



WYMONDHAM COLLEGE

A World Class State Boarding and Day School

Principal: Emma Arrand BA (Hons), FCCT, QTS

Dear Parents/Carers,

As we get near to the end of term and enter the school holidays, I am writing to remind you of the procedure for ordering repeated medication or contacting a GP during the school holidays.

Medications

Wherever possible we ask matrons to ensure children have enough medication ordered for the duration of the school holidays. However, there are restrictions on certain medications which mean this is not always possible. Equally students may be away from College for longer than planned or you may have an issue with the medication which means you require more before your child returns to College.

If you require repeat medication this is ordered via the Wymondham Medical Practice website through the following link-

<https://forms.office.com/e/NdJbxuWR9W>

You then complete the form. It asks for a staff member name but please just type in your details and then 'parent'. You will need to put in the free text box at the bottom **STUDENT AT HOME** and a **POSTCODE** of a pharmacy near you that you wish to collect the medication from. The surgery will then email you to confirm the request has been received and actioned.

You DO NOT need to inform us you have done this as the medication will be a 'one off' dispense so will not affect any medication ordered upon return to school.

PLEASE BE AWARE THAT BOOTS PHARMACY, WHO SUPPLY OUR MEDICATIONS REQUIRE A 7 DAY TURN AROUND FOR REPEAT MEDICATIONS. THEREFORE, IT IS ESSENTIAL YOUR CHILD RETURNS TO SCHOOL WITH MEDICATIONS AND SUFFICIENT STOCK FOR A MINIMUM OF 7 DAYS, BUT PREFERABLY FOR 14 DAYS.

YOU MAY THEREFORE NEED TO PUT THROUGH A REPEAT PRESCRIPTION REQUEST DURING THE SCHOOL HOLIDAYS.

Golf Links Road, Wymondham, Norfolk, NR18 9SZ

01953 609000
01953 603313

enquiries@wymcol.org
www.wymondhamcollege.org



Wymondham College is a member of the Sapientia Education Trust, a charitable company limited by guarantee, registered in England and Wales with company number 7466353.

GP review/appointment


If your child requires a GP review whilst away from College they can be registered as a temporary patient at a surgery local to you (if you do not live in the Wymondham area) or go to a walk in centre. Alternatively you can phone the Wymondham medical partnership for advice on **01953 602220** or you can go to their website and fill in the online form to request an online appointment.

Appointments – [Appointments - Wymondham Medical Partnership](#)

If any medical care is sought during school holidays it is helpful to email us with details in case we need to follow this up upon your child's return to college. We are not linked to NHS systems so will not receive automatic notification about any medical care received. For boarding students referred for medical appointments with external providers, it is College and hospital policy that a parent or guardian must provide transport and attend the appointment with the student.

All that is left is to wish everyone a Happy Christmas on behalf of all the team here in the Medical Centre.

Warm regards,

A handwritten signature in black ink, appearing to read 'Laura May', with a stylized flourish at the end.

Laura May,

Medical Centre Lead Nurse.

CONSENT TO TREATMENT

PARENTAL REQUEST FOR ADMINISTRATION OF MEDICATION BROUGHT IN FROM HOME

The college can only give your child medication if you complete and sign this form.

Child's Name: _____
Date of Birth: _____
House: _____
Name and strength of medicine: _____
Expiry Date: _____
How much to give (i.e. dose): _____
When to be given: _____
Any other instructions: _____
Number of tablets _____

Note: Medicines must be in the original container,

Daytime phone no. of parent /Carer _____

Agreed 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 for the administration of the stated medicine to my child in accordance with 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 medication is stopped.

Parent's/Carer's signature: _____ Date _____

Print Name: _____

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