Ratified: 03/10/16 Review date: 03/10/18

This policy should be read and understood in conjunction with the following policies, procedures and documents:

School Policies:

- 1. Behaviour for Learning Policy
- 2. Child Protection Policy
- 3. Single Equality Policy
- 4. Exclusion Policy
- 5. Health & Safety Policy
- 6. Home School Agreement
- 7. Secure Data Handling Policy
- 8. Teaching, Learning and Curriculum Policy
- 9. Use of Force to Control or Restrain Others Policy
- 10. Whistle Blowing Policy

School Procedures:

- 11. Medical Procedures
- 12. Non-Smoking Procedures
- 13. PSHEE Procedures

Documents:

- 14. Screening, searching and confiscation in schools: Advice for Head Teachers, staff and Governing Bodies (DfE 2014) (Appendix E)
- 15. DfE and ACPO drug advice for schools (September 2012)(Appendix F)
- 16. Supporting pupils at school with medical conditions (DfE September 2014)
- 17. Wiltshire Health and Safety Manual

This policy is written in two parts:

- □ **Part A** which sets out the school's roles and responsibilities with regards to educating young children about drugs, their use and misuse.
- □ **Part B** which sets out the definitions, principles and procedures to be followed when dealing with a drug related incident.

This policy has been devised by the staff and governors (and in consultation with children and parents) with due regard to the relevant documents. This policy applies to all staff, pupils, parent/carers, governors, visitors and partner agencies working with our school.

PART A – DRUG EDUCATION

Principles

- □ Drug education comes under the umbrella of PSHEE and Science curriculums and reflects our statutory duty to provide a balanced and broadly based curriculum that:
 - promotes the spiritual, moral, cultural, mental and physical development of pupils at the school and of Modern Britain
- prepares pupils for the opportunities, responsibilities and experiences for healthy adult life **Appendix A** shows what is covered and when.

Philosophy

□ Central to our ethos is Christ Church Primary School should be both a safe and enjoyable place where children are free from harm.

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POLICY NUMBER: B7. We want our pupils to be able to take their place safely in a world where a wide range of drugs exist. We recognise that some drugs have beneficial effects, but that every drug also has the potential to harm. All drugs need appropriate and responsible care and management. In order to be able to make informed choices, staff and pupils need to understand the nature of drugs, their social status, their uses and effects.

- □ Children need to know the facts about drugs, both legal and illegal and what constitutes a drug. An effective drug education programme will enable children to make healthy and informed choices by:
 - o increasing knowledge and understanding of drugs and their affects
 - challenging their attitudes
 - developing their sense of self-worth and self-esteem
 - helping them to develop and practise skills

Aims

- □ Drug education is part of a well-planned programme of PSHEE education delivered in a supportive environment, where pupils are aware of the school rules, feel able to engage in open discussions and feel confident about asking for help if necessary.
- □ Drug education in our school aims to equip children with the understanding and ability to make healthy, educated and informed choices, by increasing their knowledge, exploring a range of attitudes towards drug use and developing and practising decision making skills. It is based on national and local guidelines and is appropriate to the age and experience of our pupils as well as taking into consideration any specific special needs which children might have.
- □ Through our drug education programme we aim to:
 - Give children accurate information about drugs and their affects
 - Encourage responsible behaviour in relation to drug use and misuse
 - Promote positive attitudes towards healthy lifestyles
 - Challenge and try to modify behaviour that could be harmful to health and relationships

Key roles and responsibilities

□ The teacher responsible for drawing up the Drug Education Policy and for overseeing its implementation in the school is the Deputy Head.

Definition of drugs

□ A drug is defined as a substance which, when taken into the body, changes the way we feel, the way we perceive things and the way our body works. This definition includes legal substances such as alcohol, tobacco, volatile substances and medicines, illegal substances and psychoactive substances ("legal highs").

Content and Delivery

- □ Normally the curriculum will be delivered by the class teacher or another teacher at Christ Church who may have had specialist training in drug education.
- □ Where suitable, external contributors (e.g. the School Nurse and Life Education Bus) will be used in a planned way where they can add value to the school's programme.
- □ A range of techniques will be employed when delivering the curriculum to encourage active learning and maximum participation, for example:
 - o Circle Time
 - o Drama
 - o Class discussions
 - o Group work
 - Research (using websites and publications)
 - o Quizzes
 - o Video/DVDs/ICT

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This should not be viewed as an exclusive list as techniques will alter in response to the needs, understanding and abilities of the children.

- □ The children's initial level of understanding will be assessed through elicitation and lessons planned with reference to the frameworks for PSHEE and the National Curriculum Science Programme of Study (2014)
- □ The needs of vulnerable pupils and those with SEN will be assessed on a 'case by case' basis in consultation with parents.
- □ A sample of children will be asked to join with their class teacher and the PSHEE Subject Leader to evaluate the curriculum that has been delivered. Their opinions will help us to develop the curriculum in line with the needs and responses of the children. The PSHEE Subject Leader will also discuss with those teachers and agencies concerned the effectiveness of the lessons that are delivered and any changes that are felt to be required.

PART B – MANAGEMENT OF DRUG RELATED INCIDENCES

Principles

- □ The possession, use or supply of **illegal drugs*** and other **unauthorised drugs*** within the **schools boundaries*** is unacceptable and is not permitted either by children or **adults*** connected to the school.
- □ The first priority in managing any **drug related incident*** is the health and safety of the school community and supporting the needs, both physical and pastoral of those involved.
- □ Where an incident falls under the category of child protection, procedures as outlined in the Child Protection Policy need to be followed.
- □ Where an incident does not fall into the category of child protection, the procedures outlined in this policy should be followed.

Philosophy

- □ Pupils need to feel able to talk to members of staff about drug related problems without fear of being judged or reprimanded. Teachers and those dealing with such incidents need to understand questions of confidentiality together with legal responsibility. (**Appendix C** details the basic principles and procedures that members of staff should following when dealing with a drugs related incident).
- School management of sensitive issues, including incidents involving theft, bullying and drugs, should be seen in wider terms than simply issues of law or rule breaking. A more complex understanding and flexible approach to such incidents, while not condoning inappropriate behaviour, is more likely to result in a positive outcome for the individual and school community. However, it is important that we recognise and work within the legal framework and guidelines to ensure good practice.

Key roles and responsibilities

- □ The School Drug Coordinator (SDC), Claire Hann-Perkins, Deputy Head Teacher is responsible for coordinating the management of drug related incidences (in consultation with the Head Teacher) including the involvement of outside agencies in line with agreed procedures. In the absence of the SDC, the incident will be coordinated by the Head Teacher or a member of the SMT and set procedures will be followed (See Appendix C).
- □ The SDC should be aware of both local and national guidance regarding the management of drug related incidents to ensure a consistent and informed approach is undertaken.
- □ The SDC should be aware of local and national agencies who can provide support and advice as needed as well as the contact details of the school's liaison officer.

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POLICY NUMBER: B7 All staff should be made aware of the school procedures for managing incidences (as outlined in Appendix C), including when to pass on information and to whom and this is the responsibility of the SDC. This policy should be included in the induction information for all new staff. The SDC will ensure that staff are sufficiently trained to deliver the curriculum effectively to pupils, that they are aware of the issues surrounding drug education and drug use and that this will form part of their continuous professional development, as required

- □ All members of the SMT must have a working knowledge of the procedures in the event that the SDC is absent from the premises when an incident occurs.
- The school has a clear procedure in place to meet the needs of those pupils who require prescribed medication to be administered during school hours which is in line with LA Guidelines.
 Procedures as detailed in the Wiltshire LA Health and Safety Manual, together with those outlined in the school's own procedures are followed at this school. The school can refuse to administer medication as long as such refusal does not conflict with their duty of care under the Disability Discrimination Action 1995, the Equality Act 2010 or the statutory guidance "Supporting pupils at school with medical conditions" (September 2014). Office staff who are normally responsible for the administration of prescribed medication are aware of the procedures and who to consult should they be presented with an unfamiliar situation.

Responses to Drug Related Incidences

- □ Incidences can be varied and it is therefore difficult to give a set procedure or response for every possible incident however, the response of the school needs to proportionate and operate within a legal framework, whilst considering the pastoral needs of those involved and the range of options available.
- □ It is necessary to assess each instance according to the circumstances surrounding it and the pupil/s involved. Any response should balance the needs of the individual with those of the wider school community aiming to provide pupils with the ability to learn from their mistakes and develop as

individuals. As drug problems rarely occur in isolation, a holistic approach may be more appropriate than one that focuses solely on the drugs.

- □ The SDC should coordinate the response to a drug related incident, including consultation with the Head Teacher, school governors and outside agencies.
- □ When dealing with a **medical emergency*** first aid should be administered, where appropriate, by the school in the first instance with additional medical expertise being sought as needed. More detailed procedures are given in Appendix D.
- □ The SDC must investigate the nature and seriousness of each incident. They should inform, consult and involve others as necessary. After having established the nature of the incident and the needs of all concerned, an appropriate response can be chosen from the range of possible responses. Possible responses that can consider include:
 - early intervention and targeted prevention
 - o referral
 - counselling
 - o behaviour support plans
 - inter-agency programme
 - fixed-period exclusion
 - o pastoral support programme
 - permanent exclusion
- □ Some responses may serve to enforce school rules. Any sanctions should always be justified in terms of:
 - the seriousness of the incident
 - o the identified needs of the pupil and the wider school community
 - o consistency with published school rules, codes and expectations

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POLICY NUMBER: B7 consistency with disciplinary action for breaches of other school rules (such as violence, theft, bullying)

- □ The school has the power to search a pupil or their possessions where they believe the pupil may be in breach of the school rules and has brought a prohibited item into school. (Prohibited items are listed in the school's 'Behaviour for Learning Policy'). The school is not required to inform parents/carers before the search takes place or to seek their consent to search the child. Any complaints about the searching of pupils should be addressed through the school's Complaints Policy.
- □ There is no legal duty to inform parents/carers about a young person's involvement in a drug related incident but as a school we would normally involve parents/carers and explain how the school intends to respond to the incident and the pupil's needs. Any decision as to whether or not parent/carers should be

informed must be taken in the best interests of the pupil concerned and with reference to confidentiality and child protection.

- □ Parents/carers are encouraged to approach the school with any drug related issues or concerns that they have regarding their own child so that appropriate support can be given.
- □ As with drug education, the school must identify **vulnerable children*** and endeavour to provide them with appropriate support through the curriculum, pastoral system or referral to other services.
- □ The police will not normally need to be involved in incidents involving legal drugs, but the school may wish to inform trading standards or police about the inappropriate sale or supply of tobacco, alcohol or volatile substances to pupils in the local area.
- □ The school has no legal obligation to report an incident involving illegal drugs to the police but not informing the police might be counter-productive to the school and wider community.
- □ The police should be involved in the disposal of suspected illegal drugs found on the school premises. The school does not have to divulge the name of the pupil from who the drug was taken. Procedures for the temporary storage and disposal are outlined in Appendix C.
- □ The police can be approached to give advice on a case by case basis without the name/s of those involved having to be divulged.
- □ The SDC must inform, consult and involve others as necessary. It is important to listen to what people have to say and to ask open ended questions.
- □ Staff or adults who discover an incident should be asked to record the event in writing. They should also make notes of conversations which have taken place (bearing in mind the issue of confidentiality as outlined in Appendix C).
- □ All reports, paper work and correspondence relating to an incident must be stored securely with limited access and not filed in 'Individual Pupil Files' Information will be shared on a 'need to know basis' and treated with the same level of security as information relating to safeguarding issues.
- □ Where the incident involves a member of staff or adult connected with the school who is providing a service to the school it is important to address the professional, health and welfare needs of staff and to ensure that arrangements are in place for appropriate occupational advice and support.
- □ Teachers have a duty of care to pupils entrusted to the school, including on school trips and residential visits and teachers' misuse of alcohol on such occasions will be treated as a disciplinary matter and a member of staff may be deemed unfit to work if he or she is medically incapable of performing teaching duties and fulfilling their duty of care.
- □ When staff are on residential visits with children, consumption of alcohol is permitted in the evening but must be moderate and proportionate and as a result, no member of staff should be

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POLICY NUMBER: B7 incapable of fulfilling their duty of care. One member of staff should always refrain from consuming any alcohol every evening.

- □ The school recognizes it has a role to play in the identification of vulnerable children whose parents/carers may be using substances, which may in turn have an impact on their ability to care for a child and the safety of that child. When staff have such concerns, they should not hesitate in discussing them with the schools Designated Safeguarding Lead or their deputy.
- □ Where parents/carers are believed to under the influence of drugs or alcohol whilst on school premises the focus of the staff should always be the welfare of the child rather than the moderation of the adult's behaviour. There may be occasions when teachers may have cause for concern about discharging a child into the care of a parent or carer. In such circumstances a member of the SMT should be involved (if possible) to see if alternative arrangements can be made for the care of the child. Where repeated incidences place a child at risk or the adult becomes abusive or violent the incident should either be regarded as a child protection incident and dealt with accordingly, or the police should be involved.
- □ A full record must be made of every incident, whether they are emergencies or not. Any sensitive information stored should be secure and should meet the requirements of the Data Protection Act 1998. This is the responsibility of the SDC who will request input and information from those involved. It is important to note that the school's records or notes or a conversation may be requested for use in any subsequent court proceedings.
- □ Schools should ensure that pupils have access to and knowledge of up-to-date information on sources of help (see Annex B of Appendix F). This includes local and national helplines (including FRANK) for drugs, NHS Smoking Services for tobacco and Drinkline for alcohol).