

School Drug Policies

The purpose of the school drug policy is to:

- Clarify the legal requirements and responsibilities of the school
- Reinforce and safeguard the health and safety of pupils and others who use the school
- Clarify the school's approach to drugs for all staff, pupils, governors parents / carers, external agencies and the wider community
- Give guidance on developing, implementing and monitoring the drug education programme
- Enable staff to manage drugs on school premises, and any incidents that occur, with confidence and consistency, and in the best interests of those involved
- Ensure that the response to incidents involving drugs complements the overall approach to drug education and the values and ethos of the school
- Manage drug related incidents in a way that safeguards and upholds the rights of the child as embodied in UN Convention and Human Rights Act.

Substance Misuse Policy and Procedures -Dealing with Pupil Incidents

School :

Eversley Primary School

Date :

Written January 2014 Reviewed February 2016

Members of Staff Responsible :

Mrs Samatha Williams (Headteacher) and Mrs Jenny Barton (PSHE Coordinator)

Review Date: February 2019

Description of School :

Eversley Primary school is a mixed primary school in North London for pupils aged 4-11. Three forms of entry. The pupils are from a diverse background and there approx. 40 languages spoken by the children and families at the school. There are currently 630 pupils on role.

Aims and Objectives of Substance Misuse Education

This policy is seen as part of the school's PSHE guidance. We believe that the following factors help children to learn and make sound progress and we organise our teaching with this in mind.

- To form a supportive partnership between parents, governors, teachers and the community to develop each child's social skills.
- To create a safe, happy and secure environment conducive to the development of the whole child so that they may achieve their potential.
- To promote a pleasant attitude in all our children with emphasis on self discipline, respect for others, their opinions and their property.
- To build on the individual child's existing knowledge, skills and understanding to prepare for life's opportunities.

Educational Aims

We believe and support the following educational aims in respect of substance use and misuse:

- To provide pupils with accurate information about substances.
- To explore the benefits of healthy lifestyles and the role of drug education within this context.
- To develop personal and social skills e.g. communication, assertiveness and decision - making.
- To develop and enhance self esteem.
- To increase an understanding of the difference between legal and illegal drugs and the implications of their use.
- To identify sources of appropriate support.

These aims are fulfilled through aspects of the pupils experiences in the taught curriculum and the informal curriculum .We deliver in the taught curriculum, mainly through PSHE, Science and English areas, but other opportunities to reinforce learning will occur in other parts of the teaching programme .

Content Headings for a Drug Education Programme

These are in line with National Curriculum 2000 Science and PSHE and Citizenship Framework and Drugs Guidance for Schools - DfES Feb. 2004
The following broad areas are covered.

It is expected that a wide variety of teaching approaches will be used to deliver this programme .These approaches will be consistent with the aims of the PSHE and Citizenship Programme and will ensure a balanced programme which enhances knowledge, skills and attitudes .

Storage and Handling of Medication

Please refer to Appendix 1

Substance Related Incidents

These could include the following, although no judgment can be passed unless sufficient evidence is provided by the pupils themselves or the teacher has seen something that they can base this judgment on.

For instance:

- Drugs or associated paraphernalia are found on school premises.
- A pupil demonstrates, perhaps through actions or play, an inappropriate level of knowledge of drugs for their age.
- A pupil demonstrates sudden attitude and behaviour changes with falling academic attainment.
- A pupil is persistently late in the mornings, which may be due to persistent substance misuse each evening.
- A pupil is found in possession of drugs or associated paraphernalia
- A pupil shows a marked change of behaviour after lunch
- A pupil is found to be supplying drugs on school premises
- A pupil, parent/carer or staff member is thought to be under the influence of drugs
- A staff member has information that the illegitimate sale or supply of drugs is taking place in the local area
- A pupil discloses that they or a family member/friend are misusing drugs.

Establishing the nature of incidents

A range of factors may be relevant and need exploring to determine the seriousness of the incident, the needs of those involved and the most appropriate response. For example:

- What does the pupil have to say?
- Is this a one-off incident or longer-term situation?
- Is the drug legal or illegal?
- What quantity of the drug was involved?
- What was the pupil's motivation?
- Is the pupil knowledgeable and careful or reckless as to their own or others' safety and how was the drug being used?
- What are the pupil's home circumstances?
- Does the pupil know and understand the school policy and school rules?
- Where does the incident appear on a scale from 'recreational / medicinal use possession of a small quantity' to 'persistent supply for profit'?

If supply of illegal drugs is suspected:

How much was supplied, and was the pupil coerced into the supply role, were they 'the one whose turn it was' to buy for others, or is there evidence of organised or habitual supply?

A range of responses

Any response should balance the needs of the individual with those of the wider school community, and aim to provide pupils with the opportunity to learn from their mistakes and develop as individuals. The needs of pupils in relation to drugs may come to light other than via an incident, for example, through the pastoral system. Schools should develop a range of responses in line with local guidance and consider all the factors before determining their response. Given that drug problems rarely occur in isolation, responses may need to take a holistic approach rather than focus solely on drugs. Some possible responses include early intervention and targeted prevention, referral, counselling, behaviour support plans, pastoral support.

Some responses may serve to enforce and reinforce school rules. Any sanctions should always be justifiable in terms of:

- the seriousness of the incident
- the identified needs of the pupil and the wider school community
- consistency with published school rules, codes and expectations
- consistency with disciplinary action for breaches of other school rules (such as theft, violence, bullying).

Dealing with Substance Related Incidents

In order to support our aims and objectives, members of staff will on occasion need to take action with regard to a substance related incident.

In emergency situations immediate action is required and staff would be expected to follow the procedures below.

Emergency

This situation is one where a person has lost consciousness as a result of drug use or has gone into a coma through overdosing.

- (a) Summon/call staff with first aid qualifications.
- (b) Do not panic or leave the person alone.
- (c) Place the person in the recovery position.
- (d) Telephone 999 for an ambulance.
- (e) Telephone parents/carers.
- (f) Effort should be made to determine which substance has been used. Evidence, e.g. tablets, bottles, syringes etc should be gathered. This may help hospital staff identify what substance has been consumed. Samples of any vomited material may also be needed.
- (g) Seize items, seal in property evidence bag for security and preservation. (see also Collecting Evidence)

Intoxication

It is difficult to talk to a person who is intoxicated or 'high ' and in such a situation it is important to keep the person under observation so they do not wander off and get into dangerous situations. If a person is intoxicated but conscious do the following:

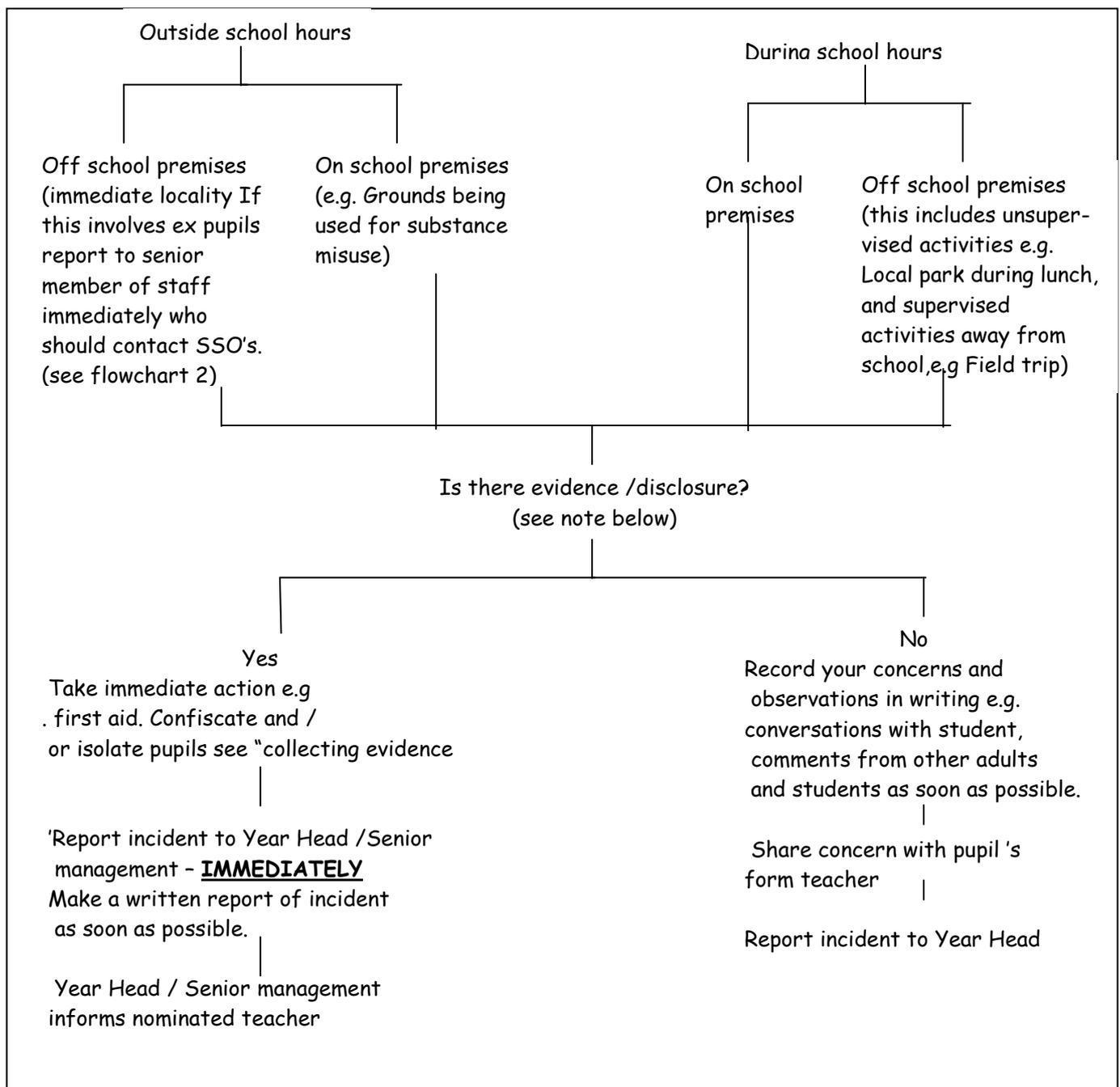
- (a) Sit them down in a quiet room or area.
- (b) Ensure good ventilation - open a window..
- (c) Remain calm, do not shout or issue threats.
- (d) Help calm them down if they are distressed.
- (e) First aid should be administered if necessary.
- (f) Call help if necessary.
- (g) Telephone parents/carers.

The action to be taken by a member of staff in a drug related incident which is not an emergency is shown on the following diagram.

The action to be taken by **ANY MEMBER OF STAFF** in a drug related incident which is not an emergency is shown on the following diagram - FLOWCHART 1

FLOWCHART 1

Action to be taken by all members of staff re substance related incident



Disclosure: This situation is one in which a pupil discloses to a member of staff that he/she has been using drugs. The member of staff must bear in mind the likely desire of the pupil for total confidentiality and should react positively to this expression of trust. [Please see notes on confidentiality below.] Whilst paramount concern should be for the pupil's welfare, members of staff must act in accordance with the school procedures.

FLOWCHART 2 IS A SUGGESTED PROCEDURE FOR THE SENIOR DESIGNATED MEMBER OF STAFF

FLOWCHART 2 Action to be taken by Senior Management.

Receive Report of Incident

Incident involves supply / dealing/

other incident

Contact YAC's **IMMEDIATELY**
DO NOT INVESTIGATE
Further. Collect evidence
(see notes), make notes

Enquire into facts. Try to identify source and accuracy of information. Enquiries should be made by nominated teacher and another senior member of staff.
Notes should be taken. As a result of these enquires is there evidence of possession, paraphernalia or other related incident?

Yes

No

Inform parents

Consider informing parents

Consider advising EWO/YOT 's

Keep notes of interview

Make decision to inform YAC's for
Appropriate resolution.

Yes

Not at this stage

Contact SSO's

Discussion with pupil, parent and year head to devise a plan of action. Police can offer advice as to appropriate legal action. It should be noted that any delay may reduce the options available for action. School to decide appropriate internal action in line with discipline policy.[NB. The fact that certain behaviour could constitute a violation of criminal law should not be taken as automatically leading to exclusion]

Make a record of incident and action taken

SEND INFO TO LA PSHE TEAM WHERE IT WILL BE RECORDED FOR STATISTICAL PURPOSES. NB school to agree with SSO's who is to pass on the information.

Contact No's SSO's , Enfield Police Station
Enfield Borough Police Control room

0208 345 1159
02083454421

Specific Issues

Confidentiality

It is not realistic to guarantee complete confidentiality for a pupil who may have been involved in a substance related incident. Schools need to consider carefully the pupils best interest when notifying parents or carers. After discussion with a pupil it could be agreed to involve another appropriate adult. This would be particularly appropriate if for example the parents / carers were thought to be involved in substance misuse themselves or if the pupil may be put at risk. (See Key Principles Appendix 2)

The student should always be told what information is going to be passed on ,and to whom, and the consequences e.g. if the police are informed this could lead to criminal proceedings

If there is a risk of harm to the pupil or other people, teachers are obliged to inform the child protection Designated Teacher.

If the law is being broken, Senior Management is to be informed.

If a pupil becomes ill, medical or nursing staff need to know about all factors that may be relevant, including any suspicions of drug taking.

Pastoral Care and Support for Students at Risk

Where a pupil has been identified by the staff as having experimented with drugs or as being at risk of doing so, he or she should be offered appropriate counselling and support within the school 's general arrangements for the pastoral care of its students, and his or her parents informed.

We are aware that we have no legal obligation to inform police about an incident that amounts to a criminal offence, and identifying a pupil as the offender, which may lead to that pupil being criminalised. In such circumstances we have to strike a balance between the needs of that pupil and the needs of the whole school and wider community. We are aware that YAC's have a variety of ways of resolving such incidents and supporting the young person.

Recording of Incidents

The school will make a full record of every incident. Storage of sensitive information about pupils or staff will be secure and accord with the requirements of the Data Protection Act 1998.

We will think carefully about whether such information will be added to a child's permanent record and inform parents/carers. The Senior management will notify the parents/carers concerned that it will be recorded on the child 's record.

An anonymous record of the total of substance related incidents will be kept centrally by the school, and is the responsibility of the Nominated Senior Teacher. This is a means of keeping track of the number of incidents occurring. It will be sent to the LEA PSHE team termly and will be used for statistical purposes only.

Collecting Evidence

If a young person is discovered to be using or holding a substance that is not permitted on school premises or is thought to be illegal, the substance(s) should be confiscated. Where possible the substance should be placed in a property evidence bag and kept in a safe place. Details should be obtained and if there is any doubt about the legality of the substance then the police, via the youth and community officers and/or Edmonton Police Station should be contacted. They can be called to remove a suspected illicit substance and organize its destruction; this is permitted under the 'Misuse of Drugs Act ',1971. It is however, important to have a senior colleague present to act as a witness to the confiscation and sealing of the evidence.

The school will decide any further action to be taken in line with the procedures given and in accordance with particular set of circumstances pertaining.

Staff should not act on the basis of rumours of drugs within the school. If there is a suspicion, evidence should be collected over a period before a decision is made to confront a young person or group about concerns over drug use. It is also dangerous to believe that the drug user can be spotted from physical or behavioural signs as these may have been caused by other factors.

The law permits school staff to take possession of a substance suspected of being a controlled drug for the purposes of protecting a pupil from harm and committing the offence of possession. The substance should be handed to the police who will be able to identify if it is an illegal drug; school staff should not attempt to analyse or taste an unidentified substance. Where pupils are suspected of concealing illegal drugs, every effort should first be made to secure the voluntary production of any unlawful substances by, for example,

asking them to turn out their pockets/open their locker. In the event that voluntary agreement is withheld a member of staff can search school property e.g. desk/ locker, in the company of a witness. At no time should a member of staff conduct a personal search of a pupil or their property. The teacher must be careful to ensure that there is no opportunity for allegations of assault or improper conduct to arise, and therefore **a witness should be in attendance**. If the pupil refuses to cooperate the parent/police may be called. The powers to search by the police are clearly defined in law, and a search can only be carried out after an arrest has been made. If nothing is found the pupil would then be de- arrested.

We are aware that in the instance that a pupil's understanding, that is, language (EAL) or any speech / language difficulties exist, a pupil should not be spoken to until they are fit and / or an appropriate adult can interpret.

Dealing with the Media

When faced with media interest, it is important that the school seeks advice from the LEA press officer. When the Police are involved their press office will also be informed and will liaise with the LEA press office and school. The point should be made that procedures outlined in the School Policy and adopted by the Governing Body are being followed. The Headteacher should not go into any details before contacting the Chair of Governors and parents/carers.

Working with Parents

Parents are informed of Drugs Education in school through termly information provided by teachers from each year group. This details the work that is carried out in PSHE drugs education lessons. Parents have the opportunity to request to see resources and materials that are used to teach drugs education on request.

Dissemination of the Policy

The policy will be available for parents/carers and the public to view the policy on the school's website online.

All policies are reviewed by the Governing Body before they can be seen by parents/carers and the public.

Procedures for Policy Monitoring and Evaluation

Review Date: January 2018 by the PSHE Coordinator.

Working with Outside Agencies

Outside agencies will, at various times, be involved in the school with regard to substance misuse. The following guidelines will be followed:

- Visits by outside agencies will be co-ordinated by the Nominated Senior Teacher, or where part of the PSHE curriculum, by PSHE Co-ordinator, who will inform the Nominated Senior Teacher before the visit.
- Outside agencies working in schools should be sent a copy of the school policy, and expected to follow school procedures.
- Outside agencies will be invited to have an input in the school curriculum provided that the input is educationally sound and supports the educational aims as described in this policy.

Appendix One Storage and Handling of Medication

Taken from "Supporting Pupils with Medical Needs" - London Borough of Enfield Education Group Policy & Guidelines - January 1998)

Particular attention must be paid to the safe storage, handling and disposal of medicine and health and safety training for staff should include guidance in appropriate procedures. Some medicines may be harmful to anyone for whom they are not prescribed. In these cases there is a duty to ensure that the risks to the health of others are properly controlled. This duty derives from the Control of Substances Hazardous to Health Regulations 1994 (COSHH).

The school will not store large volumes of medication. Wherever possible and appropriate parents or guardians or the pupil should be asked to bring in the required dose each day. Medicine stored must be clearly labelled with the pupil's name, the name and dose of the drug and the frequency of administration. If a pupil needs two or more prescribed medicines each should be in a separate container and labelled as above.

Medicines should never be transferred from their original containers.

Pupils with medical needs should know where their medicines are stored and who holds the key. Staff should also know this. However, some medication must be readily available in an emergency, e.g. Asthma inhalers, and should not be locked away. Older pupils (e.g. Yr. 5 & 6) will be allowed to carry their own inhalers and this approach, where appropriate, is encouraged by the LEA. The School nurse will be aware of the "Asthma Protocol" devised by school nurses working within the local Health Authority and will be able to support and assist in any relevant development within school. The school Welfare Assistants may need to make special access arrangements for emergency medication. However, it is important to try to ensure that medicines are only accessible to those for whom they are prescribed. If a pupil is allowed to carry and

administer their own medication consideration needs to be taken about the safety of other pupils. A clear agreement must be made with the pupil and a parental consent form completed.

Administration of Epi-Pens: People who suffer from anaphylactic reactions may need emergency adrenaline treatment. All staff are given Epi=Pen training annually (in January 2014 this year). Welfare Staff (Mary and Mandy in the Infants and Nicole and Teresa in the Juniors) have access to all children's Epi Pens in the relevant Welfare rooms (Infant or Junior) as well as an Epi-Pen for individual pupils being available in their classroom (out of reach of children). Epi-Pens are taken on all school visits that the relevant children attend. Each child that has an allergy has their photograph, name and allergies displayed in both staff rooms for all staff to be aware of. It is important to note that the treatment of an Epi-Pen is unlikely to be harmful if given too soon or in multiple doses.

Storage and disposal: Some medicines may need to be refrigerated. They can be kept in a refrigerator containing food but should be kept in an airtight container, clearly labelled ([In Mary's/Mandy's Welfare room in the Infant Building and in Teresa and Nicole's room in the Junior Building](#)). Access to the refrigerator should be restricted where possible, only accessed by designated staff. School staff should not dispose of medicines but it should be established practice that parents or guardians collect any unused medication regularly, e.g. at the end of each term and are also responsible for disposal of date expired medicines.

Hygiene and infection precautions would be included in training given to staff volunteering to administer medication. Staff should have access to protective disposable gloves and receive guidance on care when dealing with spillage of blood and other body fluids and disposing of dressings or equipment.

Non-Prescription Medication: School staff should generally not give non prescribed medication, e.g. analgesics including aspirin and paracetamol, to pupils outside normal procedures and agreements which would include the written consent of parents or guardians and records of medication given. They may not know whether the pupil has taken a previous dose or whether the medication may react with other medication being taken. **A pupil under 12 should never be given aspirin, unless prescribed by a doctor.** If a pupil suffers regularly from acute pain, such as migraine or menstrual pain, subject to school agreement, parents or guardians should authorise and supply appropriate pain-killers for their child's use, with written instructions about when the pupil should take the medication. A member of staff should supervise the pupil taking the medication and notify the parents or guardians, in writing, on the day the painkillers are taken.

Appendix Two Some Key Principles When Pursuing a Substance Related Incident

- Take care not to infringe privacy any more than is necessary to safeguard the welfare of the child.
- Listen to the concerns of children and their families, and take care to learn about their understanding, fears and wishes before arriving at your explanations and plans.
- Learn about and consider children within their family relationships and communities, including their cultural and religious contexts, and their place within their own families.
- Ensure children, families and other carers know their responsibilities and rights, including any right to services, and their right to refuse services, and any consequences of doing so.
- Use plain, jargon-free language appropriate to the age and culture of each person. Explain unavoidable technical and professional terms. Consider use of an interpreter.
- Allow children and families' time to take in and understand concerns and processes. A balance needs to be found between appropriate speed and the needs of people who may need extra time in which to communicate.
- Take care to distinguish between personal feelings, values, prejudices and beliefs, and professional roles and responsibilities

Appendix 3: Summary of relevant laws

The Misuse of Drugs Act 1971 (amended in January 2004)

	Class A	Class B	Class C
Principal drugs included	Opium Heroin/methadone Cocaine/Crack cocaine LSD Ecstasy Magic mushrooms (processed)** Class B drugs prepared for injection	Amphetamines Barbiturates Codeine Ritalin	Cannabis resin Cannabis herb Anabolic steroids Benzodiazepines (minor tranquillisers e.g. temazepam) GHB (gamma-hydroxy butyrate) Some stimulant, anti -depressant and anti-obesity medicines
Maximum penalty for possession	7 years and/or a fine	5 years and/or a fine	2 years and/or a fine
Maximum penalty for trafficking, supply or production	Life imprisonment and a fine	14 years and/or a fine	14 years and/or a fine

Offences under the Misuse of Drugs Act

Possession, possession with intent to supply another person a controlled drug and supplying another person a controlled drug. The law does not differentiate between supplying/giving drugs to friends and supplying for profit. Supplying drug paraphernalia, production, cultivation or manufacture of controlled drugs, allowing premises you occupy or manage to be used for the supply, production or cultivation of a controlled drug, also, to allow premises to be used for the smoking of cannabis or opium and the preparation of opium.

Changes to the law on cannabis

Cannabis (resin and herb) has been reclassified from a Class B to a Class C drug (with effect from 29 January 2004). Cannabis remains an illegal drug with penalties for supply and possession. A consequence of this reclassification for adults will be that the use of the retained power of arrest may not be used in all circumstances of cannabis possession. Each case will be judged on its own merit. However, youth offenders will continue to be dealt with through the Crime and Disorder Act, which requires offenders to be dealt with at the police station. In practice, this means that persons aged 17 years or under who are in possession of cannabis for personal use will be arrested. They will then be dealt with through the Youth Justice System with options of a reprimand, final warning, and then a charge.

The Medicines Act 1968

The Medicines Act divides medicines into three categories: restricted medicines or prescription-only medicines, pharmacy medicines, which can be sold without a prescription but only by a pharmacist (also called over-the-counter medicines) general sales medicines, which can be sold without a prescription by any shop.

Tobacco laws

Under section 7 of the Children and Young Persons Act 1933 (as amended by the Children and Young Persons (Protection from Tobacco) Act 1991) it is an offence for a vendor to sell tobacco products to anyone under the age of 16.. Children under age 16 who purchase tobacco products are not themselves committing an offence. However, police have the power to confiscate tobacco products from under-16s who are found smoking in a public place.

Alcohol laws

It is an offence under the Children and Young Persons Act 1933 to give alcohol to any child under the age of 5. Children over 5 can legally consume alcohol in a private environment, although police have powers to confiscate alcohol from under-18s who are drinking in a public place. Children aged over 14 or over may enter the bar area of licensed premises . It is illegal for the staff of licensed premises to knowingly sell alcohol to anyone under the age of 18 or allow them to consume alcohol in the bar area of their premises. It is also an offence for a child to buy or attempt to buy alcohol on licensed premises. It is illegal for an adult to purchase alcohol on behalf of a person under 18. However, an exception allows young people aged 16 and 17 accompanied by an adult to consume beer, porter, and cider with a meal on licensed premises. At present it is lawful for children over the age of 14 to purchase or be supplied with alcohol in registered members clubs (such as ex-services, working men's and sports clubs). Changes to the law on alcohol as set out in the Licensing Act 2003 are unlikely to be brought into force before May 2005.

Laws relating to volatile substances

In England and Wales it is an offence to sell solvent products to any person under 18 if the retailer has reason to suspect that the substances will be misused.

The Road Traffic Act 1988

It is an offence to be in charge of a motor vehicle while 'unfit to drive through drink or drugs'. This includes alcohol, illegal drugs, prescribed medicines and solvents. The legal limit for alcohol levels in the blood while driving is 80 mg of alcohol per 100 ml of blood.

Responsibility for children

School staff have a legal duty of care towards pupils in their care. This is interpreted in case law as the duty to act as a careful parent would. This duty of care is interpreted as a duty to exercise adequate supervision, which will depend on the maturity and age of the pupils involved, whether they are affected by a disability, and the precise circumstances. Supervision could mean giving adequate advice and instructions rather than constantly watching a pupil, although some activities, for example, while on school trips, may require greater supervision.