

## **Our Lady and St. Joseph Primary School Substance misuse Policy**

**This policy was published in October '06 and will be reviewed Bi-annually.**

**Core Team:** The following people are known as the core team as they are responsible for ensuring that core principles are implemented in the development of the policy and provision.

**Head teacher:** It is the role of the Head Teacher to ensure that this policy is implemented.

### **School Drug Co-ordinator (SDC):**

The School has appointed the Child Protection co-ordinator as the School Drug Co-ordinator.

**Role.** It is the role of the S.D.C to advise on and oversee the management of substance misuse-related incidents. He/she 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 Drug Co-ordinator will pay particular attention to working in partnership with the Schools Substance Misuse Education Adviser 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 and those with drug misusing parents.

He/she is also 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 correct procedures if they are unsure.

**Drug Education Co-ordinator:**

The school has appointed PSHCE Coordinator as the Drug Education Co-ordinator.

**Role.** He/she is responsible for the co-ordination of the substance misuse 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 drug co-ordinator and drug education co-ordinator to ensure that the substance misuse 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 Substance Misuse:**

The school has appointed (*insert individuals name here*) as the lead governor for substance misuse.

**Role.** He/she is responsible for familiarising the schools governing body with the substance misuse policy and procedures also ensuring that school staff has followed correct procedures for managing and responding to substance misuse related incidents. They would also be expected to work with the curriculum planning committee to allocate sufficient time and resources to implement the schools substance misuse education programme and staff are released to access necessary training. They 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 substance misuse related incidents.

**Consultation**

The following people developed this policy

- PSHCE coordinator
- Child Protection Coordinator
- Head Teacher
- HS Lead
- Governors
- School Council
- Teaching and Support Staff
- Parents
- Healthy Schools Substance Misuse Education Adviser

## **Context**

Research clearly demonstrates that all young people are close to a source of drugs; using drugs is one of the choices on a menu of activities available to young people today. Research shows that the majority of young people will have been offered an illegal drug before they are 16 and up to 50% have tried illegal drugs at least once. It is against this background that the school has developed this policy. One of the purposes of this policy is to provide a safe framework for people to work or learn in ensuring that the school uses its resources to reduce the likelihood of staff, pupils or visitors suffering avoidable substance misuse-related harm. The policy itself demonstrates how the management of substance misuse-related incidents and the implementation of substance misuse education will be carried out.

Although aspects covered in this substance misuse policy may duplicate, elaborate or reflect areas within other documents e.g. Child protection, Confidentiality, PSHCE, School Journeys/Residential Visits and School Discipline 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 substance misuse policy will synergise other policies and not supersede them.

## **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 or supply of 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/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 substance misuse identification and problems associated with their use, managing and responding to substance misuse-related incidents and substance misuse education.

## **Aim.**

It is the aim of this School Substance Misuse 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 substance use/misuse in order to achieve their full potential.
- ✚ Outline the roles and responsibilities of staff within the school.
- ✚ Outline the responsibilities of the pupils
- ✚ Outline the range of sanctions and supportive responses that would be used when responding to drug related issues.

## **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, 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, amphetamines, ecstasy, LSD, magic mushrooms, cocaine/crack and heroin.

## **Medicines.**

Although there is a more comprehensive medicines policy the fundamental principles are outlined here to assist any body that needs speedy access to them. 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.

### **Supervised Self-Medication.**

Wherever possible the school must be provided with an authorisation in the form of a letter from the legal guardians of child to supervise the self-medication of pupils. The authorisation 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 to do if the adverse effects occur.
- ✚ How the medication is to be stored.

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 Drug Co-ordinator will be asked to deal with the potential problems. If the School Drug Co-ordinator in partnership with parents or legal guardians cannot get the pupil to medicate themselves the parents or guardians will be advised that the school may be forced to exclude if a behavioural incident occurs as a result.

### **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.

- ✚ Whom the medication is for (name, DOB, address)
- ✚ 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 dependant on the number of pupils requiring access to medication and how quickly it must be accessed. The expiry date and storage 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 leave the same boundaries at the end of the normal school day. Pupils will also be expected to adhere to this policy whilst they are attending an event or on a residential or school trip . 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 team and to maintain up to date drug knowledge through refresher courses. He/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.

### **Records**

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

### **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 others 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, they will be directed to appropriate sources. 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.

### **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 member of staff 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 he/she 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 SMT and any other agency that can extend support to the school or young person will be involved in implementing the action applied. Exclusions cannot be considered without Head teacher involvement.

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

- ✚ Put together an individual teaching plan, personal support programme or support plan.
- ✚ Change things at school, i.e. Participation in peer education programme, monitor duty/playground duty.
- ✚ Rewards system for appropriate behaviour changes.
- ✚ Assessment by the educational psychology department.
- ✚ Consultation with support services.
- ✚ Referral to Sub 19 (Young People's Specialist Drug Service).
- ✚ Sanction system for inappropriate behaviour.

- ✚ Supervision of break/lunch times.
- ✚ 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 orders, which are:

- ✚ Key Stage 1; 5-7 year olds. The role of drugs as medicines.
- ✚ Key Stage 2; 7-11 year olds. Alcohol, tobacco and other drugs can have harmful effects.

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. The content of what will be taught is outlined in *Drugs: Guidance for Schools DfES/0092/2004*.

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.

### **Outside Speakers.**

If outside speakers are used to complement the drug education work in the 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 links 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.