

Administration of Medicines Policy Our Lady of the Wayside NS



Introduction

This policy deals with the administration of medicines to pupils and the supervised self-administration by pupils of medicine, both in the school and off the school premises on school-related activities.

The Board of Management has a duty to safeguard the health and safety of pupils when authorised to be on school premises or engaged in authorised school activities elsewhere. However, this does not impose a duty on teachers or administrative staff of the school to undertake personally the administration of medicines to pupils.

The Board of Management is committed to fostering a school environment that is welcoming and inclusive to all pupils, including those pupils who may have a chronic condition or may be temporarily ill. The Board of Management recognises that pupils may require to be administered medication or to self-administer medication under supervision during the school day. This may involve:

1. Pupils who require regular or ongoing medical treatment such as children with additional needs or children with a chronic condition
2. Emergency treatment of a child with a chronic condition
3. A pupil who is finishing a short course of prescribed medication for an occasional illness.

Pupils who require regular or ongoing medical treatment.

The Board of Management understands that some pupils may have chronic conditions such as **asthma, diabetes, epilepsy or anaphylaxis**, which may be serious and can be potentially life threatening if not effectively managed.

Parents are requested to ensure that the school is made aware of any medical conditions which their child may have at the time of enrolment or at the time of the onset of a particular medical condition. Parents/guardians are responsible for ensuring that the school is kept up to date regarding any medical conditions which their child may have at the time of enrolment or develop subsequently. Parents/guardians are also responsible for ensuring that the school has up to date contact details, including details of at least one alternative emergency contact person.

Where Possible a child's GP or other treating doctor should arrange for the administration of prescribed medicines outside of school hours. If this is not possible, then it should be established if the **parents/guardians could come to the school to administer the prescribed medication or supervise the self-administration of same.**

If this is not possible, the following procedure must be followed by parents who want their children to be administered medication by a member of the school staff during the school day or to self-administer medication under supervision of a member of school staff.

Parents/guardians should be aware that medication, other than emergency medication, will not be administered for the first time at school or on the school premises or on school related activities.

The Steps in the process are set out below.

STEP 1: Parent makes request in writing for approval or authorisation

Parents/guardians who wish members of staff to administer medicine to their child or to supervise self-administration by the child of medicine should write to the Board of Management requesting the Board of Management to authorise staff member(s) to administer the prescribed medicine or to supervise self administration by the child of medication, as the case may be. Non prescribed medicine will not be administered unless directed by the child's treating doctor in written instructions.

This letter of request should be accompanied by:

- A completed and signed Medical Information Form as set out in Appendix 1 of this policy.
- Written instructions from a doctor, preferably typed, setting out clearly the procedure to be followed in the administration of the medication. These instructions should contain:
 - The full name of the Student
 - The name of the medication to be administered
 - The expected duration of the course of medication
 - The exact dosage to be administered and the frequency of dosage
 - Specific instructions regarding the method of administration
 - Whether the child should be responsible for his/her medication if the child is self-administering the medication under supervision
 - Storage requirements
 - Any other essential information
- A signed Administration of Medicines Indemnity Form See Appendix 2

STEP 2: Consideration by the Board of Management

The Board of Management will consider all requests by parents/guardians to authorise staff to administer medicine to their child or to supervise self-administration of medicine provided that parents/guardians submit the required documentation. Parents/guardians may be requested to provide additional information or to attend a meeting at the Board of Management to assist the Board of Management in making its decision.

Parents/guardians must confirm their consent in the Medical Information Form for the disclosure of sensitive personal information relating to the child to appropriate staff members.

In the Event that the child has been prescribed medication for emergency purposes, Parents/guardians must confirm their consent for the administration of such medication by staff members.

The Board of Management may authorise staff members to administer prescribed medication to a pupil in accordance with the doctor's instructions or to supervise the self-administration of medication by a pupil. However, no staff member can be compelled to administer prescription medicines to a pupil.

The Board of Management may request the guardian/parent to organise a demonstration of the administration of the prescribed medicine by a medical professional or the Board may organise training of staff in the administration of the prescribed medicine.

Where the Board of Management approves the request, it will inform the school's insurers.

Emergency treatment of a child with a chronic condition.

Where a child with a chronic condition which may require emergency medication or emergency treatment, it is essential that the school is fully informed regarding the pupils condition.

Parents must complete STEPS 1 and 2 above.

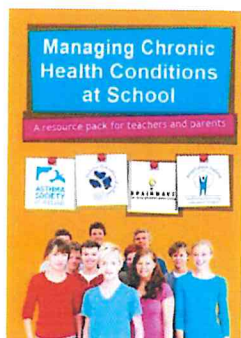
STEP 3 – In addition to STEPS 1 and 2, parents must attend an **EMERGENCY PLAN MEETING** with the school principal and the other school staff and provide specific information regarding their child’s condition and, in particular the circumstances in which emergency medication may be required to be administered.

This information should be recorded in an **EMERGENCY PLAN**, which should be signed by the parents/guardians and the Principal.

The Emergency Plan should specify signs and symptoms of an attack, seizure or episode; the dosage of emergency medication to be administered in the case of an emergency and set out any further guidelines in relation to the emergency treatment of the pupil.

Staff members should be trained in best practice in the management of the condition and the administration of emergency medication.

The Emergency plan should be brought to the attention of all staff members who have responsibility for the child with a chronic condition, including substitute teachers and SNA's.




The below EMERGENCY PLAN TEMPLATES below are samples sourced from the publication *'Managing Chronic Health Conditions at School'*.

EMERGENCY PLANS WILL BE LAMINATED AND ADDED TO EMERGENCY GREEN BOX AND SHOULD BE WITH THE CHILD AT ALL TIMES.

A copy should be attached to the child's Medical information page and a full copy of all medical details should be added to Aladdin.

[illegible]



Sample Asthma Emergency Plan


THE FIVE MINUTE RULE contains the recommended steps to follow if a child has an asthma attack.

Student's Name _____

Class _____

Family Contact _____

Schedule in the School _____



Common signs of an asthma attack

- Coughing or wheezing or raspy or hoarse
- Shortness of breath or trouble breathing
- Rapid breathing or fast or shallow breaths
- Excessive fatigue or tiredness
- Increased use of inhaler or rescue inhaler
- Increased use of oral or steroid inhaler
- Increased use of oral or steroid inhaler
- Increased use of oral or steroid inhaler

Important things to remember in an asthma attack

EMERGENCY PROCEDURE

THE FIVE MINUTE RULE

Do:

1. Recognize the signs and symptoms of an asthma attack and respond accordingly.
2. Call the school nurse or the doctor.
3. Follow the instructions of the school nurse or the doctor.
4. Follow the instructions of the school nurse or the doctor.
5. Follow the instructions of the school nurse or the doctor.

If there is no immediate improvement:

1. Continue to use the inhaler as directed by the school nurse or the doctor.
2. Call the school nurse or the doctor.
3. Follow the instructions of the school nurse or the doctor.
4. Follow the instructions of the school nurse or the doctor.
5. Follow the instructions of the school nurse or the doctor.

Call an ambulance or a doctor immediately if:

1. The student is unable to breathe or speak.
2. The student is unable to breathe or speak.
3. The student is unable to breathe or speak.
4. The student is unable to breathe or speak.
5. The student is unable to breathe or speak.

Ensure the student continues to take one puff of the inhaler every minute until the ambulance or doctor arrives.

Sample Epilepsy Emergency Plan

First aid for seizures is quite simple and can help prevent a student from being harmed by a seizure.

Student's Name _____

Type of Seizure _____

Class _____

Family Contact _____

Siblings in the School _____

PLEASE NOTE: THAT YOUR STUDENTS MAY BE PRESCRIBED AN EPILEPSY MEDICATION AND PLEASE REFER TO THEIR HEALTH CARE PLAN FOR DETAILS

TONE-CLONIC SEIZURES

1. Move the child
2. Lay the child on their side (unless there are obvious neck or back injury)
3. Loosen any clothing
4. Do not restrain the child
5. Do not put anything in the child's mouth
6. Do not try to stop the seizure
7. Call for help if necessary

DO NOT

1. Restrain the student
2. Put anything in the mouth
3. Lay the child on their back
4. Lay the child on their stomach

STUDENTS WHO HAVE ALTHOUGH 2 CONSECUTIVE OR BEHAVIORAL

DO

1. Lay the child on their side
2. Loosen any clothing
3. Call for help

DO NOT

1. Restrain the student
2. Put anything in the mouth

★ First Aid for Seizure

THE FIRST AID WILL DEPEND ON THE INDIVIDUAL STUDENT'S SEIZURE TYPE AND THE TYPE OF SEIZURE THEY ARE HAVING.

Some general guidance is given on this page. This is a sample plan and please refer to the appropriate plan for each student but most of all, it is important to keep calm and know where to find help.

When to call an ambulance - dial 112 or 999

- If the seizure lasts longer than 5 minutes
- If the seizure is the first seizure
- If the seizure is followed by a second seizure
- If the seizure is followed by a third seizure
- If the seizure is followed by a fourth seizure
- If the seizure is followed by a fifth seizure
- If the seizure is followed by a sixth seizure
- If the seizure is followed by a seventh seizure
- If the seizure is followed by an eighth seizure
- If the seizure is followed by a ninth seizure
- If the seizure is followed by a tenth seizure
- If the seizure is followed by an eleventh seizure
- If the seizure is followed by a twelfth seizure
- If the seizure is followed by a thirteenth seizure
- If the seizure is followed by a fourteenth seizure
- If the seizure is followed by a fifteenth seizure
- If the seizure is followed by a sixteenth seizure
- If the seizure is followed by a seventeenth seizure
- If the seizure is followed by an eighteenth seizure
- If the seizure is followed by a nineteenth seizure
- If the seizure is followed by a twentieth seizure
- If the seizure is followed by a twenty-first seizure
- If the seizure is followed by a twenty-second seizure
- If the seizure is followed by a twenty-third seizure
- If the seizure is followed by a twenty-fourth seizure
- If the seizure is followed by a twenty-fifth seizure
- If the seizure is followed by a twenty-sixth seizure
- If the seizure is followed by a twenty-seventh seizure
- If the seizure is followed by a twenty-eighth seizure
- If the seizure is followed by a twenty-ninth seizure
- If the seizure is followed by a thirtieth seizure
- If the seizure is followed by a thirty-first seizure
- If the seizure is followed by a thirty-second seizure
- If the seizure is followed by a thirty-third seizure
- If the seizure is followed by a thirty-fourth seizure
- If the seizure is followed by a thirty-fifth seizure
- If the seizure is followed by a thirty-sixth seizure
- If the seizure is followed by a thirty-seventh seizure
- If the seizure is followed by a thirty-eighth seizure
- If the seizure is followed by a thirty-ninth seizure
- If the seizure is followed by a fortieth seizure
- If the seizure is followed by a forty-first seizure
- If the seizure is followed by a forty-second seizure
- If the seizure is followed by a forty-third seizure
- If the seizure is followed by a forty-fourth seizure
- If the seizure is followed by a forty-fifth seizure
- If the seizure is followed by a forty-sixth seizure
- If the seizure is followed by a forty-seventh seizure
- If the seizure is followed by a forty-eighth seizure
- If the seizure is followed by a forty-ninth seizure
- If the seizure is followed by a fiftieth seizure
- If the seizure is followed by a fifty-first seizure
- If the seizure is followed by a fifty-second seizure
- If the seizure is followed by a fifty-third seizure
- If the seizure is followed by a fifty-fourth seizure
- If the seizure is followed by a fifty-fifth seizure
- If the seizure is followed by a fifty-sixth seizure
- If the seizure is followed by a fifty-seventh seizure
- If the seizure is followed by a fifty-eighth seizure
- If the seizure is followed by a fifty-ninth seizure
- If the seizure is followed by a sixtieth seizure
- If the seizure is followed by a sixty-first seizure
- If the seizure is followed by a sixty-second seizure
- If the seizure is followed by a sixty-third seizure
- If the seizure is followed by a sixty-fourth seizure
- If the seizure is followed by a sixty-fifth seizure
- If the seizure is followed by a sixty-sixth seizure
- If the seizure is followed by a sixty-seventh seizure
- If the seizure is followed by a sixty-eighth seizure
- If the seizure is followed by a sixty-ninth seizure
- If the seizure is followed by a seventieth seizure
- If the seizure is followed by a seventy-first seizure
- If the seizure is followed by a seventy-second seizure
- If the seizure is followed by a seventy-third seizure
- If the seizure is followed by a seventy-fourth seizure
- If the seizure is followed by a seventy-fifth seizure
- If the seizure is followed by a seventy-sixth seizure
- If the seizure is followed by a seventy-seventh seizure
- If the seizure is followed by a seventy-eighth seizure
- If the seizure is followed by a seventy-ninth seizure
- If the seizure is followed by an eightieth seizure
- If the seizure is followed by an eighty-first seizure
- If the seizure is followed by an eighty-second seizure
- If the seizure is followed by an eighty-third seizure
- If the seizure is followed by an eighty-fourth seizure
- If the seizure is followed by an eighty-fifth seizure
- If the seizure is followed by an eighty-sixth seizure
- If the seizure is followed by an eighty-seventh seizure
- If the seizure is followed by an eighty-eighth seizure
- If the seizure is followed by an eighty-ninth seizure
- If the seizure is followed by a ninetieth seizure
- If the seizure is followed by a ninety-first seizure
- If the seizure is followed by a ninety-second seizure
- If the seizure is followed by a ninety-third seizure
- If the seizure is followed by a ninety-fourth seizure
- If the seizure is followed by a ninety-fifth seizure
- If the seizure is followed by a ninety-sixth seizure
- If the seizure is followed by a ninety-seventh seizure
- If the seizure is followed by a ninety-eighth seizure
- If the seizure is followed by a ninety-ninth seizure
- If the seizure is followed by a hundredth seizure
- If the seizure is followed by a hundred-first seizure
- If the seizure is followed by a hundred-second seizure
- If the seizure is followed by a hundred-third seizure
- If the seizure is followed by a hundred-fourth seizure
- If the seizure is followed by a hundred-fifth seizure
- If the seizure is followed by a hundred-sixth seizure
- If the seizure is followed by a hundred-seventh seizure
- If the seizure is followed by a hundred-eighth seizure
- If the seizure is followed by a hundred-ninth seizure
- If the seizure is followed by a hundred-tenth seizure
- If the seizure is followed by a hundred-eleventh seizure
- If the seizure is followed by a hundred-twelfth seizure
- If the seizure is followed by a hundred-thirteenth seizure
- If the seizure is followed by a hundred-fourteenth seizure
- If the seizure is followed by a hundred-fifteenth seizure
- If the seizure is followed by a hundred-sixteenth seizure
- If the seizure is followed by a hundred-seventeenth seizure
- If the seizure is followed by a hundred-eighteenth seizure
- If the seizure is followed by a hundred-nineteenth seizure
- If the seizure is followed by a hundred-twentieth seizure
- If the seizure is followed by a hundred-twenty-first seizure
- If the seizure is followed by a hundred-twenty-second seizure
- If the seizure is followed by a hundred-twenty-third seizure
- If the seizure is followed by a hundred-twenty-fourth seizure
- If the seizure is followed by a hundred-twenty-fifth seizure
- If the seizure is followed by a hundred-twenty-sixth seizure
- If the seizure is followed by a hundred-twenty-seventh seizure
- If the seizure is followed by a hundred-twenty-eighth seizure
- If the seizure is followed by a hundred-twenty-ninth seizure
- If the seizure is followed by a hundred-thirtieth seizure
- If the seizure is followed by a hundred-thirty-first seizure
- If the seizure is followed by a hundred-thirty-second seizure
- If the seizure is followed by a hundred-thirty-third seizure
- If the seizure is followed by a hundred-thirty-fourth seizure
- If the seizure is followed by a hundred-thirty-fifth seizure
- If the seizure is followed by a hundred-thirty-sixth seizure
- If the seizure is followed by a hundred-thirty-seventh seizure
- If the seizure is followed by a hundred-thirty-eighth seizure
- If the seizure is followed by a hundred-thirty-ninth seizure
- If the seizure is followed by a hundred-thirtieth seizure
- If the seizure is followed by a hundred-thirty-first seizure
- If the seizure is followed by a hundred-thirty-second seizure
- If the seizure is followed by a hundred-thirty-third seizure
- If the seizure is followed by a hundred-thirty-fourth seizure
- If the seizure is followed by a hundred-thirty-fifth seizure
- If the seizure is followed by a hundred-thirty-sixth seizure
- If the seizure is followed by a hundred-thirty-seventh seizure
- If the seizure is followed by a hundred-thirty-eighth seizure
- If the seizure is followed by a hundred-thirty-ninth seizure
- If the seizure is followed by a hundred-thirtieth seizure
- If the seizure is followed by a hundred-thirty-first seizure
- If the seizure is followed by a hundred-thirty-second seizure
- If the seizure is followed by a hundred-thirty-third seizure
- If the seizure is followed by a hundred-thirty-fourth seizure
- If the seizure is followed

The image shows three sample emergency plan forms. The first is a 'Sample Anaphylaxis Emergency Plan' for 'WHEN USING ANAPEN'. It includes fields for student name, class, family contact, and school contact. It lists symptoms of mild to moderate allergic reaction and actions for mild to moderate reaction. It also includes a section for 'ANAPHYLAXIS SEVERE ALLERGIC REACTION' with a list of symptoms and actions. The second is a 'Sample Diabetes Emergency Plan' which includes fields for student name, class, family contact, and school contact. It contains information about hypoglycaemia and hyperglycaemia, including symptoms and treatment steps. The third is a 'Diabetes Emergency Plan (Cont...)' which includes sections for 'TREATMENT OF A MODERATE HYPO', 'TREATMENT OF A SEVERE HYPO', and 'HYPERGLYCAEMIA: High Blood Glucose'. It also includes a section for 'Emergency Plan For Diabetic Ketoacidosis' and 'CALL EMERGENCY SERVICES'.

Supply and Storage of Medication

Non-prescribed medication will not be held by the school or administered by staff unless on the written instructions of the child's doctor.

Parents/guardians are responsible for the provision of the medication and ensuring that it is in date. The school will only store medication in its original packaging.

Parents/guardians should hand the medication to a nominated staff member and it should never be left in the child's school bag.

An exception may be made in the case of an inhalator for pupils from 3rd class onwards if a parent requests that it remains in child's bag/pocket etc. For younger children, inhalators will be stored in GREEN EMERGENCY BOXES.

Medication will be stored in a secure but accessible area. Please note, if an EMERGENCY PLAN is in place, green storage box will be used (see image below).



If an EMERGENCY PLAN is in place, that plan and associated medications must be stored in a GREEN EMERGENCY BOX labelled with the child's details and photograph.

These boxes are brought with the child to all locations on school premises and school based outings.

They are to be stored on the wall inside the classroom door so they are readily available in the event of substitution etc.



Junior Infants to 2nd Class – Inhalators are stored in GREEN EMERGENCY BOXES along with an EMERGENCY PLAN.

3rd to 6th Class – A child may be permitted to store their inhalator in their bag/pocket etc. if parent explicitly requests it in writing.

It remains the responsibility of the parent to ensure the child brings it to/from school every day.

Parents/guardians are responsible for the disposal of out of date medication and must supply and dispose of sharps boxes if required.

Administration of Medicine

Any member of staff who administers prescribed medicines should only do so in accordance with the instructions of the child's doctor and any guidelines supplied by the parents/guardians. Every reasonable precaution must be taken on the part of the member of staff to discharge the responsibility correctly.

In administering medication to pupils, staff should exercise the standard of care of a reasonable and prudent parent

The name and dose of medication being administered will be checked by a second staff member and a written record of the time and date of administration will be co-signed and kept on the child's file in accordance with the record of Administration of Medication Form, which is at [Appendix 3](#).

Staff will take all reasonable steps to administer medicine to the child or encourage the child to self administer medicine under supervision. However, staff will not force a child to take medicine in circumstances where the child refuses to take medication, other than in an emergency situation. In the event that a child refuses to take medicine, parents/guardians will be notified at the earliest opportunity and this will be recorded on the Record of Administration of Medication Form

Changes and Updates

Parents/Guardians are required to renew the request for the administration of medication at the beginning of each school year and to complete Appendix 1 again. Parents/Guardians are responsible for notifying the school of any changes to the emergency contact details or information concerning any medical condition/allergy which their child may have.

A pupil who is finishing a short course of treatment for an occasional illness

As a general rule, children who are sick and clearly unwell should not be in school. However, it may arise that a child who has been absent from school due to ill health may have made sufficient recovery to return to school but still require to finish a short term course of medicine

It is preferable if a parent/guardian or other family member attend at the school for the purposes of administering the medication or supervising the self-administration of same. However, where this is not possible, guardians/parents should follow the procedures set out below.

Where the course of treatment is short, it may not be practicable for a request to be considered by the board of management. In the case of short courses of treatment, the principal will deal with requests for administration of medication or the supervised self-administration of medication.

Formal Request to Principal

Where Parents/guardians are unable to attend at the school in order to administer the medication themselves, the parent/guardian should contact the Principal to make a formal request for the administration or supervised self-administration of medication. Parents/guardians should be aware, however, that teachers have no contractual duty to administer medication in such circumstances and cannot be compelled to do so by the Principal or Board of Management. A principal will only consider such a request where:

1. The Request in writing
2. The request is accompanied by a written instruction from a doctor, preferably typed, setting out clearly the procedure to be followed in the administration of the medication. These instructions should contain:
 - The full name of the Student
 - The name of the medication to be administered

- The expected duration of the course of medication
- The exact dosage to be administered and the frequency of dosage
- Specific instructions regarding the method of administration
- Whether the child should be responsible for his/her medication if the child is self-administering the medication under supervision
- Storage requirements
- Any other essential information

3. The letter from the doctor must also certify the child as being fit to return to school.

4. A consent form must also be completed by the parent/guardian. This is included at [Appendix 3](#)

Where the principal or other staff member agrees to administer or supervise the self-administration of medicine, this will be confirmed to the parent/guardian in writing. In that case, the medicine should be hand delivered to the principal of the appropriate staff member; it should not be left in the child's school bag. No other medicine will be administered to the child.

In administering medication to pupils, staff should exercise the standard of care of a reasonable and prudent parent.

The name and dose of medication being administered will be checked by a second staff member and a written record of the time and date of administration will be co-signed and kept on the child's file in accordance with the Record of Administration of Medication Form, which is Appendix 2.

Staff will take all reasonable steps to administer medicine to the child or encourage the child to self-administer medicine under supervision. In the event that the child refuses to allow medication to be administered or to self-administer his/her medication, he/she will not be forced to do so. Parents/guardians will be notified of the refusal as soon as practicable

In the event that the child becomes unwell, parents/guardians will be contacted as soon as practicable by the school and will collect or arrange for the collection of their child at the earliest opportunity. If the request for the administration of medicine is not approved, no medication should be brought to the school.

Appendix to this policy:

Appendix 1	Medical Information Form
Appendix 2	Indemnity Form
Appendix 3	Record of Administration of Medicines

Ratification and Review

Signed: Matt Jones Date: 19/5/25 Signed: Fiona Downes Date: 19/5/25
Chairperson Principal

Medical Information Form

Appendix 1 – Administration of Medicines Policy

1. Student Information

Name of Student:	Class:
Date of Birth:	Age:
Address of Pupil:	
Siblings:	Names: Classes:

2. Contact Information

Family Contact 1:	Mobile/Contact numbers:
Name:	Relationship to Pupil:

Family Contact 2:	Mobile/Contact numbers:
Name:	Relationship to Pupil:

Emergency Contact 1:	Mobile/Contact numbers:
Name:	Relationship to Pupil:

Emergency Contact 2:	Mobile/Contact numbers:
Name:	Relationship to Pupil:

3. Medical Contacts

GP:	Name: Phone Number: Address:
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Consultant/ Hospital Nurse:	Name: Phone Number: Address/Location:
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4. Details of the Pupil's conditions

Details, signs and symptoms of the pupil's condition:

Triggers or things which may make the pupil's condition worse:

5. Routine Healthcare Requirements

During school hours:

Outside school hours:

6. Regular Medication to be taken during school hours.

Is your child capable and permitted to self-administer medication with supervision of a staff member?

☐ YES, my child is capable and permitted to self-administer the medication.

☐ NO, I am requesting that that medication be administered by a member of school staff.

7. Emergency Medication- Dosage and instructions for administration:

8. Other Emergency Treatment:

9. Are there any special considerations of which the school should be aware regarding the pupil's participation in the school activities?

10. Is there any other information of which the school should be aware relating to the pupil's health care in school?

The school may contact the above named persons for further information or training.

Consent to sharing of sensitive personal information regarding the pupil to appropriate staff members and emergency contacts listed above.

I agree that the information contained on this plan may be shared with members of staff involved with my child's care and education. This also may include emergency services and those listed as emergency contacts below. In the school setting, the file will be scanned and password protected on our Digital Aladdin System. Hard copy will be stored securely in the Secretary's office.

I understand that I must notify the school of any changes in relation to the healthcare requirements of my child in writing and in timely manner.

Signed by Parent: _____

Print name: _____

Date: _____

Consent for the administration of emergency medication or emergency treatment

In the event of a medical emergency, I agree that my child can be administered emergency medication or self-administer emergency medication under supervision and/or receive treatment as set out in the child's Emergency Plan.

Signed by Parent: _____

Print name: _____

Date: _____

Appendix 2

Administration of Medicine Indemnity Our Lady of the Wayside NS



THIS INDEMNITY made on _____ (date) BETWEEN _____
(lawful father and mother) of _____ (child's name) of AND for and on behalf of the
Board of Management of *Our Lady of the Wayside National School* situate at in the County of Dublin.

WHEREAS

1. The parents are respectively the lawful father and mother of _____ a child at the above school.
2. The child suffers on an on-going basis from the condition known as _____.
3. The child may, while attending the said school, require, in emergency circumstances, the administration of the following medication: _____
4. The parents have agreed that the said medication may, in emergency circumstances, be administered by a member of staff of the said school as may be designated from time to time by the Board.

NOW IT IS HEREBY AGREED by and between the parties hereto as follows:

- a) In consideration of the Board entering into the within Agreement, the parents, as the lawful father and mother respectively of the said pupil HEREBY AGREE to indemnify and keep indemnified the Board, its servants and agents including without prejudice to hool from and against all claims, both present and future, arising from the administration or failure to administer the said medicines.

IN WITNESS whereof the parties hereto have hereunto set their hands and affixed their seals the day and year first herein WRITTEN.

SIGNED AND SEALED by the parents in the presence of: _____ (Name of Witness)

SIGNED AND SEALED by the parents below in the presence of:

Parent Signature: _____ Witness Signature: _____

Parent Signature: _____ Witness Signature: _____

Pupil's Name: _____

[illegible]

