DRUGS POLICY
OUR LADY & ST JOSEPH CATHOLIC PRIMARY SCHOOL

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APPROVED BY: Governors
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Our Lady & Saint Joseph Catholic Primary School

Drugs Policy

Rationale

Current research indicates that drug use, both legal and illegal, is rising amongst young people. As part of the school's care and welfare of its pupils, we believe we have a duty to inform and educate children about drug use. Drugs are a reality in children's lives and schools share responsibility with parents to educate pupils about the risks and consequences of drug use and misuse and to encourage them to make healthy, informed choices by increasing knowledge, challenging attitudes and practising skills. We also believe that the misuse of drugs by members of the school community cannot be condoned and will be dealt with consistently and clearly with regards to the needs of the school and the individuals concerned. Fundamental to the school's values and practice is the principle of sharing the responsibility for the education with parents, keeping them informed and involved at all times. Effective communication and cooperation is essential to the successful implementation of this policy.

As a 'Health Promoting School' we are committed to the health and safety of all school members and will work together with staff, parents and the local community to enable pupils to make healthy, informed choices and discourage the misuse of drugs

Aim

It is the aim of this School drug policy to:

- Provide a protective framework within which staff can teach and young people can be taught.
- Ensure that all young people are given opportunities to develop the skills, knowledge and understanding to make healthy informed decisions about drug use and misuse in order to achieve their full potential.
- Outline the roles and responsibilities of staff within the school
- Outline the responsibilities of pupils
- Outline the range of sanctions and supportive responses that would be used when responding to drug related issues

School Policy Statement

This school recognises that there will always be young people who choose to take risks. However, at no time will the school knowingly permit or tolerate possession, consumption, supply or offer to supply any unauthorised drugs on the school premises. If any breaches of this policy are committed they will be fully investigated and dealt with ensuring that drugs use or misuse is challenged using a range of sanctions that are explained elsewhere.

Policy Implementation

It is the responsibility of all teaching and support staff to implement this policy. In order to achieve this all teaching and support staff will be given training through INSET days and/or inputs at staff meetings. This training will cover drug identification and problems associated with their use, managing and responding to drug-related incidents and drug education.

Consultation

This policy was developed in consultation with the Healthy Schools Drug Prevention Team, teaching staff, support staff, governors, parents/carers and pupils through a series of workshops, meetings and information sharing opportunities.

Although aspects covered in this drug policy may duplicate, elaborate or reflect areas within in other documents e.g. Child Protection, Confidentiality, PSHCE, School Journeys/Residential Visits and Behaviour policies they are contained here to provide easy access at a time they may be needed. Staff will need to familiarise themselves with other policies as this drug policy will synergise other policies and not supersede them. **Whilst every effort is made to avoid conflict it is expected that any person who identifies any conflict for whatever reason bring it to the attention of the school drug co-ordinator identified below.**

Roles within the school

Headteacher: It is the role of the Head teacher to ensure that this policy is implemented

School Drug (incident) Co-ordinator (SDC): The Headteacher is the School Drug Co-ordinator and it is the role of the Head teacher to ensure that this policy is implemented. The SDC will advise on and oversee the management of drug-related incidents.
The SDC will ensure that correct procedures are followed and that all pupils, parents or professionals involved have fully understood the school's role and what strategies will be implemented. These strategies will take account of age, culture, home or community circumstances and previous history of the pupil. The SDC will pay particular attention to working in partnership with the LBTH Drug Education Advisor to access appropriate support and interventions for pupils identified as vulnerable. These include: pupils excluded or self-excluded from school, those at risk of exclusion, pupils in touch with mental health services or the Criminal Justice System, those with drug misusing parents.

School (Drug Education) Co-ordinator: The school Inclusion Leader will work as the Drug Education Co-ordinator as part of Healthy Schools Leadership.
The Drug Education Co-ordinator is responsible for the co-ordination of drug education across the school. The co-ordinator will also ensure training materials and leaflets used are in line with the ethos of the school. It is the joint role of the SDC and the drug education co-ordinator to ensure that the drug policy is disseminated and publicised to all parties affected by it i.e. staff, governors, pupils and parents. This will be carried out regularly at least once every academic year and more often if circumstances indicate a need.

Governor with responsibility for drugs: The school will appoint a lead governor for drugs. The governor with responsibility for drugs is responsible for familiarising the schools governing body with the drug policy and procedures also ensuring that school staff have followed correct procedures for managing and responding to drug related incidents. They would also be expected to work with the curriculum planning committee to allocate sufficient time and resources to implement the schools drug education programme and staff are released to access necessary training. This governor will also participate/ liaise closely with disciplinary committee hearings (as long as they have not prejudiced themselves through earlier involvement) to oversee the schools decisions regarding drug related incidents.

Child Protection Co-ordinator: The school has appointed the Headteacher as the Child Protection Co-ordinator.
The Headteacher is responsible for ensuring that pupils' rights to confidentiality are observed and overseeing any case that may have social services involvement. They should be consulted to explore situations that may indicate that the child is at risk of harm significant or otherwise). If there is evidence that a child may be in need or at risk of harm they will lead on referrals case conferencing and guide staff as to the correct procedures if they are unsure. The Child Protection Policy gives full procedures for any concerns.

Drug Definition

A drug is a substance that alters the way the mind or body works; this may be physically, mentally or emotionally i.e. those found in food and drink, caffeine, over the counter and prescription medicines, alcohol, tobacco, Khat, Betel pepper leaf, Areca palm nut, solvents, steroids, magic mushrooms and controlled drugs which are often referred to as illegal drugs.

Unauthorised Drugs

Unless the Head teacher has approved a written request or given permission the school has classed the following substances as unauthorised drugs as they have the potential to change people's behaviour and/or harm human health. This includes over -the counter and prescription medicines, khat, paan, bettle nut, tobacco, alcohol, alkyl nitrites (poppers), solvents, steroids, gammahydroxybutyrate (GHB), cannabis, skunk, amphetamines, ecstasy, LSD, magic mushrooms, cocaine/crack and heroin. (This list is not intended to be limiting as the school is aware that developments in this area can give rise to an increasing range on the market).

Medicines

There is no legal requirement for any school staff to administer medicines and the general advice given by unions to schools is only to do so voluntarily and with appropriate training. However, the school is committed to being as inclusive as possible to ensure that children and young people in need of specialised educational provision are given access to it. Whenever there is a need for medicines to be taken by a pupil the school will only use medication that has a pharmacy label that has the same name and date of birth as that on the relevant forms. The administration will be facilitated in the following ways. (See Tower Hamlets Medical Needs guidance for greater detail).

Supervised Self-Medication

Wherever possible the school must be provided with an authorisation to supervise the self-medication of pupils. The authorisation form will be accompanied by a pupil support plan that details the following information:

- Whom the medication is for.
- The dosage to be taken.
- How the medication is to be taken.
- When the medication is to be used.
- What adverse effects may occur.
- What to do if the adverse effects occur.

- How the medication is to be stored.

The necessary information will be transferred onto a monitoring sheet so that records can be kept that the pupil has taken the medication. Any member of staff supervising the self-medication will ensure that the pupil is provided with the correct dosage of current medication to take or to apply. (This will also include emollients that need to be regularly applied for eczema sufferers)

Although there may be times when pupils may need extra encouragement to take their medication staff will never force the pupil to do so. If a pupil refuses to take their medication the school will be asked to deal with the potential problems. There may be occasions when the school, in partnership with parents or legal guardians, cannot get the pupil to medicate themselves. In such instances the parents or guardians will be advised that, if a behavioural incident occurs as a result, the school may be forced to exclude the pupil.

Administration of medicines

There may be times when supervised self-medication is not possible for example prolonged febrile convulsions, anaphylaxis, and hypoglycaemic episodes or when the pupil's judgement would be so affected to render them unable to self-medicate. Requests to treat any conditions that require medical interventions such as suppositories, injections or enforced oral administration must be accompanied by a form to authorise the administration of medical treatment. Care Plans are created with advice from the school nurse.

The authorisation form must be accompanied by a Care Plan clearly detailing the following:

- Whom the medication is for (name, DOB, address).
- What the medication is for.
- The dosage to be administered.
- How the medication is to be administered.
- When the medication is to be administered.
- What adverse effects may occur.
- What to do if the adverse effects occur.
- How the medication is to be stored.

- The expiry date.

This form must be completed or endorsed by a member of the Primary Care Trust. An appropriately trained member of staff in the presence of a witness must conduct all administrations unless there are exceptional circumstances that prevent this. If this occurs these circumstances will be recorded and attached to the medical monitoring record as soon as it is practical. Whenever the school is advised of a newly diagnosed medical condition of an existing pupil the school will arrange for the necessary forms to be completed at the earliest opportunity by contacting The School Nursing Team. If training is needed this may be obtained for key staff to ensure that there is at least one member of staff on site whenever the pupil is at school.

Medication on school Journeys or Residential Visits

Every effort will be made to ensure pupils that require administration of medicines can go on school journeys or residential visits. If a pupil requiring administration of medicine cannot be accompanied by a trained member of staff their needs will be discussed with a School Nurse to identify whether there is any other practical way of resolving the problem should it arise while off site.

If a pupil is able to self-medicate on school journeys or residential visits consideration will be given to the best way of the transporting and storing of the medicines. This will be dependent on the number of pupils requiring access to medication and how quickly it must be accessed. The expiry date and storage instructions will be noted at this time.

Regardless of the amount of medicine needed it must always be accompanied by a monitoring sheet to be completed by one individual at the time of medicating. At no time will medication take place without the administrator checking records of previous issuing of medicine. All medicine will be clearly labelled and wherever needed appropriate dispensers will be carried.

Safety of Staff and Pupils

To protect the health and safety of staff and pupils all staff will receive training on how to identify drug use and follow procedures to deal with drug-related incidents, this will ensure the welfare of young people is maintained. Staff should not administer medicines without appropriate training.

Responsible Behaviour

School staff should, act at all times as responsible role models and set a good example of drug related behaviour. Therefore this policy with reference to unauthorised drugs will apply to any person on the school premises.

Boundaries and School Responsibility

Pupils are expected to adhere to this policy once they have entered the physical boundaries of the school until they get home after leaving the same boundaries at the end of the normal school day. On occasions where pupils leave the school premises during these times such as break periods they shall not commit any of the breaches of this policy that are outlined. Pupils will also be expected to adhere to this policy whilst they are attending an event, 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 etc. may impose additional procedures/sanctions.

Training for all teaching and support staff

General drug training on how to manage drug-related incidents and identifying young people's drug use will be given to all staff as well as how, when and why drug education should take place. Members of the core team and interested parents will be released or provided access to more specialised training in order to carry out their respective roles confidently and competently. The school drug co-ordinator will be released to training provided by the Healthy Schools Scheme and to maintain up to date drug knowledge through refresher courses. She will cascade information on relevant changes in legislation from the training to the senior management team.

Needle Disposal

The school premises manager, two members of the senior management team and the Drug Co-ordinator will be trained to deal with discarded injecting equipment appropriately. The equipment for disposal will be kept in the cleaning cupboard where it may only be used by the trained staff. Whenever the sharps bin has been is full, it will be disposed of appropriately and steps to replace it will be taken immediately.

Records

Records will be kept using a drug-related incident record form for all drug related incidents. These will be kept securely by the headteacher and only shared with key people with the consent of the head teacher and school drug co-ordinator. See Appendix A.

Confidentiality

Young people wishing to disclose drug use by themselves or their peers to teaching staff will be informed that staff cannot guarantee secrecy and may have to take the issue further for the pupil's safety. Any information will be recorded and treated sensitively in line with the school's confidentiality policy. If it becomes necessary to forward information on to other appropriate bodies, to benefit the pupil every effort must be made to secure the pupils involvement in decisions that affect them.

If a pupil wishes to discuss their own drug use or that of their friends or family confidentially without disclosing to a member of staff, arrangements will be made to do so with an appropriate support service. If there is any evidence that the pupil's safety is at risk the person providing support will work in partnership with the pupil to ensure that they are given appropriate support or intervention. This will be carried out in consultation with the designated Child Protection Teacher or the Education Social Work Service. Child Protection procedures supersede any confidentiality agreement.

No Disclosure

The main purpose of drug education is to explore young people's attitudes and values and not their personal drug use. For this reason this point must be addressed within the first lesson so that neither staff nor pupils will discuss their own drug use. Everybody should have the opportunity to share their opinions and have them valued. Disclosure from staff or pupils within the school drug education should be avoided at all times. At the start of any drug education pupils and staff will draw up a contract that will include this as one of the ground rules. If any staff member is asked about their own drug use they will draw pupil's attention back to the contract.

Drug-Related Incidents

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

- Emergencies – where a pupil has lost consciousness or gone into a coma;
- Intoxication – being intoxicated/'high', when it is difficult to communicate with the person (under no circumstances should an interview take place at this stage to inform sanctions).
- Discovery/observation – where a young person is discovered using, holding, supplying or offering to supply a substance not permitted on the school premises;
- Disclosure – where a pupil discloses to a member of staff that s/he has been using drugs, or that they are concerned about someone else's drug use (friend, parent or sibling);
- Suspicion or rumour – staff should be wary about acting on the basis of rumour or suspicion.
- Discovery – this may be discovery of an unauthorised drug or associated paraphernalia.

Sanctions and Supportive Responses

There will not be an automatic sanction applied to any drug related incident in school. Any response will be taken after considering all the facts about a young person and their emotions and circumstances in which any drug-related incidents have come about. Training on procedures, assessments and sanctions will be given to all staff that will implement procedures or decide sanctions.
The school drug co-ordinator, at least one member of the SLT and any other agency that can extend support to the school or young person will be involved in implementing the action applied. Exclusions can only be determined by the Head teacher.

Any school response will be taken from the range available, these are:

- Put together an individual teaching plan, personal support programme or other support plan.
- Change things at school, i.e. teaching set, tutor group, subject options.
- Make sure the young person is not a victim of bullying or similar treatment.
- Rewards system for appropriate behaviour changes.
- Positive input to school, i.e. Participation in peer education programme, monitor duty/playground duty.
- Assessment by the educational psychology department.
- Consultation with support services.
- Referral to an appropriate young people's specialist drug service
- Sanction system for inappropriate behaviour.
- Supervision of break/lunch times.
- The parents/guardians being asked to attend the school
- A letter home to the parents/guardian
- The school will also consider involving the police for more serious offences or where there is a lack of co-operation from the pupil or parents and may still impose additional sanctions to help the pupil benefit from the experience and use them as a deterrent within the school.

This will be part of a supportive network developed to ensure that the school uses its powers to protect the long-term welfare of the pupils in 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.

Drug Education

The statutory provision of drug education will be taught in the science curriculum:

- Year 6 programme of study: Recognise the impact of diet, exercise, drugs and lifestyle on the way their bodies function.

To be effective drug education will be taught throughout the curriculum although the main vehicle will be the Personal Social Health Education curriculum. Using the PSHCE curriculum the school seeks to assist young people in their personal and emotional development and allow time for reflection with opportunities for exploration of attitudes and values.

Drug education will use a number of strategies such as:

- Exposition;
- Role-play – discussion and feedback;
- Group work;
- Structured games;
- Visual aids;
- Active learning techniques;
- Appropriate use of outside speakers.

Methodology/Resources

To support effective and age appropriate teaching and learning in relation to drugs education, we will use Jigsaw PSHE. (http://www.jigsawpshe.com/)
Jigsaw is a comprehensive and Scheme of Work for the whole of Primary School from Years F1 and 2 through to Year 6. It brings together PSHE Education, emotional literacy, social skills and spiritual development in a comprehensive scheme of learning. SMSC (Spiritual, Moral, Social and Cultural) development opportunities are mapped throughout. All of these pieces of learning are brought together to form a cohesive picture, helping children to know and value who they are and understand how they relate to other people the world.

The needs of pupils and SEN (Special Educational Needs)

Care will be taken to ensure that the drug education curriculum meets the needs of individual pupils and takes into account their age, maturity, stage of development and personal and social influences. Appropriately differentiated materials and approaches will

ensure that vulnerable pupils, including those with SEN, receive their entitlement to drug education.
Pupils with SEN may be more vulnerable to situations involving risk. Teachers will focus more on developing pupils' confidence and skills to manage situations that require making decisions about drugs. Teachers will pay particular attention to enabling pupils to seek help and support when they need it.

Involvement of parents/carers

The school encourages the involvement of parents/carers by:
• Informing parents about the school drugs education policy and practice;
• Inviting parents to view the materials used to teach drugs education in our school;
• Answering any questions parents may have about the drugs education their children receive in school;
• Taking seriously any issue which parents raise with teachers or governors about this policy or the arrangements for drugs education in the school;
• Informing parents about the best practice known with regard to drugs education so that the parents can support the key messages being given to children at school.

Outside Speakers

If outside speakers are used to complement the drug education work in school they will be properly briefed beforehand and the content of their sessions will be agreed with the teacher co-facilitating the lesson. The speaker will be incorporated into the programme of drug education and not used in isolation from the programme. A member of staff will participate in any deliveries from outside agencies and careful attention paid to follow up work. To ensure that outside speakers are aware of the ethos of the school and how to deal with an incident if it occurs the co-ordinator will use the Quality Standards Contracts provided by Healthy Schools.

Monitoring and reviewing

Whatever strategies are used the lessons will be properly planned and evaluated using formative and summative evaluation ensuring that young people reflect with the teacher what they have learned in terms of knowledge, skills and understanding, this can be carried out in a variety of formal and informal ways. Teachers will record their observations relating to any development in pupils group work skills and changes in attitude. Time will also be made to ensure that teachers can reflect what they have learned from the education programme which will inform future drug education.

Further guidance and easy reference diagrams can be found in the accompanying document "Managing Drug-Related Incidents in Tower Hamlets Schools: A guide to best practice".

Smoking in school

Smoking in the workplace is a health and safety issue and under no circumstances is smoking permitted on any part of school premises. This reflects the NCC 2006 Smoking Policy and Smoke-Free Legislation (2007). Signage around school reminds pupils, staff and visitors of this policy.

All members of the school community are requested not to smoke in the vicinity of the school, outside of the school boundaries, in line with national and local smoke-free policies. Staff, as positive role models, should take a responsible attitude in promoting smoke-free lifestyles to pupils. This school is committed to reducing and preventing the uptake of smoking among the school community, including pupils, parents/carers and staff.

Alcohol in school

The use of alcohol by all members of the school community is prohibited.

Tickets for raffles or tombolas in which alcohol has been donated as a prize will only be sold to adults over the age of 18. Under no circumstance will a person under the age of 18 years be given alcohol as a prize.

Any alcohol brought into school must be stored in a safe place that is neither visible nor accessible to pupils - locked cupboard in staffroom… Alcohol that has been confiscated will be disposed of down a drain or toilet, or handed back to parents/carers if appropriate at the earliest opportunity.

Taking all of the above into consideration, it is this school's policy that alcohol will not be consumed by any staff members (including helpers) or pupils on any off-site visit including residential.

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Drug Related Incident Record Form

Emergency / Intoxication	Suspicion, off premises	Suspicion, on premises	Discovery, off premises	Discovery, on premises	Pupil disclosure	Parental Disclosure	Parent/Carer Expresses

Tick one or more of these tabs to indicate the

Name:	**Record form completed by:**
Form/class:	
Date of incident:	**Time of incident:** **am /pm**

First aid given ?

Yes ☐ → **First aid given by:**

No ☐ **At time:** **AM /PM**

Ambulance/Doctor called?
(Delete as necessary)

Called by:

☐ **No**

☐ **Yes**

Drug involved (if known):
(E.g. alcohol, prescription drug, ecstasy, cannabis etc)

Senior staff involved:
(insert name)

Parent/carer informed by:

at time: **am /pm**

Sample found? **(yes / no)**
Informed police / Destroyed at time:

am / pm

Witness name:

Where retained

Brief description of symptoms/situation:

(Continue on back if necessary)

Action taken: (e.g. other agency involved; Drug Education Advisor/ Police/ drug agency consulted about the drug; referral to Healthy Schools Drug Prevention Team for assessment and or intervention or alternative to exclusion programme).

(Continue on back if necessary)

This form has been adapted from the Right Responses