

Drugs Policy

Believe, Achieve, Celebrate

Reviewed September 2021 M Woodhouse

Reviewed November 2023 M Woodhouse

Review November 2025

| Date of review | Key updates |
|----------------|--|
| 09/09/21 | 8.1 Administering of non -prescribed medicines |

(see also Behaviour and Discipline; Health, Safety and Welfare; PSHE and Citizenship)

1 Introduction

- 1.1 The following guidance and model policy draw directly on advice contained within DCFS publication 'Managing Medicines in Schools and Early Years Settings': DCFS/Department of Health 2005 Ref 1448-2005 DCL-EN
- 1.2 The DCFS publication provides updated guidance on managing medicines in schools and early years settings, and replaces the earlier DFEE/DoH guidance Supporting Pupils with Medical Needs: a Good Practice Guide, and circular 14/96 Supporting Schools with Medical Needs in School, which were published in 1996.

2 Aims and objectives

- 2.1 The aims of this policy are to:
 - clarify the Academy's approach to drugs, for staff, pupils, governors, parents or carers, and to clarify the legal requirements and responsibilities;
 - give guidance to staff on the Academy's drugs education programme;
 - safeguard the health and safety of pupils and staff in our Academy;
 - enable staff to manage drug-related incidents properly.

3 Terminology

- 3.1 The term 'drugs' is used throughout this policy to refer to all drugs:
 - all illegal drugs (those controlled by the Misuse of Drugs Act 1971);
 - all legal drugs, including alcohol and tobacco, and also volatile substances (those giving off a gas or vapour which can be inhaled);
 - all medicines, whether over-the-counter or on prescription.

4 Thurnby Mead Primary Statement

- 4.1 Thurnby Mead Primary Academy believes that the presence of unauthorised drugs in our Academy is not acceptable.
- 4.2 We want our Academy to be a safe place for us all to work, and the presence of unauthorised drugs represents a threat to our health and safety.

5 Responsibilities

- 5.1 The Principal will:
 - ensure that staff and parents are informed about this drugs policy;
 - ensure that the policy is implemented effectively;
 - manage any drug-related incidents;
 - ensure that staff are given sufficient training, so that they can teach effectively about drugs, and handle any difficult issues with sensitivity;

- liaise with external agencies regarding the Academy drugs education programme;
- monitor the policy on a day-to-day basis, and report to governors, when requested, on the effectiveness of the policy.

The governing body will:

5.2

- establish general guidelines on drugs education;
- support the Principal in following these guidelines;
- inform and consult with parents about the drugs education policy;
- liaise with the Trust and health organisations, so that the Academy's policy is in line with the best advice available:
- support the Principal in any case conferences, or in appeals against exclusions.

6 Objectives of drugs education

- Drugs education should enable pupils to develop their knowledge, attitudes and understanding about drugs, and to appreciate the benefits of a healthy lifestyle, relating this to their own and others' actions. It should:
 - build on knowledge and understanding;
 - provide accurate information, and clear up misunderstandings;
 - explore attitudes and values, and examine the risks and consequences of actions relating to drugs;
 - develop pupils' interpersonal skills, their understanding of rules and laws, and their self-awareness and self-esteem;
 - ensure that all children are taught about drugs in a consistent manner, following guidelines that have been agreed by parents, governors and staff.

7 Drugs education

- 7.1 We regard drugs education as a whole Academy issue, and we believe that opportunities to teach about the importance of a healthy lifestyle occur naturally throughout the curriculum, but especially in science, PSHE and citizenship, RE and PE. There are also opportunities in circle time.
- 7.2 Teaching about drugs will begin in Key Stage 1, when pupils are taught about seeing the doctor, visiting the chemist, and the importance of medicines and their safe handling.
- 7.3 In Key Stage 2, pupils will learn that alcohol is the most widely used drug, and that its dangers can be overlooked. We will ensure that our pupils are aware of the risks associated with drinking. We teach pupils that smoking is a minority habit, and encourage them to consider its effects and risks. We also teach pupils about the dangers of volatile-substance abuse, because of the high risk of accidental death, especially for first-time and occasional abusers.
- 7.4 We acknowledge that by the time pupils are in Year 6, some of them may have had some experiences with drugs already, so we must help to equip pupils to handle risky situations, before they actually meet them.
- 7.5 We recognise that learning is most effective when it addresses the development of knowledge, attitudes and skills together and when teaching and learning are participative and active. We use a variety of teaching styles that are

characterised by active learning. We find out what the children know already, we pose dilemmas, and we get the children to discuss choices. Wherever possible, the information we give is visually reinforced. We use drama, role-play or ICT to demonstrate various strategies and scenarios. In short, we seek to engage our pupils. We give them the opportunity to talk to groups or to the whole class. We encourage them to listen to the views of others, and we ask them to explore why drugs are such a problem for society.

- 7.6 We aim to teach all pupils about drugs, however different their attainment levels, and however diverse their requirements. We recognise that pupils with special educational needs may be more vulnerable, that different communities have different attitudes towards drug abuse, and that some pupils may have drugabusing parents.
- 7.7 Drugs education takes place during normal lesson time. Sometimes, a class teacher will seek support from the Academy nurse or another health professional. Lessons that focus on drugs education form part of a sequence of lessons that are designed to promote a healthy lifestyle.

8 Drugs at the Academy

- Pupils may bring prescribed and non-prescribed medication into the Academy. Parents will complete documentation informing the Academy of the administration. The Department for Education has confirmed to the BMA that an FP10 is not required and non-prescription medication can be administered where parents have given written consent.
- 8.2 Where children have medical needs, parents must give us details of the child's condition and medication. Parents will bring the medication to Academy in a secure, labelled container. Records will be kept of all medication received and given. Emergency medication may be stored securely in the classroom (for anaphylaxis or asthma); other drugs will be stored securely in the medical room. A medicine plan must be filled and signed by all parties.
- 8.3 Solvents and other hazardous chemicals must be stored securely, to prevent inappropriate access, or use by pupils. Teachers are cautious with older, solvent-based Tippex, with aerosols, with glues and with board-cleaning fluids.
- 8.4 Legal drugs are legitimately in Academy only when authorised by the Principal. Members of staff who smoke must keep their tobacco and matches or lighters secure. Smoking is not permitted anywhere in the Academy or within the designated area around the Academy according to the Local Authority Policy.

9 Drugs incidents

- 9.1 An incident involving unauthorised drugs in Academy is most likely to involve alcohol, tobacco or volatile substances, rather than illegal drugs.
- 9.2 The first priority is safety and first aid, i.e. calling the emergency services and placing unconscious people in the recovery position. An intoxicated pupil does not represent a medical emergency, unless unconscious.

- 9.3 Pupils suspected of being intoxicated from inhaling a volatile substance will be kept calm; chasing can place intolerable strain on the heart, thus precipitating sudden death.
- 9.4 Any drug suspected of being illegal will be confiscated and stored securely, awaiting disposal; these precautions must be witnessed and recorded. Staff should not taste unknown or confiscated substances.
- 9.5 Legal but unauthorised drugs or medicines will also be confiscated, and will be returned to parents; the Academy may arrange for the safe disposal of volatile substances.
- 9.6 Where a pupil is suspected of concealing an unauthorised drug, staff are permitted to carry out a personal search in accordance with our searching and confiscation policy (two adults must be present and parent must be informed), but may search pupils' bags, trays, etc.
- 9.7 The Principal will decide whether the police need to be called or whether the Academy will manage the incident internally.
- 9.8 A full record will be made of any incident.
- 9.9 The Principal will conduct an investigation into the nature and seriousness of any incident, in order to determine an appropriate response.

10 The role of parents

- 10.1 The Academy is well aware that the primary role in children's drugs education lies with parents. We wish to build a positive and supporting relationship with the parents of our pupils, through mutual understanding, trust and cooperation. To promote this objective, we will:
 - inform parents about the Academy drugs policy;
 - answer any questions that parents may have about the drugs education that their child receives in Academy;
 - take seriously any issue which parents raise with teachers or governors about this policy, or about arrangements for drugs education in the Academy;
 - encourage parents to be involved in reviewing the Academy policy, and making modifications to it as necessary;
 - inform parents about the best practice known with regard to drugs education, so that the parents can support the key messages being given to children at Academy.
- 10.2 When an incident concerning unauthorised drugs has occurred in Academy, and a pupil is involved, we will inform the parents, and explain how we intend to respond to the incident.
- 10.3 Staff will be cautious about discharging a pupil to the care of an intoxicated parent, particularly when the parent intends to drive the pupil home. Staff will suggest an alternative arrangement. The focus will be the pupil's welfare and safety. Where the behaviour of an intoxicated parent repeatedly places a child at risk, or the parent or carer becomes abusive or violent, staff should consider whether the circumstances of the case are serious enough to invoke child protection procedures, and possibly the involvement of the police.

11 Monitoring and review

11.1 This policy will be reviewed every two years or sooner if required.