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“Working to Empower the Community”

Pamela Beswick - Project Director

Community
Legal Service



Help Point



Consent Form for Staff to administer Medication whilst the child is in the Mobile crèche

I give permission for staff to administer any **prescribed** medication whilst my child is in the mobile crèche.

Name of child: _____

Please give details of any **prescribed** medication(s) your child has to take, should these need to be administered whilst your child is in our care

Name of Medication _____ in its original container (clearly labelled & named)

Dosage _____ (ie: 1 teaspoon 5 mls)

Times _____ (ie: 10am; 2pm; 6pm etc)

Please give any additional information on administering the Medication _____

The information above will be transferred into a 'Medicines Book' and the member of staff responsible for administering the medicine will have a witness present. The Parent / Carer will be asked to inform the Staff of the time of the last dose given prior to attending the Crèche and this will be recorded in the Medicines Book. Both members of Staff will sign the book after administering the medicine and the Parent / Carer will be asked to sign the Medicines Book at the end of the session.

I agree to the above procedures

Signed (Parent / Carer) _____

Date _____



Children's Fund

Charity Registration Number 1076393

Member of AdviceUK (previously FIAC)



INVESTOR IN PEOPLE