**Mill Lane**

**Primary School**

Drugs Policy

September 2017

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## **Mill Lane Primary School**

## **Drug Education Policy**

This policy was developed in June 2012 in consultation with governors, all teaching staff, the School Council and the Drug Education Team. This policy has obvious links with the following school policies: PSHcE; Health and Safety; The Administration of Medicines.

### This policy reflects local and national aims and priorities expressed within the Government White Paper ‘Tackling Drugs to Build a Better Britain’ (1998), ‘Every Child Matters’ (2003) and The Healthy School Progamme it also incorporates the key messages contained in Drugs: Guidance for schools (DfES/0092/2004).

This policy sets out the schools approach to drug education and how the school will respond to drug related incidents within the responsibilities of the school.

#### To whom does the policy apply?

This policy applies to all of the following people when they are on the school premises: pupils, staff, parents/carers and visitors. Breaches of this policy by any of those mentioned will be dealt with by the Head teacher/Governing body. This policy also applies to pupils and staff when off-site when the staff are acting in loco parentis, this includes all educational visits.

Although the school is not responsible for pupils travelling 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 (except when it has been agreed by parents/carers that children will travel home for lunch) 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.

**Definition of a drug**

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

*“a substance people take to change the way they feel, think or behave.”*

This broad definition allows for the inclusion of all medication (see schools Administrations of Medicine Policy), legal/illegal drugs (including alcohol and tobacco) volatile substances (see also the school’s Health and Safety Policy and COSHH Policy) and all over the counter and prescription medicines.

The consumption of alcohol is not permitted at any time on the school site or during school visits.

### **Overall Aims of the Policy**

* To provide a framework for effective drug education
* To provide systems for dealing with drug related incidents within the school environment.
* To ensure that the school’s drug education programme reflects the aims and values of the school and its governing body.

#### Roles and responsibilities

### **Governors**

As part of their general responsibilities for the management of the school, the governors have agreed this policy. They will continue their involvement through regular evaluation of it.

**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/carers, The Local Authority and appropriate outside agencies in the event of a drug-related incident. Pupils who are suspected of being at risk from drugs, and in particular truanting pupils will be supported and monitored with assistance from relevant agencies such as ESWs, Child Protection Officers, and police.

**PSHcE Subject Leader**

The subject leader together with the head teacher has a general responsibility for supporting other members of staff in the implementation of this policy. The PSHcE Subject Leader 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. The PSHcE Subject Leader is Judy Stanyard.

The Head Teacher or in her absence the Deputy Head Teacher or a senior member of staff is the first point of contact for advice/support in dealing with a drug-related incident.

**Parents and Carers**

Parents and carers are encouraged to support the school’s drug education programme. They are responsible for ensuring that guidelines relating to medication in school are followed (see Administration of Medicines Policy).

Parents/carers 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. The Child Protection Service may be contacted in the first instance and advice sought (see Schools Child Protection Policy/Procedures).

**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 and the site manager and cleaning staff. If they have any queries or training requirements these should be made known to the PSHcE Subject Leader or to the Headteacher. The caretaker regularly checks the school premises – any substances or drug paraphernalia found will be recorded and reported to the PSHcE Subject Leader and the Head teacher and dealt with in accordance with this policy.

**Limits of Confidentiality**

If a child discloses information relating to misuse of drugs, absolute confidentiality cannot be guaranteed and disclosure by pupils of information relating to misuse of drugs may be reported to the Head Teacher or in her absence a senior member of staff. Pupils should be reminded of this when appropriate with the establishment of clear ground rules that cover issues such as the teachers’ and pupils’ right to privacy and respect. Similarly, teacher should be aware that they are unable to offer confidentiality in discussions in lessons. If a pupil discloses information which is not generally known and which the pupil requests is not passed on, the request should be honoured unless this is unavoidable in order for teachers to fulfil their professional responsibilities in relation to:

* child protection
* co-operating with police investigation
* referral to external services

However, health care professionals (such as the school nurse) are able, under certain circumstances to maintain confidentiality except in circumstances where they have Child Protection concerns.

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

#### Equal Opportunities Statement

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

#### SECTION ONE – DRUG EDUCATION

### **Aims and objectives of drug/health education**

##### “The aim of drug education is to provide opportunities for pupils to develop their knowledge, skills, attitudes and understanding about drugs and appreciate the benefits of a healthy lifestyle, relating this to their own and others’ actions”. DfES 2004 p18 Drugs: Guidance for Schools.

The main aims of our drug education programme are to:

1. Enable each pupil to develop confidence and self-esteem
2. Raise pupils’ awareness of the world of drugs so that they can make informed and responsible decisions about their own drug use in order to reach their full potential
3. Encourage a healthy respect for all substances taken into the body

##### Enable pupils to explore their own and other’s feelings, views, attitudes, and values towards drugs and drug-related issues.

A base line evaluation of pupil’s knowledge and understanding around drugs will be undertaken to ensure the programme reflects and meets the needs of the pupils within the school. Where possible liaison has taken place between the school and its feeder secondary schools to ensure a spiraling curriculum is in place and consistency in managing drug-related incidents.

**The Education Act 2002**

The Education Act 2002 places a statutory responsibility upon schools to provide a broad and balanced curriculum which:

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

**The National Curriculum and Education Act 1996 Requirements**

The National Curriculum Science Order states that:

* At Key Stage 1 pupils should be taught about the use of drugs as medicines.
* At Key Stage 2 pupils should be taught to relate their understanding of science to their personal health and that tobacco, alcohol and other drugs can have harmful effects.

Within PSHcE

* At Key Stage 1 pupils should be taught that all household products, including medicines, can be harmful if not used properly
* At Key Stage 2 pupils should be taught which commonly available substances and drugs are legal and which are illegal, and their effects and risks

**Teaching programme, strategies and resources**

Drug Education is planned for as part of our long term plan for PSHcE, and is also covered during the science curriculum by class teachers in whole class or group situations using a broad variety of teaching and learning strategies*.* The PSHcE Subject Leader will review the drug education provision on an annual basis through discussion with the teachers involved with the delivery of the programme and the school council.

Where the teaching and learning includes issues which may be sensitive, staff and pupils will work within clearly understood and applied ground-rules in line DfES 2004 Guidance. (See also section relating to confidentiality.)

Teaching programmes reflects the pupils’ knowledge and understanding of drugs and drug issues by implementing a baseline evaluation technique.

Drug Education will be assessed in a number of ways including: -

* Pupil self assessment and the opportunity for reflection
* Discussion and peer group reflection
* Teacher assessment of pupil attainment by observation and review of student written work

**Monitoring and evaluation of the drug education programme.**

The PSHcE Subject Leader is responsible for the overall monitoring of drug education. This will include: -

* reviewing samples of pupils’ work
* feedback from teachers involved in the delivery of lessons
* feedback from pupils (including questionnaires, School and Class Council minutes …)

The views of pupils and teachers are essential for evaluation of the drug education programme. Feedback will be gained through discussions and written responses when necessary. Changes, if needed, will be made to the planning and teaching of the programme in light of the evaluation and evidence of best practice.

**Resources**

All resources for drug education are regularly reviewed and updated in line with the education aims of this policy and reflecting Drugs: Guidance for Schools (DfES/0092/2004). Drug education resources are kept in the resources room on the PSHcE shelf.

**Special Educational Needs**

Children registered as having Special Educational Needs have the same right to good drug education as any other pupil and will be taught alongside all other pupils. However, teachers must be aware of and respond to their needs in drug education lessons just as in any others, taking account of targets set in the pupils’ Individual Education Plans.

**Children vulnerable to substance misuse**

Those children who may be viewed as vulnerable to substance misuse can be provided with targeted drug education through the schools pastoral support. Staff are able to gain additional support and guidance from the Drug Education Team on appropriate resources and educational approaches.

**Use of Visitors and outside agencies**

Visiting facilitators can enhance the delivery of drugs education and some pupils do respond better if they perceive the deliverer to be an ‘expert’ rather than their ‘normal’ teacher. However, visitors will only be used in the programme if they can offer an expertise, approach or pupil response which cannot be achieved by the teachers. 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 (A checklist is available to support the input from external contributors Appendix 6 pp112 DfES/0092/2004, see also QCA guidance on use of external visitors).

**SECTION 2 - DEALING WITH DRUG-RELATED INCIDENTS**

This section provides a framework for dealing with incidents surrounding the use, suspicion of use and finding of drugs and substances. The school does not condone the use of drugs but will endeavor to support any pupil with a drug problem in line with its pastoral responsibilities.

Parents/carers have the right to be informed of any drug-related incident that affects their child. An exception to this is when the child is deemed ‘at risk’ and the Child Protection Service has been contacted. In this case, it is up to the CPS to decide the course of action.

Staff should be aware that if they a) fail to take action in a drug-related incident or b) allow drug use to continue on school premises, they could contravene the Misuse of Drugs Act 1971. It should be noted that if the preservation of a confidence a) enables criminal offences to be committed, or b) results in serious harm to the pupil’s health and welfare, criminal proceedings could ensue.

Following any incident staff should complete a drug incident form (appendix 11 within DfES Guidance 0092/2004)

**Unauthorised Substances**

No substances are to be brought onto the school premises unless authorised by the Head Teacher or through the agreed protocol for the use of medicines on the school premises. This includes, alcohol, tobacco, volatile substances and medicines (This list in not exhaustive, other substances may be included at the discretion of the Head Teacher). This applies to anybody using the building regardless of age or whether they are staff or pupils of the school.

Pupils found in contravention of this section of the school policy, on school premises, will be dealt with in the following way:

* Parents will be contacted by the relevant teacher. Parents’ support will be sought in stressing to the pupil how the use of unauthorised substances in school is a serious breach of school rules.
* A suitable sanction will be considered. The severity of the sanction will depend upon various factors such as the age of the pupil, the circumstances of the incident, whether it is a pupil’s first offence and whether it affected other pupils.
* The substance and associated paraphernalia such as matches or lighters found in a pupil’s possession in school will be confiscated. They will be placed in a labeled envelope and kept securely until parents are able to collect them.

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

1. Take possession of the drug/substance and inform the Head Teacher, or if not available a senior member of staff.
2. In the presence of a witness the article should be packed securely and labeled with the date, time and place of discovery.
3. The package should be signed by the person who discovered it and stored in a secure place –locked cabinet in Head Teacher’s office.
4. Police should be contacted immediately and arrangements should be made to hand the package over to them. Staff should not attempt to analyse or taste any found substance.

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

1. Do **NOT** attempt to pick up the needle.
2. Ensure a second adult guards the area while safety equipment is sought and safety actions carried out.
3. Cover the needle with a bucket or other container. – kept in secretary’s office.
4. If possible, cordon off the area to make it safe. – with cones.
5. Inform the Head Teacher or senior member of staff or PSHcE Subject Leader.
6. Contact Environmental Health. Telephone: 01642 526555

**If it is considered impractical to leave the needle where it is found, a trained member of staff, using appropriate personal protective equipment, may remove the needle from the area.**

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

1. Request that the pupil hand over the article(s). Staff can ask pupils to turn out pockets or bags, but cannot demand that this happens.
2. Having taken possession of the substance/paraphernalia, the procedure should be followed as above.
3. Pupils should be placed in isolation until the matter has been investigated.
4. Parents should be contacted as quickly as possible.

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.
* Teachers should not search pupils or personal possessions. An enforced search by staff could be interpreted as an assault.

**Procedures for dealing with a child suspected to be under the influence of a drug or substance.**

Refer to schools first aid policy – following suggestion given for guidance only

Stay calm, place child in a quiet area. Do not leave them unsupervised; seek medical advice from a First Aider. If the child is drowsy or unconscious place them in the recovery position, loosen tight clothing and attempt to establish what the 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).

**Procedures for dealing with Parents/carers under the influence of drugs on the school premises.**

Staff should attempt to maintain a calm atmosphere. If staff have concern regarding discharging a pupil in to the care of a parent/carer attempts should be made to discuss alternative arrangements with the parent/carer, for example requesting another family member escort the child home. The focus of the staff must be the maintenance of the pupil’s welfare, as opposed to the moderation of the parent’s behaviour.

Where the behaviour of the parent/carer immediately places the child at risk of significant harm or repeated behaviour places the child at risk or the parent/carer becomes abusive or violent, staff should consider whether to invoke child protection procedures and/or the involvement of the police.

**When to contact the police**

There is no legal obligation for the school to contact the police when a drug incident or offence has been discovered. Contacting the police is at the Head Teacher’s discretion. However, the school has established close liaisons with our local police and any information about illegal sales of drugs including alcohol and tobacco will be reported to them. In the event of a drug-related incident in the school, the school would cooperate with the police should they wish to search premises. However, the Local Authority will be informed. A member of staff will accompany any search and any damage will be noted.

In the event of a serious incident the police may request to interview pupil(s). Parent(s)/carer(s) must be notified. They may refuse to give consent or prefer the interview to take place in their own home, in which case the police will make arrangements. Parents/carers may give authority to a responsible adult, e.g. a teacher to be present during the interview.

**Dealing with the Media**

If there has been a drug-related incident, the Local Authority will be informed. Advice will be given by the Local Authority on dealing with enquiries from the media in order to protect the interests of the child and the school.

**Contact Numbers**

1. Drug Education Team - Simon Richardson, Tel: 527914
2. Local Authority Advisory Service – Mel Manley (admin), Tel: 526385
3. Press/Publicity Department – Vince Rutland, Tel: 526164
4. Attendance Service – Tel: 528732/527163
5. Behaviour Improvement Team – Tel: 528621
6. Exclusions – Tel: 527155

**Discipline**

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

This school does not condone drug misuse. However, in deciding an appropriate sanction must consider the interests of the child balanced against the best interests of the whole school community. Whilst exclusion is a possible sanction (fixed or permanent) it would only be used considered as a last resort. A range of responses may also be considered that may include:

* A target pastoral support programme
* Local Authority Inclusions Team (Tel: 524974)
* Home-School contract
* Behaviour support plans
* A managed move
* Fixed term exclusion
* Permanent exclusion

Consideration should be given to:

* the age of the pupil
1. whether one pupil or a group of pupils is involved.
2. whether there is evidence of particular peer pressure
3. whether it is the pupil’s first offence

(see pp67-68 DfES/0092/2004 for further considerations)

A free drug counselling service for adults, if deemed appropriate, is available through Addictive Behaviour Service **Tel. 01642 242550**. The Addictive Behaviours Service may also be able to provide further advice regarding the referral of adults or pupils to the most appropriate service.

**Further help and support is available from the L.E.A’s Inclusions Officer**

**Implementation of the policy**

A copy of this policy is provided in the Governor and staff policies file in the staffroom. A copy will be made available to any parent should they wish to see one.

**Date of implementation:** June 2012

**Monitoring and evaluating the policy**

This policy will next be reviewed in September 2019. The policy will normally be reviewed every two years by the Head Teacher or PSHcE Subject leader, pupils and other relevant outside agencies e.g. The Drug Education Team and the police. This will include evaluation of teaching and learning activities, current resources and staff training and the use (if any) of outside visitors.

**Signed and dated:**

Head Teacher ………………………………………………………………………………………………..

Chair of Governors …………………………………………………………………………………………

PSHCE Leader …Judy Stanyard………………………………………………………………….