

Great Bardfield Primary School



Drug and Substance Policy

'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.'

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| Approved by: | Elizabeth Crow (Headteacher) |
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| Ratified by Governors: | March 2024 |
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| Next review due by: | March 2026 |
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1. Aims of the Policy

This policy aims to set out the school's approach to teaching and learning about drugs and our management of situations involving drugs.

A drug is defined as any substance which, when taken into the body, affects the chemical composition of the body and how the body functions. (Appendix 1)

Our school operates a smoke free site and takes the matter of illegal drugs very seriously. We are aware of the increasing problem of drug misuse throughout the country and within our community. Our school will play a full part in contributing to efforts across our community to reduce drug misuse. To this end, we are committed to working with our parents. We will ensure parents are informed about their children's drug education and the school rules in relation to drugs.

2. Drug education curriculum

Drug education within the school is mainly delivered as part of the PSHCE and citizenship programme. It also forms part of the statutory science curriculum.

The goal of drug and alcohol education is:

For pupils to develop the knowledge, skills and attitudes to appreciate the benefits of a healthy lifestyle, promote responsibility towards the use of drugs and relate these to their own actions, both now and in their future lives.

The learning objectives for drug and alcohol education include:

Attitudes and Values.

- ☐ to examine own opinions and values, and those of others
- ☐ to promote a positive attitude to healthy lifestyles and keeping self safe
- ☐ to enhance self-awareness and self esteem
- ☐ to value and respect self and others
- ☐ to value diversity and difference within society
- ☐ to promote a sense of responsibility towards the use of drugs

Personal and Social Skills

- ☐ to identify risks to health
- ☐ to communicate with peers and adults, including parents/carers and professionals
- ☐ to learn how to give and secure help
- ☐ to develop decision-making, negotiation and assertiveness, particularly in situations related to drug use
- ☐ to develop an appreciation of the consequences of choices made
- ☐ to be able to cope with peer influences, and in resisting unhelpful pressures from adults and the media
- ☐ to make choices based on an understanding of difference and with an absence of prejudice
- ☐ to be able to talk, listen and think about feelings and relationships
- ☐

to develop critical thinking as part of decision-making

Knowledge and Understanding

- ☐ to develop an understanding of drugs and of the effects and risks of using drugs
- ☐ to gain an understanding of how the body functions
- ☐ to gain an understanding of what is safe and appropriate drug use
- ☐ to gain an understanding of the role of drugs in society and the laws and rules relating to their use
- ☐ to gain knowledge of people who can help if pupils have worries and an understanding of confidentiality
- ☐ to gain an understanding of the changing nature of relationships, including families and friends, and ways of dealing positively with change.

The PSHCE Leader is Liz Crow. Their role includes: planning the drug education curriculum via a scheme of work for PSHCE, monitoring its delivery, coordination of assessment and reporting to parents. In our school we deliver PSHCE through discrete, planned lessons, as well as through coordinated cross-curricular teaching.

A variety of teaching and learning approaches are used in PSHCE together with carefully selected teaching materials. There is a place for didactic teaching, together with active learning approaches, such as role-play, small group work and problem solving, which more effectively engage pupils in the learning process.

Ground rules are used in PSHCE to establish a safe, secure and supportive learning environment, which emphasises the promotion of relevant personal skills. Pupils are shown respect for personal privacy and time is taken to explain the implications of personal disclosures. The teaching and learning approaches also include a variety of methods and strategies that cater for the range of attainment levels of our pupils and their diverse needs

We welcome the involvement of visitors from external agencies to complement the core delivery by teaching staff. All visitors are supported in the classroom by a teacher and are informed about the school's drug education policy and the scheme of work for PSHCE.

3. Confidentiality and child protection

Confidentiality is an important consideration with respect to drugs and the boundaries of confidentiality will be made clear to pupils. If a pupil discloses information which is sensitive and which the pupil asks not to be passed on, the request will be honoured unless this is unavoidable in order for teachers to fulfil their professional responsibilities in relation to: safeguarding and child protection, co-operation with a police investigation or referral to an external service. Adults cannot and should not promise total confidentiality.

It may be necessary to invoke child protection procedures if a pupil's safety is under

threat. In such circumstances, the member of staff will inform the nominated child protection officer, of concerns. Relevant examples include a disclosure of illegal drug use by a pupil, and reporting of problematic substance misuse in the family home. Where there is disclosure of illegal substance use by a pupil, parents will be informed in all but the most exceptional circumstances.

4. Drug related situations

A drug related situation is one where there is suspicion, disclosure or observation of the use of unauthorised drugs or the discovery of unauthorised drugs.

We do not allow anyone to possess, produce, supply or offer illegal drugs on the premises in accordance with the Misuse of Drugs Act 1971. Any suspected illegal drugs found, or confiscated, on the school premises will be disposed of appropriately. The designated senior member of staff for drug related situations is: Headteacher, Mrs Liz Crow

The following will guide staff's response to an incident of drug or alcohol misuse.

- ☐ Initial response and investigation
- Inform senior colleague – who will guide investigation, ensure written record is made and decide about any disposal;
- Consider responses, including whether to contact police – including possible disposal and further searching;
- Contact parents / carers;
- Consider contacting chair of governors, LEA and other support services;
- Consider sanctions / support needs of pupil(s) involved;
- Draw up and implement action plan.

Any tobacco, alcohol, solvents or illegal substances found on pupils will be confiscated. If necessary a pupil will be asked to turn out their own pockets or bags, with another member of staff present. A personal search can only be carried out by police officer or parent / carer.

Substance misuse at school is a serious matter. If a pupil is discovered with tobacco, alcohol, solvents or illegal drugs, then a fixed period exclusion will be a consideration. More serious disciplinary consequences will be considered, together with support needs and child protection, dependent upon individual circumstances.

The school has the powers, with police assistance if necessary, to remove anyone from the site who is causing a nuisance or disturbance. This includes being intoxicated. The safety of pupils during the journey to and from school is important. If staff have concerns about the safety of a pupil due to parent /carer intoxication, discussion will be held with the adult and consideration given to moving the pupil to a safer environment and / or finding alternative means of travel home.

5. Health and Safety and medicines

Please see Health, Safety and Wellbeing Policy for additional information.

The safety of the individual and of all others on the school site are the most important concern if a pupil, visitor or member of staff is thought to be under the influence of any drug or substance which adversely affects their judgement. Responding consistently within our stated Health and Safety procedures, including, where necessary, the administration of first aid, is the priority.

Should any drug related paraphernalia be discovered on the school site, most will be handled within existing health & safety procedures using safety equipment such as disposable gloves, and will be bagged up and disposed of in the rubbish. A written record will be kept of suspicious paraphernalia. Pupils will be advised to not touch suspect items, such as discarded injecting equipment, but report the matter to a member of staff. The member of staff will ensure safety is maintained, until appropriate disposal of the item(s) is undertaken.

Solvents or hazardous chemicals legitimately used carefully by school staff or pupils and are stored securely in the appropriate area and managed in a way to prevent inappropriate access or use.

The approach to access and administration of medicines is set out in the school's Medicines Policy. The principles underlying this are to:

- Recognise individual medical needs and promote inclusion to provide an education for all pupils, supporting their medical needs.
- Undertake to contact parents/carers if a pupil is ill during the school day.

The school provides for the safe and secure storage of medicines:

- all adults are responsible for the secure storage of their own medication
- Hollie Leslie Office Assistant is the member of staff responsible for the secure storage of pupils' (prescribed) medication.
- there are clearly signposted first aid kits on the school site,

Staff only administer medicines if written parental consent has been provided and agreed to by the school and the member of staff. This may involve additional training for members of staff involved in offering assistance, which may also include assistance with surgical appliances (e.g. artificial limbs) and medical aids (e.g. hearing aids).

Emergency aid

Summoning medical help such as the qualified first aider, or an ambulance is crucial, but in the interim period emergency aid should be applied as follows:

If staff have any suspicions that a pupil is intoxicated from inhaling a volatile substance, care should be taken to not chase or overexcite the pupil. Strenuous activity for volatile substance misusers can increase the risk of sudden death. The pupil should be kept calm until the effects have worn off.

6. Educational visit/social events

The school's drug education policy applies during school visits and school social events.

During educational visits:

- Staff will be briefed about procedures and responsibilities before all visits, which will include the issue of consumption of alcohol and smoking by staff
- Adults should keep any personal medication in a safe place
- A nominated first aider will be responsible for the safe storage of any pupils' medicines and supervision their administration
- Pupils will be reminded about the relevant school rules in advance.

School social events:

- At all social events organised by the school the responsibility for the conduct of the pupils present remains with the parent/carer.
- At such events the school 'No Smoking/Vaping Policy' will be enforced.
- This school will not condone the use of any illegal substance by any individual during social activities connected with the school.
- Adults at designated school functions, subject to compliance with licensing law and within reasonable limits, may consume alcohol.

7. Staff matters including training

All staff are expected to work within the agreed policy and their own professional and employment terms and conditions.

Training will be available to all staff on: basic awareness of drugs (including alcohol), emergency procedures, procedures in the event of an incident, confidentiality and disclosure, and awareness of the drug education teaching programme within PSHCE and its consistency with the school's values. In addition, the specific professional development needs of teachers delivering aspects of drug education within PSHCE, will be incorporated into individual and team professional development plans.

8. Implementation, monitoring and review

Implementation of the policy is the responsibility of the Head and Governors. Verbal feedback will include evaluative feedback from pupils, as well as teaching and support staff. Opportunities will be made to inform parents about their children's drug education and about wider support and concerns about drugs, both through written information and parent events.

APPENDIX 1 – Definition of a drug and information about drugs of misuse.

A drug is any substance which, when taken into the body, affects the chemical composition of the body and how the body functions.

All medicines are drugs but not all drugs are medicines.

Drugs include legally controlled substances such as: caffeine, alcohol, tobacco, solvents, amyl nitrate (poppers), as well as substances used for medical purposes, whether sold over the counter or prescribed, such as: antihistamines, antibiotics, tranquillisers and illegal substances such as: cannabis, ecstasy, heroin, cocaine, LSD

Possession of some prescription-only medicines, such as Temazepam and Ritalin, is illegal under the Misuse of Drugs Act if no prescription is held.

These lists are not definitive and there may be some overlap of the categories.

| Substance | Effects | Risks | Legal Position |
|----------------------|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| Tobacco | Relaxation, headache, bad breath, reduced appetite | Bad cough, cancer, heart attack, breathless | Illegal to sell to anyone under 16 |
| Alcohol | Relaxation, lose inhibitions, loss of control, vomiting, violence, drowsiness | Liver damage, impairs decision making and judgement | Illegal to sell to anyone under 18 (as a general rule). |
| Cannabis / marijuana | Lack of co-ordination, related heart rate increase, happy loss of inhibitions, can cause panic | Long term may cause lung disease and psychotic illness. Loss of memory, impaired judgement | Class C. Illegal to grow or supply |
| Solvents / gas | Facial rash, stomach cramps, lack of co-ordination, aggressive behaviour, weird visions, headaches, light headed, relaxing | Death from asphyxiation or heart seizure. Psychological dependence. Choking on vomit. Possible damage to lungs, kidneys, liver, heart and central nervous system | Illegal to sell to under 18s knowing it will be abused |
| Amphetamines | Initially energetic and confident, but anxiety and restlessness can follow | High doses can produce delirium, panic, paranoia or depression, heart failure, damaged blood vessels | Class B. Illegal to possess or supply (unless prescribed) |

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| MDMA / Ecstasy | Increased energy and colour perception, feelings of well-being, increased thirst, head and muscle ache | Can lead to anxiety, panic, insomnia, hypothermia and dehydration. Some evidence of liver damage | Class A. Illegal to possess or supply |
|----------------|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|---------------------------------------|

| Substance | Effects | Risks | Legal Position |
|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| LSD | Hallucinogenic effects, including intensified colours and sounds, or even out of body experiences. Effects are dependent on the strength of the dose. | Difficult to identify strength of dose. Experiences can be emotionally disturbing (bad trip) leading to anxiety. Flashbacks can occur. | Class A. Illegal to possess or supply. |
| Hallucinogenic mushrooms / magic mushrooms | Similar to LSD experience | Main risk is picking and eating a poisonous mushroom by mistake | Class A if processed - cooked, dried or made into tea |
| Amyl Nitrate | Blood vessels dilate causing a rushing sensation to head, lose balance, increased energy. May enhance sexual pleasure. Effects are short lived. | Vomiting, shock, unconsciousness, heart attack, dizziness, headache, palpitations | Currently no legal restrictions on use or supply |
| Anabolic Steroids | Increase strength, speed, aggression and competitiveness. Enables more intensive training for longer. | Restriction on growth, spinal problems, menstrual abnormalities, voice changes, increase in hair growth | Possession for personal use not illegal. Supply is illegal, with Class C penalties. |
| Heroin | Euphoria, reduced anxiety and pain levels. Slow heart rate and breathing. Can cause constipation. Appetite loss. | Highly addictive. Difficult to identify strength of dose and what it is mixed with. Danger of overdose. Injecting causes abscess and other infections including septicaemia and HIV | Class A. Illegal to possess or supply. |
| Cocaine/ Crack | Feelings of exhilaration, strength and well being. Decreased hunger, indifference to pain and fatigue. Effects relatively short term. | Comedown can bring on depression, anxiety and fatigue. Excessive doses may cause death from respiratory or heart failure. Long term use may lead to paranoid psychosis. | Class A. Illegal to possess or supply. |

APPENDIX 2

Support Agencies

If you are worried about your alcohol or drug use, you should discuss your concerns with your GP. Your GP can assess the nature of your problem and help you choose the most appropriate treatment. The Essex Wellbeing Service (EWS) can help you to set goals to reduce your drinking and make a plan to enable you to reach these goals. They can also monitor your drinking levels to help you keep on track. To find out more and to complete the online assessment to request support, [visit the EWS website](#).

Visit the NHS website for [further advice about alcohol support](#) or to [find drug addiction support near you](#).

[Frank](#) offers a live [chat facility on their website, email support](#), an SMS number – 82111 and a 24 hour telephone helpline – 0300 123 6600.

[QUIT](#) gives advice and support to give up cigarette smoking. Telephone 0800 002200. Email advice stopsmoking@quit.org.uk

[Families Anonymous](#) provide help for families of drug users. Telephone helpline 0207 498 4680.

[Release](#) provide advice and help with legal issues.

Narcotics Anonymous – this is a network of self help groups for drug users based on the Alcoholics Anonymous approach Tel. 020 7730 0009. Email helpline: NAhelpline@ukna.org

[Adfam](#) – a national charity for families and friends of drug users. They may be in contact with family support groups in your area.

[Famanon](#) – Involved in support groups for parents and families of drug users in different parts of the country. Helpline is 0207 498 4680

