

HOLLY LODGE PRIMARY SCHOOL

Medication at school 2020/21

Administration of prescribed medicines during the school day may be arranged for the following groups of children:

- (a) those who have a long term illness or medical condition which may require daily administration of medicine or medication to be held in school for occasional or emergency use
- (b) those who are susceptible to asthmatic attacks for whom the school may take custody of inhalers on a day-to-day basis or who may be considered mature enough to take responsibility for their own inhalers
- (c) those who are experiencing illness for whom medication has been prescribed to be taken at regular intervals over a short period of time

The school cannot take responsibility for administering non-prescribed medication and children are not permitted to bring these to school for self-administration.

Medication for all the groups above will normally be kept in the reception office and **children are expected to present themselves at the appropriate time** if they have a daily requirement. **In all cases, agreement must be reached with the school on how the medication is to be stored and who will be responsible for its administration.** Teaching staff cannot be required to take on this responsibility and are not permitted to store any medicines, apart from inhalers and Epi-pens, in classrooms. Parents must inform the class teacher that their child is on medication and ask him/her to send the child to the office for medication. ***Please note that where possible, the need for medicines to be administered at school should be avoided and parents are therefore requested to try and arrange the timing of doses accordingly (ie before school, after school, bedtime). Holly Lodge cannot accept responsibility for missed doses.***

All medication arrangements are at the discretion of the Head Teacher.

Parents requesting medication facilities for their children for the year 2020/2021 must complete the details required below. Ongoing requirements must be reviewed at the beginning of each school year.

Child's Name:	Age:	Class:
Medical condition requiring medication:		
Type of medication and instructions for administration (including circumstances requiring occasional or emergency use):		
Arrangements for storage and administration (to be agreed with all staff concerned):		
Staff responsible for administration (at least two to be nominated – check with office):		
Doctor's Name and Telephone No:		

In the event of an emergency arising from the administration of this medication, I authorise the school to contact my family doctor and take such action as he/she may advise.

Parent/Guardian Name: _____ Signature: _____

Date: _____