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Statement

The aim of this policy is to promote safe and healthy practice for pupils requiring medication, in school. This will be done by ensuring that all medication is delivered and stored safely, administered correctly and that all relevant documentation and records are completed and kept updated.

This school ensures that the whole school environment is inclusive for pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

- This school is committed to providing a physical environment accessible to pupils with medical
 conditions and pupils are consulted to ensure this accessibility. This school is also committed to an
 accessible environment for out of school activities.
- This school makes sure the needs of pupils with medical conditions are adequately considered to
 ensure their involvement in structured and unstructured activities, including extended school
 activities.
- All staff are aware of the potential social problems that pupils with medical conditions may
 experience and use this knowledge, alongside the school's anti-bullying policy, to help prevent and
 deal with any problems. They use opportunities, such as PSHE and science lessons, to raise
 awareness of medical conditions to help promote a positive environment.
- This school understands the importance of all pupils taking part in physical activity and that all
 relevant staff make appropriate adjustments to physical activity sessions to make sure they are
 accessible to all pupils.
- This school understands that relevant staff are aware that pupils should not be forced to take part in
 activities if they are unwell. They should also be aware of pupils who have been advised to avoid /
 take special precautions during activity, and the potential triggers for a pupil's condition when
 exercising and how to minimise these.
- This school makes sure that pupils have the appropriate medication / equipment / food available during physical activity.
- This school makes sure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.
- All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition. This school will not penalise pupils for their attendance if their absence relates to their medical condition. Following absence, reintegration back into school will be properly supported with the appropriate advice from medical professionals and parents so pupils with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Medical risk assessments to be updated as necessary. Short term absences, including those for medical appointments are effectively managed.
- This school makes sure that a risk assessment is carried out before any out of school educational visit. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.
- This school is aware of the common triggers that can make medical conditions worse or can bring on an emergency. This school is actively working towards reducing or eliminating health and safety risks through sharing of medical risk assessments and pupil profile documents.
- This school is committed to identifying and reducing triggers both at school and on out of school

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visits. This is through work with the appropriate medical professional, parents and carers and through thorough risk assessments.

• This school reviews all medical emergencies and incidents to see how they could be avoided, and changes school policy according to these reviews.

Responsibilities

The Local School Board

The Local School Board ensure that the school adhere to all healthy and safety legislation and guidance in regard to administering and storing medication.

Headteacher

The headteacher is responsible for ensuring that procedures for administering medication are understood and adhered to. The headteacher will ensure that training is provided where necessary. The headteacher is responsible for ensuring that there is effective communications and consultation with parents/carers, pupils and health professionals concerning the pupils' medical needs. This school ensures the policy is applied across the curriculum and includes when pupils are out on day trips, offsite lessons and residential trips.

Senior Leaders

Senior leaders will;

- Ensure that there are a sufficient level of trained staff members working with identified pupils with specific medical needs
- Conduct medication checks to confirm that all pupils have received their required medication
- Ensure that appropriate adaptations are made to support pupils with medical conditions in accessing a full and balanced curriculum
- Liaise with medical professionals to ensure that the most up to date documentation regarding a pupil's medical need is distributed to relevant staff within the school

Safeguarding Team

The safeguarding team will;

- Quality assure the medication procedures via weekly spot checks of two pupil's medication to
 ensure that all staff are adhering to the policy and that all medication stored in school is in date and
 administered in line with the policy
- Quality assure the medication procedures to ensure that all staff are adhering to the policy and that every pupil's medication stored in school is in date and administered in line with the policy

Administration Team

An identified administrator at each site will;

- Ensure that all medication is signed in and out of the school building by nominated staff
- Ensure that all medication is promptly stored in the locked medication cabinet, locked emergency
 medication cabinet or locked medication fridge, in line with the medication's storage recruitments.
 (No medication or equipment to be stored elsewhere)
- Key to locked cabinet to be kept in correct place. No one person to have ownership of said key but in a location where access can be monitored
- Maintain all medication records in line with the policy
- Ensure that all medication is in date and that expired medication is returned home to parents/carers for disposal
- Inform the members of staff, relevant to the pupil, about any changes to medication requirements

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Teaching staff

It is the duty of all teaching staff to:

- Ensure they facilitate pupils receiving their medication at the required time as stated on their prescription label and/or parent and carer consent form
- Ensure that all class staff are aware of the pupils with medication requirements and what those requirements are
- Ensure that all class staff understand their roles and responsibilities regarding the administration of medication

TA staff

It is the duty of all TA staff to:

 Ensure they facilitate pupils receiving their medication at the required time as stated on their prescription label and/or parent and carer consent form

Medication in School

Handing medication to taxis and parents/carers

All medication being brought into/leaving the school is not to be handled by pupils

- Medication being brought into school via taxi/car must be handed to the designated staff member with the medical bag by the taxi/PA /parent/carer
- Medication being sent home from school must be handed to the taxi/PA/parent/carer by designated staff member
- Medication will be handed to the taxi and or the parents/carers directly

Signing In and Out

All medication must be signed in by two staff members when it is brought on to the school site. The signing in process includes recording:

- The pupil's name who's the medication it is
- The type of medication
- That the medication is in date
- The date the medication was bought in to school
- The total amount of the medication at the time of signing in i.e. number of tablets, number of pieces of equipment
- The signatures of the two staff members signing the medication into school.

All medication will be signed out of school, following the same recording as above, each time the medication is taken off site. (this process also refers to pupils leaving/returning to site following a trip or event). Medication will remain in the original packaging at all times when in the responsibility of school. Pupil's medication is taken off site in every instance that the pupil leaves site for a school activity.

Parent/carer must provide signed parent/carer consent to administer medication form (see appendix 2) in order for medication to be administered by staff during the school day. Where this document is shared electronically, by completing the forms and adding their name a parent/carer is giving consent for medication to be administered by staff during the school day. Medication cannot be provided to any child by staff members without signed consent by parent/carer. Consequently, any changes to the dose of medication must be provided to the school in writing with signed, or electronic confirmation, from parent/carer (or doctor if appropriate) before school can administer the changed dose. In the event of medication being prescribed to a child, medication can only be administered in line with the instructions on

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the prescription label i.e at the time stated on the prescribed label. If the prescription label states an ambiguous time such as before lunch, the time that the medication will be administered will be agreed with parent/carer.

Daily quality assurance of medication:

Daily quality assurance:

The administration of medication needs to be quality assured daily. This requires two staff members (one must be SLT) to check that medication has been administered correctly. (see appendix 5 for the quality assurance forms)

The procedure is as follows:

- Designated staff member to ask member of SLT to choose two pupils at random
- SLT to be shown medication plan for identified pupil and to check that appropriate medication was given at the appropriate times.
- SLT to sign QA sheet
- QA sheets to be kept in a QA medical folder in the medical area.

Weekly quality assurance:

To add an additional layer to the quality assurance process, the medication is then checked on a weekly basis. The procedure for this is as follows:

• Medication spot checks are conducted weekly by two members one of which is a member of the safeguarding team at both sites.

Termly quality assurance:

Two members of the safeguarding team and or SLT also complete a full medication check of all
pupils at both sites, in terms three and six.

The school will not accept items of medication in unlabelled containers.

Storage of Medication

All medication will be stored in a secure medication cabinet located in the central reception area of school. The key to this medication cabinet is stored in a secure key fob and is only accessible by staff. A secure fridge is located in the central reception to store medication that requires refrigeration. The key to this fridge is stored in a secure key fob and is only accessible by staff. Keys must always be kept in the allocated place. No one person should have control of said keys.

All medication is:

- · stored in the original packaging
- clearly labelled with the pupil's name

Out of date medication will be returned to parent/carer and replacements requested-

All pupils are made aware of where their medication is stored and are informed of how this medication can be accessed and administered.

Medication Record Keeping

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All pupils with daily and emergency medication have a specific colour coded (orange for daily, red for emergency) folder consisting of;

- Parent/carer consent to administer medication form
- Individual Health Care Plan (IHCP) for pupils that have one provided by a health care professional
- Medication signing in and out record
- Daily medication record/Emergency medication record
- Emergency contact information
- Record of pupil's school medication for pupils that have more than one medication in school
- Medical correspondence
- Archiving of old records these are placed in the pupil folder in the appropriate place, from most recent date order

The routine and emergency medication folders are stored in reception and only removed from reception in the event of a pupil leaving site in the care of school staff such as a day trip or off-site lesson.

All pupils with occasional medication such as temporary pain relief will have their records stored alphabetically in a central location in a green folder consisting of (for each pupil);

- Parent/carer consent to administer medication form
- · Medication signing in and out record
- · Occasional medication record
- Archiving of old records these will be scanned and uploaded into the Health Document List on the MIS termly, three times per academic year (once scanned the physical documents will be destroyed).

The occasional medication folder is stored and required to remain in reception.

There are instances when pupils are required to bring medication into school but not require medication to be administered during the school day. Such medication may be in the event of a pupil requiring a specific medication for transport and/or pupils that need to take medication with them to a respite provider. In the event of such medication being brought into school, this medication will be signed in and out via the transport and respite medication signing in and out form and stored in the transport and respite medication blue folder.

The transport and respite medication folder is stored and required to remain in reception.

Administering Medication

Designated staff who have been trained in administration of medication should ensure that they are confident in the administration of a medication with any pupil that requires it; if they are not confident, they should seek advice from the SLT. The process of administering medication is as below:

- a) Medication is administered by one designated staff member and overseen and co-signed by a second staff member
- b) The staff member giving out medication is required to check all details and ensure that the seconder is double checking the below points:
 - 1. Correct name of the child
 - 2. Correct medication and within medication expiry date
 - 3. Correct dosage and correct formulation e.g. in liquid or tablet form
 - 4. Correct route of medication e.g. orally
 - 5. Correct time of medication e.g. 12:00pm
 - 6. Correct documentation completed and co-signed by second staff member

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- 7. Reason for the medication
- 8. Correct response following the medication
- c) Medication must only be administered to one pupil at a time
- d) Medication can only be administered in line with the prescription label, or in the instance of medication being non-prescribed the medication must be administered as signed and stated by parent/carer via the parent/carer consent to administer medication form
- e) Record the total amount of medication that has been carried over from the previous administration or when signed into school
- f) Record the time the medication was administered
- g) Staff members will observe that the pupil has consumed their medication to seek confirmation, as reasonably possible, that this has been consumed
- h) Record the total amount of medication that is left after administration
- i) Sign to confirm that the stated medication was administered and consumed by the pupil
- j) In the event of a pupil refusing their medication a member of SLT must be informed. A telephone call must be made to parent/carer to inform them of this and seek necessary next steps, who makes the call will be decided by the SLT member. Staff will note that medication was refused on the pupil's medication daily record.
- k) All staff should be familiar with normal procedures for avoiding infection and follow basic hygiene procedures. Staff have access to protective clothing and suitable disposal equipment to safely deal with spillages of blood or other bodily fluids, including the change of dressings.
- l) Risk assessments or procedures required for school trips or other school activities outside the normal school timetable will be undertaken to ensure the pupil can participate.
- m) Medication is not to be administered in the classroom, unless with prior agreement with SLT.
- n) Where possible when administrating any medication, staff should avoid touching the medicines. Tablets should be placed into cups/folded paper/pupil's hand and then given to the pupil. Liquids should be administered straight into the syringe/spoon and given directly to the pupil. If staff are unsure if they will touch medication, they need to wear gloves.

Epilepsy, Seizures and Emergency Medication

- All pupils who have emergency medication to support the management of their epilepsy and seizures, such as Buccal Midazolam or Rectal Paraldehyde, must have an epilepsy treatment plan, completed, and signed by either the GP or consultant and parent/carer.
- Buccal Midazolam and Rectal Paraldehyde will both be stored in the locked medication cabinet located in the central reception area.
- The Buccal Midazolam will be taken to the pupil as soon as a seizure commences, in preparation to administer if the seizure continues for five minutes, (or a prolonged period of time, depending on the pupil's care plan).
- Staff working directly with pupils who have the administration of Buccal Midazolam and Rectal Paraldehyde on their care plan must have epilepsy training and Buccal Midazolam and/or Rectal Paraldehyde training. These staff members **are the only ones authorised to administer the medication**. In the absence of trained staff, the school should follow the normal medical emergency procedure dial 999. If no Buccal Midazolam is available, or it is out of date, the pupil can be in school but if seizures occur 999 must be rung immediately. Parent/carer must be informed of this.

Seizures and the emergency services: An ambulance will be called in the event of pupils:

- with the diagnosis of epilepsy
- is known to have seizures

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- for any seizure continuing for five minutes
- if the pupil's presentation is concerning
- if they have had repeated seizures for less than five minutes for a sustained period of time.

In the event that a pupil who is not known to have seizures or who does not have a diagnosis of epilepsy, has a seizure an ambulance will be called regardless of the duration of the seizure. Parent/carer will be called immediately after a telephone call to the emergency services has been made.

Seizure Reporting

Any seizures that occur at school, need to be reported on the appropriate form (see appendix 6: Seizure Record Form).

Upon completing the form, it needs to be uploaded to the Health Document List section on the schools' MIS Following a seizure, staff need to complete the medical event tab in the Health Background section of the pupil in the school's MIS.

Trained Staff for Specialist Medical Treatment

There are specific medical conditions and equipment that require specialist training such as diabetes, tracheostomy, epilepsy, anaphylaxis and pupils requiring oxygen. If a pupil has or develops a diagnosis that requires specialist treatment, the school will liaise with the relevant health care teams and organise training for identified staff members working with that pupil. The trained staff members can only provide the level of treatment for which they have been trained to do so in line with the pupil's treatment plan. The school will ensure that there are an adequate number of staff trained and that this training remains current and up to date through close and frequent liaison with the pupil's specialist health care team.

First Aid

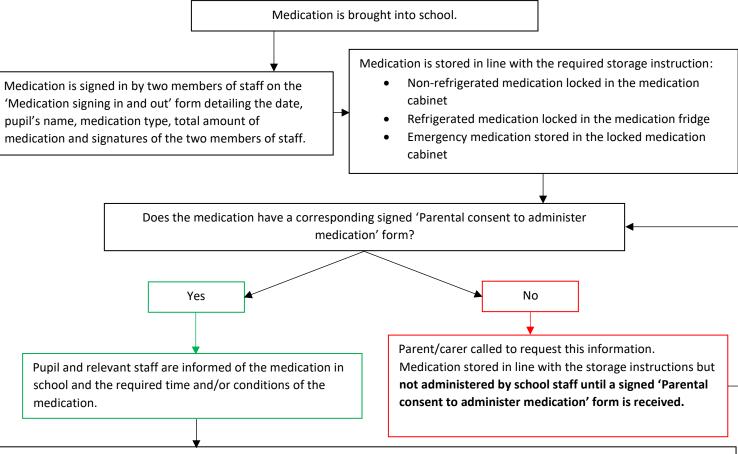
First aid boxes are located throughout school and staff are trained in the administration of first aid. When off site, an identified member of staff with first aid training will be present with the group. If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent/carer arrives.

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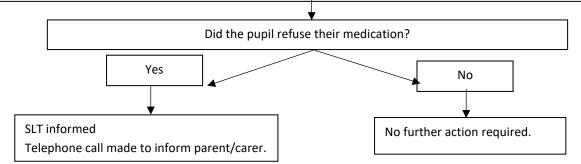




Appendix 1: Administration of Medication in School Process



- 1. Pupil is bought to the medication hatch by a member of staff at the time the medication is required. (Emergency medication is taken to the safe location of the pupil if required)
- 2.
- 3. The medication is retrieved from the locked medication cabinet/fridge.
- 4. **Two staff members** confirm the following, the correct name of the child, correct medication, correct dosage, correct route of medication e.g. orally, correct time of medication e.g. 12:00pm, correct formulation e.g. in liquid or tablet form, medication expiry date.
- 5. The time of administration and total amount of medication, **before** administration, is recorded on the daily medication record form.
- 6. The time of administration and total amount of medication, **after** administration, is recorded on the daily medication record form.
- 7. The required dose of medication is confirmed by both staff members and provided/administered to the pupil.
- 8. Both members of staff observe and confirm, as reasonably possible, that the medication has been consumed.
- 9. The remaining total of medication is recorded.
- 10. Both members of staff sign to confirm that the medication has been consumed.
- 11. The medication is returned to the required locked storage (cabinet or fridge).



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Appendix 2: Procedure for receiving/dispatching medication

Start of the day:

Medication arrives at the setting and is given to the staff member with the medical bag by the PA/taxi/parent/carer. All medication is placed into the medical bag.

Ambergate: one medical bag at walkers' gate, one medical bag at taxi entrance

Sandon: Staff on duty with medical bag

Signing in medication

Staff member responsible for collecting of all medication takes the bag to appropriate area, for medication to be checked into school (see page 3/appendix 1)

End of the day:

All medication placed into the appropriate medical bag(s) (Ambergate – walkers' gate/taxi entrance, Sandon, staff on duty) following two staff members signing medication out. Staff responsible for distribution of medication to collect the bag from appropriate area at the end of the day. It is the responsibility of the PA/taxi and parent/carer (walkers' door) to collect the medication from the identified staff member.

Ambergate: one rucksack at walkers' gate, one rucksack at taxi entrance

Sandon: PA/taxi will collect medication from the staff member on duty with medical bag

Daily quality assurance of daily medication:

The administration of medication needs to be quality assured daily. This requires for two staff members (one must be SLT) check that medication has been administered correctly. The procedure is as follows:

- Staff member to ask member of SLT to choose two pupils at random
- SLT to be shown medication plan for identified pupils and to check that appropriate medication was given at the appropriate times.
- SLT to sign QA sheet
- QA sheets to be kept in a QA medical folder in the medical area.

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Appendix 3: Parental Consent to Administer Medication form

Parental Consent to Administer Medication

Medication can only be administered to your child in school if the below information is completed with signed consent.

<u> </u>	
	Child's Information
Pupil's school	Grantham Additional Needs Fellowship
Pupil's name	
Pupil's class	
Pupil's date of birth	
Pupil's address	
Medical diagnosis/condition	
Give details of pupil's symptoms,	
triggers, signs, treatments,	
facilities, equipment or devices, environmental issues etc.	
environmental issues etc.	Medication Information
	Wedication information
Name and strength of medication	
Expiry date of medication	
Dose to be given (As stated on the prescription label if prescribed)	
When to be given (As stated on the prescription label if	
prescribed)	
If the time to be administered is	
ambiguous (i.e after lunch) parent/carer must specify a time	
Specific storage requirements i.e.	
refrigerated	
5	<u>I</u>

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Knc	own medication side effects			
me chil	scribe what an emergency dical situation looks for your ld, and what action needs to taken			
	dication review date			
	E	mergency Contact Info	rmation	
	time phone number of parent adult contact			
Nar	me and phone number of GP			
the of i	e above information is, to the beasent to school staff administeric school immediately, in writing, f the medication is stopped. ent/Carer Name ent/Carer Signature	ng medication in accord	ance with the school's policy.	I will inform
Dat	re			
can (e: Medication must be in the or only be administered at the time: Where this consent form is she giving consent for medication to School Admin Purposes Only Staff Member receiving Medication	ared electronically, by cook be administered by sta	the prescription label. ompleting the form and addin	

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Appendix 4: Trained Members of Staff to Administer Medication

Please refer to GANF training matrix

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Appendix 4: Medical support signs to be placed in the medical area

8 Rights of a Pupil

When administering medicine, the following needs to be adhered to.

• Right Pupil

Check the name of the pupil Second person must confirm the name of the pupil Pupil to identify themselves (where possible)

Right Medication

Check the label of the medication
Check medication is in date
Check if the correct form (tablet, liquid)
Check medication against paperwork/care plan
Second person must confirm right medication

Right Dose

Check the amount of medication to be given
Check dosage against paperwork/care plan
Second person must confirm the dosage of the medication

• Right Route

Check the route required for the medication
Check route against paperwork/care plan
Second person must confirm the route of the medication
Check that the pupil can take the medication via identified route

Right Time

Check label of medication to confirm that this is the correct time

Check when the last dose was (where possible to ensure enough time between doses)

Second person must confirm that this is the correct time of the medication

Right documentation

Check correct paperwork/care plan
Write time, dosage, how much medication is left on paperwork (pupil's folder)
Second person must check and sign paperwork
(all completed paperwork needs to be filed at the back of the pupil's folder – date from most recent)

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• Right Reason

Check you know why pupil is receiving the medication Second person to check why pupil is receiving the medication

Right Response

Pupil to be monitored and any concerns highlighted to SLT

If in doubt stop!

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What to do if a pupil refuses to take their medication

- Report immediately to SLT
- Note that medication was refused on the pupil's medication daily record.

SLT:

Decide who will contact parent/carer/guardian Call 111, if necessary, to seek next steps.

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What to do if there is an error with medication

Child has been given the incorrect medication

Report error immediately – to SLT Record accurately on CPOMS (as soon as possible following the error)

SLT in charge of medication to:

Decide who will contact parent/carer- always

Decide who will contact doctor

Decide who will contact 111

If necessary

Medication has been found

Report immediately – to SLT Record accurately on CPOMS

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Pupils who have epilepsy or need the administration of Buccal Midazolam and/or Rectal Paraldehyde

- Only trained staff can administer the above medication
- In the absence of trained staff, the normal medical emergency procedure must be followed school is to call 999.
- The administration of epilepsy medication must have an epilepsy treatment plan, completed and signed by GP, consultant and parent/carer.
- Buccal Midazolam and Rectal Paraldehyde is stored in the locked medication cabinet located in the central reception area.
- Buccal Midazolam will be taken to the pupil as soon as a seizure commences in preparation to administer please refer to individual care plan.
- If there is no buccal medication available, or is out of date, the pupil may remain in school but 999 must be called immediately if a seizure occurs.
- Parents must be informed.

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Seizures and the emergency services

An ambulance will be called:

- In the event of a pupil having a seizure that continues for five minutes or more
- In the event of a pupil having a seizure and Buccal Midazolam administered
- A pupil's presentation is concerning
- A pupil is having repeated seizures over a sustained period of time

In the event that a pupil, who is not known to have seizures or who does not have a diagnosis of epilepsy, has a seizure an ambulance will be called regardless of the duration of the seizure.

Parent/carer will be called immediately after a telephone call to the emergency services has been made.

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Checking medication in and out of school

Checking medication in/out of the school can be at the start/end of the day or can be for a trip. No matter when the medication is being checked in/out, the process remains the same.

Signing in/out of school

This must always be completed and signed by **two staff members**All of the following must be recorded on the correct pupil paperwork

Pupil's name

Date medication was brought into school

Type of medication

Amount of medication (number of tablets, needles, pieces of equipment etc)

All medication must be kept in the original packaging at all times

Signing medication out of the school will follow the above process – this relates to the end of the school day and trips.

Pupil folders

Pupil folders are not to be removed from school

For any pupil going on a trip, the staff member must remove the pupil's daily medication log **only** and place this into the blue clipboards

These clipboards must always be kept with staff, in the class medical rucksacks, along with the pupil medication

(All daily medication logs must be returned to pupil folders immediately returning to site.)

Class Rucksack

Each class has their own rucksack

This rucksack is the only rucksack to be used when a class is leaving site for medication

Medication and pupil daily medication log must be kept in the rucksack at all times and remain in the care of trained staff at all times

Occasional medication

Pupils with occasional medication must have records stored alphabetically in a central Occasional Medication (green ring binder folder) consisting of (for each pupil);

Parent/carer consent to administer medication form

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Medication Signing in and Out record Occasional Medication Record Archiving of old records

The occasional medication folder is stored and required to remain in reception.

Medication brought into school not to be administered

Medication brought into school not to be administered during school time must still follow the above sign in/out process

This must be signed in/out via the transport and respite medication form (lime green folder)

This folder is kept and must remain at reception

• Handing medication to taxis and parents/carers

Medication will be handed to the taxi and or the parents/carers directly

• In date

All medication must be in date
If medication is not in date, it must be reported immediately to SLT in charge of
medication

SLT will

Decide who will contact home

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Appendix 5: Quality Assurance Emergency log form

SLT daily check Any gaps? Pupil medication checked (two indiss) Time of check Signature	Emergency Medications	Medication	Dosage	Time	Monday	Tuesday	Wednesday	Thursday	Friday	
SLT dally check Pupil medication checked (throi ningle)										
SLT daily check Any gaps? Pupil medication checked (two inits) Irme of check Signature										
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Any gaps? Pupil medication checked (two initials) Time of check Signature			SLT	daily check						
Pupil medication checked (two initials) Time of check Signature				Any gaps?						
Time of check Signature		Pupil	medication checked	(two initials)						
Signature			I	ime of check						
				Signature						

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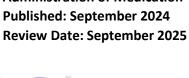




Occasional Medications	Medication	Dosage	Time	Monday	Tuesday	Wednesday	Thursday	Friday
		,						
SLT daily check								









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Weekly medication Log:

Checks:	Correct? Notes	Notes	Actions	Dates Actions Completed
Any gaps to date				
Signed by staff				
Counter signed by staff				
Daily check by SLT				

Medication spot check:

Student Initials:

Medication currently held in school

Emergency		Daily	Occasional	Notes /actions
Checks:	Correct? Notes	Notes	Actions	Dates Actions Completed
Correct medication				

Checks: Correct medication	Correct? Notes	Notes	Actions	Dates Actions Completed
Correct amount				
Correctly stored				
Meds in date?				



Review Date: September 2025





Appendix 6: Seizure Record Form

Seizure Record Form	GRANTI FELLOWSHIP (Sandon and		TIONAL NEED e Campus)	S		
CAMPUS: Sandon / Ambergate (p			, , ,			
PART A: Details of person (pupil, employee or other)						
Full Name: Date of birth (if pupil):						
Job title (if employee)						
Status: (Please tick applicable box	x)					
Employee		School pupil				
Employee of another organisation. Agency staff	1	Other (please	e specify)			
Please provide additional details if relevant (e.g. contact details of supply agency or employing organisation)						
PART B: Description of seiz	ure (keep it clear	and factua	al)			
<u> </u>			Where did it happe	en:		
What was the person doing when t			, 55	ude type of seizure		
What treatment did the person receive? (please include timings and specific treatments for the pupil e.g.						
VNS magnet, rescue medication)						
Did you call 999? (if yes, please state time of call and time of arrival)						
Were there any injuries as a result	of the seizure?					
Injury details and treatment (e.g sustained":	j. First Aid given, m	edical assist	tance, hospital vis	sit) or record "None		
Were SLT informed of the seizure?	? (please give details i	ncluding time	e)			

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Were parents informed of the seizure? (please give details inclu	iding time)	
Witnesses: (if colleagues, please state name and job titles)		
Signature of Person completing form:	Date:	