

INVERKEITHING PRIMARY SCHOOL



In accordance with Fife Council Medication in School Policy

Updated October 2019 Revised June 2022

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1.0 PURPOSE

To ensure a consistent approach to the administration of, and arrangements for, medication across Inverkeithing Primary School in line with Fife policy.

2.0 SCOPE

This procedure relates to all staff willing to assist in supervising or gaining skills in the administration of medication or clinical tests. It also relates to support staff who have a responsibility for meeting the health care needs of pupils as part of their contractual duties.

Some health care needs will include a requirement for mediation. Common examples include allergy, diabetes, asthma and epilepsy.

Specific policy circulars apply to diabetes and nut allergies (see appendix 4).

This procedure is to be read in conjunction with The Administration of Medicines in Schools (2001) published by the Scottish Government.

3.0 **RESPONSIBILITIES**

Responsibilities of heads of service, heads of establishments, staff, parents/ carers and pupils are covered in The Administration of Medicines in Schools (2001).

The role of the NHS Fife School Health Service Appendix 1.

Additional, specific responsibilities are as follows:

The **Headteacher** responsible for the premises has the following responsibilities:

- To develop, implement and administer a school policy for meeting the health care needs of pupils based on this procedure and The Administration of Medicines in Schools (2001).
- To ensure that an Education Health Care Plan and Summary (Appendix 3) is pulled together for all pupils along with Health Care Plans from other identified Specialist Services, for whom action is required in relation to a health issue, including those who may require emergency medicines, in accordance with chapter 3 of the above document. This plan should be reviewed and updated regularly and at least on an annual basis, or when medication is changed in consultation with the parents/carers of the pupil and relevant medical staff. Where appropriate, the pupil should also have an involvement in this planning review. Staff from the specialist clinics should complete a Health Care Plan/Emergency Plan when a child is seen at the clinic. A copy of this Plan should be given to the school i.e., Asthma, Cystic Fibrosis, Pupils with Allergies and Epilepsy.
- To ensure that all relevant staff who have volunteered or are required to work to this procedure are aware of the procedures' requirements, notified of any specific responsibilities they have been appointed to, and work to it.

- To ensure that all staff involved in the administration or supervision of medication are given the opportunity to gain skills and routinely update skills and knowledge on a two-yearly basis or more often if required.
- To ensure that all staff, including supply teachers, visiting teachers and support staff receives general awareness raising instruction / guidance in common medical conditions and that they are made aware of trained staff within the school to whom they can refer if a pupil requires medication. They should also be made aware of emergency procedures noted on any pupil's Education Health Care Plan and Summary.
- To ensure that there is sufficient staff instructed to provide care at all times, ie school hours, extra-curricular activities, school trips.
- To ensure that records are kept appropriately including class lists being clearly marked to indicate pupils with any medical condition which might require action to be taken to ensure a pupil's well-being, eg allergy, asthma, diabetes, epilepsy.
- To liaise with the parents/carers/pupil and the local Health Authority to ensure that the health care needs of the pupil are met as far as the resources of the staff and establishment allow.
- To ensure that agreement is reached with all parties involved before the release of any information on a pupil's health care needs.
- To ensure pupil confidentiality is maintained as appropriate.
- To ensure that accommodation is available which offers adequate privacy where necessary.
- To ensure that adequate facilities for instruction purposes are made available.
- To ensure that parents are requested to replace "out of date " medication, remove any medication from the school at the end of session and replace medication at the beginning of the new session.

Staff have the following responsibilities:

• To comply with this procedure, The Administration of Medicines in Schools (2001) and the establishment's policy on the administration of medicines.

Under no circumstances may any staff member dispense medication to pupils on their own initiative.

- Where there is involvement in the administration or supervision of the taking of medicine on the part of education staff, staff involved must have attended appropriate awareness raising sessions.
- Staff are not to administer medication until they have completed appropriate awareness raising sessions. Involvement is voluntary for the majority of staff, though some support staff have 'meeting the health care needs of pupils' as part of their contractual duties.
- Schools should update their knowledge of all common medical conditions, ie allergy, asthma, diabetes, epilepsy, regularly using national and local resources. A list of staff who have received instruction should be displayed clearly in the school office. (Appendix 2).
- Fife Council will provide indemnity to the member of staff administering emergency medicines against claims arising from, or out of negligence providing the member of staff has:
- Completed appropriate awareness raising instruction
- Shown competency in awareness to the medical professional conducting awareness raising instruction
- Followed agreed procedures and protocols:
 - All staff who have direct responsibility for a pupil should be made aware of any school Education Health Care Plan and Summary (Appendix 3) for managing the condition.
 - Consideration of a pupil's medical condition should be made with regard to physical activities s illustrated in below.
 - Pupils with asthma should be allowed to take time to use inhalers if necessary but should be encouraged to resume participation as soon as they feel able. Exercise triggers for asthmatic attacks should be pre-empted by encouraging the pupil to use their inhaler prior to activity or if any wheezy episode occurs during exercise.
 - Pupils with diabetes should be allowed access to blood testing facilities as well as food and drink before and during exercise.
- Staff are unable to administer temporary medication such as paracetamol, penicillin etc. Staff can only administer medication for chronic conditions such as asthma, epilepsy, diabetes, or any child who has a long-term medical protocol or health care plan.
- First aid staff administer any medicines associated with health care plans and asthma inhalers if required.

Pupils, parents or carers should:

- Provide the Headteacher with sufficient information about the pupil's health care needs and treatments. This could include some written record of their medical condition from i.e., GP, Hospital or Specialist Nurse.
- In collaboration with relevant health professionals and the head of establishment, reach an understanding on the education establishment's role in supporting their child's, or in the case of a pupil their own, health needs.

- Where there is a need for ongoing or emergency medication, it is essential that the parents/carers, Headteacher, relevant health professionals, and the pupil if appropriate, meet to discuss the pupil's health care needs. One of the purposes of this meeting would be to formulate an Education Health Care Plan and Summary (Appendix 3) which both outlines the nature of the health care need and gives a clear indication of how these needs will be met. The community paediatrician should be contacted before the meeting and asked to assist in providing background information from medical records. Following the completion of the health care plan a copy should be sent to the community paediatrician for information.
- It is the responsibility of the parents/carers to ensure that all medication is "in date" and is replaced as necessary. It is also their responsibility to remove medication from the school at the end of the school session and replace it at the beginning of the new session
- Staff are unable to administer temporary medication such as paracetamol, penicillin etc. Staff can only administer medication for chronic conditions such as asthma, epilepsy, diabetes, or any child who has a long-term medical protocol or health care plan. We would ask parents and carers to come into the school office to administer any medications to their child.

Specialist Asthma Nurse

For pupils who have been identified by a specialist as having severe asthma, the specialist asthma nurse at the Victoria Hospital, Kirkcaldy, will complete an Asthma Record Card. This will be discussed with the school who should keep a copy of this in the pupil's PPR. GP practices will be encouraged to complete a plan.

4.0 PROCEDURE

Pupils will at some time need to take medication in schools, nurseries or other education establishments.

Children may suffer from conditions such as asthma or diabetes, may require some form of daily treatment or monitoring of their condition.

Some pupils may require emergency treatment for severe allergic reaction (anaphylaxis) or epilepsy.

Pupils with all such conditions are regarded as having health care needs, and with suitable support from the school or education establishment can take part in most normal school activities.

A positive response by the establishment to a pupil's health care needs will not only support the pupil's health, but will be seen as allowing the pupil to gain the full benefit of their education experience:

- Headteachers are to follow guidance given in The Administration of Medicines in Schools (2001).
- Class registers should be clearly marked to indicate pupils with medical conditions which might require medication, e.g., asthma, so that any teacher taking the class will be aware of the need to be observant and reactive.

4.1 Additional Guidance: Storage of medication/test material

In cases where medication or tests are administered by staff, these medicines or test materials should be:

- stored in a secure area which is easily accessible to designated staff members during the school day.
- This area should be locked/secured at the end of the school day.
- All appropriate members of staff should be aware of where the keys for this cabinet are held.
- Schools should ensure that storage areas are kept below 25C whenever possible.
- In the event of medicines requiring to be kept under refrigeration, storage is to be in a designated refrigerator authorised by the head of establishment or in a locked and labelled container within a domestic fridge.
- Access to all medication must be controlled and refrigerators or containers either secured firmly or be located in a room or area that can be locked. Particular care needs to be taken where an establishment stores controlled drugs such as methylphenidate which is a class A drug. This may be more easily recognised under the brand names Ritalin or Equasym. These medicines should be kept in a locked cupboard allowing access only to designed staff and being dispensed only by designated staff.
- All medication, and in particular epi-pens, should be retained in the original packaging.

Asthma inhalers should be readily accessible at all times. It is suggested that:

- In Primary 1 to 3 inhalers should be kept in a zipped "poly pocket" with the Emergency Care flow diagram, in the pupil's classroom
- In Primary 4 to 7 inhalers will, in most cases, be kept by the pupil in their bag or in the classroom with an additional inhaler kept in a zipped "poly pocket", with the Emergency Care flow diagram, in a central, easily accessible place.

Recording

Establishments are to put in place a robust procedure for recording when medicines are received, the expiry date and where appropriate, when administered. The forms can be found in the Education Health Care Plan and Summary (Appendix 3)

Schools should also ensure that parents are informed when medication requires replacement.

Medication which is held within the school and is in date should be collected by the parent/carer at the end of the term and returned to the school on the first day of the next term.

Staff presence

While staff are acting with parental agreement and are in loco parentis, it would be desirable for a second member of staff to be present during the administration of medication both as a reassurance to staff and pupil. This person will also be able to confirm that medication has been correctly administered.

The need for privacy and reassurance should be kept in mind at all times, particularly in the case of administration of rectal diazepam.

Disposal of medicines

Staff are **not** to dispose of medicines.

- Parents/carers should be informed by the school that the medication requires to be uplifted. This will be collected by the parent/carer for disposal.
- Parents/carers must provide replacement in-date medication to the school if this is still required.

Collection and delivery of bins for disposal of needles

Sharp's bins or clinical waste bins can be provided to schools on request from the Estates Team. Arrangements will be made for delivery of bins and frequency of uplift agreed dependent on requirements and agreed protocols.

Hygiene/infection control

All staff should be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures. Where advice on infection control is required, staff should request help from the NHS Board Infection Control Nurse. Normal precautions include having access to protective disposable gloves and taking care when dealing with spillage of blood or other body fluids.

Educational excursions and after school clubs

From time-to-time pupil(s) may take part in activities out with school. These might include school trips, extra curricular activities, work placements etc. Suitable arrangements for the administration of medicines must be put in place to cover such activities so that designated trained staff have access to necessary medication. Where an after-school activity takes place within the school premises a designated person should have appropriate instruction and be given access to any medication stored in the locked location within the school.

Refusal to take medicine

Where a pupil refuses to take medication or undergo a test, school staff are not to put pressure on the pupil to take the medication or test and should contact the parent/carer if the pupil is under 12 years of age or is unable to advocate for him or herself. If parents/carers or emergency contacts are unobtainable, the pupil's GP should be contacted for advice. In urgent cases the emergency services should be contacted.

Self-management

It is good practice to allow pupils who can be trusted to manage their own medication from a relatively early age and schools should encourage this. If pupils can take their medication themselves, staff may only need to supervise. An example would be inhalers for asthma. Some children with diabetes may require to inject insulin during the school day. Appropriate facilities should be provided to allow pupils to do this in private.

Where the parent/carer is satisfied that the child is accustomed to independent selfadministration of medication, the head of establishment may agree to a written request from the parent/carer that the child be permitted to use the medication as required without permission. A suitable Self-Administration consent form is given as Appendix 3.3.

Children losing an inhaler

Where an inhaler has been mislaid or lost within the school the pupil (or member of staff) should alert the designated member of staff who should thereafter inform the parent of the need to replace this as soon as possible. In addition, every effort should be made by the school to recover this.

Nut allergies

Specific guidance on actions to take in the case of a reaction to peanut or other nut allergies is to be found in Standard Circular No APG 11 – Policy on Health Promotion - The Management of Nut Allergies in Fife Schools (2005).

Non-prescription medication

Pupils sometimes ask for painkillers (analgesics) at school such as paracetamol. School staff are not to give non-prescribed medication to children without the agreement of parents/carers. In the event of a child presenting in pain, school will contact the parent/carer immediately. Should the emergency contact not be available, school will contact the emergency services.

Buccal Midazolam, Intranasal Midazolam and Rectal Paraldehyde.

The administration of these medicines requires a measured dose individualised for each child. Staff must have attended awareness raising instruction in relation to a particular pupil. In the event of non availability of a suitably trained member of staff, alternative measures may involve:

- A request to the paediatrician to consider alternative medication
- Consideration of alternative accommodation (possible move to another educational establishment)
- Case consultation that may result in alternative emergency procedures.

The use of oxygen therapy in schools raises particular issues. It is important to enable a child to take part in education and to minimise the disruption oxygen therapy can cause. The use of oxygen should be fully covered by the health care plan.

Note: Care must be taken in the storage, handling and use of oxygen, e.g. adequate ventilation in the room in which oxygen is used is essential, as oxygen supports combustion, increasing the speed at which things burn. It is supplied in highly pressurised containers.

Appropriate instruction will be required for any member of staff taking responsibility for oxygen therapy.

Local guidelines and an individual care plan along with full safety information and instruction will be made available on request to Pharmacy Services. NHS Fife, Pentland House, Lynebank Hospital, Halbeath Road, Dunfermline KY11 4UW (Telephone 01383565341, Fax 01383 741395).

NHS Fife: School Health Service

1.0 Information for schools

1.1 Every school and early years' establishment in Fife has a named community paediatrician and school nurse or health visitor. These practitioners work in partnership to enable each school child to gain maximum benefit from education by reducing the consequences of disability through the early recognition of problems and appropriate intervention/referral or signposting.

2.0 School entry

- 2.1 When a child enters school or early years' establishment, a questionnaire is sent to the parents requesting information about the child's medical history and any concerns about the child's health or development that the parents may have. In the case of early years' establishments, the enrolment form provides the opportunity for this essential information to be shared.
- 2.2 All children are offered a review of growth by the school nurse service. Parents are offered the opportunity to discuss any problems or anxieties with the named school nurse.
- 2.3 A medical examination may be considered for selected children where problems, or potential problems, which could interfere with the ability to benefit from education, have been identified. Parents are invited to attend for the medical examination.

Pupils may be selected for referral:

- A health concern has been identified on the parental questionnaire.
- Parents have requested a medical examination.
- School staff have identified a health concern.
- A health concern is identified by the school nurse during the health review.

The child's immunisation record is checked and advice is given to parents when this is found to be incomplete.

3.0 Pre-school or P1 entry

- 3.1 Vision screening tests of visual acuity is offered to all pre-school children prior to enrolment in P1 by NHS.
- 3.2 Height and weight measurements are taken and recorded to assess the pupils growth. Following assessment of findings the school nurse service will discuss any issues identified and take necessary action.
- 3.3 Primary 1 dental check as part of national dental inspection programme. Parents will also be encouraged and assisted where necessary to register with a local NHS dentist.

4.0 Primary 7

- 4.1 A questionnaire is sent to all parents requesting update information on their child's health prior to entry to secondary schools.
- 4.2 A review of growth is offered by the school nursing service and appropriate intervention offered if required.
- 4.3 Dental checks may be carried out as part of national dental inspection programme.

5.0 Secondary S2

5.1 All girls in S2 will be offered the HPV (human Papilloma Virus) vaccine which gives some protection against cervical cancer.

6.0 Secondary S3

- 6.1 Booster vaccination against Diphtheria, Tetanus and Polio will be offered in school for those not routinely immunised by their family GP.
- 6.2 Dental checks may be carried out as part of national dental inspection programme.

7.0 At all ages

- 7.1 Any health needs identified will be managed by the relevant agency with onward referral to appropriate specialist if indicated. In line with the principles of GIRFEC senior school staff are notified when those problems are of educational significance and likely to be other than of a temporary nature after discussion with the pupil and parents/carers.
- 7.2 Referral to the Audiology Department is available at the request of pupils, parents or teachers whenever there is doubt about a pupil's hearing.
- 7.3 The community paediatrician and the school nurse are available at any time for discussion with school staff where health concerns exist about pupils.
- 7.4 Advice is always available from the school nurse, when there is anxiety about cases of infectious disease or parasitic infestation in a school, eg scabies, lice
- 7.5 Managing infectious diseases in schools document

8.0 Health promotion

- 8.1 Involvement of the school nurse service may include:
 - Supporting the head teacher to draw up the Education Health Care Plan and Summary (Appendix 3)
 - Signposting/supporting classroom teachers to deliver aspects of curriculum for excellence
 - Signposting/supporting staff to develop health initiatives identified by the school, e.g. healthy lifestyle

Appendix 1

9.0 Raising awareness for administration of emergency medicines in school

- 9.1 Some pupils may have medication prescribed for use in an emergency situation e.g. epileptic convulsion, acute allergic reaction (anaphylaxis).
- 9.2 Community paediatricians will be responsible for the Initial instruction to staff members in the administration of these medicines. Updates are offered two yearly across Fife. It is advised that schools be proactive in identifying a member of staff to receive this instruction whether or not there are pupils who, at that time, require medication.

Instruction of staff on Medication in Schools

Pupils who may require emergency medication to be administered

A half day Initial instruction for the management of Allergy, Anaphylaxis and Epilepsy is offered on a number of occasions throughout the school year. These sessions are delivered by Community Paediatricians and can be booked through CPD online. When instruction takes place a register of those present is kept and a copy sent to the CPD office and Rothesay house. A signature of attendance by the attendee is essential and this must be completed at the instruction session

Staff should update their knowledge at least every 2 years and Update sessions will be offered locally by Community Health Practitioners (school nurses). These can also be booked through CPD online. When instruction takes place a register of those present is kept and a copy sent to the CPD office. A signature of attendance by the attendee is essential and this must be completed at the instruction session

Where specific instruction is required for procedures other than those offered on the centrally held courses, this will be carried out on an individual basis with staff and the community paediatrician or specialist nurse. Such sessions should be noted by staff on their individual CPD record and a note of the specific instruction with the trainer's name, sent to Rothesay House for noting in central records.

Sessions in Special Schools are often organised for whole departments and it is essential that this information is included in CPD records. This can be done by ensuring that when instruction takes place a register of those present is kept and a copy sent to the CPD office. A member of that team will then enter the information in the records of the people named on the register.

Pupils with severe asthma

Specific instruction will be offered by the Asthma Specialist Nurses for school staff who work with pupils

Pupils with mild asthma

General awareness raising instruction for all staff may be requested from the Asthma Specialist Nurses

Pupils with diabetes

Specific instruction will be offered by the Diabetes Specialist Nurses for school staff who work with pupils and more general instruction for all staff may also be possible.

Pupils with epilepsy

General awareness raising sessions for all staff and pupil specific instruction may be requested from the Epilepsy Specialist Nurse.

Pupils with allergies

General advice for all staff may be requested from the Specialist Allergy Nurse.

Staff Instruction Record

Record of staff who have volunteered to administer emergency medication as and when required and who have attended instruction on the management of *SEVERE ALLERGIES*, *ASTHMA AND EPILEPSY*

(N.B. Staff should attend an update at least every 2 years)

NAME	Initial Attendance	Update	Update	Update	Update



Education Health Care Plan and Summary HSI2 – Appendix 3

Please enter name and date of birth of pupil here

Please enter photograph of pupil here

Please enter name of school here

Emergency Medication in Schools for Pupils

Education Health Care Plan for a	Pupil with	Medical	Needs
(Please enter details requested in shaded boxes)	-		

(Please enter details requested in shaded boxes)

_

Medical Information (Enter name of medical condition(s))

Family Contact Information (Please enter all requested details as fully as possible)					
Name of family member					
Relationship to pupil					
Contact telephone no.	Home:		Work:		
	Mobile:				

Name of family member			
Relationship to pupil			
Contact telephone no.	Home:	Work:	
	Mobile:		

NHS contact details				
Name of GP				
Telephone no.				
Surgery Name				

Name of Consultant/Spe	cialist
Name of hospital/clinic	
Telephone no.	

This plan was prepared by (please add name and designation of everyone involved in preparing this plan)				
Copies of this plan have been given to (please add name and designation of everyone who received a copy of this plan)				

Fife

Education Ser

Medication in Schools for Pupils - contd.

Name of pupil's medical condition(s) and details of pupil's individual symptoms

1. Name of medical condition

Give brief descriptions of symptoms associated with this medical condition

Name of medication taken for this medical condition

2. Name of medical condition Give brief descriptions of symptoms associated with this medical condition

Name of medication taken for this medical condition:

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

Action to be taken in an emergency (this will be the agreed procedures shown in The Summary Form)

Follow up care (add details of any after care required for this pupil)

Members of staff in school trained to administer medication for this pupil (add name and designation of staff member – also state if different staff are trained for off-site activities)

Signature of Parent or Guardian	School representative's signature			
Sign above and print name below	Sign above and print name below			
Relationship to pupil Designation				
Education Health Care Summary Prepared	Yes No Date			

FIFE COUNCIL EDUCATION HEALTH CARE PLAN SUMMARY – EXAMPLE ONLY



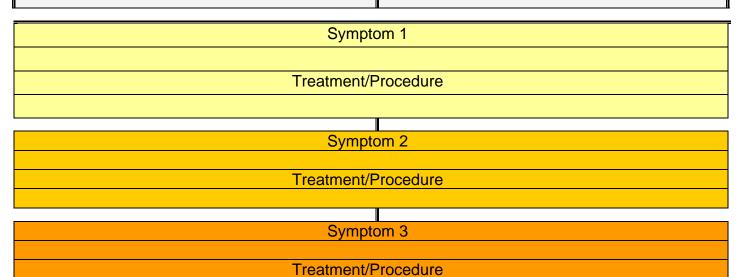
Name of Pupil:	JOHN SMITH	(Caller)				
Date of Birth: 01/08/99						
Address:	77 Anywhere Street, Kirkcaldy KY2 6SS					
In the event of		C SK				
an emergency	Mum on 01592 555555					
phone:						
Hypoglyca	DIABETES MELLITIS Hypoglycaemia is a complication of diabetes where the blood glucose levels fall too low – BELOW 4. Each child has their own signs and symptoms of Hypo.					
	Hypogel Insulin Lucozade All kept in box in cupboard in classroom					
Symptom 1						
Feeling lethargic, generally unwell						
Treatment/Procedure						
Test blood						
If reading is below 4 treatment is required						
	Symptom 2					
Treatment/Procedure						
Symptom 3						
Treatment/Procedure						
Symptom 4						
	Treatment/Procedure					

Nominated people within school:

Signatures of agreeing parties:		Parental contact details:		GP details:	
Health Professional	Nurse Jones	Name	Deborah Smith	Name:	Dr Drake
Parent/Carer	Deborah Smith	Tel:	01592 555555	Tel:	01592 222222
Headteacher	Mrs Trunchbull	Mobile:	n/a	Address.	Health Centre Anywhere
Date Completed					

FIFE COUNCIL EDUCATION HEALTH CARE PLAN SUMMARY

Name of Pupil:		
Date of Birth:		
Address:		
In the event of an emergency phone:		



Symptom 4			
Treatment/Procedure			

Nominated people within school:					
Signatures of agi	eeing parties:	Parental contact	details:	GP details:	
Health Professional		Name		Name:	
Parent/Carer		Tel:		Tel:	
Headteacher		Mobile:		Address:	
Date Completed					

	I Request ter information i The Head tead	nto the sha	ninistration ded areas)	of Medic	ation	HSI 2 Appendix 3.2
School:						1
l reques	st that my son/da	aughter is g	iven the following	medication o	r clinical test by school s	staff as indicated below:
	Name of pupil		Date of Birth	<u>(</u>	Class/Teacher	Date request made
Name of m	edical condition					
			(a) Details of me	edicine(s) and	l/or test(s)	
Nan	ne of medicine(s) or	r test(s)	<u>Dosage</u>	Time to	be administered (am/pm)	Only as required (tick)
	(b) Please indi	cate the cir	cumstances in whi	ch the medici	ne(s) or test(s) should b	be administered
<u>(c)</u>	Dose of medicir	ne(s) to be	given and means o	of administrati	on and/or technique for	undertaking the test
		<u>(d)</u> Le	ngth of time curren	it supply of m	edicine(s) will cover	
<u>Monday</u>	<u>Tuesday</u>	Wednesda	<u>y</u> <u>Thursday</u>	<u>Friday</u>		ngoing be replenished/updated regularly
	N	ame addre	ss and telephone r	number of GP	or Paediatric Consulta	at
	<u> </u>					<u></u>
Name address and telephone number of parent/carer						
					to school, and to replaces in treatment prescribe	
Signed by:			Relationship to cl	hild:		Date:

RECEIPT OF MEDICATION FOR PUPIL		
Name of medicine	Date received in school	Expiry Date
Total amount of drug received (in mls, no. of tablets or units)		

Name of school:	Signature of staff member	Countersignature of 2 nd staff member

RECEIPT OF MEDICATION FOR PUPIL		
Name of medicine	Date received in school	Expiry Date
Total amount of drug received (in mls, no. of tablets or units)		

Name of school:	Signature of staff member	Countersignature of 2 nd staff member

RECEIPT OF MEDICATION FOR PUPIL		
Name of medicine	Date received in school	Expiry Date
Total amount of drug received (in mls, no. of tablets or units)		

Name of school:	Signature of staff member	Countersignature of 2 nd staff member

RECEIPT OF MEDICATION FOR PUPIL		
Name of medicine	Date received in school	Expiry Date
Total amount of drug received (in mls, no. of tablets or units)		

Name of school:	Signature of staff member	Countersignature of 2 nd staff member

Please note that medication stored in schools will not be available outwith normal school hours.

Parents and carers must contact their GPs within normal hours for the replacement of medication outwith normal school hours and terms

Parental Request for Self-Administration of Medication					HSI 2	
To: The Head teacher				Appendix 3.3		
School:						
I wish my son/daughter, when necessary, to be permitted to take the following medicine(s) and/or perform the following clinical test(s)						
<u>N</u>	ame of pupil		Date of Birth		Class/Teacher	Date request made
Name of m	edical condition					
			(a) Details of m	edicine(s) an	d/or test(s)	
Name	of medicine(s) or te	est(s)	Dosage	Time	to be administered (am/pm)	Only as required (tick)
	(b) Please indi	cate the circu	mstances in whi	ch the medic	ine(s) or test(s) should	<u>be administered</u>
	(c) Dose of	medicine(s) t	o be given and r	means of adn	ninistration and/or other	details of test
		(d) Leng	th of time currer	nt supply of m	nedicine(s) will cover	
<u>Monday</u>						
(e) It is/It is not necessary for a member of staff to record each dose of medicine and/or each test performed						
	<u>n/daughter will c</u>	carry the abov	<u>/e medicine(s) a</u>	<u>t all times, fo</u>	<u>r taking as required. I u</u>	<u>ndertake to advise you</u>
	imme	ediately of an	y change of trea	tment prescr	ibed by my doctor or hos	<u>pital.</u>
	<u>N</u>	lame address	and telephone	number of Gl	P or Paediatric Consulta	<u>nt</u>
Name address and telephone number of parent/carer						
I undertake to deliver the medicine(s) and/or test materials personally to school, and to replace them whenever necessary. I also undertake to advise you immediately of any changes in treatment prescribed by doctor or hospital.						
Signed by:					· ·	

RECEIPT OF MEDICATION FOR PUPIL		
Name of medicine	Date received in school	Expiry Date
Total amount of drug received (in mls, no. of tablets or units)		

Name of school:	Signature of staff member	Countersignature of 2 nd staff member

RECEIPT OF MEDICATION FOR PUPIL			
Name of medicine		Date received in school	Expiry Date
Total amount of drug received (in mls, no. of tablets or units)			

Name of school:	Signature of staff member	Countersignature of 2 nd staff member

RECEIPT OF MEDICATION FOR PUPIL			
Name of medicine		Date received in school	Expiry Date
Total amount of drug received (in mls, no. of tablets or units)			

Name of school:	Signature of staff member	Countersignature of 2 nd staff member

Please note that medication stored in schools will not be available outwith normal school hours.

Parents and carers must contact their GPs within normal hours for the replacement of medication outwith normal school hours and terms

Notice to parent/carer that	t supply of medic	ation nee	ds replacing	HSI 2 Appendix 3.4		
To the parent/carer of:	To the parent/carer of: Enter name of pupil and date of birth in row below					
Supply						
The emergency medication held in sc	hool for your daughter/son r		replaced because			
<u>it is c</u>	out of date/has been used.					
Name of medication	Name of medication Dose prescribed Time(s) t			to be given		
If your son/daughter still requires th	nis medication please ensur possible.	e you send a t	further supply into so	chool as soon as		
Please make sure that this medication and indicating contents, dosage and ch	-	container in v	vhich it was dispens	ed, clearly labeled		
Please return this form with the medica	ation					
I request that th	e medication stated above		administered to:			
	(Enter name and date of birth of pupil)					
I accept full responsibility for informing	the school if my child has l school.	been given a c	lose of this medication	on before coming to		
I accept responsibility for ensuring tha the school for my child's needs. I w	•		-			
Parent's Name and address: (enter below)		Contact details:			
	8	Home				
	2	Work				
	8	<u>Mobile</u>				
		<u>E-mail</u>				
Signature of parent/guardian			Date			

Note: The school will not accept medication unless this form is completed and signed by the parent or legal carer of the child and the headteacher agrees to the administration of the medication.

RELATED CIRCULARS AND DOCUMENTS APPENDIX 4

- 1. The Administration of Medicines in Schools 2001 (Scottish Executive)
- 2. Standard Circular No APG 10 Educational Excursions
- 3. Standard Circular No HSI 6 First Aid (Appendices 5 & 5A)
- 4. Standard Circular No APG 11 Policy on Health Promotion (Appendix 8: The Management of Nut Allergies in Fife Schools)
- 5. Standard Circular HSI 9 Policy for the Management of Diabetes in Schools