



# **CHUMS PRESCRIBED MEDICATION FORM**

Where a child must take prescribed medicines at CHUMS for allergies, short term illness or other conditions such as asthma, diabetes, or epilepsy, it is essential that a written request comes from a parent/guardian and that the request gives all necessary details. Please fill out the form below if this applies to you and ensure you read the *medical notes* on the reverse. Please don't hesitate to e-mail <u>sportsdevelopment@essex.ac.uk</u> or speak to a member of staff on the day if you have any further concerns related to this.

PRESCRIBED MEDICATION REQUEST (CONFIDENTIAL)

To the CHUMS Coordinator,

Childs Name:

As parent or guardian of the above-named child, I request that you arrange for the administration of the following medication, which has been prescribed for the conditions stated:

Condition:

Medicines and Dosage:

**Special Instructions:** 

I have clearly labelled all medication with the **name of the medicine**, the **name of the child and the appropriate dosage**. I understand that although the staff at CHUMS will endeavour to administer the medicine according to the instructions given, no responsibility can be accepted if a dose is late or missed.

Parents/Guardian's Name:		
Signed:		
Date:		





## **Medication Administration Date and Time**

Date	Time of Administration	Staff Member Present	Parents Signature

### MEDICAL NOTES (for parents/guardians to read)

## **Medical Information Form**

The Camp Coordinator holds a copy of each child's medical details and emergency contact telephone numbers on the application form. Parents should inform the CHUMS coordinator/manager of any changes as that occur so that our records remain up to date.

#### Prescribed Medication Form

In order to comply with guidelines, the Camp Coordinator is required to have these forms completed when we need to administer medicines to a child. In our view, there are three possible sets of circumstances where this involvement may be necessary:

- i. Where a child, recovering from a short-term illness, is well enough to return to CHUMS but is receiving a course of antibiotics or cough medicine.
- ii. Where a child has a chronic illness or ongoing complaint such as diabetes, asthma or epilepsy.
- iii. Where a child is in good health but could suffer a major allergic reaction (e.g. peanuts, wasp stings) for which adrenalin or similar medication may have to be given.

In cases (ii) and (iii), such information should be detailed on the form to ensure the Camp Coordinator is in full possession of all facts prior to any action being necessary.

It is understood that although the CHUMS Coordinator will endeavour to administer the medicine according to the instructions given, no responsibility can be accepted if a dose is late or missed.

Medicine in the smallest practicable amount should, wherever possible, be brought to CHUMS by the parent and delivered personally to the Camp Coordinator or Lead Playworker on arrival. All medicine will be placed in a lockable medicine cabinet. Two adults will then be present when dispensing the medication at the appropriate times stated. Reliever inhalers for asthma can be kept by the child in an agreed place or stored safely in the bag of one of our CHUMS playworkers.

#### Important Checking Points (for staff to read)

- Check the child's details to ensure the right child Name & DOB
- Check that the medication label for right child, right drug, in date, right dose, right route and
- right date & time
- Two members of staff to witness all administering & initial this form after administration
- Ensure the medication is stored safely & correctly.
- Speak to CHUMS Coordinator if unsure of anything related to form.