

BROMLEY HEATH JUNIOR SCHOOL

ADMINISTRATION OF MEDICATION – FORM OF CONSENT/INDEMNITY

Parents/guardians are advised that, unless you complete and sign this form the school will not administer medication to your child. The Headteacher and staff must still agree to administer medication as this is a purely voluntary act on their part.

DETAILS OF PUPIL

Surname _____ Forename(s) _____

Date of Birth _____ Class _____

CONDITION OR ILLNESS

Type of Condition or Illness _____

Name & Type of Medication _____
(as described on container)

How long will your child require the medication? _____
(ongoing or specific time span)

FULL DIRECTIONS ON USE

Dosage & Method

Timing

Special Precautions

I understand that I must personally deliver the medicine to Head/Secretary/Class Teacher and accept that this is a voluntary service provided by the school.

Signature of Parent/Guardian _____ Date _____

Bromley Heath Junior School

Policy - Issue of Administration of Medicine

The following notes refer specifically to Bromley Heath Junior School:

- Administration to alleviate the effects of a non-serious illness is at the discretion of the Headteacher.
- In the above cases the parent would be required to sign a consent/indemnity form before medicine would be administered.
- All medicines to be clearly labelled with the child's name, dosage etc and kept in the office.
- Wherever possible, children will be encouraged to self-administer their own prescribed medication under supervision, but help will be given if requested.
- Help, including accessing the medication and the opening of bottles will not be refused.
- The child is responsible for requesting the administration of his/her medicine at the correct time.