

# Medicines and Drugs Policy

Clipstone Brook Primary School



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| <b>Approved by:</b>      | Sarah Orr     | <b>Date:</b> December 2025 |
| <b>Last reviewed on:</b> | NA            |                            |
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# Medicines and drugs Policy

## **Introduction**

### **Safeguarding:**

At Clipstone Brook Lower School, safeguarding and child protection is paramount and we are fully committed to ensuring the welfare and safety of all our children. We believe that pupils have a right to learn in a supportive, caring and safe environment which includes the right to protection from all types of abuse; where staff are vigilant for signs of any student in distress and are confident about applying the processes to avert and alleviate any such problems. If any behaviour is a concern in relation to safeguarding Clipstone Brook Lower School procedures and processes will be followed at all times in accordance with the Child Protection and Safeguarding Policy. Any concerns will be referred to the Designated Safeguarding Leads; Sarah Orr, Jen Sinclair-Gunn and Sam Gale, as procedures state.

### **Principles:**

There is no legal or contractual duty on school staff to administer medicine or to supervise a pupil taking it. This is a purely voluntary role and is recognised as such by the DFE. While teachers have a general legal duty of care to their pupils, this does not extend to a requirement to routinely administer medicines.

Staff should not agree to administer medicines without specific training linked to a personal care plan for the child where:

- The timing of its administration is crucial to the health of the child or some technical or medical knowledge is required.
- Intimate contact with the pupil is necessary (this would include administration of rectal valium, assistance with catheters or use of equipment for children with tracheostomies).

Staff who do volunteer to administer medicines should not agree to do so without first receiving appropriate training and information. The local NHS Trust or Health Authority is in a position to advise schools on the source of the support required. In many areas this will be provided through the School Health Service. In accordance with the *National Framework for Children, Young People and Maternity Services*, all schools and educational settings have access to training provided by health professionals on all medical conditions, usually the School Nurse.

Governors will fully support any member of staff who does not wish to administer medicines or who feels that they are being unfairly pressurised to do so.

Governors recognise that it is desirable for children with long term recurring health such as asthma, epilepsy, arthritis, diabetes and eczema to be accommodated within the school in that they can continue their education. For this to be done however, proper and clearly understood arrangements for administration of medicines must be made.

Parents should be encouraged to provide maximum support and assistance in helping the school accommodate the pupil. This would include measures such as self administration or parental supervision.

## **1. Guidelines**

- 1.1 Any member of staff who is prepared to administer medicines should only do so under strictly controlled guidelines, fully confident that the administration will be safe.
- 1.2 Clear instructions about medicines requiring regular administration must be obtained and strictly followed.
- 1.3 A written record of the date and time of administration is recorded.
- 1.4 Any decision to agree to administer medicines has to be a matter of individual choice and judgement.
- 1.5 All members of staff who agree to administer medicines take on a legal responsibility to do so correctly.
- 1.6 In cases of accident and emergency staff help, as they and other school staff in charge of pupils have their general legal duty of care to act as any parent should.
- 1.7 Qualified medical treatment will be secured in emergencies at the earliest opportunity.
- 1.8 Parents are responsible for their child's medication and children who are genuinely unwell should not attend school.
- 1.9 We will only administer prescribed medicines with signed authorisation from the parent/carer and clear instructions provided. Please refer to 2.3 also.
- 1.10 Many pupils with long term medical conditions will not require medication during school hours. Those that do may be able to administer it themselves. If this is not the case then wherever possible, parents should be asked to make arrangements to come into school or for pupils to return home at lunchtime for medication.
- 1.12 If there is any doubt about any procedure, staff will not administer the medicines but check with the parents or a health professional before taking any further action.

## **2. Storage**

- 2.1 Guidance gives the following advice in relation to the storing of medication. The employer must ensure that health risks arising from medicines are properly controlled, in line with the Control of Substances Hazardous to Health Regulations 2002 (COSHH).
- 2.2 The First Aid trained LSAs are responsible for ensuring the safe storage of medicines. Prescribed medicines should be brought into school. These should be in the original container as dispensed by a pharmacist and include the prescribers' instructions for administration ( including child's name, dose of drug, frequency of administration, any likely side effects and the expiry date). Parents are responsible for ensuring this information is provided.

2.3 Non prescription medication will not be administered by the school. However, if a known condition for which a Health Care plan exists and has been agreed by the Headteacher, individual cases may be considered.

2.4 Medicines are stored safely in a secure location taking particular account of the correct storage temperature.

2.5 Where two medicines are required by a child, each should be kept in a separate container.

2.6 The school will not store large volumes of medication or out of date medicines. As far as practicable, the smallest possible dose of medicine should be brought into school. Parents will be asked to collect surplus or out of date stock for delivery back to the chemist, and should routinely collect medicines at the end of each school term. If parents do not collect medicines, they will be taken to the pharmacy by school staff for safe disposal.

2.7 Pupils should know where their medication is stored.

2.8 Some medicines, such as Epipens, must be readily available to pupils and must not be locked away.

2.9 Asthma inhalers are readily available to pupils in their classrooms. Parents must complete an inhaler information form, copies of which are held in the school office.

2.10 Members of staff may need to bring their own medication into school. This should be safely locked away. It does not need to be stored with pupils' medicine, but must not be kept in classrooms or in any area to which children have access.

#### **Returning medication to parents**

To ensure that medication is handed over correctly to parents, staff must ask for the child's name and date of birth. This must be checked with the label on the medication, before handing over.

#### **Educational trips and visits**

Medication and medical devices will remain readily available to staff and pupils on educational trips and visits that involve leaving the school premises. This may include pupils carrying their medicine, where possible and appropriate, e.g., for asthma inhalers for older children only.

If the medication is of a type that should not be carried by pupils, e.g., capsules, or if pupils are very young or have complex needs that mean they cannot self-administer, the medication will be taken by a designated staff member for the duration of the trip or activity.

At least one staff member will be trained to administer medication on every out-of-school trip or visit, which pupils with medical conditions will attend. Staff members will ensure that they are aware of any pupils needing medication administered during the trip or visit and know the correct procedure for administering their medication, e.g., timing and dosage.

If the out-of-school trip or visit will be over an extended period, e.g., an overnight stay, a record will be kept of the frequency at which pupils need to take their medication and any other information that

may be relevant. This record will be held by a designated trained staff member who is present on the trip and can manage medication administration.

## **Drug Misuse**

### **Procedure for handling and reporting incidents**

A suspected drug related incident is described as:

- Suspect drugs found on the school premises
- A pupil suspected of being in possession of drugs
- A pupil found in possession of drugs
- A pupil suspected of being under the influence of drugs
- An adult suspected of being under the influence of drugs

When an incident occurs the member of staff involved must:

- Make the situation safe
- Send for support
- Administer first aid if necessary
- If an illegal drug is found it should be secured in a safe place until dealt with by the police.
- Under no circumstances should staff try to analyse or identify it if unknown.
- Report the incident

The incident will in the first instance be reported to the Head Teacher who will contact the police. The parents will also be contacted and made aware of the situation. The incident will be recorded by the member(s) of staff involved.

All staff are made aware of the procedures and where necessary emergency procedures will be followed. If a search needs to be carried out the Head Teacher will conduct this with an appropriate witness.

### **Confidentiality**

Where a pupil discloses to a member of staff that he/she is taking drugs, it must be made clear that there can be no guarantee of confidentiality. However, the pupil may be advised of other sources of confidential information or advice. A record will be made of the disclosure, the Head Teacher informed, as well as the parents. The Head Teacher will commence the safeguarding procedure.

### **The role of the head teacher for drug related incidents**

If the Head Teacher has grounds to suspect that drugs are being used or supplied on the school premises, they will take appropriate steps to inform the relevant bodies in order to avoid any liability as a 'manager or occupier' of the premises. The Head Teacher is responsible for co-ordinating the arrangements to deal with cases of suspected or actual drug taking. Their role includes:

- Implementing procedures as outlined in this policy

- Receiving any substance found in school and ensuring it is kept secure until handed to the police
- Liaison with the appropriate authorities/outside agencies on any drug related incident
- Regularly updating staff on the procedures for dealing with a drug related incident
- The induction of new staff as appropriate

### **Procedures for handling alcohol misuse**

The school premises are an alcohol free zone. The school does not allow any alcohol to be brought onto or consumed in the school premises. This applies to visitors, staff and pupils.

Adults breaking this rule will be referred to the Head Teacher directly.

Pupils will be dealt with under the school's Behaviour Policy.

### **Procedures for handling tobacco misuse**

The school is a smoke free zone and no smoking of any cigarettes/cigars or e cigarettes is permitted on the premises.

Adults breaking this rule will be referred to the Head Teacher directly.

Pupils will be dealt with under the school's Behaviour Policy.

### **The management of solvents**

Pupils are not permitted to bring solvents or aerosols into school. This includes correction fluid and pens, correction thinners, glue, marker pens and spray deodorants.

All members of staff are responsible for the safe storage and usage of solvents in their classroom.

Where possible they should be locked away when not in use. This includes white board marker pens, glues and paints. The cleaners and site manager should ensure that their stores are locked when not in use and that solvents are held in a secure place.

## Drug Incident Procedure Form

Name of pupil

Date of Birth

Class

Date of Incident

Time of Incident

Location of Incident

Reported by

First Aid Administered Yes/No\*

Administered by

Ambulance Called

Yes/No\*

Time of call

Parents informed

Yes/No\*

Date

Time

By Whom

Drug Involved (if known)

Sample found

Yes/No\*

Where Sample retained

or

Date sample destroyed/taken by Police\*

Time

By Whom

Witnessed By

Police Informed

Yes/NO\*

Date

Time

By

Name of Officer

Form Completed by

Date

Position

Witnessed by

Date

Position

\*Delete as necessary

## Incident Witness Form

**Completed by**

Date