

Brackenwood Junior School

Policy for the Administration of Pupil Medicines and Management of Children's Illness

January 2025- December 2027

1. General Policy of Statement

- (1.1) The Governors have adopted the Guidelines issued by Wirral County Council in relation to Medication in Schools. These guidelines are more comprehensive and detailed than this policy statement and should be referred to for more information.
- (1.2) Children who are generally unwell should not be in school and should not return to school until they are fit to participate in the curriculum as normal (some exceptions and are discussed later in the policy).
- (1.3) Parents are responsible for any medicines their children may need (the school may support the administration of some medicines on request see 2.2 below).
- (1.4) In the event of an illness occurring during the school day; the school will make every effort to contact the parents, or a designated carer, with the view to the child going home. Parents are responsible for providing the school with emergency contact numbers and for updating these as necessary. Parents must be ready and willing to remove an ill child or make arrangements for care elsewhere. No child would be sent home alone when ill.
- (1.5) If a child's health needs are likely to affect their normal participation in school life, then it is the responsibility of the parents to inform the school of this fact. This should be done on the admission form when applying to the school, or for subsequent developments, by letter.
- (1.6) All staff are expected to be responsible for the care of the children's health in the school. As such staff would be expected to exhibit the same level of response as would be expected of a careful and prudent parent in similar circumstances. The school has a number of designated First Aiders for dealing with accidental injury. In the case of a children's illness this should be reported to the school secretary. Where it is suspected that a child will need urgent medical attention, for an illness or accident, an ambulance should be summoned on 999 and the Headteacher, Deputy or Assistant Head should be informed.
- (1.7) The Governing Body, together with the Headteacher, are responsible for ensuring that this Policy and Guidelines are implemented and adhered to.
- (1.8) All supply staff and visitors who will be working with children must be issued with a copy of details of children with specific ongoing medical needs and any procedures or Healthcare Plans in place to cover those needs.
- (1.9) Parents are encouraged to provide a hat and sun block for children during the summer months. High factor sunscreens are available which are long lasting and will provide protection for children through the lunch period even when administered in the morning. Children may bring sunscreen to school for self- administration. Staff will apply sunscreen in exceptional circumstances (e.g. There is extreme sensitivity to the

sun and the child is too young or has special needs which prevent self- application). Parents will be required to sign permission form.

- (1.10) All children are encouraged in school to bring a water bottle to school every day but particularly so in the hottest months. There are a number of drinking taps in school where these can be replenished.

Important the detailed guidelines provided in the LA Manual Medication in Schools should be referred to for guidance in all cases. This policy briefly outlines the main points and specific responsibilities in school. The advice of Health Service is paramount in supporting children's individual illnesses.

2. Specific Policies and Procedures

2.1 Illness in School

A child will be allowed to attend school whilst unwell if suffering from a chronic illness and on advice from the School Health Service would benefit from leading as normal and happy life as possible.

2.2 Medicines in School

Prescribed medicines will be administered in school on the following conditions:

- A pupil medication request form has been completed by Parent/Carer
- The Doctor prescribing has cleared the children to return to school.
- Clear instructions about administering the medicine are given and the medicine is clearly labelled.
Name of the child
Dose/frequency of administration
Instructions for administration pharmacy
Date of dispensing
Cautionary advice
Expiry date.
- All effort has been made to schedule the dosage of the medication so that it does not fall within school times. (only medication that is required 4 times per day or is required before food)
- Parents are responsible for delivering and collecting medicines from the school office at the end of the school day.
- Medicines will not generally be kept in school with the following exception:
 - A. Paracetamol provided by a parent may be kept for a child who regularly suffers from: headaches and toothache.
 - B. Medication associated with treatment as appropriate to an agreed Individual Health Care Plan e.g. epi-pens, medication for epilepsy.
 - C. Inhalers for Asthma
 - D. Antibiotics – Completion of a course on GPs instructions where the dosage schedule makes administration in school unavoidable.
- Medicines will kept in secure labelled boxes in the First Aid room. If refrigeration is required then they will be placed in the refrigerator in the First Aid room.
- No medicine can be given without parents consent via a pupil medication form.
- Medicines brought to school must be given to the school office by the parent on arrival. **On no account should children keep medicine with them in bags or classrooms.**

Non-prescribed Medicines

- Non prescribed medicines (e.g. Calpol, over the counter) will be administered in school on the following conditions 1. A pupil Medication Request Form has been completed by Parent/Carer. 2. Clear instruction about administering the medicine is given. 3. The medicine is proved by Parent/Carer (school will not keep its own stock)
- A written record each time medication is administered to a child will be kept.

2.3 ADMINISTERING MEDICINES IN SCHOOL.

- Where possible parents shall be responsible for the administration of medicines. However, should it be agreed by the Headteacher/Deputy Headteacher/Assistant Headteacher medicines may be administered by on a voluntary basis by:
 - 1) School Administration Team or nominated other member of staff following structured procedures laid down in the Guidelines.
 - 2) The pupil as part of a written agreement with the parent or doctor such as in the case of asthma inhalers.
- A child refusing to take medicine will not be forced to take a treatment. The parent or carer will be contacted as soon as possible.
- The school staff will not dispose of medicines. Parents should collect the medicine and dispose of it personally.
- Educational Visits – the medical needs of pupils will be considered at the planning stage of any visit. Reference will be made to the Guidelines for Educational Visits and Outdoor Education Activities Manual. It will be noted on EVOLVE system.
- Intimate or Invasive Treatment will only be carried out by a volunteer who is entirely willing. During any such treatment two staff will be present one if possible who is of the same gender as the child being treated. Staff will preserve the dignity of the child as far as possible.
- The following standard practice should be followed by school staff when administering medicines. They must:
 - a) Check written instructions received by the school and confirm with details on the medicine container.
 - b) Check the prescribed dosage.
 - c) Check the expiry date of the medicine (Inform parents if expiry date is approaching).
 - d) Check timing/frequency details.
 - e) Check record of last dosage given, to avoid double dosage.
 - f) Check child's name on the medicine again.
 - g) Complete written record of dosage given, including, date, time and signature.
- Staff involved with the administration of medicines should be alert to any excessive requests for medicine by children or parents on their behalf.
- Have a register of children in the school that have been diagnosed with asthma or prescribed a reliever inhaler, a copy of which should kept with the emergency inhaler
- Have written parental consent for use of the emergency inhaler included as part of a child's individual healthcare plan
- Ensure that the emergency inhaler is only used by children with asthma with written parental consent for its use
- Ensure that appropriate support and training for staff in the use of the emergency inhaler
- Maintain records of use of the emergency inhaler and informing parents or carers that their child has used the emergency inhaler
- Have at least two volunteers responsible for ensuring the protocol is followed

- Schools can buy inhalers and spacers (these are enclosed plastic vessels which make it easier to deliver asthma medicine to the lungs) from a pharmaceutical supplier, provided the general advice relating to these transactions are observed. Schools can buy inhalers in small quantities provided it is done on an occasional basis and is not for profit. The supplier will need a request signed by the principal or Headteacher (ideally on appropriately headed paper) stating:
- The name of the school for which the product is required;
- The purpose for which that product is required, and
- The total quantity required.
- Schools may wish to discuss with their community pharmacist the different plastic spacers available and what is most appropriate for the age-group in the school. Community pharmacists can also provide advice on use of the inhaler. Schools should be aware that pharmacies cannot provide inhalers and spacers free of charge and will charge for them.
- With regard to care of the inhaler, the two named volunteers amongst school staff should have responsibility for ensuring that:
- On a monthly basis the inhaler and spacers are present and in working order, and the inhaler has sufficient number of doses available
- That replacement inhalers are obtained when expiry dates approach;
- During an incident, spacers should be available for use for an individual child and must be replaced following use;
- The plastic inhaler housing (which holds the canister) has been cleaned, dried and returned to storage following use, or that replacements are available if necessary.

3. **Training**

- All First Aiders in the school will be supported in training to maintain current First Aid Certificates.
- Where a child requires Individual Health Care Plan training will be sought for key staff from the Health Authority. The awareness of all staff to the problems is seen as a key element in a successful Health Care Plan.

4. **Staff Responsibilities.**

- Staff Indemnity – When staff are responsible for care and control of the children of others then they must take the same care that a reasonable, prudent and careful parent would take in the same circumstances. The staff are fully indemnified for claims of negligence providing that they are working within the scope of their employment.

4.1 **List of Trained Staff**

Lead Person for Managing Medicines at School

Headteacher

School First Aiders (Full First Aid at Work Certificate)

Name	Role	Renewal Date
Kirsty Case	Teaching Assistant	October 2027
Susan Jump	Teaching Assistant	April 2026

Joanne Powley	Teaching Assistant	October 2025
Clare Balmer	Senco	November 2025
Rosie Jones	Teaching Assistant	December 2026
Wendy Jones	Teaching Assistant	February 2027
Bev Wilson	Teaching Assistant	October 28

Trained Staff for Administering Medicines

Mrs E Nicol

Mrs J Johnson

Mrs M Milne

First Aiders

5. Treatment for Serious Medical Conditions

Children suffering from a chronic medical condition that may be on occasions develop into life threatening situation will have an Individual Health Care Plan.

- Staff concerned with this plan must be given training.
- All Supply Staff should be made aware of the possible dangers and what to look for.
- In the case of an emergency developing an ambulance will be summoned from the nearest phone using 999 regardless of any treatment undertaken.
- Should all trained staff be absent then the treatment will be given by the ambulance service only.
- The parent or carer will be informed.

6. Medic alert bracelets/necklaces

- These are deemed to be exceptions to the policy on jewellery. However, they should be removed for PE and held by the class teacher. After PE activities are completed the teacher will see that the bracelet or necklace is put back on.

7. Emergency Procedures.

- Normally when a child becomes unwell or is injured in an accident other than minor cuts and bruises) the school will arrange for the child to be looked after in a quiet and comfortable place until the parent or carer arrives.
- In a situation where an illness or injury is serious an assessment will be made by a registered first aider then an ambulance will be called using (9)999. The parent or emergency contact will be contacted as soon as possible and advised. No decision regarding potentially serious incidents should be taken alone.

8. Record Keeping

- The First Aid Lead/ Administration Staff are responsible for ensuring that medicine consent forms are correctly submitted and that the Accident file (Cpoms for Children and Every for adults) is completed in accordance with the Guidelines.

9. Publishing the Policy

- A brief summary of the policy will be published in the school prospectus and the policy posted on the web-site.
- Regular updates in the head teacher's newsletters will be used to make parents aware of procedures and policies and problems arising.
- Information will be published that a copy of the full Policy will be available to staff, Governors and parents in the Administration Office.

10. Review

In order to ensure that this policy continues to be effective and applicable, the policy will be reviewed biennially by the Health, Safety & Resilience Team and relevant stakeholders. Conditions which might warrant a review of the policy on a more frequent basis would include: a) Changes to legislation; b) Employee concern. Following completion of any review, the program will be revised and/or updated in order to correct any deficiencies. Any changes to the program will be consulted through the relevant stakeholders.

Relevant Legislation and Guidance:

Managing Medicines in Schools and Early Years Settings (2004)

Education Act (1996)

Supporting pupils at school with Medical Conditions (April 2014).

Children and Families Act (2014)- Section 100 – duty on Governing Bodies to make arrangements for supporting pupils at their school with medical conditions.

Date: January 2025

To be reviewed: December 2027

APPENDIX 1 – Leaflet for Parents

SUPPORTING PUPILS WITH MEDICAL NEEDS IN SCHOOL

A GUIDE FOR PARENTS

This leaflet aims to give parents some general information about the way in which schools try to meet pupils' medical needs and suggests some of the ways in which parents can help school to do so.

GENERAL - Local Education Authorities and schools are responsible for the health and safety of pupils in their care. It is anticipated that teachers may take care the same care that a reasonable and careful parent would take in similar circumstances while they are responsible for the care and control of children. In Wirral the LEA works closely with the Health Authorities in order to provide schools with effective support and guidance for meeting the medical needs of pupils and providing detailed information and advice on expectations and best practice.

- In summary, this states that schools are able to develop their own policies and procedures for supporting pupil's medical needs, including arrangements for the administering medication at school.
- In general teachers cannot be legally required to administer medication or supervise a pupil taking it. This is a voluntary role. There may be in some cases non-teaching staff appointed who may be responsible for administering medication. Teachers and other school staff nevertheless have a duty to act as any reasonably careful parent would to make sure that pupils in their care are healthy and safe and this might extend to administering medicine or taking action in an emergency.
- For pupils with more complex needs school will draw up an Individual Healthcare Plan with parents and medical staff, with everyone concerned agreeing what action they will take to support the pupil.

HOW CAN YOU HELP YOUR CHILD'S SCHOOL? - It will help your child's school if you:

- Ensure your child is fit and well enough to attend school.
- Provide **FULL** details of any health problems he/she may have and keep the school informed of any changes.
- If medicines are prescribed for your child, ask if they can be taken outside of school hours (8:00am, 3:30pm and bedtime).
- If appropriate, offer to attend the school to administer his/her medication.
- Provide full details of any medication requirements and ensure medicines supplied to the school do not exceed their expiry date.
- Primary age children should not carry medicines except possibly inhalers or insulin accompanied by written consent to the school.

- Ensure school has a telephone number where you can be contacted in an emergency.
- Medicines should be in a container, clearly labelled with the child's name, type of medicine, dosage, storage instruction and expiry date.

Please Note: Schools are advised not to keep medicines in school for general use, with the exception of Paracetamol which may be given in age appropriate doses, with Parents written consent for certain conditions. Schools cannot be expected to take responsibility for any other non-prescribed medicines which may be brought into school to treat minor ailments.

APPENDIX 2 – CONTACTING EMERGENCY SERVICES

Contacting Emergency Services

Speak clearly and slowly and be ready to repeat information if asked.

Request for an Ambulance

Dial 999, ask for ambulance and be ready with the following information:

1. Your telephone number – School 0151 608 3001
2. Give your location as follows:
Brackenwood Junior School, Norbury Avenue, Bebington, CH63 2HH
3. State the postcode is CH63 2HH
4. Give exact location in the school setting – on lower playground near to climbing wall.
5. Give your name
6. Give name of child and brief description of child's symptoms.
7. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to the child/adult.
8. Place a completed copy of this form by the telephone.

Short Term

Parental agreement for school/setting to administer medicine (short-term)

The school/setting will not give your child prescribed medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine. You are also agreeing to other appropriate employees to administer medicine if authorised to do so by the school/setting.

Name of school/setting

BRACKENWOOD JUNIOR SCHOOL

Name of child

Date of birth

Group/class/form

Medical condition or illness

Medicine

Name/type of medicine
(as described on the container)

Date dispensed

Expiry date

Dosage and method / Timing

Special precautions
Are there any side effects that the
school/setting needs to know about?

Self administration

YES / NO

Procedures to take in an emergency

Contact Details

Name
Daytime telephone no.
Relationship to child
Address

I accept that this is a service that the school/setting is not obliged to undertake.
I understand that I must notify the school/setting of any changes in writing.
I understand that a non-medical professional will administer my child's medication, as defined by the prescribing professional only.

Date Signature(s)

APPENDIX 3b

Long Term



Parental agreement for school/setting to administer medicine (short-term)

The school/setting will not give your child prescribed medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine. You are also agreeing to other appropriate employees to administer medicine if authorised to do so by the school/setting.

Name of school/setting
Name of child
Date of birth
Group/class/form
Medical condition or illness

BRACKENWOOD JUNIOR SCHOOL

Medicine

Name/type of medicine
(as described on the container)
Date dispensed
Expiry date
Dosage and method / Timing
Special precautions
Are there any side effects that the school/setting needs to know about?
Self administration
Procedures to take in an emergency

YES / NO

Contact Details

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Name
Daytime telephone no.
Relationship to child
Address

I accept that this is a service that the school/setting is not obliged to undertake.
I understand that I must notify the school/setting of any changes in writing.
I understand that a non-medical professional will administer my child's medication, as defined by the prescribing professional only.

Date Signature(s)

Appendix 3c

Short Term Viral Wheeze



Parental agreement for school/setting to administer medicine

The school/setting will not give your child prescribed medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine. You are also agreeing to other appropriate employees to administer medicine if authorised to do so by the school/setting.

Name of school/setting

BRACKENWOOD JUNIOR SCHOOL

Name of child

Date of birth

Group/class/form

Medical condition or illness

Viral Wheeze - TEMPORARY

Medicine

Name/type of medicine
(as described on the container)
Date dispensed

Salbutamol with spacer

Expiry date

Dosage and method / Timing

2 puffs every 4 hours

Special precautions
Are there any side effects that the school/setting needs to know about?

Self administration

YES / NO

Procedures to take in an emergency

**If inhaler is required more than
4 hourly, then inform parents.**

Asthma

- 1) Signs shortness of breath, persistent coughing.
- 2) Response use inhaler as instructed and encourage to sit leaning forward helping the chest to expand.

ASTHMA-severe

- 1) Signs shortness of breath, working hard to breathe/using tummy muscles to breathe, unable to complete a sentence, take fluids or is getting tired
- 2) Response Dial 999 stating severe asthma and inform parents. 1 puff of blue reliever inhaler via spacer every 30 seconds until ambulance arrives

ASTHMA Life threatening

- 1) Having severe difficulty breathing, has blue lips, is pale drowsy or weak
- 2) Response Dial 999 stating severe life threatening asthma and inform parents. 1 puff of blue reliever inhaler via spacer every 30 seconds until ambulance arrives

Contact Details

Name

Daytime telephone no.

Relationship to child

Address

I accept that this is a service that the school/setting is not obliged to undertake.

I understand that I must notify the school/setting of any changes in writing.

I understand that a non-medical professional will administer my child's medication, as defined by the prescribing professional only.

Date

Signature(s)

Please ensure temporary permission is given for use of the school's

spare inhaler should your child's inhaler fail, or an inhaler is required

in an emergency.

If the viral wheeze persists for longer than 2 weeks then the child should be taken back to the GP for further advice.

APPENDIX 4

PUPIL MEDICATION RECORD

ADMINISTRATION OF MEDICATION

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