



Date August 2020
 Review Date August 2022
 Responsibility Second Master

EPSOM

COLLEGE

CONFIDENTIAL

RISK ASSESSMENT FOR THE SELF-MANAGEMENT OF MEDICINES BY PUPILS

Name of pupil		HOUSE	YEAR
Name and Role of person completing this section		Date	
Notification received from: parent/pupil/other (please specify):	Notification received via:		
Category of medicine			
Dose & Duration			
Means of storage/care/safekeeping while on College premises:			
Possible side effects:			

Housemaster / Housemistress / Matron to complete this section

I confirm that the pupil named above has been reminded that:

- he/she is responsible for administering the medicine according to the prescribed or recommended dose;
- he/she is responsible for ensuring that the medicine is held and stored safely and does not fall into the hands of those for whom it was not prescribed or otherwise provided;
- prescription medicine is to be kept at all times in its original labelled container in which it was dispensed by a pharmacist and which carries the prescriber's instructions for its administration (including the name of the pupil, the name and dose of the medicine, the date of its expiry and the frequency of administration);
- non-prescription medicine is to be kept at all times in its original container with the manufacturer's instructions for use;
- Date-expired medicine is to be taken from school and returned to a pharmacy or otherwise safely disposed of.

2. I am satisfied that the pupil named above is sufficiently mature and trustworthy to assume responsibility for keeping and self-administering the medicine while on College premises or otherwise engaged in College activities, and has the means of storing the medicine safely and securely, with the pupil and no one else having ready access as necessary.

Signed Name..... Date

Copies will be retained by HMM/Matron & Medical Centre