**DRAFT**

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**Medication**

**Policy**

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1. **Medication Policy**
	1. This policy applies to all pupils, parents/carers and staff in De La Salle College.
2. **Introduction**
	1. The Board of Governors and Staff of De Salle College wish to ensure that pupils with medication needs receive appropriate care and support at school. As a school we believe that happy, healthy students learn and achieve best.
	2. The DE Publication: Supporting Pupils with Medication Needs (February 2008) states that ‘An inclusive education policy means that children with special educational needs, disabilities or medical needs will be educated in a variety of school settings, ranging from classes and units/learning support centres in local mainstream nursery, primary and post primary schools through to special schools. This may include children with complex medical needs, where a number of specific procedures may be required in relation to their physical health. The school’s ‘duty of care’ to pupils requires that all staff act in ‘loco parentis’ to pupils entrusted to the school and any associated school related activities.’
3. **Medical Needs**
	1. 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.
	2. Some other pupils may require medication on a long term basis to keep them well, for example children with diabetes type 1 or well controlled epilepsy and, if the medical need is not properly managed, they could be prevented from reaching their full potential. Such pupils are regarded as having medical needs.
	3. 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.
4. **Special Educational Needs**
	1. 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. Under the terms of the Education (Northern Ireland) Order 1996, a Health and Social Care authority must provide help to the Education Authority for a pupil with special educational needs, which may include medication needs, whether a child is placed in a mainstream or special school.
	2. 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 Authorities, 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.
	3. If a pupil has a Statement of Special Educational Needs, the Statement should outline the procedures, support and training required as outlined in the relevant medical advices if appropriate.
5. **Guidance for parents/carers when their child unwell**
	1. Parents/Carers are responsible for making sure that their child is well enough to attend school. A child’s own doctor is the person best able to advise whether the child is fit to be in school and it is for parents/carers to seek and obtain such advice as necessary. For further information see DE Circular 1999/17 Parental Responsibility: Guidance for Schools.

**Please note that parents/carers should keep their child(ren) at home**

 **if acutely unwell or infectious.**

1. **Guidance for pupils needing access to the medical room**
	1. When a pupil needs access to the Medical Room, he must request permission from the member of staff whose care he is currently under. This could be his form teacher, subject teacher or classroom assistant. The staff member must provide a written note to the Pupil Welfare Officer detailing:
* *Pupil’s Name*
* *Form Class*
* *Assessment of what is wrong*
* *Date & Time & Signature*
	1. This is to allow the Pupil Welfare Officer to record pupil visits to the room and to screen and prioritise appropriate care and support. The College is mindful that if an emergency develops a note will not be expected.  (See Appendix 2 for a suggested template).
1. **Guidance for staff**
	1. There may be occasions where school staff may be asked to administer medication, but they cannot be directed to do so.
	2. The administration of medication to children remains the responsibility of the parent or those with parental responsibility.
	3. Medication should only be taken to school when absolutely essential and with the agreement of the Principal.
	4. 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.
	5. Schools should be alerted to the particular risks for young persons in taking Aspirin and Ibuprofen and should not routinely administer these unless under clear medical guidance.
2. **General Principles**
	1. The Principal and school staff must treat all medical information as confidential.
	2. On the pupil’s admission to the school the parent/carer must complete an admission form giving full details of medical conditions, any regular/emergency medication required, name of GP, emergency contact numbers, details of hospital consultants, allergies, special dietary requirements and any other relevant information. This information should be renewed annually.
	3. There must be adequate arrangements for safe receipt, storage, administration and disposal of medication.
	4. There must be adequate access to, and privacy for, the use of medication.
	5. If staff have any concerns regarding the administration or storage of medication within the school then they must approach the SENCO, with this concern immediately.
3. **Responsibilities**
	1. Due to the increase in the number of pupils who have medical needs, the school has a Pupil Welfare Officer, Mr. Gerard Armstrong. His working hours are 8.45am – 3.30pm. The Pupil Welfare Officer (PWO) resides in the Medical Room beside the school office. The PWO is first aid trained and is also supported by trained First Aid Staff: Mrs Margaret McCann, Mrs Anne O’Rawe, Mrs Angela Armstrong and Ms Eimear Dolan.
	2. The Pupil Welfare Officer has a valuable role to play in providing a support service for students, whose responsibilities include overseeing medication procedures, dealing with illness, injury and emotional wellbeing. Many cases have to be dealt with confidentially and the PWO needs to determine what information needs to be acted upon personally, the speed of response and what has to be passed on to senior colleagues as well as parents. The most important thing for our pupils is their safety. We foster a culture of vigilance amongst staff, students and parents. We always listen to children and take their concerns seriously.
	3. The responsibilities of the PWO include:

**Pupil Care**

* Act as a first aider
* Care for all sick pupils and make arrangements for supervised and secure transport for sick/injured pupils to be taken home or to hospital as required.
* Ensure that pupils requiring regular medication maintain their treatment under the written advice of their medical practitioner and with the written permission of their parent/guardian.
* Inform principal/teacher and parents/guardians when medical attention is required.
* Communicate with appropriate personnel regarding welfare of pupils or concerning trends including the Key Stage Managers, Heads of Year, Form Teachers, SENCO and Designated Teacher for Child Protection and Canteen Staff.
* Inform the Key Stage 5 Manager if pupils from Saint Genevieve’s (Consortium Arrangement) become ill. (Heads of Year 13 or 14, as appropriate, will deputise in the absence of the Key Stage % Manager). They will in turn inform the appropriate personnel from Saint Genevieve’s.
* Inform parents after consultation with staff (Heads of Year/ Key Stage Manager/ Vice Principal/ SENCO) if a pupil needs to be collected from the school in an emergency due to his medical needs.

**Administration**

* Operate manual and computerised information systems (SIMS) in relation to administrative tasks associated with the area of work.
* Complete all records as required to include Completion of accident report forms following incidents.
* Oversee the implementation of Health Care Plans that are in place (for pupils with epilepsy, diabetes and anaphylaxis).

**General**

* Assist in maintaining standards of good order and cleanliness in the medical room.
* Implement medication policy and procedures and all relevant related policies.
* Participate in any relevant training as directed by the principal.
	1. The school is responsible for ensuring that all staff involved in the administration of medication are familiar with the schools medication policy and procedures and that they receive appropriate training for the tasks they undertake.
	2. When the school does agree to administer medication during the school day, parents/carers must provide a written request detailing all the appropriate information. This should be kept by the staff member/s that are responsible for administering the medication. ***Verbal instructions are not acceptable***.
	3. Schools should only agree to administer prescribed medication.
	4. Medication brought into school should be handed over by the parent/carer to a named member of staff (Pupil Welfare Officer/ First Aid Staff/ SENCO or Head of Year) unless it has been previously agreed that the pupil can carry their own medication e.g reliever inhaler.
	5. 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.
	6. Staff noticing deterioration in a pupil’s health over time should inform the Principal who should let the parents know.
	7. It is the parent’s/carer’s responsibility to provide the school with the medication required. The medication must be dispensed, in the original container and must be clearly labelled with:
* Name of pupil
* Name of medication
* Strength of medication
* How much to administer i.e. dose
* When it should be administered
* Length of treatment/stop date, where appropriate
* Any other instructions
* Expiry date (Where there is no expiry date the medication should have been dispensed within the last 3 months)

**NB: The label “To be taken as Directed” does not provide sufficient information. Precise information/instructions must be supplied.**

* 1. Liquid medication should be accompanied by a 5ml medicine spoon or oral syringe.
	2. If the medication and/or dosage needs to be changed or discontinued, the school must be informed in writing by the parent/carer.
	3. It is the parent’s/carer’s responsibility to replenish medication when required.
	4. The school should work in partnership with parents/carers to ensure that medication is still fit to use and that equipment and devices are in good working order.
	5. Parents/carers must ensure that their child understands their responsibility if they carry their own medication, for example, an inhaler for asthma. The pupil must be made aware of the dangers of misusing their medication, not taking appropriate care of their medication and the importance of having the medication with them when required.
	6. The Principal should also consider how much other children in the pupil’s class 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 himself, if appropriate. When consent is given the situation should be handled as sensitively as possible.
1. **Self Management**
	1. The age at which pupils are ready to take responsibility for the carrying of and administration of their own medication varies and an agreement should be made between the parent/carer and the school. This agreement must be documented and all relevant staff made aware of this agreement. A risk assessment must however be included in this decision including the safety of other pupils.
	2. With the exception of emergency medication e.g. Buccal Midazolam (for seizures), Controlled Drugs such as Ritalin etc, must be kept in lockable, non-portable facilities. In exceptional circumstances, where agreed, a pupil may be allowed supervised access to their own supply in order to self-medicate. This must be agreed by the SENCO and the parent/carer of the pupil. The relevant staff (Pupil Welfare Officer, First Aid Staff and Head of Year) must be made aware of this agreement.
2. **Storage of Medication**
	1. Medication, when not in use, is stored in a safe and secure locked cabinet. The medication must be accessible to the appropriate members of staff at all times.
* All emergency medications must be stored safely but must also be readily accessible at all times, i.e not locked away in a cabinet.
* Asthma ‘reliever’ inhalers must be readily accessible at all times, including prior to and during exercise. Whenever possible pupils should be responsible for their own inhalers. The need for a pupil to have access to their inhalers must override any concerns about misuse by others.
* Some medications may need to be refrigerated. An appropriate refrigerator, with restricted access, is in the Pupil Welfare Room. The medication must be placed in a closed container with the lid clearly marked “Medication”. This container must then be kept on a separate shelf in the fridge.
	1. Records must be kept of the named staff who are authorised to have access to medication.
	2. A designated person (Pupil Welfare Officer) must check the medication cabinet at least once every term, to ensure that medication has not reached its expiry date. Medication which is no longer required must be disposed of in accordance with the school policy.
1. **Administration of Medication**
	1. Staff who have agreed to administer medication must have received training appropriate to the tasks they have been asked to perform.
	2. Facilities must be available to enable staff to wash their hands before and after administering medication and to clean any equipment used after use.
	3. Ideally, medication administration should take place in the Pupil Welfare Room only.
	4. Medication must only be administered to one pupil at a time.
	5. It is expected that in normal circumstances the pupil requiring medication will be known to the member of staff administering it.
	6. Before administering medication the member of staff must check

• The pupil’s identity

• That there is written consent from a parent/carer

• That the medication name and strength and dose instructions match the details on the consent form

• That the name on the medication label is that of the pupil being given the medication

• That the medication to be given is in date

• That the pupil has not already been given the medication

* 1. If there are any concerns about giving a medication to a pupil, then the member of staff must not administer the medication but must check with the parent/carer or a health professional, documenting any action taken.
	2. Immediately after administering, or supervising the administration of medication, written records must be completed and signed. In addition attendance at the medical room will be recorded on SIMs Behaviour Management for monitoring and record keeping purposes.
	3. If a pupil refuses to take a medication they must not be forced to do so. Refusal must be documented and agreed procedures followed. Parents must be informed as soon as possible on the same day. If a refusal could result, or results in an emergency then the school’s emergency procedures/ critical incident policy must be followed.
1. **Record Keeping**
	1. See Appendices 1-9 for record keeping documentation and communication between school staff, parents and pupils.
	2. A parental consent form must be completed each time there is a request for medication to be administered. (Interpreting Services can be contacted for support with this if necessary). All relevant information must be supplied including:
* Pupil’s name
* Pupil’s date of birth
* Name, strength and quantity of medication provided.
* Clear, concise instructions for administration
* Reason for Request
* Emergency contact names and telephone numbers
* Parent/carer signature.
	1. If staff take responsibility for the administration of a medication to a pupil then a record must be kept which includes:
* The name of the pupil
* The pupil’s date of birth
* The name and strength of the medication
* Dose given
* The date and time of administration
* The person responsible for the administration
* Quantity of medication received or returned
	1. Reasons for non-administration of medication must be recorded and the parent/carer informed as soon as possible.
	2. Wasted doses, i.e. tablets dropped on floor or any liquid medication spillages must also be recorded.
	3. When a pupil is self-administering medication then there must be a written request for this which clearly states whether this needs to be supervised. If supervision is required then a record must be kept as explained above.
	4. Changes to instructions must only be accepted when received in writing from the parent/carer or healthcare professional. A fresh supply of correctly labelled medication must be supplied as soon as possible and records updated and documented.
1. **Out of School Activities/Extended School Day**
	1. If medication is required during a school trip, it should be carried by the pupil if this is the normal practice e.g. asthma inhalers. If not then the medication must be carried by a designated member of staff who is responsible for the administration of medication, or the parent/carer if they are present.
	2. For trips outside of the UK, parents/carers may need to seek advice from the pupil’s doctor or consultant on the timings of medication, especially those such as medications for epilepsy.
	3. Information on the carriage of medication especially regarding Controlled Drugs, can be obtained from the Home Office or the Embassy of the country to be visited. In addition, the airline can also provide information regarding the carriage of luggage on an aircraft.
	4. It is essential that all members of staff who have any responsibility for the pupil during the trip, are fully aware of the medical needs of the pupil and the medication they are on. They must also be aware of the procedures that must be followed should a medical emergency arise. Staff taking pupils on school trips must liaise with the SENCO and PWO to ensure medical needs are met as part of their risk assessment.
2. **Pain Relief**
	1. School staff should not give non-prescribed medication to pupils.
3. **Medical Emergencies**
	1. All staff must know who is responsible for carrying out emergency procedures in the event of an emergency.

There should be specific guidance on:

* Calling for an ambulance
* Where emergency medication is stored
* Who should administer the medication
* Who should stay with the pupil
* Supervision of other pupils nearby
* Supporting pupils who witnessed the event
	1. Emergency medication must always be readily available and must never be locked away. A copy of the pupil’s individual management plan must be kept with the medication and must include precise details of the action to be taken in an emergency.
	2. Whenever an ambulance has been called, an Incident or Accident Report form (as appropriate) must be completed.
	3. Staff who agree to administer emergency medication must have training from an appropriate medical healthcare professional which should be updated annually. Records must be kept of all training received using SIMS.
	4. Adrenaline (epinephrine) autoinjectors e.g. Epipen, are best carried by the pupil with a spare auto-injector device stored in school. There must be clear, written and up-to-date instructions kept with the medication with spare copies available for staff. Parents/carers must ensure that all relevant information regarding this medication is kept up-to-date and given to the school.
	5. New guidance, the Human Medicines (Amendment) Regulations 2017, on the use of Adrenaline Auto-Injectors (AAIs) in schools came into being on the 1st October 2017 to allow all schools in the UK to buy adrenaline auto-injector (AAI) devices without a prescription, for emergency use in children who are at risk of anaphylaxis but whose own device is not available or not working. Schools are not required to hold spare AAI(s) – this is a discretionary change enabling schools to do this if they wish. The school’s spare AAI(s) should only be used on pupils:
* Where both medical authorisation and written parental consent have been provided for the spare AAI to be used on them, and
* Whose own prescribed AAI(s) cannot be administered correctly and without delay.
	1. Pupils who have diabetes must have an emergency supply kit available at all times in the Pupil Welfare Room.
	2. If blood glucose monitoring is undertaken in school then a clean, private area with hand washing facilities must be made available. A yellow sharps box must also be available and the importance of its use must be stressed to all involved. Staff agreeing to undertake this procedure must receive the necessary training from a Diabetes Specialist Nurse. Records on such training must be kept.
	3. Pupils who are known to have asthma must have a reliever inhaler available at all times in school.
	4. If a pupil is expected of being under the influence of drugs, the PWO or First Aid Staff will be asked to make an assessment of the pupil’s current state of health and wellbeing and to provide a written assessment to the Designated Teacher for Chid Protection.
1. **Food Supplements**
	1. It is strongly advised that schools only agree to administer food supplements which have been prescribed by a GP or Consultant.

**18. Treatment of Attention Deficit Hyperactivity Disorder (ADHD)**

18.1 Methylphenidate (e.g. Ritalin, Concerta XL, Equasym) is a stimulant medication that is used for the treatment of ADHD. Methylphenidate is legally categorised as a Controlled Drug and must be kept in a locked cabinet. Only named staff will have access to Controlled Drugs. (The Pupil Welfare Officer and the school’s registered First Aiders).

18.2 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).

18.3 Misuse of a controlled drug, such as passing it to another pupil for use, is an offence. Schools should have a policy in place for dealing with drug misuse. (DE Circular 1996/16: Misuse of Drugs: Guidance for Schools)

**19. Disposal/Return of Medication**

19.1 It is the responsibility of the parent/carer to ensure that medication no longer required is returned to a pharmacy for safe disposal.

Medications should be returned to the pupil’s parents/carers:

* When the course of treatment is complete
* When labels become detached or unreadable
* When instructions are changed
* When the expiry date has been reached
* At the end of each term if necessary

19.2 At the end of each term a check of all medication storage facilities must be carried out by the Pupil Welfare Officer. Any medication which has not been returned to parents/carers and is no longer required must be returned by a designated member of staff to the local Community Pharmacy.

19.3 A written record of all returned medication must be kept.

19.4 Sharps boxes must always be collected by the appropriate authorities.

**20. Guidance on the provision of Intimate Care to pupils**

 20.1 De La Salle College currently does not have any pupil who requires support with intimate care during the school day. This policy will be revisited in the future should one of our pupils require intimate care or we enrol a pupil with intimate care needs.

20.2 The Intimate Care Policy and Guidelines Regarding Children and Safeguarding Vulnerable Groups (Northern Ireland ) Order 2007 will be adhered to.

20.3 Intimate Care can involve: Feeding/ Oral care/ Washing/ Dressing/undressing/ Toileting/ Menstrual Care/ Treatments such as enemas, suppositories, enteral feeds/ Catheter and stoma care/ Supervision of a child involved in intimate self-care.

20.4 Should a need arise in the future all staff undertaking intimate care will be given appropriate training. The child centred focused principles of intimate care dovetail our Child Protection and Safeguarding policy and indeed underline our core Lasallian ethos in the school whereby every child has the right to be safe, have personal privacy, be valued and treated with dignity and respect. They have the right to be involved and consulted in their own intimate care to the best of their abilities.

20.5 Pupils who would require regular assistance with intimate care will have an IEP which will be agreed and reviewed as required.

**21. Hygiene/Infection Control**

 21.1 All staff should be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures. Staff should 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.

**22. Monitoring and Evaluation of the Policy**

22.1 This policy will be monitored and evaluated annually by the Pupil Welfare Officer, SENCo, First Aid staff and Bursar to assess the success of the policy and its implementation and will consider changing circumstances and trends in drug use;

**Appendix 1: Sample Letter to Parents/Carers Regarding Medication**

**September 2018**

**Dear Parents and Carers of:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
I hope that you are well and have had a relaxing Summer. I particularly wanted to contact you as the following information may impact on the provision for your son’s medical needs.

I wish to remind you at the start of the year that it is the responsibility of the pupil’s parent/carer to provide the school with the medication required. The medication must be dispensed, in the original container and must be clearly labelled with:

* Name of pupil
* Name of medication
* Strength of medication
* How much to administer i.e. dose
* When it should be administered
* Length of treatment/stop date, where appropriate
* Any other instructions
* Expiry date (Where there is no expiry date the medication should have been

 dispensed within the last 3 months)

**NB: The label “To be taken as Directed” does not provide sufficient information. Precise information/instructions must be supplied.**

**It is your responsibility as the parent/carer to replenish medication when required** and to ensure that medication is still fit to use and that equipment and devices are in good working order.

Please ensure that your child understands their responsibility if they carry their own medication, for example, an inhaler for asthma. The pupil must be made aware of the dangers of misusing their medication, not taking appropriate care of their medication and the importance of having the medication with them when required.

Please note that it is the responsibility of the parent/carer to ensure that medication no longer required is returned to a pharmacy for safe disposal.

Please note that according to the College’s records your son’s medication:



* **Is Out of Date or is about to expire**
* **Needs replaced (as it has run out) prior to the school term beginning** 

The medical room in the College is located on the ground floor beside the main school office. This is the central storage location of all medication which is stored in a locked cabinet or fridge (as required). There is strict recording and monitoring procedures in place for administration of all medications. For pupils who need to self-administer insulin injections – this is where this **must** take place. There are hand washing facilities here as well. We hope that this facility continues to be comfortable and discreet provision for your son’s medical needs.

If you leave medication in to the College, please mark it clearly for my attention and ensure that the above procedures and labelling mechanisms are followed. You can contact me by phone if you have any concerns.

**Best wishes for the new school year.**

**Kind regards,**

**Mrs Orla Rodgers (SENCO)**

**Appendix 2: Sample Note from Staff when Pupil requires access to the Medical Room**

**Medical Room Note**

* **Pupil’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Form Class \_\_\_\_\_\_\_\_\_\_\_**
* **Your assessment of what is wrong:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* **Date & Time & Signature**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Appendix 3: FORM AM1 - 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**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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:

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

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

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

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Members of staff trained to administer medication for this child

(state if different for off-site activities)

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

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

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

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Follow up care

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**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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Appendix 4: FORM AM2 - REQUEST FOR A SCHOOL TO ADMINISTER MEDICATION**

The school will not give your child medicine unless you complete and sign this form, and the Principal 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 follow 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 Principal**

I agree that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of child) will receive

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (quantity and name of medicine) every day at

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (time(s) medicine to be administered eg 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 Principal/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.**

**Appendix 5: FORM AM3 - TEMPLATE FOR A REQUEST FOR PUPIL TO CARRY HIS/HER**

**MEDICATION**

This form must be completed by parents/carers

**Details of Pupil**

Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Forenames(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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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**Contact Details**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

(work) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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

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

**Agreement of Principal**

I agree that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name of child) will be allowed to carry and self-

administer his/her 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 Principal/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 his/her own medication**

**Appendix 6: FORM AM4 - Record of medicine administered to an individual child**

|  |  |
| --- | --- |
| **SURNAME** |  |
| **FORENAME(S)** |  |
| **DATE OF BIRTH** |  |
| **CLASS** |  |
| **CONDITION OF ILLNESS** |  |
| **DATE MEDICINE PROVIDED BY PARENT** |  |
| **NAME AND STRENGTH OF MEDICINE** |  |
| **QUANITY 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** |  |  |  |

**Appendix 7: FORM AM5 - RECORD OF MEDICINES ADMINISTERED TO ALL CHILDREN**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **DATE** | **CHILD’S NAME** | **TIME** | **NAME OF MEDICINES** | **DOSE GIVEN** | **ANY REACTIONS** | **SIGNATURE OF STAFF** | **PRINT NAME** |
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**Appendix 8: FORM AM6 - TEMPLATE FOR A RECORD OF MEDICAL TRAINING FOR STAFF**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of training received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name(s) of condition/ medication involved

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

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

Date training completed \_\_\_\_/\_\_\_\_/\_\_\_\_

Training provided by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I confirm that has\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ received the training detailed above

and is competent to administer the medication described.

**Trainer’s signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

I confirm that I have received the training detailed above

**Trainee’s signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

Proposed Retraining Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Refresher Training Completed:

Trainer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_/\_\_\_\_/\_\_\_\_

Trainee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_/\_\_\_\_/\_\_\_\_

**APPENDIX 9: SAMPLE CONTACT FORM - SUPPORTING PUPILS WITH MEDICAL AND**

**ASSOCIATED NEEDS WITH LOCAL CONTACT NUMBERS**

**LOCAL CONTACT NUMBERS (Please complete as appropriate for your school)**

**School: De La Salle College – 028 90508800**

Principal: Mrs Claire White

Pupil Welfare Officer: Mrs Sally Brennan

SENCO: Mrs Orla Rodgers

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

**Education Authority: Belfast Region**

APO: Ms Irene Maguire

Educational Psychology: Ms Vikki Bratten

 Health and Safety Officer: Mr Brendan O’Reilly

**Medical Services**

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

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

Local Hospital: Royal Victoria Hospital

Local GP Surgeries \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Community Paediatrician \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Health Service \_\_\_\_/\_\_\_\_/\_\_\_\_

**Bibliography**

Supporting Pupils with Medical Needs:

<https://www.education-ni.gov.uk/sites/default/files/publications/de/supporting-pupilwith-medical-needs.pdf>

HSS (MD)21/2017: GUIDANCE ON THE USE OF ADRENALINE AUTO-INJECTORS (AAIs) IN SCHOOL

The Intimate Care Policy and Guidelines Regarding Children

Safeguarding Vulnerable Groups (Northern Ireland ) Order 2007

DE Circular 1996/16: Misuse of Drugs : Guidance for Schools

DE Circular 1999/17 Parental Responsibility: Guidance for Schools

Code of Practice for the Identification and Assessment of Special Educational Needs 1998 and the supplement to the Code published in September 20052.

Education (Northern Ireland) Order 1996,