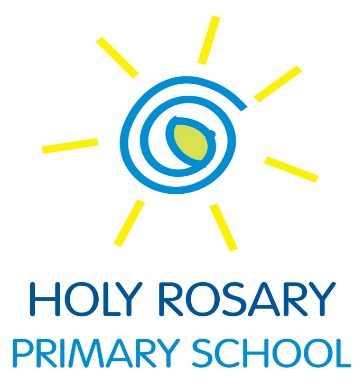
****

|  |  |
| --- | --- |
| **Reference No.** | **HR-POL-07** |
| **Version** | **3.0** |
| **Operative Date** | **October 2017** |
| **Status** | **Live** |
| **Approved by** | **Board of Management** |

**HOLY ROSARY PRIMARY SCHOOL**

**Administration of Medicines Policy**

The principles in this policy are approved by the Board of Management and therefore constitute standard practices, which apply throughout Holy Rosary Primary School.

**Signed Chairperson, Board of Management**

**Date**

This policy, along with all Holy Rosary policies, is available on the Holy Rosary website. Electronic copies of these policies are controlled and live. Holders of printed copies of the policies are responsible themselves for ensuring that they have the most up to date version.

**This is a Controlled Document, as presented on-line.**

**If you read this in printed form,**

**It is Uncontrolled.**

If the user of this document discovers any errors with the document or would like to suggest feedback to improve the document, the user should contact the Principal of Holy Rosary Primary School.

**Contents**

[1 Policy, Rational and School Ethos 3](#_Toc493164791)

[1.1 Policy 3](#_Toc493164792)

[1.2 Rational 3](#_Toc493164793)

[1.3 Relationship to School Ethos 3](#_Toc493164794)

[2 Definitions 3](#_Toc493164795)

[3 Roles and Responsibilities 3](#_Toc493164796)

[3.1 Board of Management 3](#_Toc493164797)

[3.2 The Principal 3](#_Toc493164798)

[4 In-School Procedures 4](#_Toc493164799)

[4.1 General 4](#_Toc493164800)

[4.2 Parents / Guardians 4](#_Toc493164801)

[4.3 Teachers / SNAs 5](#_Toc493164802)

[4.4 Storage of Medicines 5](#_Toc493164803)

[4.5 Procedure 5](#_Toc493164804)

[4.6 Nut Allergy 6](#_Toc493164805)

[4.7 Child comes into contact with Allergens 6](#_Toc493164806)

[4.8 Anaphylactic Shock 6](#_Toc493164807)

[4.9 Indicators of Shock 7](#_Toc493164808)

[4.10 Emergencies 7](#_Toc493164809)

[5 Success Criteria 7](#_Toc493164810)

[Appendix 1 - Medical Condition and Administration of Medicines Form 8](#_Toc493164811)

[Appendix 2 – Emergency Procedures Form 9](#_Toc493164812)

[Appendix 3 – Allergy Details Form 10](#_Toc493164813)

[Appendix 4 – Record of Administration of Medicines Form 11](#_Toc493164814)

[Briefing Note 12](#_Toc493164815)

|  |  |  |
| --- | --- | --- |
| **Version No.** | **Date** | **Comments** |
| 1.0 | 2011 | Initial Release |
| 2.0 | December 2014 | Policy reviewed |
| 3.0 | October 2017 | Policy reviewed and reformatted |

This policy was ratified by the Board of Management in October 2017. It will be reviewed in the event of incidents or on the enrolment of child/children with significant medical conditions, but no later than 2020.

# Policy, Rational and School Ethos

## Policy

### The aims and objectives of the policy can be summarised as follows:

* To clarify areas of responsibility in relation to the administration of medicine.
* To provide a framework within which medicines may be administered in cases of emergency.
* To safeguard school staff who are willing to administer medication under defined conditions.

## Rational

### This policy is the result of a review of the procedures in this area and the need to update them.

### The policy was drafted by the Health and Safety committee of the school which consulted with staff members and the relevant parent body.

## Relationship to School Ethos

### The school promotes positive home-school contacts, not only in relation to the welfare of children, but in relation to all aspects of school life.

### This policy is in keeping with the school ethos through the provision of a safe, secure and caring school environment and the furthering of positive home-school links.

# Definitions

### **BOM** – Holy Rosary Board of Management.

### **Epipen** - An Epipen is a medical device for injecting a measured dose or doses of epinephrine (adrenaline) by means of auto-injector technology.

### **Relevant Parent Body** – Parents/Guardians of children with medical needs.

### **SNA**– Special Needs Assistant.

# Roles and Responsibilities

## Board of Management

### The BOM has overall responsibility for the implementation and monitoring of the school policy on Administration of Medication.

## The Principal

### The Principal is the day to day manager of routines contained in the policy with the assistance of all staff members.

# In-School Procedures

## General

### The school generally advocates the self-administration (e.g. inhalers) of medicine under the supervision of a responsible adult, exercising the standard of care of a prudent parent.

### In an emergency situation, qualified medical assistance will be secured at the earliest opportunity and the parents contacted.

### We recommend that any child who shows signs of illness should be kept at home; requests from parents to keep their children in at lunch break are not encouraged. A child too sick to play with peers should not be in school.

### The school maintains an up to date register of contact details of all parents/guardians including emergency numbers. This is updated in September of each new school year.

## Parents / Guardians

### All parents/guardians are required to complete the “Relevant Health/Medical Information” section of the enrolment form when enrolling their children in the school.

### Parents/guardians of children with long-term health problems are responsible for making proper and clearly understood arrangements for the administration of medicines with the Board of Management.

#### This responsibility includes such measures such as self-administration, administration under parental supervision or administration by school staff (Procedures for same outlined below).

### Where a child has a medical condition and requires administration of medicine, the parent/guardian must complete a “Medical Condition & Administration of Medicines” form (Appendix 1).

### Parents/guardians of children with a medical condition must, if required, also complete an “Emergency Procedures” form (Appendix 2) detailing the symptoms and the required procedure if such an event occurs.

### Where children have a reaction to any allergens (e.g. Nuts) that require the administration of medication in an emergency, they must complete an “Allergy Details” form (Appendix 3) detailing the type of allergy, reaction level, medication to be taken etc.

### Parents should also outline clearly in writing proper procedures for children who require medication for life threatening conditions.

### Parents must also meet with the class teacher to explain the procedures for administering the medicine.

### The Board of Management requests parents to ensure that teachers be made aware of any medical condition suffered by any child in their class.

#### For example, children who are epileptics, diabetics etc. may have a seizure at any time and teachers must be made aware of symptoms in order to ensure that treatment may be given by appropriate persons.

### Parents are responsible for the provision of medication.

### If there is a change to any aspect of the child’s medication or administration there of (e.g. type of medication or dosage), this change must be given in writing. Verbal instructions will not be accepted.

### Parents are also asked to supply two recent photos of their child for staff identification.

### Where possible, the parents should arrange for the administration of prescribed medicines outside of school hours.

## Teachers / SNAs

### Teachers have a professional duty to safeguard the health and safety of pupils, both when they are authorised to be on the school premises and when they are engaged in authorised school activities elsewhere.

#### Where a child has a medical condition, it does not imply a duty upon teachers personally to undertake the administration of medicines or drugs. No teacher/SNA can be required to administer medicine or drugs to a pupil.

### A teacher/SNA must not administer any medication without the specific authorisation of the Board of Management.

### Teachers/SNAs in the school will only administer prescribed medication when arrangements have been put in place as outlined in the procedure below.

### The prescribed medicine should be self-administered, if possible, under the supervision of an authorised Teacher/SNA if not the parent.

## Storage of Medicines

### In general no medicines are stored in classrooms. However a small quantity of prescription drugs may be stored in the Administration Office if a child requires self-administering on a daily basis and parents have requested storage facilities.

### Arrangements for the storage of certain emergency medicines, which must be readily accessible at all times, will be made with the Principal.

### It is not recommended that children keep medication in bags, coats, etc.

### Non-prescribed medicines will neither be stored nor administered to pupils in school.

## Procedure

### This procedure describes the process to be followed for parents/guardian who wish to have prescribed medicine administered to their child by a staff member.

### The parents/guardians of the pupil concerned should write to the Board of Management requesting the Board of Management to authorise a member of the staff to administer the medication.

#### The request should also contain a completed “Medical Condition & Administration of Medicines” form (Appendix 1), giving written instructions of the procedure to be followed in administering the medication.

#### As part of the form, the Board of Management will seek an indemnity from the parents/guardians in respect of any liability that may arise regarding the administration of the medication.

### The Board of Management will inform the school's insurers accordingly.

#### When all the above are in place the Board of Management, having considered the matter, may authorise a teacher/staff member to administer medication to a pupil.

### All staff who are willing to administer medication will be provided with appropriate training in the administration of the particular medication prior to being authorised to do so.

#### A Teacher/SNA should not administer medication without the specific authorisation of the Board or having not been trained to do so.

#### In administering medication to pupils, staff should exercise the standard of care of a reasonable and prudent parent.

### It is the parent's responsibility to ensure there is an adequate supply of medicine in the school and that it is in date.

### Arrangements will be made by the Principal for the safe storage of medication.

### When the prescribed medicine is administered, by the child if possible, under the supervision of an authorised Teacher/SNA, a “Record of Administration of Medicines” form (Appendix 4) must be completed.

### In the event of the absence of authorised personnel parents/guardians will be informed that there are no trained personnel who are authorised to do so on a particular day.

## Nut Allergy

### The following guidelines are in place with regard to pupils with a Nut Allergy.

#### If a child has a nut allergy, a note will be sent home to his/her class informing parents that there is a nut-allergy case and asking them not to bring nuts or any item with nut traces to school.

#### Advise children not to offer or exchange foods, sweets, lunches etc.

#### If going off-site, medication must be carried.

## Child comes into contact with Allergens

### In the event the pupil comes in contact with nuts or other allergens:

#### Administer 5ml Zirtec/Sudafed or other antihistamine as prescribed immediately.

#### It is important that the pupil be kept calm to allow him to breathe calmly as he will experience discomfort and sensation of his/her throat swelling.

#### If possible he/she needs to drink as much water as possible.

### These steps should allow him/her to recover fully.

## Anaphylactic Shock

### Only in the event of anaphylactic shock should an Epipen be administered.

### Anaphylaxis occurs when two or more systems are affected, e.g. Swollen/red/runny eyes and swollen mouth/swelling of mouth and rash on skin.

### The Epipen is stored in the main office. It is essential to note that different pens have different dosages; the required dosage must be clearly marked on the Pen.

### If a child needs two Epipens, both should be stored together with an elastic band.

### Before or immediately after the Epipen has been administered, an ambulance must be called.

## Indicators of Shock

### Symptoms of shock can include, wheezing, severe difficulty breathing and gastrointestinal symptoms such as abdominal pain, cramps, vomiting and diarrhoea.

## Emergencies

### In the event of an emergency, teachers should do no more than is necessary and appropriate to relieve extreme distress or prevent further and otherwise irreparable harm.

### Qualified medical treatment will be secured in emergencies at the earliest opportunity. It is school policy to call an ambulance for any person who has a seizure on school premises.

### Where no qualified medical treatment is available, and circumstances warrant immediate medical attention, designated staff members may take a child into Accident and Emergency without delay. Parents will be contacted simultaneously.

# Success Criteria

### The effectiveness of the school policy in its present form is measured by the following criteria;

* Compliance with Health and Safety legislation.
* Maintaining a safe and caring environment for children.
* Positive feedback from parents/teachers.
* Ensuring the primary responsibility for administering medication remains with parents/guardians.

Appendix 1 - Medical Condition and Administration of Medicines Form

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contacts

1) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Doctor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical Condition:

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

Prescription Details:

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

Storage details:

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

Dosage required:

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

Is the child to be responsible for taking the prescription him/herself?

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

What Action is required?

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

I/We request that the Board of Management authorise the taking of Prescription Medicine during the school day as it is absolutely necessary for the continued wellbeing of my/our child. I/We understand that the school has no facilities for the safe storage of prescription medicines and that the prescribed amounts be brought in daily. I/We understand that we must inform the school/Teacher of any changes of medicine/dose in writing and that we must inform the Teacher each year of the prescription/medical condition. I/We understand that no school personnel have any medical training and we indemnify the Board from any liability that may arise from the administration of the medication.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Appendix 2 – Emergency Procedures Form

In the event of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ displaying any symptoms of his/her medical difficulty, the following procedures should be followed.

Symptoms: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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

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

Procedure:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dial 112 or 999 to call emergency services.

Contact Parents

1) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Appendix 3 – Allergy Details Form

Type of Allergy: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reaction Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medication: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Storage details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dosage required: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administration Procedure (When, Why, How)

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

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

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

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

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

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

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

Appendix 4 – Record of Administration of Medicines Form

Pupil’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical Condition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medication: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dosage Administered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administration Details

(When, Why, How)

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

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

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

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

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

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

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

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

Briefing Note

|  |  |
| --- | --- |
| **Purpose:**  This policy is published by the Board of Management of Holy Rosary Primary School to outline the process within which medicines may be administered to children within the school. | **Scope:**  This policy relates to staff and parents and children of Holy Rosary school only. |
| **What’s New / What’s Changed & Why?**  This policy was reviewed and reformatted and issued as version 3.0. | |
| **Target Audience:**  Parents/Guardians of Children with medical conditions.  Holy Rosary staff involved in the supervision/administering of medication to children. | |
| **Note:**  Advise target audience to read thoroughly any sections that affect them directly.  Be more specific and expand on sections as appropriate for the audience.  Encourage feedback. If any feedback, Briefer should forward details to the Principal. | |