Medicines in school

The administration of medicines must remain the responsibility of the child's parents but academy staff will help with the supervision of certain medicines in accordance with the Academy's medicines policy. We cannot take responsibility for giving medicines which are for the treatment of serious conditions without a medical health care plan in place. If you would like us to help with the administration of medicines please complete the form and discuss the matter with a member of staff.

Child's Name		
Date of birth		
Class		
Name of Medicine		
Condition that is being treated		
Duration of treatment (e.g. One week, indefinite)		
Dosage & method		
Time to give medicine		
Are there any possible side affects we		
need to know about?		
Procedure to take in an emergency		
Please note: Academy staff will try to ensure the circumstances may arise when it may be overlow in the control of medicing school staff cannot be held legally responsible	ooked. nes remains a parenta	al responsibility and that
Signed	(P	arent) Date
To be completed by Headteacher/Admin Staf	f	
I agree that the above medication will be admi parental request. The child will be supervised I medicine.		
Signed	Date	Head/Admin