

Drug Education and Drug related Incidents Policy



School Policy for Drug Education and Dealing with Drug-Related Incidents

Members of staff responsible: - all Staff and Governors

Description of policy formation and consultation process

We believe that policies should reflect the ethos and beliefs held by the school community, therefore a wide range of representatives were actively involved in the compilation of this policy. These include members of SMT and teaching staff, support staff, pupils, governors, parent/carers, our school nurse, the local Community police Officer and a representative from the LEA advisory service. We have ensured that the Drugs Policy links with other relevant school policies including the policies on Behaviour, Child Protection, and Equal Opportunities.

Rationale

In line with the Government's 10 year strategy 'Tackling Drugs to Build a Better Britain' and the Gloucestershire Drug & Alcohol Action Team Strategy, Blakeney School has a policy on drug education and dealing with drug-related incidents, and provides a quality drug education programme for all our pupils. Blakeney School acknowledges that we cannot solve all the problems of drug misuse in society but recognises that education can play a key role in ensuring that young people know the risks of taking drugs, have the knowledge and skills to make informed decisions and know how to access support and help if needed. Blakeney School is committed to safeguarding the health and safety of its members and will not knowingly permit or tolerate possession, consumption, supply, or offer to supply, any restricted drugs on the school premises. If any of these offences are committed, they will be thoroughly investigated and sanctions applied when necessary. School staff and other adults on site should act at all times as responsible role models and set a good example of drug-related behaviour. Therefore this policy, with reference to restricted drugs, will apply to any person on the school premises, unless the Head Teacher has agreed for the rules to be altered for a particular occasion.

Drug definition

A drug is a substance, legal or illegal that can alter the way the mind or body works. Therefore this policy will include alcohol, tobacco products, caffeine, solvents and other volatile substances, over the counter drugs and medicines, prescribed medicines including tranquilizers and painkillers and illegal drugs.

General aims of drugs policy and procedures:

- to provide a protective framework within which staff can teach and pupils can be taught
- to help children and young people resist drug misuse in order to achieve their full potential in society
- to ensure that all pupils are given opportunities to develop skills, explore attitudes, consider consequences and increase knowledge and understanding in order to make healthy informed choices about drug use and misuse.

Specific aims:

- to provide pupils with accurate information about substances in order to dispel myths

- to increase understanding about the implications and possible consequences of drug use including related health and social issues
- to develop personal and social skills such as communication, assertiveness and decision making skills
- to develop and enhance self esteem and self confidence
- to inform pupils about appropriate sources of additional support and enable them to access these eg LEA pathways project, Infobuzz, GINI service within context of

Drug education

To be effective, drug education will be taught through the formal and informal curriculum, although the main vehicle will be the PSHE and Citizenship curriculum in conjunction with Science. The Science and PSHE Co-ordinators plan the delivery of the drug education programme together with the Head teacher, so it is clear who is delivering which aspects, how and when. This ensures that there is not repetition or omission, but that topics are introduced and reinforced appropriately. The school also actively co-operates with other agencies such as the Infobuzz, police and the LEA to deliver its commitment to drug education and to deal with drug-related incidents.

The programme is based on a needs assessment and aims to build on existing knowledge, skills and attitudes. Lessons are carefully planned, with appropriate grouping of pupils for different activities, clear learning outcomes for each topic and strategies for assessment. The whole programme is monitored at regular intervals throughout the year and the programme annually evaluated. The PHSE Co-ordinator takes the lead on these reviews and any subsequent amendments.

a) Content

The statutory National Curriculum Science Orders requires that the following elements of drug education are taught:

- Key Stage 1 (5 -7 year olds) - The role of drugs as medicines
- Key Stage 2 (7 -11 year olds) – That alcohol, tobacco and other drugs can have harmful effects

The National Curriculum PSHE and Citizenship Guidelines recommend that we help young people to:

- develop confidence and responsibility and make the most of their abilities
- prepare to play an active role as citizens
- develop healthy, safer lifestyles
- develop good relationships and respect the difference between people.

Through these elements our specific drug education programme includes:

- Year 2 – Medicines and keeping safe
- Year 4 – Facts about smoking and alcohol
- Year 6 – Awareness of effects and dangers of a range of legal and illegal drugs

b) Teaching approaches

Effective drug education should encourage the active participation of young people and use a wide variety of teaching approaches. We therefore encourage the use of:

- exposition
- role play
- brainstorming
- group work
- structured games
- audio and visual aids

- outside speakers/contributors
- theatre groups

c) Assessment, monitoring and evaluation

Lessons will be carefully planned using formative and summative assessment to ensure that the pupils reflect with the teacher on what they have learned in terms of knowledge and understanding, development of skills, and how their attitudes and values may have changed.

This is carried out in a variety of formal and informal ways. Teachers also have the opportunity to reflect on what they have learned from the programme.

Pupils record their progress and achievement in individual pupil profiles and also record agreed goals/targets for further progress. Teachers are required to report on personal and social development in pupils' annual school reports and will incorporate progress and achievement in drug education within this.

The Drug Co-ordinator will lead on monitoring and evaluating the teaching programme as a whole at regular intervals throughout the year and formally on an annual basis. For further information, contact the Drug Co-ordinator or the Assessment Co-ordinator.

d) Staff professional development and training

All staff are given training on dealing with drug-related incidents as part of their induction to the school. There are also training opportunities addressing:

- signs and symptoms of drug use and misuse
- drug awareness
- delivering effective drug education.

e) Outside speakers and contributors

When outside speakers/contributors are used to complement the work of the school, the sessions are jointly planned beforehand with the PHSE Co-ordinator and/or the teacher(s) co-facilitating the session(s). This will include agreement on the content, learning outcomes, methods of evaluation, and any possible follow up work. The visitor's contribution will be incorporated into the programme of drug education and not used in isolation from it. Outside speakers/contributors will be given a copy of the school drug policy and any other relevant school policies prior to the visit, to ensure that they are aware of the ethos of the school, and how incidents are dealt with should any occur.

Storage and handling of medication

The school does not keep, or make available, over-the-counter medicines or remedies and school staff are not obliged to administer any medicines to pupils. The school must be informed in writing of any medicines that a pupil may need during the school day or on the school premises and wherever possible the parent/carer or the pupil will be asked to bring in the required dose each day. The parents/carers of pupils prescribed medicines for a short period eg antibiotics should inform Mrs Grant (a trained First Aider) in the Main Office, of the medication and the method and frequency of administration and, in some circumstances may request that the school administers it. Medicines taken orally can, if necessary, be administered by school staff with specific training in the method of administering that medicine.

Pupils who need access to medication on a continuing basis eg asthma inhalers or ventilators, sickle cell treatment, or insulin for diabetics, are allowed to bring their medication to school in suitable tamper-proof containers. Where able to do so, they

will be able to self-medicate. If a pupil suffers regularly from acute pain such as migraine or menstrual pain, subject to school agreement, parents/carers should authorise and supply appropriate pain killers for their child's use, with written instructions about when the pupil should take the medication. A member of staff should supervise the pupil taking the medication and notify the parents/carers in writing on the day the painkillers are taken. A pupil under 12 should never be given aspirin unless prescribed by a doctor.

Procedures:

- Medicine stored must be clearly labelled with the pupil's name, the name and dose of the drug and the frequency of administration. If a pupil needs two or more prescribed medicines, each should be in a separate container and labelled as above.
- Medicines should not be transferred from their original container.
- Any medicines that need to be refrigerated can be kept in a refrigerator containing food but should be kept in an airtight container, clearly labelled. Access to the refrigerator will be restricted.
- Pupils with medical needs should know where their medicines are stored and who holds the key. Staff should also know this.
- Some medicines such as asthma inhalers must be readily available and therefore not be locked away.
- Older pupils (from year 5 onwards) are allowed to carry their own inhalers with the agreement of their parents/carers.
- Parents/carers will be required to complete a parental consent form if it has been agreed that their child can carry and administer their own medication.
- People who suffer from anaphylactic reactions may need emergency adrenaline treatment. Staff who volunteer to administer this treatment will be given training. NB. This treatment is unlikely to be harmful if given too soon or in multiple doses.
- Parents/carers will be held responsible for the regular collection of any unused medication eg at the end of each term, and also for the disposal of date expired medicines. The school will not take responsibility for the administration of any prescribed medicines if it has not been informed by parent/carers of the medical needs of a particular pupil or formally agreed to the administration.

Dealing with drug-related incidents

a) Procedures

There are a variety of situations that would constitute a drug-related incident outlined below.

- 1 Pupil under the influence of drugs/alcohol.
- 2 Discovery - drugs/alcohol/paraphernalia found on pupil.
- 3 Supplying by:
 - a) pupil;
 - b) school staff/parents/carers/persons external to the school community.
- 4 Disclosure.
- 5 Suspicion or rumour.
- 6 Drugs/alcohol/paraphernalia found on premises.
- 7 School staff/parents/carers/person external to the school community under the influence of drugs/alcohol on school premises.

b) Boundaries and school responsibility

Everyone is expected to adhere to this policy once they have entered the physical boundaries of the school until they leave the same boundaries at the end of the school day. The policy will also apply to pupils on their journey to and from school and if they leave the school premises during the school day. Pupils will also be expected to adhere to this policy whilst they are attending an event, on work experience placements, or on a residential or school trip, whether supervised or not. Any pupil involved in a drug-related incident on such an occasion will be dealt with according to this policy. People concerned in the management of any venue hosting an event may impose additional procedures/sanctions.

c) Support and sanctions

There will not be an automatic sanction applied to any drug-related incident in school. Any response will be taken after considering all the relevant facts and information about a young person and the circumstances in which any drug-related incident has come about. Depending upon the severity of the incident, the school PHSE Co-ordinator, designated member of the SMT and any external agency that can extend support to the school or young person may be involved in implementing the support and/or sanction applied. The school response will be part of a supportive network developed to ensure that the school uses its powers to protect the long-term welfare of all the pupils in the school. There is a range of possible responses that the school may implement, eg (not in hierarchical order):

- Establish an individual teaching plan, personal support programme or other support plan.
- Change things at school, eg teaching set, tutor group, subject options.
- Make sure the young person is not a victim of bullying or similar treatment.
- Use the rewards system for appropriate behaviour changes.
- Encourage positive input to school, eg participation in peer education programmes, monitor duty, playground duty.
- Assessment by the educational psychology service.
- Consultation with support services.
- Access to counselling.
- Statementing.
- Application of school's sanction system for inappropriate behaviour.
- Supervision of break and lunch times.
- Referral to the school nurse.
- Referral to a local drug support agency.
- A letter home to parents and carers.
- The parents and carers being asked to attend the school.
- Involvement of police - The school will consider involving the police for serious offences or where there is lack of co-operation from the pupil or parents. In addition, the school may also impose internal sanctions to help the pupil benefit from the experience and use the incident as a deterrent within the school.
- Fixed term or permanent exclusion - may be used when other options have been explored or where it is demonstrated that there is a significant risk to the safety or welfare of staff or pupils.

d) Records

Records will be kept using the LEA's drug-related incident record form for all drug-related incidents. These will be kept securely by the PHSE Co-ordinator and will

only be shared with key people with consent from the Head Teacher and Senior Teacher

e) Confidentiality (and disclosure)

Young people wishing to disclose drug use by themselves or their peers to school staff are informed that confidentiality cannot be guaranteed and that the issue may need to be taken further for the pupil's safety. Any information will be recorded and treated sensitively in line with the school's confidentiality policy.

f) Public disclosure

The main purpose of drug education is to develop young people's knowledge, skills, attitudes and values and not to find out about their personal drug use. For this reason, this point is addressed within the first lesson of any drug education programme so that neither staff nor pupils will discuss any personal drug use. Public disclosure from staff and pupils should be discouraged at all times. However, the staff should make it clear to pupils that they can talk with them privately on matters that are concerning them (see Confidentiality above). At the start of the drug education programme, pupils and staff are encouraged to draw up a set of ground rules/a contract, which will include issues of confidentiality as part of the group agreement. If any member of staff or a pupil is asked about personal drug use, they will refer back to the ground rules/contract.

g) Collecting evidence

- The law permits school staff to take temporary possession of a substance suspected of being a controlled drug for the purposes of protecting a pupil from harm and/or committing an offence of possession.
- The substance should either be handed to the police who will be able to identify if it is an illegal drug or it should be disposed of in the presence of a witness, but its identity cannot be claimed in retrospect. School staff should not attempt to analyse or taste an unidentified substance.
- It is open to a member of staff to search a student's desk or locker where s/he has reasonable cause to believe it contains unlawful items. This should be done in the presence of a witness and the student.
- Where pupils are suspected of concealing illegal substances on their persons, every effort should first be made to secure the voluntary handing over of any unlawful substance by, for example, asking them to turn out their pockets.
- It is also reasonable for the designated teacher, when interviewing a pupil to ask the pupil to make his/her bags available for inspection.
- The teacher must be careful to ensure that there is no opportunity for allegations of assault or improper conduct to arise, and therefore a witness should be in attendance at any interview or search of belongings.
- If a student refuses, the student should be detained under supervision while the police are called in to deal with the situation.
- Intimate physical searches should never be made by a teacher – the powers to search by the police are clearly defined in law.

h) Needle disposal

The Site Manager, the Deputy Head and the Drug Co-ordinator will be trained to deal with discarded injecting equipment appropriately and ensure the equipment for disposal is securely stored in the Main School Office.

i) Monitoring and evaluation

The Drug Co-ordinator and the Deputy Head will take the lead on monitoring the school policy and its implementation, and acting on any resulting recommendations. This will happen informally on an annual basis, with a formal review and any necessary re-writing of the policy on a three year cycle.

Drug Co-ordinator role

- Has access to SMT meetings.
 - Trained to advise on and oversee the management of drug-related incidents and coordination of the drug education programme.
 - Will keep updated on professional development needs in relation to drug education and dealing with drug-related incidents, and lead on the co-ordination of staff training including cascading of relevant information to staff (through twilight sessions, briefing, school newsletter etc).
 - Ensures that training materials and leaflets are in line with the ethos of the school, and age and needs appropriate.
 - Liaises with outside agencies and ensures they are familiar with school policy.
 - Disseminates drug policy and leads on consultation and review processes.
- a. Producing or attempting to produce a controlled drug
 - b. Supplying or attempting to supply a controlled drug to another Or offering to supply a controlled drug to another.
 - c. Preparing opium for smoking
 - d. Smoking cannabis resin or prepared opium.

Possession and Disposal

Should you come into possession of an illicit substance, with a view to ensuring its disposal, you have a legal exemption as an appropriate adult under section 5 of The Misuse of Drugs Act to do so without compromising your position.

There are two possible course of action:

NB: Always inform your line manager immediately of your intent, and keep file notes.

1. Destroy the substance eg by flushing it down the toilet

NB:

- always have a colleague present to witness the disposal
- ensure it is completely gone
- you are not obliged to inform the police.

2. Hand the substance over to the police

NB:

medicines, each should be in a separate container and labelled as above.

- Medicines should not be transferred from their original container.
- Any medicines that need to be refrigerated can be kept in a refrigerator containing food but should be kept in an airtight container, clearly labelled. Access to the refrigerator will be restricted.
- Pupils with medical needs should know where their medicines are stored and who holds the key. Staff should also know this.
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