_\_

\_\_\_\_\_

Daily care requirements (e.g. before sport, dietary, therapy, nursing needs)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Members of staff trained to administer medication for this child (state if different for off site activities)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe what constitutes an emergency for the child, and the action to take if this occurs

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Follow up care

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I agree that the medical information contained in this form may be shared with individuals involved with the care and education of

Signed \_\_\_\_\_ Date \_\_\_\_\_  
*Parent/carer*

**Distribution**

School Doctor \_\_\_\_\_ School Nurse \_\_\_\_\_

Parent \_\_\_\_\_ Other \_\_\_\_\_





**Park House School**

REQUEST FOR A SCHOOL TO ADMINISTER MEDICATION

The school will not give your child medicine unless you complete and sign this form, and the Headteacher has agreed that school staff can administer the medicine.

*Details of Pupil*

Surname \_\_\_\_\_ Forename(s) \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ M F

Class \_\_\_\_\_

Condition or illness \_\_\_\_\_

*Medication*

**Parents must ensure that in date properly labelled medication is supplied.**

Name/Type of Medication (as described on the container)

\_\_\_\_\_

Date dispensed \_\_\_\_\_ Expiry Date

\_\_\_\_\_

**Full Directions for use**

Dosage and method

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**NB**

**Dosage can only be changed on a Doctor's instructions**

Timing \_\_\_\_\_ Special precautions

\_\_\_\_\_

Are there any side effects that the School needs to know about?

\_\_\_\_\_

\_\_\_\_\_

Self Administration

Yes/No (*delete as appropriate*)

*Procedures to take in an Emergency*

---

---

---

Contact

**Details**

Name

---

Phone No

(home/mobile)

---

(work)

---

Relationship to Pupil \_\_\_\_\_

Address \_\_\_\_\_

---

I understand that I must deliver the medicine personally to \_\_\_\_\_ (*agreed member of staff*) and accept that this is a service, which the school is not obliged to undertake. I understand that I must notify the school of any changes in writing.

Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

**Agreement of Headteacher**

I agree that \_\_\_\_\_ (*name of child*) will receive  
\_\_\_\_\_ (*quantity and name of medicine*) every day at  
\_\_\_\_\_ (*time(s) medicine to be administered e.g. lunchtime or afternoon break*).

This child will be given/supervised whilst he/she takes their medication by  
\_\_\_\_\_ (*name of staff member*).

This arrangement will continue until \_\_\_\_\_ (*either end date of course of medicine or until instructed by parents*).

Signed \_\_\_\_\_ Date \_\_\_\_\_  
(*The Headteacher /authorised member of staff*)

**The original should be retained on the school file and a copy sent to the parents to confirm the school's agreement to administer medication to the named pupil.**

Park House School



**TEMPLATE FOR A REQUEST FOR PUPIL TO CARRY THEIR  
MEDICATION**

**Five Rivers  
Park House**

This form must be completed by parents/carers.

If staff have any concerns discuss this request with healthcare professionals.

Details of Pupil

Surname \_\_\_\_\_ Forename(s) \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Class \_\_\_\_\_

Condition or illness \_\_\_\_\_

Medication

**Parents must ensure that in date properly labelled medication is supplied.**

Name of Medicine \_\_\_\_\_

Procedures to be taken in an emergency  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact

Details

Name \_\_\_\_\_

Phone No (home/mobile) \_\_\_\_\_  
(work) \_\_\_\_\_

Relationship to child \_\_\_\_\_

**I would like my child to keep their medication on him/her for use as necessary.**

Signed \_\_\_\_\_ Date \_\_\_\_\_

Relationship to child \_\_\_\_\_

**Agreement of Headteacher**

I agree that \_\_\_\_\_ (*name of child*) will be allowed to carry and self administer their medication whilst in school and that this arrangement will continue until \_\_\_\_\_ (*either end date of course of medication or until instructed by parents*).

Signed \_\_\_\_\_ Date \_\_\_\_\_  
(*The Headteacher/authorised member of staff*)

**The original should be retained on the school file and a copy sent to the parents to confirm the school's agreement to the named pupil carrying Their own medication.**

**Park House School**  
**RECORD OF MEDICINE ADMINISTERED**  
TO AN INDIVIDUAL CHILD



Surname	
Forename(s)	
Date of Birth	___/___/___ M F
Class	
Condition or illness	
Date medicine provided by parent	
Name and strength of medicine	
Quantity received	
Expiry date	___/___/___
Quantity returned	
Dose and frequency of medicine	

**Checked by:**

Staff signature \_\_\_\_\_ Signature of parent \_\_\_\_\_

Date	___/___/___	___/___/___	___/___/___
Time given			
Dose given			
Any reactions			
Name of member of staff			
Staff initials			
Date	___/___/___	___/___/___	___/___/___
Time given			

## Medication Policy and Procedure

Dose given			
Any reactions			
Name of member of staff			
Staff initials			

Date	___/___/___	___/___/___	___/___/___
Time given			
Dose given			
Any reactions			
Name of member of staff			
Staff initials			
Date	___/___/___	___/___/___	___/___/___
Time given			
Dose given			
Any reactions			
Name of member of staff			
Staff initials			
Date	___/___/___	___/___/___	___/___/___
Time given			
Dose given			
Any reactions			
Name of member of staff			
Staff initials			
Date	___/___/___	___/___/___	___/___/___

## Medication Policy and Procedure

Time given			
Dose given			
Any reactions			
Name of member of staff			
Staff initials			

Name of School \_\_\_\_\_

**RECORD OF MEDICINES ADMINISTERED TO ALL CHILDREN**

Date	Child's Name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print Name
/ / -							
/ / -							
/ / -							
/ / -							
/ / -							
/ / -							
/ / -							
/ / -							
/ / -							
/ / -							
/ / -							
/ / -							
/ / -							
/ / -							



## COVID 19 TEST KIT PROCEDURE

Sept 2020 Department of Education issued Covid 19 test kits

The test Kits are to be held in the COSHH cupboard at Park House School;

These can only be used in the following circumstances:

- Kits are only to be given to staff/ pupils in exceptional circumstances. Only to be given if you believe they would not be able to have the test carried out at the normal places – e.g apply for one sent to home or visit a test centre.
- Do not give directly to a child, hand to parent/ carer.
- Only to be used on pupils/ teachers/ staff, not for peoples households.
- Parents/ carers to administer for pupils under 11 years old.
- Tests must not be completed on site – to be completed at the persons home.
- Test shelf of 12 months – have expiry date on.
- To be kept at room temperature.

Park House School policy for allocating the tests;

1. Request made by staff or parent/carer for test to headteacher
2. Headteacher refers to allocation criteria set out above
3. Test is allocated and recorded as allocated with name date and time
4. Test is delivered to parent/carer and delivery is logged
5. Results are recorded