



**THE FROEBELIAN SCHOOL**  
**Administration of Medicines Policy**

The provisions in this document apply to all aspects of the school including the EYFS, Breakfast Club, Little Acorns, Homework and Activities Club, Summer Holiday Club, school trips and extra-curricular activities.

This policy should be read in conjunction with the following policies:

- First Aid
- Sick Children

The Froebelian School is committed to safeguarding and promoting the welfare of all its pupils. We believe all staff and visitors have an important and unique role to play in child protection. The Froebelian School recognises its legal and professional duty to work with other agencies in protecting pupils from harm and responding to abuse.

The provisions in this document apply to all aspects of the school including EYFS, Breakfast Club, Little Acorns, Homework and Activities Club, Summer Holiday Club, school trips and extra-curricular activities.

**Administration of Medicines to Children**

The school is willing to administer medicines to children during the school day, subject to the following protocol:

- a) Medicine to be administered should be handed into the School Office and the appropriate Form Teacher or Teaching Assistant informed. In the case of a school trip, please hand medication to the Teacher in charge, by a Parent/Carer. It should be clearly labelled with the child's name and the dose to be administered.
- b) Medicine will be stored in the School Office or, if necessary, refrigerated.
- c) Medicine will normally be administered by staff in the School Office, but all staff will be aware of the protocol and are prepared to administer medicines.
- c) A Parent/Carer will be asked to sign a Consent Form when they deliver the medicine.
- d) This Consent Form will also be signed by the member of staff administering the medicine, to confirm that it has been administered.
- e) At the end of the school day, the Parent/Carer should collect the medicine from the School Office (if the child is going home at 3.30pm), from the Homework & Activities Club Supervisor, or from the person in charge of the extra-curricular activity their child is attending.
- f) At the time of collection, the Parent/Carer will be asked to sign the Consent Form to acknowledge that a dose has been given.
  - If collected from the School Office, the original of the Consent Form will be handed to the Parent/Carer and a copy kept by the Office.
  - If collected after 3.30 pm the form will be kept, handed to the School Office the following morning for copying, and the original will be sent home at the end of the following day.

g) With regard to proprietary medicines, e.g. Calpol, Paracetamol; if a parent confirms by telephone/e-mail or other means that they are happy for the School to administer a proprietary medicine, the parent will be required to call at the School Office at the end of that day to sign a Consent Form.

d) If a child needs 3 doses of medicine each day, these could be administered as follows:-

First dose	before school
Second dose	as soon as possible at the end of the school day*
Third dose	bed-time

\*If the child is attending an extra-curricular activity or HAC after school, the second dose might need to be given in school.

e) If a child needs 4 doses of medicine each day, these could be administered as follows:-


First dose	before school
Second dose	start of lunch-time
Third dose*	as soon as possible at the end of the school day
Fourth dose	bed-time

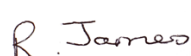
If the child is attending an extra-curricular activity or HAC after school, the third dose (in addition to the second) might need to be given in school.

This policy is reviewed regularly by the Headteacher, in consultation with the governing body, in the light of experience, research and good practice.

Policy Date: October 2018

Policy Review Date: October 2021

Signed (Headteacher): 

Signed (Chair of Governors): 

**ADMINISTRATION OF MEDICINES TO CHILDREN**

I confirm having read and understood the school’s protocol in relation to the administration of medicines and agree to give permission for the administration of proprietary medicines (e.g. Calpol/Paracetamol). The school will make every effort to contact the parents before administering a proprietary medicine.

Child’s  
Name.....Signed.....(Parent)

**FROEBELIAN SCHOOL**

**MEDICINE ADMINISTRATION FORM**

**Name of Child**.....

**Form**.....

Date:	
Medication:	
Dosage:	
Time:	
Parent/Carer’s Signature giving permission for dosage to be given:	
Staff Signature to confirm dosage has been given:	
Parent/Carer’s Signature to acknowledge that dosage has been given.	