

Saint Norbert's Catholic School

Drugs Education Policy and Managing Drug related Incidents

Date Adopted: Spring 2015

Date of Review: Spring 2018



Our Mission Statement

St. Norbert's strives to nurture and develop the whole child through a

Love of God

Love of one another

Love of life itself

Article 24: Every child has the right to the best possible health. Governments must provide good quality health care, clean water, nutritious food and a clean environment so that children can stay healthy. Richer countries must help poorer countries achieve this.

Article 19 - Governments should ensure that children are properly cared for, and protect them from violence, abuse and neglect by their parents, or anyone else who looks after them.

Introduction:

At St. Norbert's we value the uniqueness of the individual and work together to learn, grow and live with Jesus

Therefore we aim:

- to acknowledge and clarify the schools' role in drug prevention and education and ensure it is appropriate to pupils' needs.
- to encourage the individual pupil to take responsibility for their own spiritual, personal and moral development by providing knowledge and an understanding of drugs which enables personal decisions to be made.
- to provide information on the consequence of the misuse of drugs.
- to be committed to the health and safety of all within our community and will take action to safeguard their well-being.
- to have a non-smoking policy for all employees, students, visitors and outside lettings.
- to acknowledge the importance of its pastoral role in the welfare of all.
- to ensure all know of the procedure if illegal substances or paraphernalia associated with such substances are found on the school premises.

The policy provides information and guidance about drug education, as well as procedures to respond to any drug-related incident, for pupils, teachers, support-staff and outside agencies or individuals.

Implementation:

This policy should also be read in conjunction with the PSHE policy, medicines policy, health and safety/ Nonsmoking policy, SEN and discipline/behaviour policy.

This policy applies at all times to the school premises, school transport as well as school visits/trips/fieldwork/ residential etc.

Definition: "Drugs" are taken here to mean those that are legal, such as alcohol, tobacco and solvents, over the counter and prescribed drugs, and illegal drugs such as cannabis, ecstasy, amphetamines, heroin, crack/cocaine, LSD etc

The school believes that the possession and or use of such drugs in school, during the school day or while travelling to/from school is inappropriate. The drugs/substances covered by this policy are not to be bought, sold or otherwise exchanged or brought onto school premises during the school day, or while pupils are on school visits. Individual exceptions may be made for pupils who require prescription medicines where appropriate.

Drug Education: The school provides a planned drug education curriculum through the following:

(i) The National Curriculum science order outlines the content of the *statutory* drugs education-

- Key Stage 1, 5-7 year olds should be taught about the role of drugs as medicines
- Key Stage 2, 7-11 year olds should be taught that tobacco, alcohol and other drugs can have harmful effects

(ii) Other discretionary topics (delivered through Circle Time, Personal, Social and Health Education and P4C sessions) reflect knowledge, understanding, attitudes and social skills: this will:

- Enable pupils to make healthy, informed choices
- Promote positive attitudes to healthy lifestyles
- Provide accurate information about substances
- Increase understanding about the implications and possible consequences of use and misuse
- Widen understanding about related health and social issues

- Enable young people to identify sources of appropriate advice and personal support.

It will be the responsibility of the staff to ensure the unit of work is carried out in accordance with Diocesan and LEA guidelines. Where appropriate, outside visitors may make a contribution. Such visitors should be used in a planned way and be their contributions evaluated. Teachers will have access to on-going advice, support and training as part of their own professional development. The school actively cooperates with agencies such as the LEA, police, health and drug agencies. See Appendices 1 and 2 which also contain useful information.

Statutory duty of the school: The head teacher takes overall responsibility for the policy and its implementation, for liaison with the governing body, parents, LA and appropriate outside agencies. The head teacher will ensure that all staff dealing with substance issues are adequately supported and trained.

Implementation of the policy: In incidents involving substance misuse or supply on the premises/during the school day, and following discussion with the pupil and staff, action will proceed as follows. It should be noted here that, when dealing with drug-related incidents, the school has adopted the procedures as laid out in *Drugs: guidance for schools* (Reference: DfES/0092/2004)

Implementation of the policy: In incidents involving substance misuse or supply on the premises/during the school day, and following discussion with the pupil and staff, action will proceed as follows. It should be noted here that, when dealing with drug-related incidents, the school has adopted the procedures as laid out in *Drugs: guidance for schools* (Reference: DfES/0092/2004).

- Any medical emergencies will be dealt with as per Appendix 3
- In cases of substance use/misuse or supply on the premises, during the school day or during school visits etc, the case will be discussed with the young person and a written record taken (see Appendix 5); parents/carers will be informed by the head teacher as soon as possible. The support of outside agencies will be sought if appropriate
- If a young person admits to using or supplying substances off the premises, the appropriate action will be taken by the head teacher, who will inform the parents/carers (please refer to the school behaviour policy)

While there is no legal obligation to inform the police, they may also be involved at the discretion of the Headteacher in consultation with governors and staff who know the young person well. The school will consider each incident individually and will employ a range of responses to deal with each incident. Specific cases will be managed as per Appendix 4: all staff, pupils, parents/carers will be informed of these issues.

- The governing body will be involved in drug-related incidents as they are concerning other matters relating to the school.
- The Headteacher will take responsibility for liaison with the media, where required. Additional support and advice is available from the School Drugs Adviser and LA Communication Officer Education.

All staff, parents/carers and young people will be reminded of this policy, and its procedures, on a regular basis.

APPENDIX 1: Information about drugs and current legislation.

APPENDIX 2: Warning signs of drugs misuse.

APPENDIX 3 : Drug situation - medical emergencies.

APPENDIX 4 : Situations involving drugs without medical authority.

APPENDIX 5 : Record of drug-related situation (a specimen record sheet)

Appendix 1:

Information about drugs and current legislation:

THE LEGAL POSITION

Misuse of Drugs Act 1971

Under this act it is an offence to possess or supply certain types unless they have been prescribed for personal medical use. Within controlled drugs there are 2 categories: Category A and B.

Drugs can also be divided into the following categories:

CATEGORY A

Heroin (slang - bot, china, dragon, H, scag, smack, junk)

This can be identified as a white powder and is derived from the opium poppy. It can be smoked, sniffed, injected or inhaled.

Cocaine (slang - crack, rock, C, charlie, coke, dust, snow)

This can be used as a white powder or in a small white block, extracted from the cocoa plant. It is sniffed or injected. Crack is not smoked.

Ecstasy (slang - E, adam, burgers, dennis the menace, brownies, MDMA, XTC)

This will be found in capsules and tablets of various sizes and is swallowed.

LSD (slang - acid, tabs, blotters, frash, lucy, dots, transfers, rhubarb and custard)

This is generally made into small white or brown tablets, or will be found as blotting paper soaked in chemicals. These substances are swallowed.

Amphetamines (slang - speed, whiz, sulph, uppers, stimulants)

Can be included in category A if prepared for an injection or category B if ingested. They will be found in powder, tablets, or capsule form and are either sniffed, swallowed or injected.

CATEGORY B

Cannabis (slang - hash, grass, dope, ganja, pot, blow, draw, marijuana)

Hash is a brown solidified resin from the cannabis plant, whereas grass consists of dried leaves of the cannabis plant. This substance is smoked with tobacco, or smoked on its own. It can also be eaten.

Licensing Act 1964 and Children and Young Persons Act 1933

This legislation makes it illegal to sell alcohol to young people under the age of 18. It is an offence to give alcohol to children under 5, but those over 5 can consume alcohol on private premises.

Children and Young Persons Act 1933 (amended 1991)

This act makes it illegal to supply TOBACCO to anyone under the age of 16 years. It is also an offence for children 16 and under to smoke in public.

Intoxicating Substances (supply) Act 1985

It is illegal to supply any substances to anyone under the age of 18 hours knowing that it will be misused.

Appendix 2:

WARNING SIGNS OF POSSIBLE DRUG MISUSE

Some signs of drug misuse can be confused with signs of other problems or quite innocent behaviour. Therefore it is important that all staff (teaching and non teaching) should take extreme care about not jumping to a conclusion which might be inappropriate. However, in order to support staff in their identification of possible drug misuse amongst students we have grouped signs into three broad categories.

Where equipment is required

Containers made from silver foil perhaps discoloured by heat

Small bottles or pill boxes, Twists of paper, Straws

Syringes or needles, Empty solvent containers, Cigarette lighters

Drinks cans with extra holes and signs of scorching

Spoons discoloured by heat, Sugar lumps

Spent matches, Plastic bags or butane gas containers

Stamps, stickers, transfers

Physical symptoms

Sudden changes in mood, unusual outbreaks of temper

Disregard for physical appearance

Loss of appetite or increase in consumption of set foods

Use of deodorant to cover smell of drugs or solvents

Drowsiness, sleeplessness or slurred speech

Unusual smell, stained or marks on clothing or body or around the mouth and nose

Marked interest in glue or other solvent based products

Soreness or redness around the eyes or mouth

Small groups meeting in secretive places

Unsteady on foot, Staining on hands

General social change

Keeping away from other pupils

Being the subject of rumour about drugs, Use of drug slang

Excessive spending or borrowing of substantial sums of money

Unexplained loss of money or belongings from home

Perpetual stealing of money or goods which are then sold

Changes in attendance patterns

Reluctance to participate in school activities

Loss of interest in a sport or hobby

Sudden changes in friendships group

Performance at school shows a marked decline

Strangers on the school premises

Appendix 3: Drug situations – medical emergencies

The procedures for an emergency apply when a person is at immediate risk of harm. A person who is unconscious, having trouble breathing, seriously confused or disorientated or who has taken harmful toxic substance, should be responded to as an emergency.

The main responsibility is for the pupil at immediate risk, but you also need to ensure the well-being and safety of others. Put into practice your school's first-aid procedures. *If in any doubt, call medical help.*

Always:

- assess the situation
- if a medical emergency, send for medical help and ambulance

Before assistance arrives

If the person is conscious:

- ask them what has happened and to identify any drug used
- collect any drug sample and vomit for medical analysis
- **do not** induce vomiting
- **do not** chase or over-excite them if intoxicated from inhaling a volatile substance
- keep them under observation, warm and quiet

If the person is unconscious:

- ensure that they can breathe and place in the recovery position
- **do not** move them if a fall is likely to have led to spinal or other serious injury which may not be obvious
- **do not** give them anything by mouth
- **do not** attempt to make them sit or stand
- **do not** leave them unattended or in charge of another pupil
- notify parents/carers

or needle stick(sharps) injuries:

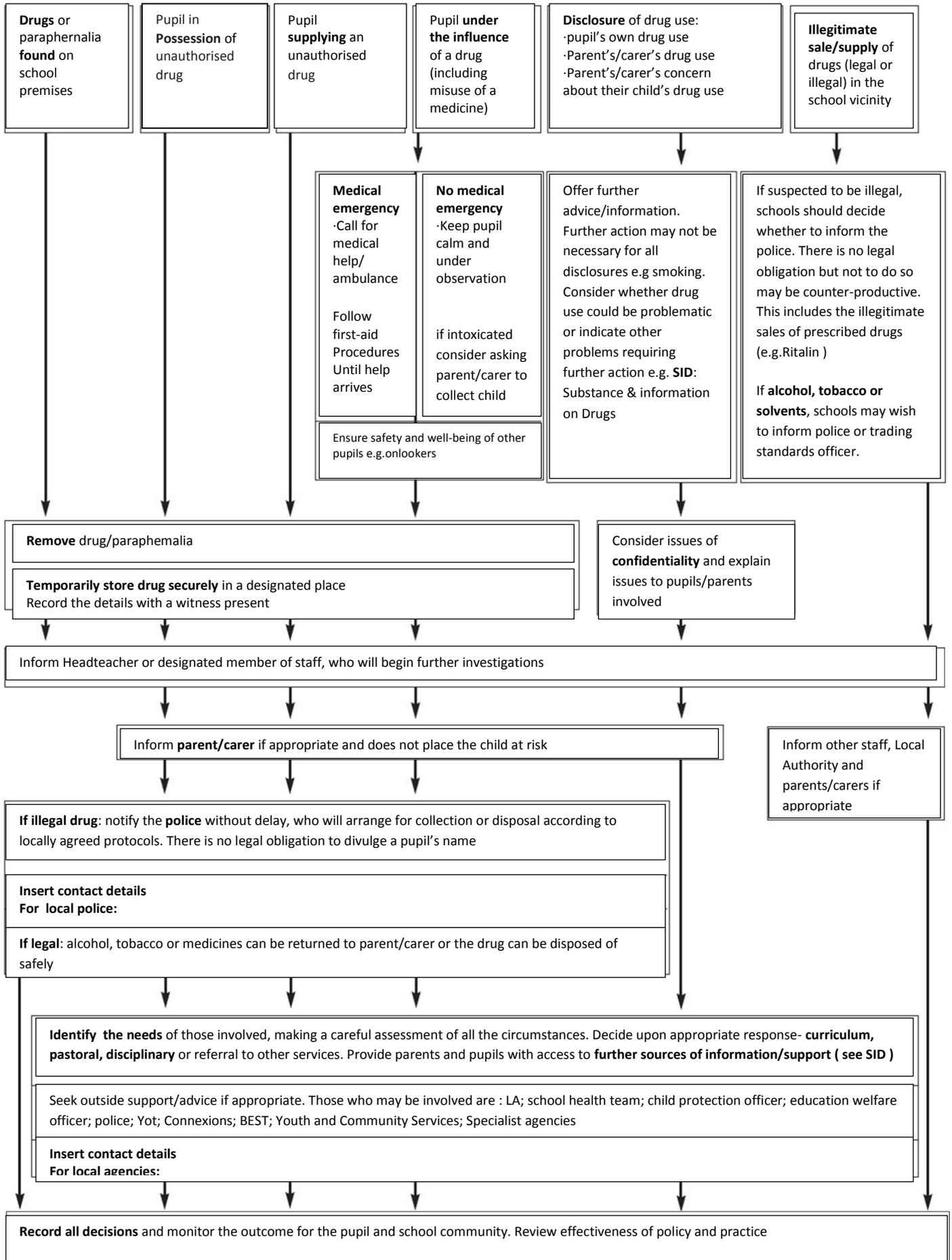
- encourage wound to bleed. **Do not** suck. Wash with soap and water. Dry and apply waterproof dressing
- if used/dirty needle seek advice from a doctor

When medical help arrives

- pass on any information available, including vomit and any drug samples

Complete a medical record form as soon as you have dealt with the emergency. This form is based on Appendix 9 of *Drugs: guidance for schools*.

Appendix 4: Responding to incidents involving drugs



Appendix 5: Record of incident involving unauthorised drug

- 1 For help and advice, telephone the LA
- 2 Complete this form WITHOUT identifying the pupil involved
- 3 Copy the form
- 4 Send the copy within 24 hours of the incident to the LA
- 5 Keep the original, adding the pupil's name and form- store securely

Tick to indicate the category:

Drug or paraphernalia found ON school premises	<input type="checkbox"/>	Pupil disclosure of drug use	<input type="checkbox"/>
Emergency/Intoxication	<input type="checkbox"/>	Disclosure of parent/carers drug misuse	<input type="checkbox"/>
Pupil in possession of unauthorised drug	<input type="checkbox"/>	Parent/carers expresses concern	<input type="checkbox"/>
Pupil supplying unauthorised drug on school premises	<input type="checkbox"/>	Incident occurring OFF school premises	<input type="checkbox"/>

Name of pupil *:	Name of School:
Pupil's form *: (*for school records only)	Time of incident: am/pm
Age of pupil: MALE/FEMALE	Date of incident:
Ethnicity of pupil **:	
Tick box if second or subsequent Incident involving same pupil	Report form completed by:

First Aid given? YES NO
 First Aid given by:.....

Ambulance/Doctor called? YES NO
 (Delete as necessary)

Called by:..... Time:
 Drug found/removed? YES/NO

Drug involved (if known): (e.g Alcohol, Paracetamol, Ecstasy)
Senior staff involved:

Where found/seized:

Name and signature of witness:

Disposal arranged with
 (police/parents/other):

At time:

If police, incident
 Reference number:

Name of parent/carers informed *:	(*for school records only)
Informed by:	At time:

Brief description of incident (including any physical symptoms):
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Other action taken: (e.g. Connexions or other agency involved, Educational Psychologist report requested, case conference called, pupils/staff informed, sanction imposed, LA/GP/Police consulted)

Signed _____
(Headteacher)

Signed _____
(for and on behalf of the *Governing* body)

Date _____