



Parent and Staff Agreement for College to administer medication

Name of student:

Student's date of birth: Group/class/form:

Health condition:

Medical information:

Medication name/type (as described on the container):

Expiry date:

Dosage and method:

Times to be given:

Special precautions:

Side effects/Missed medication risks:

Self-administration: Yes No

Emergency procedures:

GP/health professional information

Name:

Daytime telephone:

Parent/caregiver information

Name:

Address:

Daytime telephone:

Work telephone:

Mobile:.....

Relationship to child:



AGREEMENT

ST JOHN'S COLLEGE

I (SENCO / Principal) understand that a designated staff member will deliver the medication personally to at the agreed time, and at the dosage noted above.

The student is assessed, by both the College and their parent/caregiver, as being able to take responsibility for coming to the College Office to receive this medication. The College may try, **but cannot guarantee**, that it will locate the student if he does not present at the agreed time.

This arrangement will continue until End Date OR

until instructed by parents/caregivers.

Signature (SENCO/principal):

Date:

PARENT/CAREGIVER

I understand and agree:

- a) that I must notify the College of any changes in writing;
- b) That the College may administer medication at the dosage and times noted above;
- c) That my son / student is able and willing to take responsibility for going to the Office at the regular time in order to take his medication;
- d) That the College may try, but does not guarantee, that it will locate my son / student if he fails to appear for his medication;
- e) That a missed or late dosage does not result in a severe or emergency reaction;
- f) That I will take responsibility for arranging replacement medication as necessary and before it expires.

Signature (Parent/Caregiver):

Date:



COLLEGE PROCEDURES FOR PROVISION/SUPERVISION OF STUDENT MEDICATION

1. SUPERVISED DELIVERY OF MEDICATION

- a) The College will have a Medication Agreement in place which clearly details the medication dosage and timing, health condition and other relevant medical information.
- b) The College will securely store student medication.
- c) Students will present to the College Office at an agreed time to receive and take their medication. This Agreement relies on the parent/caregiver assessing that the student is able and willing to take personal responsibility for regularly presenting for their medication.
- d) The College will keep a daily record of medication taken.
- e) The College Office is a very busy environment. The College does not commit to noticing that a student has failed to present for their regular medication.
- f) The College will, if it becomes aware of a missed dosage, endeavour to locate the student and administer the medication as soon as possible **but it does not guarantee** this will happen.
- g) The College will notify the parent/caregiver of a missed or late dose only as soon as it becomes aware of the omission. (Late dose means beyond a time range as indicated by the parent/caregiver)
- h) This method of supervised administering of medication is not suitable if late or omitted medication causes a severe or emergency reaction.**
- i) Parents/caregivers must take responsibility for recording consumption and expiry dates on medication provided to the College. It is the parent/caregivers' responsibility to send replacement medication prior to medication running out or expiring.

2. STORAGE OF EMERGENCY MEDICATION

- a) The College will securely store student emergency medication.
- b) The College will have an agreed Care Plan in place to guide its response to an emergency event for that student. This information will be accessible to all teaching staff.
- c) Parents/caregivers must take responsibility for recording consumption and expiry dates on medication provided to the College. It is the parent/caregivers' responsibility to send replacement medication prior to medication running out or expiring.