



PADNELL JUNIOR SCHOOL SUPPORTING PUPILS WITH MEDICAL NEEDS POLICY

Designated Committee: Full Governing Body
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Introduction

Section 100 of The Children and Families Act 2014 places a duty on the governing body of this school to make arrangements for supporting children at their premise with medical conditions. The Department for Education have produced statutory guidance 'Supporting Pupils with Medical Conditions' and we will have regard to this guidance when meeting this requirement.

We will endeavour to ensure that children with medical conditions are properly supported so that they have full access to education, including school trips and physical education. The aim is to ensure that all children with medical conditions, in terms of both their physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

It is our policy to ensure that all medical information will be treated confidentially by the Headteacher and staff. All administration of medicines is arranged and managed in accordance with this policy. All staff have a duty of care to follow and co-operate with the requirements of this policy.

Where children have a disability, the requirement of the Equality Act 2010 will apply.

Where children have an identified special educational need, or a medical condition that requires an Education, Health and Care (EHC) plan, the SEN Code of Practice will also apply.

We recognise that medical conditions may impact social and emotional development as well as having educational implications.

Key Roles & Responsibilities

Statutory Requirement: The governing body will ensure that the school's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support children at school with medical conditions.

The Governing Body is responsible for:

Making arrangements to support pupils with medical conditions in school and ensuring that this policy is developed and implemented. They will ensure that sufficient staff have received suitable training and are competent before they take on the responsibility to support children with medical conditions.

The Governing Body will ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. They will ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

The Headteacher is responsible for:

Ensuring that the school's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. The Headteacher will ensure that all staff who need to know are aware of the child's condition. The Headteacher will also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. This may involve recruiting a member of staff for this purpose. The Headteacher has the overall responsibility for the development and monitoring of individual healthcare plans. The Headteacher will also ensure that school staff are properly insured and are aware that they are insured to support pupils in this way. The Headteacher will contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school support staff.

If the Headteacher is unavailable or absent, the Deputy Headteacher assumes the Headteacher's responsibilities under this policy.

Parents are responsible for:

Providing the school with sufficient and up-to-date information about their child's medical needs. Parents are key partners and should be involved in the development and review of their child's individual healthcare plan. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Teachers and Support Staff are responsible for:

Any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of a teachers' professional duties, they will take into account the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.

The School Link Nurse/Matron is responsible for:

Notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school. They will not have an extensive role in ensuring that the school takes the appropriate steps to support children with medical conditions, but they may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training. Schools nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs.

**Local Arrangements
Identifying children with health conditions**

Statutory Requirement: The Governing Body will ensure that the policy sets out the procedures to be followed whenever a school is notified that a pupil has a medical condition.

We will aim to identify children with medical needs on entry to the school by working in partnership with parents/ carers. We will use the 'Health Questionnaire for Schools' to obtain the information required for each child's medical needs to ensure that we have appropriate arrangements in place prior to the child commencing at the school to support them accordingly. (See Appendix A)

We will gather information from the Infant or previous schools regarding any child with a medical condition during the transition period. Where a formal diagnosis is awaited or is unclear, we will plan to implement arrangements to support the child, based on the current evidence available for their condition. We will ensure that every effort is made to involve some form of medical evidence and consultation with the parents.

Individual health care plans

Statutory Requirement: The Governing Body will ensure that the school's policy covers the role of individual healthcare plans, and who is responsible for their development in supporting children at school with medical conditions.

We recognise that Individual Healthcare Plans are recommended in particular where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and are likely to be helpful in the majority of other cases, especially where medical conditions are long term and complex. However, not all children will require one. The school, healthcare professional and parent will agree based on evidence when a healthcare plan would be inappropriate or disproportionate.

Where children require an individual healthcare plan it will be the responsibility of the Headteacher to work with parents and relevant healthcare professionals to write the plan. (See Appendix B)

A healthcare plan (and its review) may be initiated in consultation with the parent/carer, by a member of school staff or by a healthcare professional involved in providing care to the child. The Headteacher and SENCo will work in partnership with the parents/carer, and a relevant healthcare professional eg. school, specialist or children's community nurse, who can best advise on the particular needs of the child to draw up and/or review the plan. Where a child has a special educational need identified in a statement or Educational Health Care (EHC) plan, the individual healthcare plan will be linked to or become part of that statement or EHC plan.

Where a child has a special educational need identified in a EHC plan, the individual healthcare plan should be linked to or become part of that EHC plan.

We will use the individual health care plan template produced by the Department for Education (DfE) to record the plan.

If a child is returning following a period of hospital education or alternative provision (including home tuition), that we will work with Hampshire County Council and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

Statutory Requirement: The Governing Body will ensure that all plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. Plans should be developed with the child's best interests in mind and ensure that the school assesses and manages the risks to the child's education, health and social well-being and minimise disruption.

The school will ensure that all plans will be reviewed annually by entering a review date in the school calendar. Should the school be notified of any change to a child's medical condition, then this will prompt a review of the plan to ensure that it remains up to date.

Statutory Requirement: When deciding what information should be recorded on individual healthcare plans, the governing body will consider the following:

- The medical condition, its triggers, signs, symptoms and treatments;

- The pupil's result needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g crowded corridors, travel time between lessons;
- Specific support for pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- The level of support needed (some children will be able to take responsibility for the own health needs) including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring;
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
- Who in the school needs to be aware of the child's condition and the support required;
- Arrangements for written permission from parents and the Headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, for example risk assessments;
- Where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition and;
- What to do in an emergency, including whom to contact and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

Staff training

Statutory Requirement: The Governing Body will ensure that this policy clearly sets out how staff will be supported in carrying out their role to support children with medical conditions, and how this will be reviewed. It should specify how training needs will be assessed and by whom training will be commissioned and provided.

The school policy should be clear that any member of school staff providing support to a child with medical needs should have received suitable training.

Staff must not administer prescription medicines or undertake any health care procedures without the appropriate training (updated to reflect any individual healthcare plans)

In the case of administering medication such as antibiotics and painkillers, written authorisation from the parent is considered confirmation of training. In the case of medication that is deemed to be invasive, for example epi-pens, suppositories, then only a member of medically trained staff are able to undertake administering the medicine.

All new staff will be inducted on the policy when they join the school through the normal induction process. Records of this training will be stored within their personnel file together with the school training programme/record.

All nominated staff will be provided awareness training on the school's policy for supporting children with medical conditions which will include what their role is in implementing the policy. This training will be carried out annually, every September and any changes to the policy will be notified via secure email.

The awareness training will be provided to staff by presentation during the INSET day training.

We will retain evidence that staff have been provided the relevant awareness training on the policy by signature sheets/confirmation emails..

Where required we will work with the relevant healthcare professionals to identify and agree the type and level of training required and identify where the training can be obtained from. Staff should have a basic understanding of the specific medical conditions they are being asked to deal with. This will include ensuring that the training is sufficient to ensure staff are competent and confident in their ability to support children with medical conditions. The training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs and therefore allow them to fulfil the requirements set out in the individual healthcare plan.

Any training undertaken will form part of the overall training plan for the school and refresher awareness training will be scheduled at appropriate intervals agreed with the relevant healthcare professional delivering the training.

A 'Staff training record– administration of medicines' form will be completed to document the type of awareness training undertaken, the date of training and the competent professional providing the training. (Appendix C)

The child's role

Statutory Requirement: The Governing Body will ensure that the school's policy covers arrangements for children who are competent to manage their own health needs and medicines.

Where possible and in discussion with parents, children that are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be recorded in their individual healthcare plan. The healthcare plan will reference what will happen should a child who self-administers refuse to take their medication (this will normally be informing the parent/carer at the earliest opportunity).

We will ensure that children have easy access to their own medicine to allow for quick self medication. We will agree with relevant healthcare professionals/parent the appropriate level of supervision required and document this in their healthcare plan.

Managing medicines on School Premises

Statutory Requirement: The Governing Body will ensure that the school's policy is clear about the procedures to be followed for managing medicines

The administration of medicines is the overall responsibility of the parents/carers. Where clinically possible we will encourage parents to ask for medicines to be prescribed in dose frequencies which enable them to be taken outside of school hours. However, the Headteacher is responsible for ensuring children are supported with their medical needs whilst on site, therefore this may include managing medicines where it would be detrimental to a child's health or school attendance not to do so.

We will not give prescription or non-prescription medicines to a child under 16 without their parent's/carers written consent (a 'parental agreement for setting to administer medicines' form will be used to record this). (See Appendix D)

A documented tracking system to record all medicines received in and out of the premises will be put in place. The tracking system used is the Individual Child Record of Administration form. (See *Appendix E*)

The name of the child, dose, expiry and shelf life dates will be checked before medicines are administered.

On occasions where a child refuses to take their medication the parents will be informed at the earliest available opportunity.

We will only accept prescribed medicines that are in date, labelled, provided in the original container as dispensed by the pharmacist and include instructions for administration, their dosage and storage. Insulin is the exception, which must still be in date but will generally be available to schools inside an insulin pen or a pump, rather than its original container.

Inhalers are stored in classrooms, in an easily accessible box, which are checked termly. Staff are to support as required and record usage on the tracking form. Emergency inhalers are held in the medical room. Children who are able to use their own inhalers themselves are encouraged to carry it with them.

Controlled drugs will be securely stored in a non-portable container which only named staff will have access to. We will ensure that the drugs are easily accessible in an emergency situation. A record will be kept of any doses used and the amount of the controlled drug held in school. There may be instances where it is deemed appropriate for a child to administer their own controlled medication. This would normally be at the advice of a medical practitioner. Where an individual child is competent to do so and following a risk assessment, we may allow them to have prescribed controlled drugs on them with monitoring arrangements in place.

We will only administer non-prescribed medicines on request from the parent if they are in clearly identifiable packaging and only on a short term basis (Where the school have concerns they will seek further guidance from their link School Nurse).

We will never administer aspirin or medicine containing Ibuprofen to any child under 16 years old unless prescribed by a doctor.

All other pain relief medicine will not be administered without first checking maximum dosages and when previously taken. We will always inform parents.

Any homeopathic remedies to be administered will require a letter of consent from the child's doctor and will be administered at the discretion of the Head teacher.

Emergency medicines will be stored in a safe location but not locked away to ensure they are easily accessible in the case of an emergency.

Types of emergency medicines include:

- Injections of adrenaline for acute allergic reactions
- Inhalers for asthmatics
- Injections of Glucagon for diabetic hypoglycaemia

Other emergency medication ie. Rectal diazepam or Buccal Midazolam for major seizures will be stored in accordance with the normal prescribed medicines procedures (see storage section).

Storage

All medication other than emergency medication will be stored safely in a locked cabinet, where the hinges cannot be easily tampered with and cannot be easily removed from the premise.

Where medicines need to be refrigerated, they will be stored in the dedicated first aid refrigerator in a clearly labelled airtight container. There must be restricted access to a refrigerator holding medicines.

Children will be made aware of where their medicines are at all times and be able to access them immediately where appropriate. Where relevant they should know who holds the key to the storage facility.

Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children and not locked away. We will also ensure that they are readily available when outside of the school premises or on school trips.

Storage of medication whilst off site will be maintained at steady temperature and secure. There will be appropriately trained staff present to administer day to day and emergency medication and copies of individual health care plans will be taken off site, when appropriate e.g. school trip, to ensure appropriate procedures are followed. (See Appendix F)

Disposal

It is the responsibility of the parents/carers to dispose of their child's medicines. It is our policy to return any medicines that are no longer required including those where the date has expired to the parents/carers. Parents/carers will be informed of this when the initial agreements are made to administer medicines. Medication returned to parent/ carers will be documented on the tracking medication form.

Sharps boxes will be in place for the disposal of needle and other sharps. Collection and disposal of these will be arranged locally through County Supplies who will remove them from site *as required*

Medical Accommodation

The first aid room will be used for all medical administration/treatment purposes. The location/room will be made available when required.

Record keeping

Statutory Requirement: The Governing Body will ensure that written records are kept of all medicines administered to children.

A record of what has been administered including how much, when and by whom, will be recorded on a 'record of prescribed medicines' form. The form will be kept on file. Any possible side effects of the medication will also be noted and reported to the parent/carers. (See Appendix G)

Parents will be informed if their child has been unwell at school.

Emergency Procedures

Statutory Requirement: The Governing Body will ensure that the school's policy sets out what should happen in an emergency situation.

Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and provide a process to follow. All relevant staff will be made aware of the emergency symptoms and procedures. We will ensure other children in the school know what to do in the event of an emergency ie. informing a teacher immediately if they are concerned about the health of another child.

Where a child is required to be taken to hospital, a member of staff will stay with the child until their parents arrives, this includes accompanying them to hospital by ambulance if necessary (taking any relevant medical information, care plans etc that the school holds).

Day trips/off site activities

Statutory Requirement: The Governing Body will ensure that their arrangements are clear and unambiguous about the need to support actively pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

We will ensure that teachers are aware of how a child's medical condition will impact on their participation in any off site activity or day trip, but we will ensure that there is enough flexibility for all children to participate according to their own abilities within reasonable adjustments.

We will consider what reasonable adjustments we might make to enable children with medical needs to participate fully and safely on visits. We will carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. We will consult with parents and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely.

Other issues

The school holds on site a defibrillator and the local NHS ambulance service have been advised of its location. Staff members have all undertaken the online training.

Planet Padnell Before and After School Club staff are paediatric first aid trained and will be informed of health care plans and how to deal with situations as they arise.

Unacceptable practice

Statutory Requirement: The Governing Body will ensure that the school's policy is explicit about what practice is not acceptable. *The areas below have been taken from the DfE guidance document, please refer to page 23.*

Staff are expected to use their discretion and judge each child's individual healthcare plan on its merits, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged);
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;

- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips eg. by requiring parents to accompany the child.

Liability and Indemnity

Statutory Requirement: The Governing Body will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

Staff at the school are indemnified under the County Council self insurance arrangements.

The County Council is self-insured and have extended this self insurance to indemnify school staff who have agreed to administer medication or under take a medical procedure to children. The insurance policy will be accessible to staff providing such support.

To meet the requirements of the indemnification, we will ensure that staff at the school have parents' written permission for administering medicines and members of staff will have had training on the administration of the medication or medical procedure.

Complaints

Statutory Requirement: The Governing Body will ensure that the school's policy sets out how complaints may be made and will be handled concerning the support provided to pupils with medical conditions.

Should parents or children be dissatisfied with the support provided they can discuss their concerns directly with the Headteacher. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

Making a formal complaint to the Department of Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted.

Monitoring and Review:

This policy is monitored and reviewed by the Governing Body every year.

Governor Approval and Review Dates:

This policy was approved by the Curriculum and Standards Committee in May 2024. It is due for renewal by May 2025.

Appendices:-

Appendix A	Pupil's Health Questionnaire
Appendix B	Letter inviting parents to contribute to individual healthcare plan Individual Healthcare Plan
Appendix C	Staff training record – administration of medicines
Appendix D	Parental agreement for Padnell Junior School to administer medicine
Appendix E	Record of medicine administered to an individual child
Appendix F	Fridge Monitoring Sheet
Appendix G	Record of medicine administered to all children

Appendix A

Dear Parents

NEW MEDICAL CONDITIONS POLICY

We would like to inform you following instruction from the Department of Education, our previous 'Administration of Medicines in School' policy has been replaced with 'Supporting Pupils at School with Medical Conditions'. You can find a copy of the new policy (which has more statutory requirements), on our website.

In order to follow these legal requirements, we must ask every parent to complete a medical questionnaire (attached). We require all questionnaires to be returned, even in your response in "No". If you answer "Yes" to any questions, we will be in touch with further information.

Our procedures for medicines required for short term illness (antibiotics for example) have also had to be reviewed. We will still only be able to administer medicines if your child needs four doses a day, unless there is a specific time requirement for administering the medicine.

All medication will still need to come in via the School Office where you will have to complete a new form. We will ensure your child is given their medication and record it on two separate forms. We will then require you to sign for the medicine at the end of each afternoon, and again when you hand it back the following day.

All inhalers for asthma sufferers will be taken in through the School Office so we can record their expiry dates, but will then be held in class and administered and recorded by the class teacher or LSA.

Yours sincerely

Mrs Sarah Luker
Headteacher

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Pupil's Health Questionnaire

It is important that all children with medical conditions are supported to make sure that they are able to access their education. Some children with medical conditions may need care or medication to manage their health condition and to keep them well during the school day. Could you please complete the questionnaire below and return it to school as soon as possible so that we are able to assess your child's health needs and make arrangements to support them if necessary. In order to ensure that any medical needs are appropriately met in school we may need to discuss your child's health with the School Nursing service or another health professional who is involved in your child's care.

Name of child Date of Birth

Home Address.....

Does your child have a medical condition/ health concern?

YES		NO	
-----	--	----	--

If YES please give details

Does your child have a medical condition/health concern that needs to be managed during the school day?

YES		NO	
-----	--	----	--

If YES please give details

Does your child take medication during the school day?

YES		NO	
-----	--	----	--

If YES please give details

Does your child have a health care plan that should be followed in a medical emergency?

YES		NO	
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If YES please give details

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the school to discuss this information with the School Nursing service or other health professionals who are involved in my child's care.

Signature(s) _____ Print Name _____
[Parent/ Carer with parental responsibility]

Date _____ Contact number _____

PLEASE RETURN TO SCHOOL EVEN IF YOUR RESPONSE IS "NO". THANK YOU

Appendix B - Individual Healthcare Plan



Child's name

Class

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Who is responsible for providing support in school

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

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

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Appendix C - Staff training record – administration of medicines



Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	

I confirm that _____ has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated

Trainer's signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date _____

Appendix D - Parental agreement for Padnell Junior School to administer medicine



Dear Parent

We require your written permission to administer any medicines in school. Please do not decant medicines into other containers. We can only accept medicines in their original container as dispensed by the pharmacy; otherwise we might miss important instructions and warnings. If your child refuses to take the medicine, we will make every effort to inform you on the same day.

Please hand the medicine over to a member of the Admin team personally.

For any medicines required on a long term basis, ask the pharmacy if they can supply a separate labelled supply just for the school (they might need another prescription to do this). We can then keep a separate supply at school without the need for you to send medicines in each day.

The school will not give your child medicine unless you complete and sign this form, in accordance with the school policy that staff can administer medicine.

Date for review to be initiated by	
Name of school	Padnell Junior School
Name of child	
Date of birth	
Class	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Strength of Medicine	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
How should medicine be stored?	
Are there any side effects that the school needs to know about?	
Self-administration	Yes / No
Procedures to take in an emergency	

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

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	

I understand that I must deliver the medicine personally to

School Admin Team

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

Signature(s) _____

Date _____

Appendix E - Record of medicine administered to an individual child



Name of child	
Date medicine provided by parent	
Class	
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

Appendix F - Fridge Monitoring Sheet



- Once a day, you must record the temperature of any fridge used to store medicines
- The temperature should not exceed 8C or fall below 2C
- Use a thermometer that records the maximum and minimum temperatures reached over 24 hours and ensure that you re-set it each day
- Don't place medicines at the back of the fridge as they can freeze and this might reduce their efficiency
- If the temperature is out of range, check with a pharmacist to see if the medicines are still suitable for use. Record their advice on the bottom of this form.

Day	Month:		Year:	Month:		Year:
	Min	Max	Signature	Min	Max	Signature
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
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29						
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31						

Record pharmacist advice here (for any occasions where the fridge is out of range):

Date contacted:

Pharmacist's Name:

