

# HINTON ST GEORGE CHURCH of ENGLAND FIRST SCHOOL

'Let Your Light Shine'



## DRUGS EDUCATION POLICY

Adopted: April 2020

Review date: April 2024

Signed: \_\_\_\_\_

Chair of Governors

## **Hinton St George CE First School**

This Policy should be taken and used as part of Hinton St George Church of England School's overall strategy and implemented within the context of our vision, Instrument of Government aims and values as a Church of England School.

This Policy statement has been formally adopted by the governing body, in consultation with the headteacher, and will be reviewed at the date given on the cover page.

## **Introduction**

Hinton St George First School recognises that:

- drugs play a part in the lives of every one of us and that experimentation with drugs has always been a feature of many young people's lives.
- this school has a responsibility to help to reduce the harm from drugs and to play a role in drug prevention.

This policy aims to emphasise the school's pastoral role and proactive approach to drugs education and to give a clear view on drug use in school. In developing this policy consideration has been given to legal requirements, the guidance from the Department of Education and the needs of the pupils, teachers, governors and parents/carers.

## **A definition of drugs**

For the purposes of this policy, the term drugs includes over the counter drugs, prescribed medication, tobacco, alcohol, solvents and other substances whose use may have harmful effects on the body, as well as illegal drugs.

## **The reasons for producing this policy are:**

- To meet the needs of pupils.
- To provide a framework for staff to inform teaching and responses to drug related incidents on school premises.
- To inform parents and carers about the schools approach to dealing with incidents and the drug education programme.

## **The staff and governors of the school:**

- are committed to promoting the good health, safety and well-being of the pupils and adults in the school community.
- are committed to working in partnership with parents and will seek to involve parents in the drug education programme by keeping them informed.
- believe that health education is a vital part of the personal and social education of every pupil, (Personal, Social and Health Education - PSHE).

### **Drug Education Programme**

The drug education programme will be co-ordinated by Headteacher. Drug education in the school will be provided by all teachers, supported by a range of relevant practical training.

All teaching and support staff, health professionals and staff from appropriate agencies will contribute to the delivery of the drugs education programme.

#### **The purpose of the drug education programme is to:**

- enable pupils to make healthy informed choices by increasing knowledge, challenging attitudes, developing and practising skills.
- provide accurate information about different substances, particularly the use of medicines, alcohol and smoking cigarettes.
- explain that using other people's medicine is dangerous and misusing any substance can be harmful.
- help pupils to develop self-confidence and strategies to respond to unwanted peer pressure.

The drug education programme will be delivered throughout the school and will be reinforced as it arises across the curriculum.

## **Administration of medication - in school and on school journeys**

### **Prescribed Drugs**

Asthma inhalers must be easily accessible and are stored in named clear plastic bags in containers within each classroom. A member of staff must observe a child using their inhaler and then complete an 'Inhaler Slip' which is to be sent home on the day the inhaler has been used.

1. School staff should not administer medication to pupils unless written parental consent is received.
2. All medicines at school need to be managed by school staff.
3. Medicines can only be brought on to school premises with teachers' knowledge and approval.
4. In the event of a child being taken to hospital they will be escorted by a member of staff and parents will be informed as early as possible. Any medical notes and details of the medicine book must accompany the child to hospital.
5. All medication must be kept out of the reach of children. If two or more prescribed medicines are needed these must be kept in a separate container.
6. For off-site activities, all necessary medication and prescribed drugs are the responsibility of the participating school staff that are accompanying the pupil/
7. All medicines must be dated, labelled with the name of the pupil, the name of dose of the drug and the frequency of administration.
8. Staff must complete, sign, date and time record cards each time they give medication to a pupil.
9. Medicines that need to be refrigerated can be kept in a fridge containing food, but must be kept in an airtight container and clearly labelled. The school should restrict access to a refrigerator holding medicines.
10. School staff should not dispose of medicines. Parents should collect medicines held at school at the end of each term. Parents are responsible

for ensuring medicines are in date and the disposal of date-expired medicines.

11. School must have sufficient information about the medical condition of any pupil with long term medical needs before a child starts school or when a pupil develops a condition. A written health care plan should be completed, involving parents and relevant health professionals. This should include:

- Details of a pupil's condition
- Special requirements e.g. dietary needs, pre-activity precautions
- Medication and any side effects
- What to do and who to contact in an emergency
- The role that the school can play

Children are not allowed to hold or self-administer any other medicine, for example, Paracetamol for a headache, cough sweets, cough mixture or antibiotics.

### **Confidentiality**

Pupils at the school need to feel able to talk in confidence to a member of staff about drugs without fear of being judged or told off.

The welfare of children will always be central to our policy and practice. However, teachers will not be able to promise complete confidentiality if specialist help is needed and this will be explained to the child.

Information about a pupil in relation to drugs will follow the same procedure as for other sensitive information/child protection:-

- The head teacher/designated member of staff will be informed.
- Help sought, if appropriate, in discussion with the pupil and the parents/carers.
- Confidentiality will be maintained beyond the class teacher and Headteacher.

### **In all situations involving drugs the following principles apply**

1. All situations will be carefully considered before deciding on the response.
2. The needs of the child will always come first.

3. Supporting the child will be the first response if at all possible.
4. Parents/carers will be involved at an early stage and throughout any investigation.
5. Support agencies, including the police, will be involved if appropriate and in consultation with the parents/carers.
6. Responses may include both disciplinary and counselling responses.
7. The headteacher/designated safeguarding leads have the responsibility for organising the pupil support, involving parents and external agencies.

### **Training of teachers and support staff**

The school will ensure that the teachers and support staff receive training and support to help them provide effective drug education.

The school will take advantage of the support, advice, information and training provided by the local support services.