

#### Dishforth Airfield Community Primary School

#### **Drug Policy**

#### **Reviewed November 2019**

This policy was originally developed and agreed with consultation with governors, senior management team, all staff teaching and non-teaching and parents. This policy has obvious links with other school policies and reference to which policies will be identified.

This policy reflects national aims and priorities including DfES documentation Drugs: Guidance for school (March 2004), QCA Curriculum guidance for schools on drug, alcohol and tobacco education (2003), the Governments updated drugs strategy 2002 and the Healthy School Scheme Standards. The policy has been updated with reference to the amended PSHE curriculum for NYCC in 2018.

### To whom does the policy apply?

This policy applies to school pupils, all staff, visitors on site and parents.

#### To what does it apply to?

For the purpose of this policy the following definition of a drug will apply:

- All illegal drugs (those controlled by the Misuse of Drugs Act 1971)
- All legal drugs including alcohol, tobacco, volatile substances and alkyl nitrites
- All over the counter and prescription medicines (misuse of)

This broad definition allows for the inclusion of all medication, (see medical policy DfES Supporting Pupils with medical needs. Good practice guide **link this policy with your medical policy**) legal/illegal drugs, tobacco (see smoking policy), volatile substances (see health & safety policy) and alcohol.

Alcohol is permitted on the school site as prizes however if a child wins a bottle of wine on a tombola only a person over the age of 18 can collect the prize.

#### Where does the policy apply

This policy applies at all times when staff are acting in loco parentis this includes educational visits in line with the *Schools Educational Visits Policy*. Although the school is not responsible for pupils traveling to and from school we will work with parents and/or other agencies should any problems be identified. The school is

responsible for pupils during break and lunchtimes and this policy applies during these times.

It also affects the use of school premises after normal school hours. **Organisers of any** after school events should be made aware of the policy and their responsibility to implement it.

## Overall Aim

- To increase pupils knowledge and understanding and clarify misconceptions
- To develop pupils personal and social skills to make informed decisions and keep themselves safe and healthy
- To enable pupils to explore their own and other peoples attitudes towards drugs, drug use and drug users, including challenging stereotypes, and exploring media and social influences

# **Roles and responsibilities**

#### Governors

As part of their general responsibilities for the management of the school, the governors have played a key role in the development of the school's policy for drug education and drug prevention. (**Drugs: guidance for schools 2004 for further guidance**) They will continue their involvement through regular evaluation of it. Named lead Governor with responsibility for this policy is Mr Brown.

#### Head Teacher

The head teacher takes overall responsibility for providing a safe place of work for all staff and pupils and as such takes responsibility for this policy, its implementation, and for liaison with the Governing Body, parents, LEA and appropriate outside agencies in the event of a drug-related incident. Pupils who are suspected of being at risk from drugs, will be supported and monitored with assistance from relevant agencies such as ESWs, Child Protection Officers, young peoples drug support agencies and police.

The head teacher has appointed a PSHE Co-ordinator who will work with and have access to Senior Management Meetings – Mrs Carole Kestell.

## PSHE Co-ordinator

The co-ordinator, together with the Head Teacher, has a general responsibility for supporting other members of staff in the implementation of this policy. The PSHE Coordinator will provide a lead in the dissemination of information relating to drug education. They are responsible for identifying and providing good quality resources and in-service training.

#### <u>Pupils</u>

Pupils should be asked to contribute to the review of the drugs policy through feedback about the education provided and if it is meeting their needs. Also if a drug incident does happen on school premises that the pupils involved are allowed an opportunity to feedback on how the incident was managed.

### Parents

Parents are encouraged to support the school's drug education programme and have access to this policy. They are responsible for ensuring that guidelines relating to medication in school are followed by completing a medical consent form. The school plays its part in ensuring that parents have up-to-date information regarding drugs by regularly scheduling parents drug awareness sessions that are sensitive to cultural backgrounds. Parents have the right to be informed of any incident that could result in potential harm to their child. This can be a very sensitive issue for parents, and therefore, it will be handled with care and consideration. The Head Teacher will consider if there are any special circumstances, which may temper this right.

## All Staff

Drug prevention is a whole school issue. All staff, both teaching and non-teaching, should be aware of the policy and how it relates to them should they be called upon to deal with a drug-related incident. This includes lunchtime supervisors, caretaker and cleaning staff. All new staff should be made aware of the policy and procedures.

If they have any queries or training requirements these should be made known to the P.S.H.E. Coordinator. Staff should have access to continuing professional development opportunities for drug education and it should be outlined how this learning will be cascaded to others.

#### <u>Caretaker</u>

The caretaker regularly checks the school premises – any substances or drug paraphernalia found will be recorded and reported to the SMT and dealt with in accordance with this policy.

# SECTION ONE – OUTLINE FOR DRUG EDUCATION

#### **Equal Opportunities Statement**

Drug education will be provided to all pupils with consideration of any particular needs (see equal opportunities policy).

#### Aims and objectives of drug education

" Drug education should enable pupils to develop their knowledge, skills, attitudes and understanding about drugs and appreciate the benefits of a healthy lifestyle, relating to their own and others' actions" (Drugs: Guidance for Schools DfES 2004)

The main aims of our drug education are:

- To enable each pupil to develop confidence and self-esteem
- To raise pupils awareness of the world of drugs so that they can make informed decisions about their own drug use in order to reach their full potential
- To provide accurate information and correct any misunderstandings
- To encourage a healthy respect for all substances taken into the body
- To enable pupils to explore their own and other's feeling, views, attitudes, and values towards drugs and drug issues.

#### The National Curriculum and Education Reform Act 1988 Requirements

The National Curriculum Science Order states that:

- At Key Stage 1 pupils should be taught about the role of drugs as medicines.
- At Key Stage 2 pupils should be taught about the effects on the human body of tobacco, alcohol and other drugs, and how these relate to personal health.

#### Within PSHE & Citizenship updated document 2018

Year 1: I know the role of medicines in promoting health, the reasons why people use them and the rules on safe use of medicines I know that some substances can help or harm the body including household substances like dishwasher tablets

Year 2: I understand that all drugs can be harmful if not used properly I know simple rules about medicines and other substances used

in the home, including solvents which can be harmful if not used properly

Year 3: I can demonstrate basic safety procedures when using medicines, sun protection, crossing roads, riding a bike, swimming etc I know school rules for health and safety, basic first-aid procedures and where to get help for myself and others in need including how to call 999 in an emergency

Year 4: I can describe what risk means to me both on and offline I can take responsibility for my own behaviour and safety and realise that actions have consequences both on and offline

Year 5: I know which commonly available substances (alcohol, tobacco, e-cigarettes, medicines) and drugs are legal and illegal, and their effects and risks I know that the pressure to behave in an unacceptable, unhealthy or risky way can come from a variety of sources including people I know both on and offline and the media

Year 6: I am able to make informed decisions relating to risk taking behaviours in relation to medicines, alcohol, tobacco, e-cigarettes, drugs and other substances including what is meant by the term, 'habit' and why habits can be hard to change

I know that the pressure to behave in an unacceptable, unhealthy or risky way can come from a variety of sources both on and offline, including people I know and the media

Section 1 of the ERA 1988 places a statutory responsibility upon schools to provide a broad and balanced curriculum which:

- Promotes the spiritual, moral, cultural, mental and physical development of pupils at the school.
- Prepares pupils for the opportunities, responsibilities and experiences of adult life.

#### Teaching programme, strategies and resources

Drug Education is delivered in whole class or group situations using a variety of teaching and learning strategies to encompass the broad aims of the PSHE curriculum It is also taught within other curriculum areas for example Science

Where the teaching and learning includes issues, which may be sensitive, staff, and pupils will work within clearly understood and applied ground-rules. If a young person discloses information relating to misuse of drugs then absolute confidentiality cannot be guaranteed. Pupils should be reminded of this when appropriate. Staff should be aware that failure to take action, or allowing drug use to continue on school premises, could contravene the Misuse of Drugs Act 1971. Any such disclosures should be reported to the *Head Teacher*.

#### Resources: 'I am, I know, I can', Drugs through Dance, PSHE resources

#### Assessment and Recording

We have clear expectations of what pupils will know, be able to do and have considered at the end of each key stage. Teachers assess the pupils work both by informally and through formal assessments of their work. Measured against the specific learning objectives set.

#### **Resources**

All resources for drug education are kept in the Staff Room. The following resources were purchased after careful consideration and evaluation of the materials in line with national guidelines and the aims of this policy. *(I am, I know I can).* 

#### Key stage 2 – reference NYCC PSHE curriculum 2018 p37

Alcohol - Drinkaware provide a range of supporting lesson plans, powerpoints and all supporting resources including short films covering: introducing alcohol, understanding risks and harms, handling peer pressure and alcohol and emotional health <u>https://resources.drinkaware.co.uk/Education</u>

Substances - Mentor Adepis have developed a series of lesson plans aim to provide a specific but flexible pathway to enable children to consider ways to develop resilience, reducing risk-taking and considering safer options focused on substances (alcohol, smoking and drugs) for key stage 2 pupils <u>http://mentor-adepis.org/lesson-plans/</u>

#### Use of Visitors and outside agencies

Where visitors and outside agencies are involved, their contribution must have been planned as part of an overall programme of Drug Education. Their contribution should complement the teaching already taking place in the school. *All outside visitors should complete the HS 2 Form (Healthy School visitors form) with the teacher who is leading on their visit so there is an understanding of what the outside*  visitor is providing and that it fits in with the schools taught programme. A HS 2 form can be found in the Healthy Schools File. See Drugs: Guidance for schools DfES 2004 for more guidance

# SECTION TWO – DEALING WITH DRUG RELATED INCIDENTS

Use in conjunction with the Guidance for City of York Schools Managing Incidents Involving Drugs flow chart.

It provides a framework for dealing with incidents surrounding suspicions, observations, disclosures or discoveries of situations involving unauthorized drugs. *It could fit into the following categories:* 

- Drugs or associated paraphernalia are found on school premises
- A pupil is found in possession of drugs or associated paraphernalia
- A pupil is found to be a recognized source of supply of drugs on school premises
- A pupil is thought to be under the influence of drugs on school premises
- Allegations or suspicions of use off school premises
- A pupil disclosures that they are misusing drugs or a family member/friend is misusing drugs
- A parent/carer is thought to be under the influence of a substance on the school premises

# What to do in the event of finding a drug or suspected illegal substance

- 1. Take possession of the drug/substance and *inform the Headteacher Mrs Julie Lyon (or Senior Teacher, Mrs Kestell if Head is away).*
- 2. <u>In the presence of a witness</u> the article should be packed securely and labeled with the date, time, quantity (e.g. two cannabis joints, packet of powder equivalent to the size of fifty pence piece) and place of discovery.
- 3. Assess the area where the drug/substance was found to establish if any pupils have passed through the area and may have picked up/ taken the substance. Speak to relevant staff, perhaps make pupils aware and parents if necessary. Watch for any unusual behaviour in the pupils.

- 4. The package should be signed by the person who discovered it and the witness and stored in a secure place *School's safe*
- 5. Arrangements should be made to hand the package over to police. Staff should not attempt to analyse or taste any found substance.
- 6. Write up the incident in the Health and Safety Book

In the event of discovering a hypodermic needle the incident should be recorded in the *Healthy and Safety Book* and the following procedure should be followed in order to protect all persons:

- 1. If possible do not to attempt to pick up the needle but if deemed necessary an adult should do it with care, with gloves on and place the needle in a container that cannot be pierced e.g. a biscuit tin then ring YorkPride for the safe removal.
- 2. Or cover the needle with a bucket or other container.
- 3. Cordon off the area to make it safe.
- 4. Inform the Head Teacher.

# What to do in the event of finding or suspecting a pupil is in possession of a drug

The law permits school staff to take temporary possession of a substance suspected of being an illegal drug for the purpose of protecting a pupil from harm and to prevent an offence committed in relation to that drug.

- 1. Request that the pupil hand over the article(s).
- 2. Having taken possession of the substance/paraphernalia, the procedure should be followed as above (finding a drug or suspected illegal drug)

# EXTREME CARE SHOULD BE TAKEN IF HYPODERMIC NEEDLES ARE INVOLVED.

If a pupil refuses to hand over articles a search may be required – it should be noted that:

- Teachers can search school property, i.e. cupboards and trays without permission and ask a pupil to turn out their bags, pockets and lockers.
- Teachers cannot carry out an intimate personal search of a pupil. An enforced search by staff could be interpreted as an assault.

# Procedures for managing a pupil suspected to be under the influence of a drug or substance.

Stay calm, place pupil in a quiet area. Do not leave them unsupervised, seek medical advice, if the child is drowsy or unconscious place in recovery position, loosen tight clothing and attempt to establish what child has taken. Any suspected substances should travel with child if removed for treatment. *Vomit should be safely collected where possible and also taken with the child (for analysis).* Contact the pupils parents/carer.

# <u>Procedures for managing a parent/carer suspected to under the influence of a substance when collecting their child(ren) and parental use of substances</u>

Increasingly staff in education are expressing concerns regarding parents or carers who misuse drug substances, the possible impact on their children and what they should do in these circumstances.

# The use of drugs by parents does not in itself necessarily mean that they are poor, uncaring or incompetent parents or that their children are at risk of abuse or neglect.

This guidance has been compiled to assist staff in deciding under what circumstances a referral to Social Services should be made, either under Section 17 (Child in Need) or Section 47 (Child in Need of Protection) of the 1989 Children Act. This guidance should also be read in conjunction with your establishment's:

- Child Protection policy
- Area Child Protection Committee's Child Protection Procedures and Guidance and;

Whether teachers or other education staff should intervene in a situation where parents are suspected or known to be using drugs, including alcohol, in ways that might be harmful to their children will depend on a child being judged to be suffering significant harm. The focus of attention is the individual child or young person and it is their welfare that is paramount to any action that is taken.

If a member of staff has concerns about a parent or carer's drug/alcohol misuse they should immediately inform the senior member of staff within their establishment that has responsibility for Child Protection. This designated individual will decide on the information available and after, where appropriate, consultation with parents and a Local Education Authority officer with responsibility for Child Protection, how to proceed.

However, there may be occasions where an immediate, urgent call needs to be made to the police (999) because it is judged that a child or another person (including yourself) may be imminently at risk of serious danger. Examples include;

- (a) where an intoxicated parent is behaving violently or is threatening violence such that the belief is that the threats may be carried out thus compromising the immediate safety or care of a child, or;
- (b) place others in danger by driving a car whilst unfit through drink or drugs

It is important that staff do not generalise or make assumptions, rather that information about each case is assessed given regard to individual circumstances and the impact on the child or young person. A number of factors will need to be considered, including what 'protective factors' are in place i.e. arrangements to ensure the health, welfare and safety of the child.

It is however also important to recognise that drug and alcohol misusing parents are a high-risk group. They are often faced with multiple and complex difficulties which may adversely affect the child e.g. financial, housing, relationships, social integration and support, health, issues relating to criminality. At all times decisions should be made with regard to the principle that the child's welfare is paramount.

Education staff will rarely have access to the complete range of information necessary to make a full assessment of the situation therefore they should, (when concern arises), wherever possible and appropriate, seek parental agreement for a referral to be made for an assessment under Section 17 of the Children Act. Where parents do not agree to a referral a decision will need to be made as to whether there is reasonable cause to suspect that the child is suffering or likely to suffer 'significant harm' in which case a child protection referral should be made.

To assist in this decision making it may be helpful to consider not the drug and alcohol misuse per se, rather the individual circumstances and the impact on the child.

#### When to contact the police

It is good practice to liaise closely with local police officers on drug incidents, as they will be able to give relevant support and advice

If a pupil is found in possession of and/or believed to be supplying suspected illegal drugs on the school premises it is good practice to inform the police as a school cannot knowingly allow it premises to be used for 'administering or using a controlled drug, which is unlawfully in a person's possession'. Contact the Police on 0845 60 60 24 7

If your school is concerned about people dealing illegal substances upon or near your school premises also contact the police.

Trading Standard officers can be contacted if your school is concerned about the illegal selling of tobacco and/or alcohol and /or solvents.

#### Limits of Confidentiality

Pupils disclosing information about drug use by themselves, or by people they know, should be reminded that the teacher cannot offer absolute confidentiality. Parents have the right to be informed of any incident that could result in the potential harm of their child.

It should be noted that if the preservation of a confidence -

i) Enables criminal offences to be committed, or

ii) Results in serious harm to the pupil's health and welfare,

Criminal proceedings could ensue.

If rumours of drug misuse are disclosed the Head Teacher should be informed – the Head Teacher should assess the information and decide whether further action is to be taken.

## <u>Discipline</u>

In normal circumstances parents will be contacted. If the Head Teacher assesses that the situation is a child protection issue then social services will be contacted in the first instance.

All pupils involved in a drug related incident should at an appropriate time and place have an informal conversation sensitively conducted about the incident and be provided with further information about drugs and there misuse and have access to further support either within the school or by outside agencies:

- Young person Substance Misuse Workers
- School Nurse

Focus on the young person rather than the substance. Any decision should consider; what is best for the pupil(s) involved. Secondly what is best for the school and lastly what the legal position is for all involved. Exclusion would only be used as a last resort.

Consideration should also be given to:

- Age of pupil.
- Whether one pupil or a group of pupils is involved.
- Whether there is evidence of particular peer pressure.
- Home/School contract.
- Referral to a supporting agency
- Behaviour contract
- Fixed term exclusion.
- Permanent exclusion.

#### **Implementation of the policy**

A copy of this policy is provided for each member of staff and each member of the governing body. Reference copies are available from the Head Teacher for all other persons who come into contact with the pupils.

A copy of this policy (or relevant extracts are published in the School Prospectus Governor, Staff and Pupils Handbooks.

Date of implementation: November 2009 Date of review: January 2013

#### Monitoring and evaluating the policy

This policy will be reviewed every two years by the lead Governor, Head Teacher, Substance Coordinator, Pupils and other relevant outside agencies *e.g. (police, drugs education consultant)* This will include evaluation of teaching and learning activities, current resources and staff training and the use (if any) of outside visitors. Evaluation tools include discussion groups, feedback from external inspection and formal testing procedures Next review date: January 2015

Reviewed November 2019