## Drugs Policy 2024

(Pastoral Care & Safeguarding)

### Ashgrove Primary School



Learning, Caring, Growing Stronger Together

#### THIS POLICY HAS BEEN DEVELOPED IN-LINE WITH THE FOLLOWING GUIDANCE:

<u>Circular 2015/23 Drugs Guidance</u> <u>Supporting Pupils with Medication Needs Guidance (DENI)</u>

#### **MISSION STATEMENT**

Ashgrove Primary School strives to promote primary education of the highest quality for all children, in a caring environment.

#### **RIGHTS RESPECTING (UNCRC)**

This policy is underpinned by the following Rights:

- ✓ Article 6: "Every child has the right to life. Governments must do all they can to ensure that children survive and develop to their full potential."
- ✓ Article 33 "Governments must protect children from the illegal use of drugs and from being involved in the production or distribution of drugs."

#### **DEFINITION OF DRUGS**

The definition of drugs used in this policy is the definition given by the United Nations Office on Drugs and Crime: "A substance people take to change the way they feel, think or behave". This refers to all drugs whether:

- Illegal drugs (those controlled by the Misuse of drugs Act 1971) such as ecstasy, cannabis, crack/cocaine, heroin and LSD, ketamine, GHB, anabolic steroids and khat.
- Drugs that are legal to use but are covered by some legislation such as selling to under 18-yearolds including alcohol, tobacco, shisha and volatile substances (solvents).
- Drugs that are legal to use and buy such as poppers.
- Over the counter and prescription medicines.
- And other drugs such legal highs/Novel Psychoactive Substances that are illegal to sell for human consumption and e-cigarettes that currently have no restrictions (although laws about selling to under 18s and use in public places are to be put in place).
- The term 'Legal highs' is misleading. Public perception is that 'legal' means safe. This is not the case as there is no regulation of these substances and therefore no way of knowing what chemicals they contain.

#### **DEFINITIONS OF OTHER KEY WORDS**

Drug use describes any drug taking. Any drug use can potentially lead to harm, including through intoxication, breach of the law or school rules, or future health problems.

Drug misuse is drug taking which leads to social, psychological, physical or legal problems through intoxication, regular excessive consumption and/or dependence.

#### RATIONALE

The Department of Education for Northern Ireland advises that all schools have an up-to-date policy which is part of being a healthy school.

Although it is unlikely that illegal drugs will be in our primary school, we believe that drugs play a part in the lives of every one of us and recognize that drug use and misuse can have a serious effect on health, well-being and academic achievement. We therefore have a crucial role to play in drug prevention and education.

Primary aged children need to be protected from the harm that drugs can cause and it is our responsibility to give them the knowledge and skills to be able to be healthy and keep safe.

We take a positive and proactive approach to the issue of drugs and this policy aims to:

- Give a clear view on the use of drugs in school.
- Provide information so that everyone is clear about the procedures should an incident occur and the approach taken by the school.
- Give information about what is taught, how it is taught.
- Give guidance to designated teacher
- Support staff and visitors about drug education.

#### APPROACH TO TACKLING DRUGS

As part of being a healthy school we take a whole school approach to drugs through:

- A planned drug education programme through PDMU informed by pupils, staff and parents' views, as well as science.
- Carefully considered responses to drug-related incidents informed and supported by the views of the whole school community.
- Clear rules and sanctions related to drugs.
- Access to specialist support and advice, if needed.
- Providing training and support for staff.

#### AIMS OF DRUGS EDUCATION

To give pupils information about drugs and help them develop the skills and attitudes to make healthy and safe decisions about drugs, alcohol, tobacco and medicines.

To achieve this, our drug education programme will help pupils:

- gain knowledge and understanding about the effects and risks and dangers of drugs and correct myths and misunderstandings;
- develop skills to make informed decisions, including communication, self-awareness, negotiation, finding information, help and advice, helping others and managing situations involving drugs;
- develop skills to manage situations involving drugs including assessing and avoiding risks, assertiveness and refusal skills and helping others;
- explore their own and other peoples' attitudes to drugs, drug use and drug users, including challenging stereotypes and dispelling myths and exploring media and social influences.

#### WHERE IS IT TAUGHT IN THE CURRICULUM?

Teaching about drugs, alcohol and tobacco is taught through PDMU (Personal Development & Mutual Understanding) where it is required in the Curriculum.

#### Foundation/Key Stage1

Focuses on what are safe and unsafe substances, what medicines are, why people take them and how to take them safely, being ill and getting better and what to do if someone persuades you to take something dangerous.

#### Key Stage 2

Focuses on what a drug is, the effects and risks of drugs including tobacco and alcohol, managing peer influences and resisting pressure to take risks and be able to make safe decisions.

Our curriculum ensures that we teach pupils to recognise the impact of drugs on the way their bodies function and how some drugs and other substances can be harmful to the human body and the relationship between diet, exercise, drugs, lifestyle and health.

Our PDMU Scheme shows what is taught in each Year group in PDMU. Drug education focuses on knowledge and understanding, skills and attitudes and the teaching programme ensures that there is progression from P1 to P7 with topics and issues included which are appropriate to the age and maturity of pupils.

	015						
Primary	There's No-	Sometimes	Taking	Belonging	Caring &	You & Me!	
	one Quite	l Feel	Care of Me	& Co-	Sharing		
1	Like Me!			operating			
Primary	Wonderful	How do I	Keeping	Getting	l am		
2	Me!	feel?	Healthy,	Along with	Learning		
			Staying	Others	to		
			Safe				
Primary	Getting to	Families	Why	Living With			
3	Know me!		Should I?	Difference			
Primary	Difficult	Growing	Friendships	Who	l am You		
4	Feelings	means		Influences	are We		
		Changing		Me?	can		
Primary	Valuing	Ups &	Learning	Valuing	Stay Safe &	Myself &	l have
5	Self &	Downs	More	Self &	Healthy	my	feelings
	Others		About	Others	_	Attributes	_
			Others				
Primary	Speaking	Check It	Healthy	Who Am I?	Working At	Dealing	Decisions,
6	Up for Me	Out First	Habits		Harmony	with	Decisions,
						Feelings	Decisions

#### OVERVIEW OF PDMU TOPICS & THEMES THROUGHOUT SCHOOL:

ſ	Primary	Who Says	Who	Moving On	Fit For	New	What	Thinking &
	7	So?	Cares?		Future	Horizons	Makes Me,	Feeling
							Me?	

#### HOW IT IS TAUGHT (INCLUDING INVOLVING OUTSIDE CONTRIBUTORS)

A wide range of active teaching methods are used that enable pupils to learn skills to be safe and healthy, discuss their views, explore their own and other peoples' attitudes and values about drugs, as well as learn key information about the effects and risks of drugs and practice skills to stay safe if involved in a drug-related situation. Such activities include role play, discussions, debates, case studies, quizzes, research and games. Pupils work individually, in pairs, in small groups and with the whole class, mixing up so that they experience working with lots of different pupils in the class, as well as in friendship groups.

As a Rights Respecting School all classes establish class charters to ensure that pupils discuss opinions with respect and listen to one another as well as ensuring that pupils and teachers do not disclose personal information.

Drug education is taught by the class teacher and sometimes involves the school nurse or other professionals.

#### **ROLES AND RESPONSIBILITIES**

In Ashgrove Primary School, the Principal, Mr Smith, will assume the responsibility of Co-ordinator and will also deal with drug matters in school.

It will be the responsibility of the drugs education co-ordinator, Mrs Carberry, to ensure that a comprehensive programme of study exits which will provide appropriate knowledge in relation to drugs and opportunities to develop positive attitudes in relation to drug avoidance. (See Appendix 2.)

The enlistment of outside bodies will be a matter for consideration. Organisations such as the PSNI may be used and when it is considered necessary.

Regular review of this element of the curriculum will ensure that the school's policy is actively addressing the stated commitment to drug education.

The drugs education co-ordinator will liaise closely with the Leadership Team to ensure that policy and curricular provision are always complimentary.

We take advantage of the support, advice and training provided by the Education Authority, CCEA and other local organisations.

#### MANAGEMENT OF DRUGS IN SCHOOL

This school does not permit the possession, use or supply of any illegal or legal drug (unless authorised legal drug), which takes place within the school boundaries. This covers; on or near the school premises, within the school day and during term time, on school visits and school journeys.

These rules apply equally to staff, pupils, parents and carers, governors and those working and visiting the school.

#### PROCEDURES FOR THE MANAGEMENT OF PRESCRIBED MEDICINES IN SCHOOL. REFER TO

#### **ADMINISTRATION OF MEDICATION POLICY**

In Ashgrove Primary School we recognise 2 categories of required prescribed medications, namely:

- 1 Long-term medications e.g. for asthma, diabetes or epilepsy.
- 2 Short-term medications e.g. antibiotics.

#### LONG-TERM MEDICATIONS

Staff at Ashgrove Primary School agree to store inhalers for asthma sufferers who are able to administer the drug themselves, provided that parents provide comprehensive information on the administration of the medication. This information should include:

- 1 The name of the drug.
- 2 The amount required.
- 3 The regularity of the dose.
- 4 Exactly what procedure should be followed in the case of an emergency.

This information will be made available to all staff who may come into contact with the child during the course of a school day.

Staff at Ashgrove Primary School agree to store glucose necessities for children suffering from diabetes provided that information is provided as outlined above.

#### **SHORT-TERM MEDICATIONS**

Please refer to the Administration of Medication Policy.

#### **SOLVENTS**

To prevent the abuse of solvents in school, the range of these materials which have been deemed acceptable are made clear in the school's Health and Safety Policy. This includes cleaning materials, glues, fibre pens, cleaning fluids and aerosol cleaning materials. Those materials may be ordered by teachers and cleaning staff.

Not all necessary substances can be solvent free and where these are purchased the strictest rules for storage will be adhered to. In particular cleaner's materials will be securely stored in spaces not accessible to pupils. In-class storage will take account of the height at which materials are stored and the accessibility to keys for cupboards which will be locked.

#### **SMOKING POLICY**

We are a smoke free school and staff, parents, pupils and visitors are not allowed to smoke anywhere on school premises. Smoke free signage is prominent around our school grounds. There will usually be an automatic suspension from school for pupils who smoke or vape in school premises or during school related activities.

E-cigarettes, like tobacco, should not be used in school premises.

#### MANAGEMENT OF DRUG-RELATED INCIDENTS

#### **DEFINITION OF A DRUG-RELATED INCIDENT**

In Ashgrove Primary School, a drug-related incident includes any incidents involving any drug that is unauthorised and therefore not permitted within the school boundaries.

Drug related incidents in a primary school rarely involve illegal substances but can involve:

Pupils smoking cigarettes in school, a parent/carer collecting their child whilst drunk, pupils selling cigarettes to other pupils, misusing another pupils' asthma inhaler, disclosing concern about a family member who has a drug problem, giving medicines to another pupil, staff finding used syringes in the playground, a member of the public phoning the school to say they have seen pupils smoking.

#### SCHOOL RESPONSES TO DRUG-RELATED INCIDENTS

In all drug-related incidents the following principles will apply;

- The Principal and Vice-Principal will be informed immediately.
- All situations will be carefully considered before deciding on the response.
- The needs of the pupil(s) will always come first, whilst also taking account of the needs of the school as a whole.
- Parents/carers will be involved at an early stage and throughout any investigation.
- Support agencies, including the police will be involved as appropriate and in keeping with legal requirements.
- A range of responses will be considered including disciplinary and counseling/supportive responses.
- Permanent exclusion will not be the automatic response and will only be used in the most serious cases and as a final resort
- Any action taken will be in line with the school's Positive Discipline Policy.
- Decisions about the response will depend on the severity of the situation, whether the offence is one of a series or a first time and whether the person involved is putting themselves and others at risk. The Principal, in consultation with key staff will decide whether a disciplinary and/or counseling action should take place.
- Incidents will be reported to the Chair of Governors

Possible responses might be:

(i) Support and Counselling

If a pupil has a concern about drugs or has been involved in a drug related incident or is themselves at risk of drug misuse, we will seek support from our Education Authority/Health Department and if appropriate refer to a specialist agency

(ii) Sanctions

Where a school rule related to drug use, is broken, sanctions will be given. The type of sanction will depend on the nature and degree of the offence. Decisions about sanctions will be made by

the Principal and consistent with the Positive Discipline Policy. In the unlikely event of an incident involving illegal drugs, permanent exclusion will be considered and used if needed.

#### **PROCEDURES FOR MANAGING INCIDENTS**

All drug-related incidents are reported to the Principal.

We will inform Police immediately any incident involving a suspected illegal drug. Incidents involving legal drugs will remain school matters.

#### **RECORDING THE DRUG-RELATED INCIDENT**

All drug-related incidents are recorded using a drugs incident form. The form is given to the Principal and kept confidential in the school office.

In all drug-related incidents the Principal, in consultation with key staff, will decide on the responses, including the use of sanctions and/or counselling and support.

It is very rare for primary-age pupils to misuse drugs in school, however we believe it is important to be prepared should such an incident occur.

#### MEDICAL EMERGENCIES WHEN A PUPIL IS UNCONSCIOUS AS A RESULT OF DRUG USE:

Staff with first aid qualifications should be called immediately but the pupil is not left alone. The pupil will be placed in the recovery position and an ambulance called immediately. Parents/carers will be informed immediately.

#### **INTOXICATION, WHEN A PUPIL IS UNDER THE INFLUENCE OF A DRUG:**

The pupil will be removed to a quiet room and not left alone. The first aider and Principal called. The pupil will be helped to calm down and medical assistance sought immediately. Parents/carers will be informed and called to the school.

#### **DISCOVERY/OBSERVATION**

When a person is discovered using, supplying or holding a substance that is not permitted on school premises and which is described in this policy. If the substance is suspected to be illegal, staff can take temporary possession of it:

- it will be confiscated, in the presence of a second member of staff as witness;
- the sample will be sealed in a plastic bag with details of the date and time of the seizure/find and witness present and stored in a secure location (e.g. a safe or lockable container) with access limited to the Principal and Vice-Principal;
- the pupil will be taken to the school office and the Principal or Vice-Principal called and the pupils questioned;
- the police will be notified immediately, who will collect it and store or dispose of it, in line with locally agreed protocols;
- we will record details of the incident, including the police incident reference number;
- we will inform the pupil's parents/carers and they will be asked to come into school, unless it is not in the best interests of the child to do so;

• identify any safeguarding concerns and develop a support and sanctions response including internal exclusion whilst investigations are carried out.

If the substance is legal (but unauthorised in school) it will be disposed of or handed to the parent/carer.

The school reserves the right in **emergencies** to **search** a pupil's belongings and clothes **in the event of finding that pupil adversely affected by drugs**. This will be done to assist the police and medical services who will be immediately summoned. (See Appendix 4). Where drug possession is **suspected** on the pupil's person the voluntary production of any substances will be requested. In similar circumstances, but where risk to health or life is not in question, the school reserves the right to search school property if it is suspected that substances may be concealed. Where refusal to comply is encountered the pupil will be detained in school and the police will be called.

Should the press become informed of any drug incident in school it is the school's policy to produce a written statement which will be read without question. Any such statement will end with a positive indication of the school's intention towards a positive resolution for the benefit of the pupil concerned. All members of staff will be aware of the need for complete confidentiality and reliance upon the agreed written statement.

Refer to flow charts is appendices.

#### **DISCIPLINARY MEASURES**

In situations where pupils have been found to be in possession of or under the influence of illicit or illegal substances the school will exercise its right to automatic suspension for up to fifteen days while proper investigations can be conducted. Cases where drug possession has resulted under threat or bullying will be given consideration before suspension is decided upon. Eventually expulsion may occur in the light of the incident or incidents after the case has been studied by the Education Authority.

Parents are expected to support the aims of the school throughout the implementation of any aspect of the school's policy in deciding disciplinary measures. It is emphasised that all measures taken will be for the long term benefit of the perpetrator as well as the protection of other pupils.

#### **DISCLOSURE**

When a pupil discloses to a member of staff that he/she has been using drugs, or is concerned about someone else's drug use.

In these situations, staff will be non-judgemental and caring and will show concern for the pupil. Pupils know that teachers cannot promise total confidentiality. The Principal or Vice-Principal should be informed as soon as possible so that appropriate support can be found.

#### SUSPICION/RUMOUR

Staff should not assume use of drugs on the basis of rumours or behaviour alone. However, where there is a suspicion, evidence will be collected over a period of time before a decision is made to question the pupil(s) involved.

#### **INTOXICATED PARENTS/CARERS**

Our schools rules for drugs apply to all people who are on the school premises and we expect that parents/carers will adhere to these rules. If a parent/carer comes to school and appears to be under the influence of drugs or alcohol, they will be asked to leave. If they have come to collect their child, we will sensitively offer to phone for someone else to come and collect the child. If we are concerned that the child is at risk then we will follow the Child Protection procedures. Refer to appendix 7.

#### **NEEDS OF PUPILS**

We are sensitive to the needs of students whose parent/carers or family members have problems with drugs. Where problems are observed or suspected or a pupil discloses problems, we will assess the pupils' welfare and support needs and if needed, involve external support for the child and, where appropriate, for the family.

#### **CONFIDENTIALITY**

Pupils need to be able to talk in confidence to staff without fear of being judged or told off. The welfare of children will be central to our policy and practice. However, teachers cannot promise total confidentiality in order to seek specialist help if needed. This is made clear to pupils through the PDMU programme. Information about a pupil in relation to drugs will follow the same procedure as for other sensitive information. If teachers have any concerns about the welfare of children, they must inform the Principal.

#### WORKING WITH PARENTS/CARERS

The school welcomes parents/carers who wish to share with us, their concerns about drugs.

Parents/carers will be informed immediately if their child has been involved in a drug-related incident. However, there may be some exceptional situations where involving the parents may put the child at risk and in these cases, the school will consult with CPSS (Child Protection School Support). The decision will be taken by the Principal in liaison with the Designated Child Protection Officer with the child's welfare a priority.

#### **REVIEWING THE POLICY**

This policy is reviewed every three years.

If an incident should occur, the policy is reviewed in the light of that incident.

The review will include feedback from the evaluations of drug education, included in the regular review of PDMU.

#### **DISSEMINATING THE POLICY**

The policy is on the school's website and a copy can be requested from the school office.

Any outside contributors involved in drug education, receive a copy prior to teaching. Pupils are taught about the content of the policy in drug education.

#### LINKS TO OTHER POLICIES

- Health & Safety Policy
- Safeguarding & Child Protection
- Administration of Medication
- Staff Code of Conduct
- Visitors Code of Conduct
- Educational Visits
- Smoking Policy
- Positive Behaviour & Discipline
- GDPR

#### SIGNS & SYMPTOMS OF DRUG ABUSE (CCEA GUIDANCE)

Recognising current drug use is a major issue for many professionals who work with young people. There is also the issue of identifying those young people who may be at increased risk of using drugs. Below are specific physical and behavioural signs that may be associated with drug use. Some of these, however, can indicate the onset of adolescence.

#### **Physical Signs**

These can differ depending on the type of drug taken, for example a stimulant or hallucinogen. Below are some of the physical signs related to drugs used illicitly in Northern Ireland.

#### Solvents

Solvents include glues, butane gas refills, aerosols, typewriting correcting fluids and thinners. Signs to look out for include:

- usual signs of intoxication uncoordinated movement or slurred speech;
- possible odour on clothes and breath;
- redness around the mouth and nose, if using glue;
- a cough; and
- possible stains on clothing, depending on type of solvent used.

#### Cannabis

Cannabis can have the effect of a depressant or mild hallucinogen, depending on the amount taken and situational factors.

The effects of taking cannabis include:

- a tendency to laugh easily;
- becoming talkative;
- relaxed behaviour;
- reddening of the eyes; and
- hunger.

If the drug is smoked, it produces a distinctive sweet smell.

#### STOPPING SMOKING MADE EASIER FACT SHEET

https://www.publichealth.hscni.net/sites/default/files/2022-03/Stopping%20smoking%20made%20easier\_01\_22.pdf

#### CHECKLIST OF ROLES AND RESPONSIBILITIES WHEN MANAGEING A DRUG RELATED INCIDENT

#### INDIVIDUAL STAFF MEMBERS SHOULD:

- Assess the situation and decide the action;
- Make the situation safe for all pupils and other members of staff, secure first aid and send for additional support staff if necessary;
- Carefully gather up any drugs and /or associated paraphernalia or evidence and pass all information or evidence to the designated teacher for drugs; and
- Write a brief factual report of the incident and forward it to the designated teacher for drugs.

#### The DESIGNATED TEACHER FOR DRUGS SHOULD:

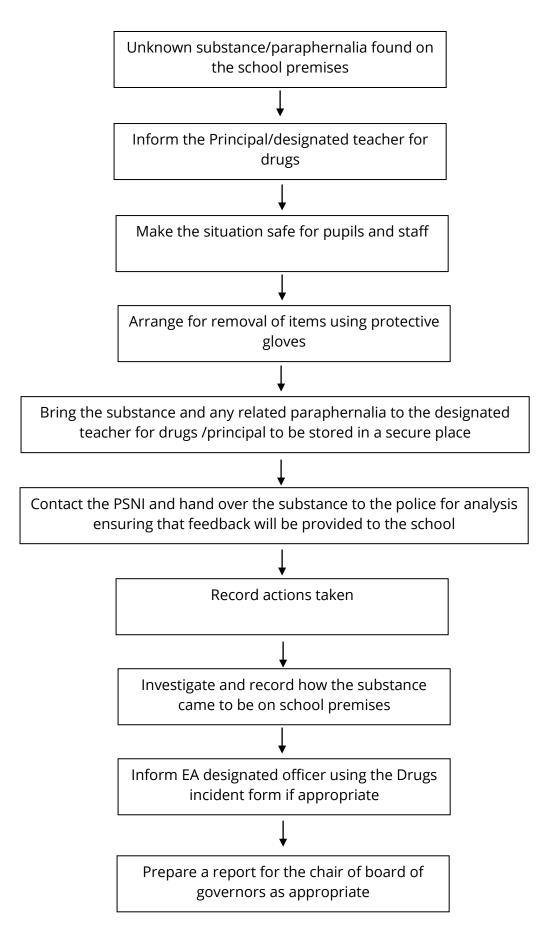
- Respond to the first aiders advice or recommendations;
- Inform parents or carers immediately, in the case of an emergency;
- Take possession of any substances and associated paraphernalia found;
- Inform the principal;
- Take initial responsibility for pupils involved in the suspected incident; and
- Complete a drugs incident form (see appendix) and forward it to the principal.

#### THE PRINCIPAL SHOULD:

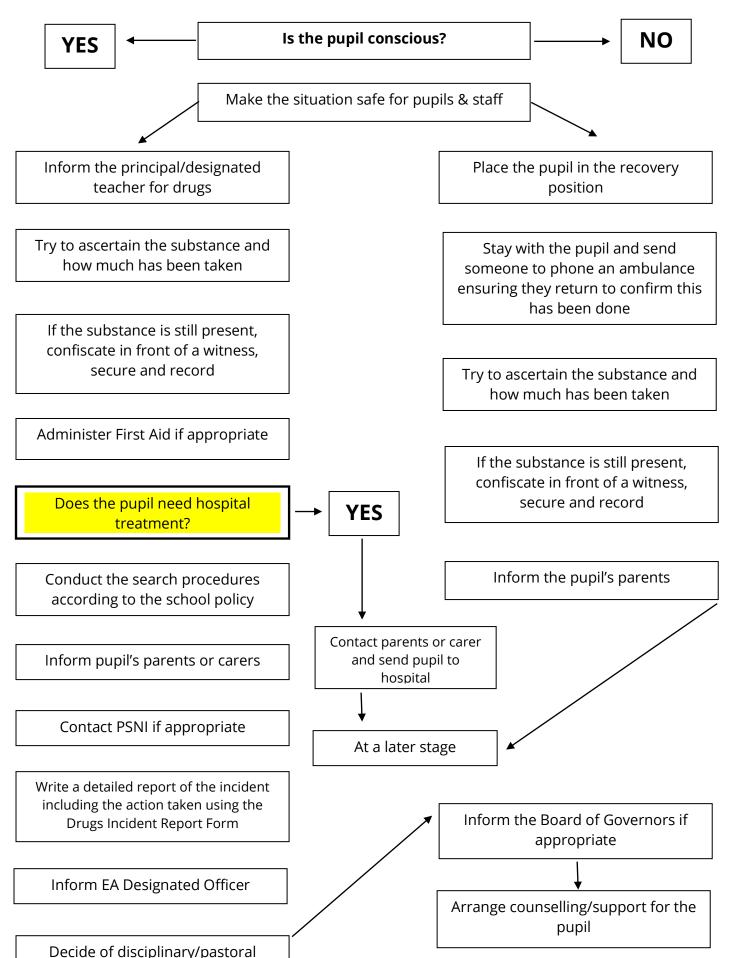
- Determine the circumstances surrounding the incident;
- Consult and agree pastoral and disciplinary responses, including counselling services or support;
- Forward a copy of the incident report to the chairperson of the board of governors and the designated officer in the Education Authority;
- Review procedures and review if necessary;
- Ensure the following people are informed:
  - Parents or carers;
  - Designated officer in the local PSNI area;
  - Board of Governors; and
  - Designated Officer in Education Authority

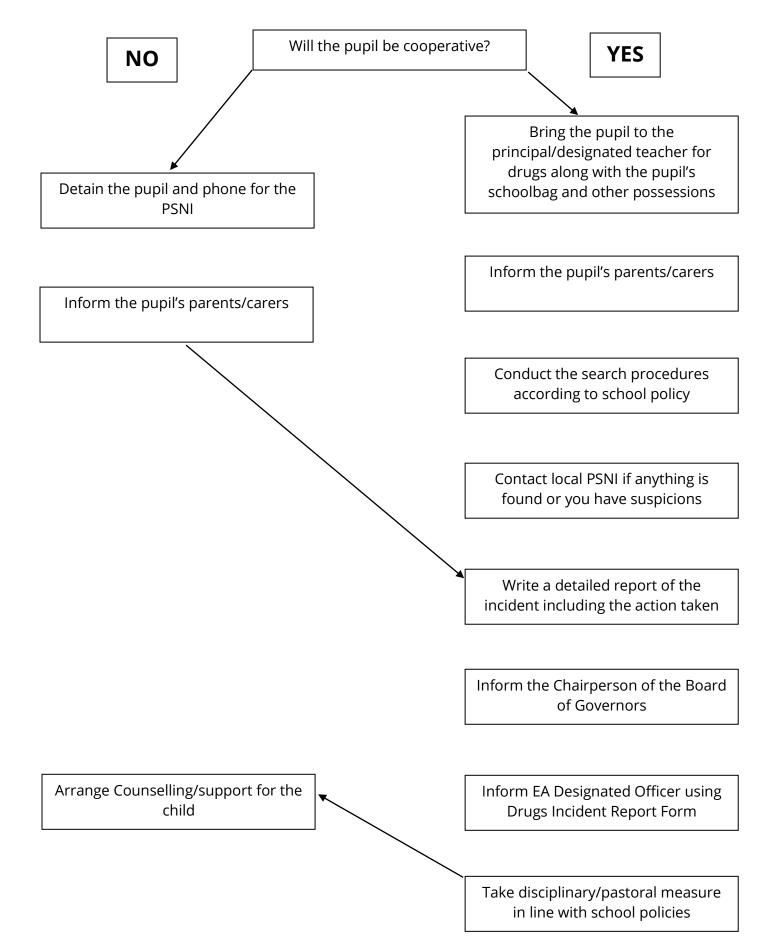
#### PROCEDURE FOR HANDLING DRUG RELATED INCIDENTS

#### Finding a suspected substance or drug related paraphernalia on or close to the school premises



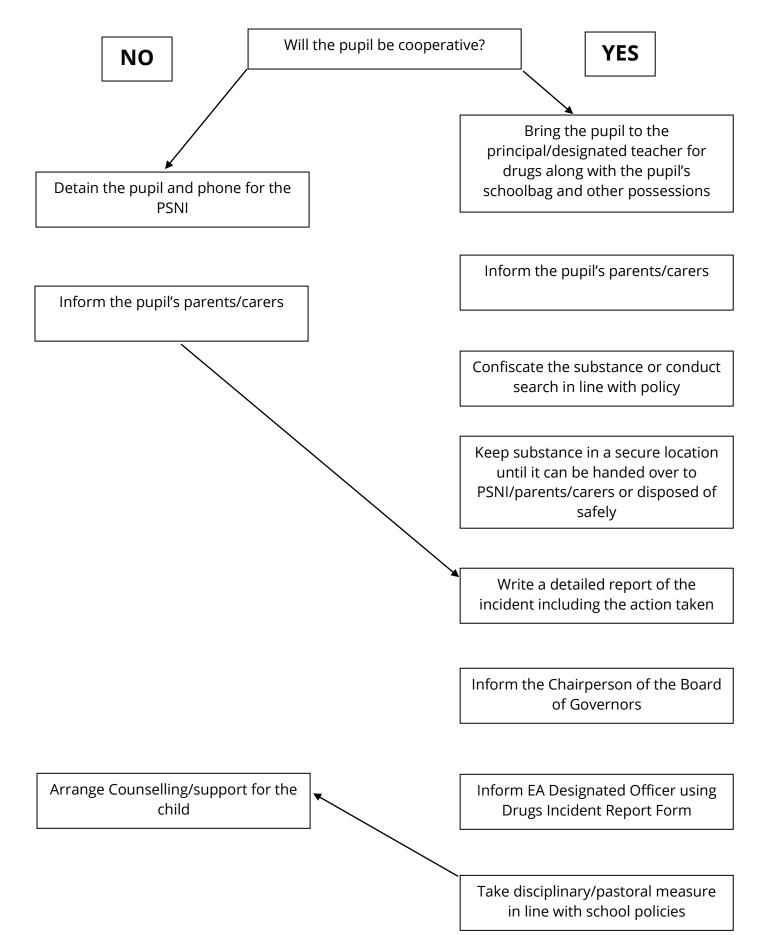
#### PUPIL SUSPECTED OF HAVING TAKEN ALCOHOL/DRUGS ON SCHOOL PREMISES



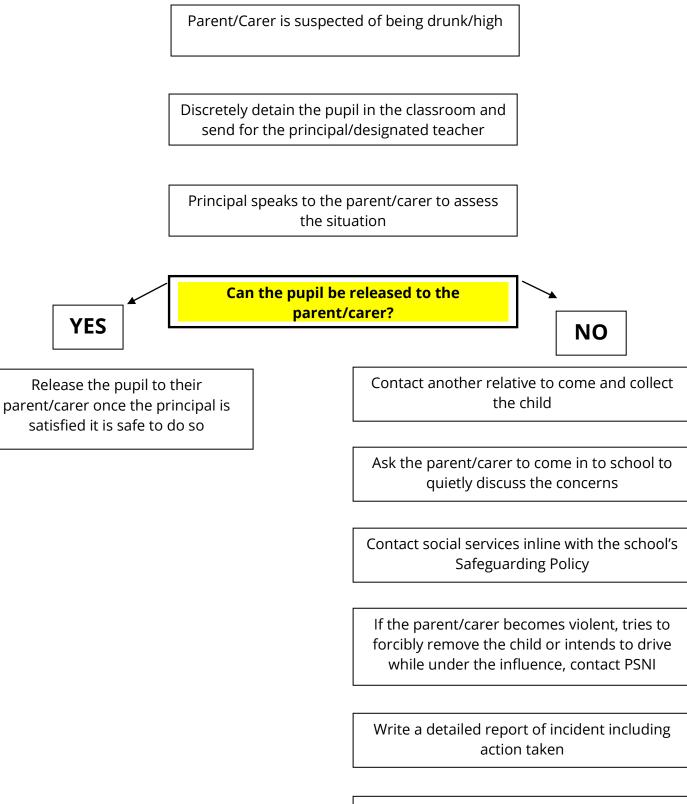


#### PUPIL SUSPECTED OF POSSESSING/DISTRUBUTING AN ILLEGAL SUBSTANCE

# PUPIL IN POSSESSION OF ALCOHOL OR UNAUTHORISED PRESCRIBED MEDICATION ON THE PREMISES



#### A PARENT OR CARER ARRIVES TO THE SCHOOL AND APPEARS TO BE UNDER THE INFLUENCE OF ALCOHOL OR ANOTHER SUBSTANCE



Inform the Chair of Governors as appropriate

Inform EA Designated Officer using the Drugs Incident Report From if appropriate

#### **DRUGS INCIDENT REPORT FORM**

Name of pupil

DOB

Address

Date of Incident	Reported by	
Time of Incident	Location of Incident	

First Aid given?	First Aid administered by
YES NO	
Ambulance/Doctor called?	Time of Call
YES NO	

Parent/Carer informed?	YES	NO	
Date:			
Time:			

Where substance is retained				or date
substance destroyed or pa	assed to PSNI			Time
PSNI informed?	YES		NO	
Date:				
Time:				
EA Designated Officer info	ormed?	YES		NO

Date:	
Time:	
Form completed by	
Date	Position

Description of incident

Incident From completed by:

Date:

Appendix 9

#### USEFUL CONTACTS IN NORTHERN IRELAND

Education Authority				
Belfast Region	Tel: 028 9056 4000			
North Eastern Region	Tel: 028 9448 2200			
South Eastern Region	Tel: 028 9056 6200			
Southern Region	Tel: 028 3751 2200			
Western Region	Tel: 028 8241 1411			
Child Protection School Support, CPSS	Tel: 028 9598 5590			

Health & Safety Executive				
Tel: 028 9024 3249	www.hseni.gov.uk			

Police Service for Northern Ireland (PSNI)				
Drugs Squad	Tel: 028 9065 0222			
Community Involvement	Tel: 028 9070 0964			
Crimestoppers	Tel: 080 0555 111			