



## SECTION 11

### THE ADMINISTRATION OF MEDICATION IN SCHOOL

#### At a Glance Action

- Create a procedure for the administration of medication in your school **including the potential provision of emergency asthma inhalers**
- Nominate a responsible person to control the administration of medication
- Ensure all staff are aware of the procedures
- Ensure parents are aware of the procedures
- Consult with GP, Parent, Paediatrician, School Nurse as required
- Ensure records are kept of all medication administered
- Ensure staff are adequately trained to administer medication
- Keep records of training.

# GUIDANCE AND PROCEDURES

## Introduction

There will be occasions when a parent/guardian will request that a pupil be administered medication during the school day. It is not in a teachers terms and conditions that they must administer medication, and it is left to individual schools to determine their policy of this subject.

It is preferable for parents/guardians to administer medicine themselves, but it is recognised that this is not always possible or practicable. It is not the intention of this guidance to discourage the administration of medication, but to provide information and guidance on what procedures should be followed to assist in the smooth working of this process.

Each request for medicine to be administered to a pupil in school or at out of school activities should be considered on its merits. Under no circumstances should children bring medicine to school without requesting permission from the Headteacher.

If a school agrees to administer medication, the procedure on how this will be done and in which circumstances should be clearly communicated to parents to avoid any confusion

Headteachers are advised to consider the best interests of the pupil and the implications for the staff and the school, as a whole, in deciding whether to administer medicines and that their decisions are defensible if it is clear they have acted reasonably.

Where a Headteacher agrees to administer medicine to a child he/she is advised to follow the **Welsh Assembly Government – Access to Educational Support for Children and Young People with Medical Needs 2010** and ensure that the following safeguards should be observed:-

- For prescribed medication, a doctor's note, or clear medical direction, should be received, preferably delivered by the parent, confirming that it is necessary for the child to receive medication during the school day and the required dosage.
- Parents should inform the school if their child has a medical condition or long term illness and this information should be included in a child's records'.
- Medicines, not prescribed by a doctor, must not be administered unless there is specific prior written permission. Parents should be deterred from requests to give a "spoonful of Calpol if he's feeling poorly".
- Medicines, in the smallest practicable amount, should be taken to the school by the parent and delivered personally to the Headteacher or an appropriate member of staff.
- Medicines should be clearly labelled with the child's name, contents and dosage and should be kept in a locked cupboard away from children.

- Before medication is brought into school, the parent must complete either Form 3A or 3B. If the Headteacher is in agreement that the medication will be administered, then Form 4 will be completed.

## **Parental Responsibilities**

Parents should, wherever possible, administer or supervise the self-administration of medication to their children. This may be effected by the child going home during the lunch break or by the parent visiting the school. However, this might not be practicable if, for example, the child's home is a considerable distance from the school. In such a case parents may make a request for medication to be administered to the child in school.

When the medication is being prescribed the parents should ask whether it is possible to have the administration intervals out of school time. The parent should also seek the opinion of the GP as to whether the child should be in school, and it is on this opinion that the decision should be made whether to send the child to school or not, and not what is the more convenient solution. The flow chart in annex 1 shows the procedure that should be followed if a request to administer medication is to be made.

It is the parents responsibility to ensure that the medication the school holds is within date. Expired medication should be collected from school by parents within 7 days of the expiry date. The school will contact parents/guardians immediately if medication remains uncollected.

## **School Responsibilities**

As stated previously it is not in school staff terms and conditions to administer medication (unless specifically detailed in the job description). However, school staff have a general duty of care and are expected to take action as a reasonably prudent parent would. So if a child in their care is ill, they should secure either the attendance of a parent or medical assistance.

When a parent requests that medication be administered to their child at school the Headteacher will deal with the case sympathetically and on its merits. The Headteacher should consider all the circumstances of the case and have regard to the best interests of the pupil and the implications for the staff.

The Headteacher will ensure all staff are aware of the school's procedures with respect to the administration of medication. In the case of pupils with Complex Health Needs, staff who come into contact with that child will be made aware of the precautions that need to be taken and the procedure for coping with an emergency. The Headteacher and staff will do what a "reasonable parent" would do in the circumstances prevailing at the time.

## **Emergency Asthma Inhalers**

The Welsh Government has issued guidance to schools on a change in legislation that allows schools to buy emergency salbutamol inhalers without a prescription. Schools are not required to hold an inhaler, this is discretionary, but the change in legislation has been made so schools can do this if they wish.

The Welsh Government has produced guidance on this issue, which can be accessed at the following web link:

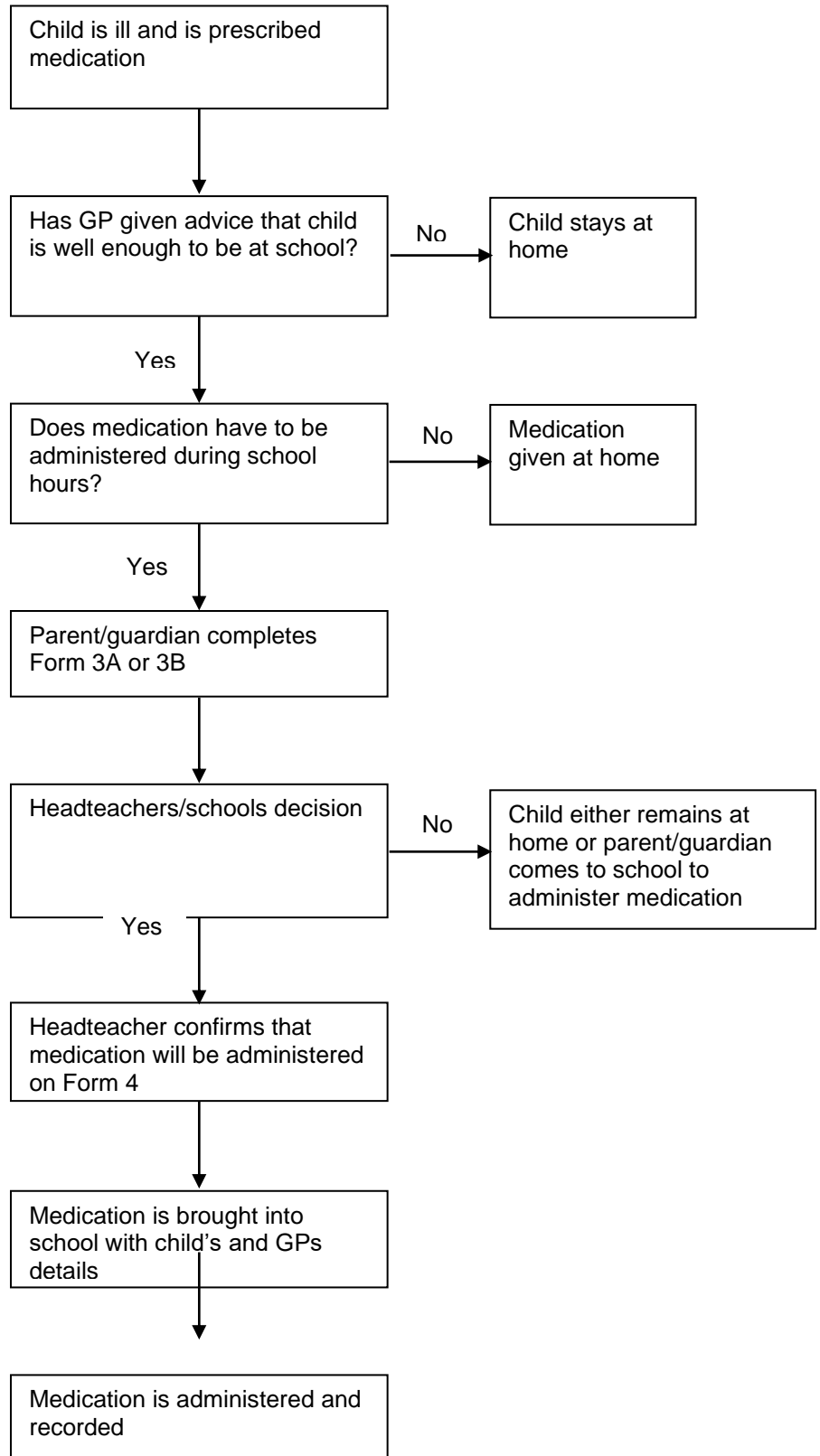
<http://learning.wales.gov.uk/docs/learningwales/publications/guidance-on-the-use-of-emergency-salbutamol-inhalers-in-schools-in-wales-en.pdf>

If you do decide to purchase inhalers, then you will also need to adopt a policy on their use, or amend your currently policy on medication. Currently Welshpool Church in Wales Primary School do not hold emergency salbutamol inhalers. Annexe 2 has a suggested template for an Emergency Inhaler Policy. If you decide to hold these inhalers, you should communicate this to the parents/carers of your students. Suggested information for parents is included in the Welsh Governments guidance and it is recommended that you refer to, or use this information, particularly the element that parents should not rely on the school holding an emergency inhaler and that they should always ensure that their child is carrying their own inhaler.

### **Additional Guidance**

Annexe 3 contains a link to the Welsh Assembly Government Access to Education and Support for Children and Young People with Medical Needs. Annexe 4 has Word versions of the forms in the WAG guidance document for school use.

Flow Chart for the Administration of Medication





# **Model Emergency Inhaler Policy**

**October 2014**

## **Introduction**

Following agreement by the UK Government and Welsh Government, an amendment to the Human Medicines (Amendment) (No. 2) Regulations 2014 allows schools to buy salbutamol inhalers, without a prescription, for use in emergencies from 1 October 2014.

The emergency inhaler can be used if the child or young person's prescribed inhaler is not available, for example because it is broken or empty, and should only be used by children or young people who

- have been diagnosed with asthma, and prescribed a reliever inhaler; OR
- who have been prescribed a reliever inhaler;

AND for whom the written parent/carer consent for use of the emergency inhaler has been received.

The Governing Body of [SCHOOL NAME] has taken the decision to hold Salbutamol inhalers and this policy covers their management.

## **Register of Asthmatics**

The School will hold a list of all pupils who have been diagnosed with asthma and / or have been prescribed a reliever inhaler. This list will be held with the inhalers and will be reviewed on an annual basis or as information becomes available. This list is only as accurate as the information received from parents / carers.

## **Recognising Asthma**

Common 'day to day' symptoms of asthma may include:

- Cough and wheeze (a 'whistle' heard on breathing out) when exercising
- Shortness of breath when exercising
- Intermittent cough

These symptoms are usually responsive to use of the child or young person's own inhaler and rest (e.g. stopping exercise). They would not usually require to be sent home from school or need urgent medical attention.

However, if a child or young person is displaying the early signs of an asthma attack they should be treated according to their individual health care plan where possible, and the Asthma Attack Procedure (Appendix 1) should be followed. If a spacer is used, the child can take it home with them (to avoid the possible risk of cross-infection, the spacer should not be reused by the school) and the school will need to obtain a new spacer promptly.



Early signs of an asthma attack may include:

- Persistent cough (when at rest)
- A wheezing (whistling) sound coming from the chest (when at rest)
- Shortness of breath or difficulty breathing (the child could be breathing fast and with effort)
- Nasal flaring (the nostrils move with breathing)
- Unable to talk or complete sentences
- May try to tell you that their chest 'feels tight' (younger children may express this as tummy ache)
- Being unusually quiet

An ambulance and parents/carers should be called immediately if the child or young person is:

- Exhausted
- Too breathless to speak
- Going blue/has a blue or white tinge around lips
- Collapsed
- Not showing sufficient improvement in symptoms after 5-10 minutes

**To note:** a child or young person may be prescribed a different reliever inhaler to salbutamol e.g. terbutaline. The salbutamol inhaler should still be used if their own inhaler is not accessible – it will help to relieve their asthma and could save their life.

The procedure in Appendix 1 summarises what to do

### **Parental Consent**

As with all types of medicine, parental consent will be sought for use of an emergency inhaler. The letter template in Appendix 2 will be used and a record of this consent included in the register of asthmatics. Parental consent will be sought [choose one of the following options]

at the same time as consent is sought for administering or supervising administration of a child or young persons own inhaler

at the same time as seeking consent for the flu vaccination or other vaccinations

at the start of a new academic year

### **Supply, Storage and Care of Emergency Inhalers**

The school will purchase the salbutamol inhalers from a local pharmacy and a letter from the Headteacher on school letterhead paper will be taken to the pharmacy confirming the following:

- The name of the school for which the inhalers is required
- The purpose for which the inhaler is required , and
- The total quantity of inhalers and spacers required.

The inhalers will be stored in [location] and their use by dates will be checked on a monthly basis by [Name or position] to ensure they are within date. Inhalers that are empty or beyond their use by date will be disposed of by returning them to the pharmacy.

## **Training**

All staff will be made aware of

- the signs and symptoms of an asthma attack
- the emergency inhaler policy
- how to check if a child is on the asthma register
- how to access the inhaler
- who the designated members of staff are

Those staff who volunteer to either supervise the administration of the emergency inhaler or administer the emergency inhaler will be provided with training via the Asthma UK video clips on using metered-dose inhalers and spacers at <http://www.asthma.org.uk/knowledge-bank-treatment-and-medicines-using-your-inhalers> Further advice can be sought from the School Nurse.

The designated members of staff are [Names of staff members]

Any member of staff who administers an asthma inhaler as directed and for the benefit of a child will be covered the employers indemnity.

## **Record of use**

Every time an emergency inhaler is used, this will be recorded and the parents/carer of the child informed, a template letter is included in Appendix 3. The record of use is kept with the emergency inhaler.

## **Educational Visits**

When children who have either been diagnosed as asthmatic, or prescribed a reliever inhaler are attending an educational visit, the group will carry an emergency inhaler. On returning to school, any record of use will be made and parents informed. If the attack is more serious, parents will be informed immediately.

## Asthma Attack Procedure

- Keep calm and reassure the child or young person, and do not leave them alone
- Encourage them to sit up and slightly forward, and to take slow steady breaths
- Use their inhaler, or if unavailable, stay with them whilst the emergency inhaler kit is brought to you. Check consent in the asthma register. Use the inhaler, as below:

To prime inhaler, spray 2 puffs into the air. Then give 2 puffs of emergency salbutamol inhaler to the child or young person (via the spacer device if possible)



**To note:** a child or young person may be prescribed a difference reliever inhaler to salbutamol, e.g. terbutaline. The salbutamol inhaler should still be used if their own inhaler is not accessible – it will help to relieve their asthma and could save their life.

TEMPLATE CONSENT FORM:  
USE OF EMERGENCY SALBUTAMOL INHALER  
Welshpool Church in Wales Primary School

**Child or young person showing symptoms of asthma / having asthma attack**

Child's full name \_\_\_\_\_

Class \_\_\_\_\_

- 1 I confirm my child has been diagnosed with asthma / has been prescribed an inhaler (please delete as appropriate).
- 2 My child will have a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.
- 3 In the event of my child displaying symptoms of asthma, and if their inhaler is not available or unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

You may wish to discuss this form with your child.

Signed: \_\_\_\_\_ Date \_\_\_\_\_

Parent/carer full name \_\_\_\_\_

Mobile telephone number \_\_\_\_\_

Home/work telephone number \_\_\_\_\_

Parent/carer address \_\_\_\_\_

\_\_\_\_\_  
E-mail address \_\_\_\_\_

Child's Doctor's name \_\_\_\_\_

Child's Doctor's telephone number \_\_\_\_\_

Child's Doctor's address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Template Letter to Inform Parents / Carers of Emergency Salbutamol Inhaler Use

Childs Name \_\_\_\_\_

Class \_\_\_\_\_

Date \_\_\_\_\_

Dear

This letter is to notify you that \_\_\_\_\_ has had problems with their breathing today. This happened when \_\_\_\_\_

**[Please delete as appropriate]**

A member of staff helped them to use their own asthma inhaler

**OR**

They did not have their own asthma inhaler with them, so a member of staff helped them to use

the school's emergency inhaler containing salbutamol. They were given \_\_\_\_\_ puffs

**OR**

Their own asthma inhaler was not working, so a member of staff helped them to use the schools emergency inhaler containing salbutamol. They were given \_\_\_\_\_ puffs

We strongly advise that you pass this information on to your doctor as soon as possible to see whether your child needs further medical assessment

Yours sincerely

## Annexe 3

The following links will take you to the Welsh Assembly Government document for medication in schools

### **Welsh Version**

<http://wales.gov.uk/topics/educationandskills/publications/guidance/medicalneeds/?skip=1&lang=cy>

### **English Version**

<http://wales.gov.uk/topics/educationandskills/publications/guidance/medicalneeds/?skip=1&lang=en>

## Forms

To assist schools with the administration for their support of children with medical needs the WAG has prepared a number of examples of forms which are set out on the following pages. Schools and settings may wish to use or adapt these according to their particular policies on administering medicines.

Form 1	Contacting Emergency Services
Form 2	Health Care Plan
Form 3A	Parental request for school/setting to administer medicine
Form 3B	Parental request for school/setting to administer medicine
Form 4	Headteacher/Head of setting agreement to administer medicine
Form 5	Record of medicine administered to an individual child
Form 6	Record of medicines administered to all children
Form 7	Request for child to carry his/her own medicine
Form 8	Staff training record - administration of medicines
Form 9	Authorisation for the administration of rectal diazepam

## Contacting Emergency Services

### Request for an Ambulance:

Dial 999<sup>1</sup>, ask for ambulance and be ready with the following information

- 1 Your telephone number – 01938 538660
- 2 Give your location as follows (*Welshpool Church in Wales Primary School*)
- 3 State that the postcode is SY21 7FA
- 4 Give exact location in the school/setting (*Salop Road, Welshpool*)
- 5 Give your name
- 6 Give name of child and a brief description of child's symptoms
- 7 Inform Ambulance Control of the best entrance and state that the crew will be met and taken to
- 8 Don't hang up until the information has been repeated back.

Speak clearly and slowly and be ready to repeat information if asked

Put a completed copy of this form by all the telephones in the school

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<sup>1</sup> Remember, you may need to dial 9 for an outside line



## **Health Care Plan**

The health plan should specify:

- The child or young person's view where possible.
- Parental wishes for the child.
- The care co-ordinator/key worker for the child.
- Any anticipated changes in the child or young person's care routine.
- The contact details of the paediatric healthcare team providing medical advice, care and support.
- Protocols for exchanging information between education and health services (with clearly defined lines of responsibility and named contacts) including the provision of accurate and regularly updated information about the needs of individual children and young people.
- The medication the child or young person takes both in and out of school hours.
- The request of parents and the permission of the Headteacher for the administration of medicines by staff or self-administration by the child or young person (Forms 3a, 3b or 7 and Form 4).
- Arrangements for any emergency or invasive care, or for the administration of medication. Emergency procedures should be set out in conjunction with health care professionals. Risk assessment should be carried out and would include the identification of potential emergencies in relation to the health needs of that particular child - better planning leads to fewer real emergencies.
- Any special health care needs which may affect the child or young person's use of services such as transport or play activities at the school, implementation of therapy programmes etc. The use, storage and maintenance of any equipment.
- Any arrangements for the provision of education or associated services when the child is too unwell to attend school or is in hospital or another appropriate health care setting.
- Health care plans should be jointly written by health professionals and parents. Completed plans should be signed by the parents, Headteacher and health professionals. A copy of the plan should also be available to all the above and to accompany the child on out of school trips.

- Health care plans should be reviewed annually at the child or young person's annual school review. If the plan needs revising the school health professionals should meet with parents and the plan would then be written again and signed by all parties. If the plan needs to be altered between reviews this should always take place with parents and be signed.
- The importance of very clear procedures for emergency treatment for all children and young people with complex health needs.
- The plan should also be made available to all staff coming into contact with the child or young person.
- Copies of any relevant forms should form part of the healthcare plan.

## Healthcare Plan

Name of School

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Child's Name

---

Group/Class/Form

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Date of Birth

---

Child's Address

---

---

Medical Diagnosis or Condition

---

---

Date

---

Review Date

---

Contact Member of Staff

---

### Family Contact Information

Name

---

Phone No. (Work)

---

Phone No. (Home)

---

Phone No. (Mobile)

---

Name

---

Phone No. (Work)

---

Phone No. (Home)

---

Phone No. (Mobile)

---

### Clinic/Hospital Contact

Name

---

Phone No.

---

### G.P.

Name

---

Phone No.

---

Describe medical needs and give details of child's symptoms

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Daily care requirements, e.g. before sport, at lunchtime, home, school trips

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Describe what constitutes an emergency for the child, and the action to take if this occurs

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Who is responsible in an emergency? State if different for off-site activities

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Form copied to

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### Parental Request for School to Administer Medicine

The school/setting will not give your child medicine unless you complete and sign this form and the school or setting has a policy that staff can administer medicine

Name of School \_\_\_\_\_

Name of Child \_\_\_\_\_

Date of Birth \_\_\_\_\_

Group/Class/Form \_\_\_\_\_

Medical Condition or Illness \_\_\_\_\_

**Medicine**

Name/type of Medicine (as described on the container) \_\_\_\_\_

Date Dispensed \_\_\_\_\_ Expiry Date \_\_\_\_\_

Agreed review date to be initiated by [name of staff]

Dosage and method \_\_\_\_\_

Timing \_\_\_\_\_

Special precautions \_\_\_\_\_

Are there any side effects that the school/setting needs to know about? \_\_\_\_\_

Self-administration (delete as appropriate) **Yes / No**

Procedures to take in an emergency \_\_\_\_\_

**Contact Details**

Name \_\_\_\_\_

Daytime Telephone No. \_\_\_\_\_

Relationship to Child \_\_\_\_\_

Address \_\_\_\_\_

I understand that I must deliver the medicine personally to [agreed member of staff]

I accept that this is a service that the school/setting is not obliged to undertake. I understand that I must notify the school/setting of any changes in writing.

Signed \_\_\_\_\_ Date \_\_\_\_\_

### Parental Request for School to Administer Medicine

The school/setting will not give your child medicine unless you complete and sign this form and the school or setting has a policy that staff can administer medicine

Name of School \_\_\_\_\_

Date \_\_\_\_\_

Child's Name \_\_\_\_\_

Group/Class/Form \_\_\_\_\_

Name and Strength of Medicine \_\_\_\_\_

Expiry Date \_\_\_\_\_

How much to give, .i.e. dose to be given \_\_\_\_\_

When to give \_\_\_\_\_

Any other insutrctions \_\_\_\_\_

Number of tabliets/quantity to be given to school \_\_\_\_\_

**Note: Medicines must be in the original container as dispensed by the pharmacy**

Daytime phone no. of parent \_\_\_\_\_

**or**, adult contact \_\_\_\_\_

Name and phone no. of GP \_\_\_\_\_

Agreed review date to be initiated by *[name of member of staff]*

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Print Name \_\_\_\_\_

Parents Signature \_\_\_\_\_

Date \_\_\_\_\_

If more than one medicine is to be given, a separate form should be completed for each one.

**Headteacher Agreement to Administer Medicine**

Name of School \_\_\_\_\_

It is agreed that [name of child] \_\_\_\_\_

Will receive (quantity and name of medicine) \_\_\_\_\_

Every day at [time to be administered, e.g. lunchtime, or time] \_\_\_\_\_

Will be given/supervised whilst he/she takes their medication by [name of staff] \_\_\_\_\_

This arrangement will continue until [either end date of course of medicine or until instructed by parents] \_\_\_\_\_

**Record of Medicine Administered to an Individual Child**

Name of School \_\_\_\_\_

Name of Child \_\_\_\_\_

Date Medicine Provided by Parent \_\_\_\_\_

Group/class/Form \_\_\_\_\_

Quantity Received \_\_\_\_\_

Name and Strength of Medicine \_\_\_\_\_

Expiry Date \_\_\_\_\_

Quantity Returned \_\_\_\_\_

Dose and Frequency of Medicine \_\_\_\_\_

Staff Signature \_\_\_\_\_

Signature of Parent \_\_\_\_\_

Date \_\_\_\_\_

Time Given \_\_\_\_\_

Dose Given \_\_\_\_\_

Name of Member of Staff \_\_\_\_\_

Staff Initials \_\_\_\_\_

Date \_\_\_\_\_

Time Given \_\_\_\_\_

Dose Given \_\_\_\_\_

Name of Member of Staff \_\_\_\_\_

Staff Initials \_\_\_\_\_

Date \_\_\_\_\_

Time Given \_\_\_\_\_

Dose Given \_\_\_\_\_

Name of Member of Staff \_\_\_\_\_

Staff Initials \_\_\_\_\_



**FORM 5 Cont.**

Date \_\_\_\_\_

Time Given \_\_\_\_\_

Dose Given \_\_\_\_\_

Name of Member of staff \_\_\_\_\_

Staff Initials \_\_\_\_\_

Date \_\_\_\_\_

Time Given \_\_\_\_\_

Dose Given \_\_\_\_\_

Name of Member of staff \_\_\_\_\_

Staff Initials \_\_\_\_\_

Date \_\_\_\_\_

Time Given \_\_\_\_\_

Dose Given \_\_\_\_\_

Name of Member of staff \_\_\_\_\_

Staff Initials \_\_\_\_\_

Date \_\_\_\_\_

Time Given \_\_\_\_\_

Dose Given \_\_\_\_\_

Name of Member of staff \_\_\_\_\_

Staff Initials \_\_\_\_\_

Date \_\_\_\_\_

Time Given \_\_\_\_\_

Dose Given \_\_\_\_\_

Name of Member of staff \_\_\_\_\_

Staff Initials \_\_\_\_\_

Date \_\_\_\_\_

Time Given \_\_\_\_\_

Dose Given \_\_\_\_\_

Name of Member of staff \_\_\_\_\_

Staff Initials \_\_\_\_\_



**Request for Child to Carry His / Her Own Medicine**

*This form must be completed by parents/guardian*

**If staff have any concerns discuss this request with healthcare professionals**

Name of School \_\_\_\_\_

Child's Name \_\_\_\_\_

Group/Class/Form \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Medicine \_\_\_\_\_

Procedures to be taken  
In an emergency \_\_\_\_\_  
\_\_\_\_\_

**Contact Information**

Name \_\_\_\_\_

Daytime Phone No. \_\_\_\_\_

Relationship to Child \_\_\_\_\_

I would like my son/daughter to keep his/her medicine on him/her for use as necessary.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Staff Training Record - Administration of Medicines**

Name of School \_\_\_\_\_

Name \_\_\_\_\_

Type of Training Received \_\_\_\_\_

Date of Training Completed \_\_\_\_\_

Training Provided By \_\_\_\_\_

Profession and Title \_\_\_\_\_

I confirm that *[name of member of staff]* \_\_\_\_\_  
has received the training detailed above and is competent to carry out any necessary  
treatment.

I recommend that the training is updated *[please state how often]* \_\_\_\_\_

Trainer's signature \_\_\_\_\_ Date \_\_\_\_\_

I confirm that I have received the training detailed above.

Staff signature \_\_\_\_\_ Date \_\_\_\_\_

Suggested review date \_\_\_\_\_

**Authorisation for the Administration of Rectal Diazepam**

Name of School \_\_\_\_\_

Child's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_  
\_\_\_\_\_

G.P. \_\_\_\_\_

Hospital Consultant \_\_\_\_\_

\_\_\_\_\_ should be given Rectal Diazepam \_\_\_\_\_ mg

If he/she has a \*prolonged epileptic seizure lasting over minutes

**OR**

\*serial seizures lasting over \_\_\_\_\_ minutes

An Ambulance should be called for \*at the beginning of the seizure

**OR**

If the seizure has not resolved \*after \_\_\_\_\_ minutes (\*please delete as appropriate)

Doctor's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_

**NB: Authorisation for the administration of rectal diazepam**

As the indications of when to administer the diazepam vary, an individual authorisation is required for each child. This should be completed by the child's GP, Consultant and/or Epilepsy Specialist Nurse and reviewed regularly. This ensures the medicine is administered appropriately. The Authorisation should clearly state:

- When the diazepam is to be given e.g. after 5 minutes; and
- How much medicine should be given

Included on the Authorisation Form should be an indication of when an ambulance is to be summoned.

**Records of administration should be maintained using Form 5 or similar.**