

## **Drug Education Policy**

### **Context**

John T. Rice Infant and Nursery School is situated on the Newlands estate which is part of the Forest Town area, on the eastern side of the Mansfield district. It is only a short distance from the Mansfield – Newark boundary. The school serves an ex-mining community with the majority of our children residing in Forest Town East (our catchment area) or Clipstone. In comparison with national figures, both of these areas have a low level of adults in higher education and a low level of high social class households.

The high level of deprivation in the area has been acknowledged nationally, through our inclusion in the SureStart and Neighbourhood Renewal programmes. Of the 156 wards in the County, our school is ranked in the 11<sup>th</sup> highest in terms of poverty.

Set against this background, we work closely with parents/carers in building up their own and their children's confidence and self-esteem and delivering a creative curriculum through which they can achieve success and develop high aspirations.

Our mission statement is:-

### **Aim High and Shine**

*Schools have an important role to play in helping them to deliver the government's National Drugs Strategy - Tackling Drugs to Build a Better Britain (HMSO 1998). This includes helping young people to resist drug misuse in order to achieve their full potential in society - Drug Alcohol & Tobacco Education (QCA 2003).*

The strategy aims to reduce the harm that drugs cause to society and to prevent today's young people from becoming tomorrow's problematic drug users.

The school is committed to a healthy environment in which neither the misuse of drugs (including legal substances) by pupils, staff or visitors, nor the illegal supply of these substances is condoned. Unauthorised drugs in school are not acceptable and our first concern in managing drugs is to safeguard health.

We are dedicated to the continual development of a 'healthy school'. We wish to work towards this in all aspects of school life, and to provide an environment, ethos and curriculum that support and prepare pupils for making positive, healthy choices in a drug-using world.

We are committed to involving the whole school community in the ongoing development of our drugs policy. This policy was formulated with input from members of staff and the LA/Local Healthy Schools Advisor.

This policy is for all staff, pupils, parents/carers, prospective parents/carers, governors, visitors and partner agencies working within school.

## **Roles and Responsibilities**

The Head Teacher has overall responsibility for the policy and its implementation; for liaison with the Governing Body, parents/carers, LA and appropriate outside agencies and for the appointment within the school of a Drugs Coordinator, who will have general responsibility for handling the implementation of this policy.

The Drugs Co-ordinator's responsibilities are:

- Policy development and review, involving pupils, staff, governors, parents/carers and relevant local agencies
- Implementing the policy, and monitoring and assessing its effectiveness in practice
- Ensuring evaluation takes place and that this informs policy review
- Ensuring co-ordination and coherence of drugs education
- Managing drug related incidents and situations
- Ensuring the overall health, welfare and well - being of all pupils is taken into account
- Co-ordinating the planned action to manage medicines in school
- Establishing and co-ordinating links with external agencies
- Cross-phase liaison with Newlands Junior School and Garibaldi College to promote a smooth transition
- Accessing and co-ordinating training and support for staff

(For staff responsibilities see U&S policy Section 10, Appendices 2,3,5,9. Sections 32, 33, Appendix 12.)

The nominated Governor's responsibilities are:

- To contribute to generating and updating this policy
- To support the Head Teacher and Drugs Co-ordinator in overseeing the Drugs Education curriculum
- To review practice
- To contribute to any case conferences called or appeals against exclusions

### **Staff support and training**

It is important that teaching staff feel confident in delivering drugs education and in implementing this policy. Drug awareness training will be provided for all staff, including site managers and lunch-time supervisors, and for relevant governors. We will ensure that members of staff are regularly consulted as to their training needs and training is provided as appropriate to keep up to date with developments in drugs education.

## **Definition of Drugs and Boundaries of the Policy**

### **Drugs Definition**

This policy encompasses all illicit drugs, volatile substances (solvents), over the counter and prescription medicines, alcohol, tobacco and other legal drugs.

This policy will apply to any new trends involving different drugs and substance use, which have the potential to cause harm to young people.

### **School Boundaries**

The school boundary is defined by the hedge/gates at the front of the building and the boundary fence along the sides and the back of the building.

The normal times of our school day for full-time children are: 8.45 a.m. - 3.15 p.m. Our Nursery session times are 8.30 – 11.30 a.m. and 12.30 – 3.30 p.m.

This policy, in line with all other school rules and expectations of behaviour, applies not only within the school boundaries but on all school visits, including those made outside of normal school hours.

### **Related Policies**

Other policies which relate to the implementation of this policy are:

- Behaviour policy
- Anti-bullying policy
- Health & Safety policy
- PSHCE policy
- Child Protection policy
- Confidentiality policy

### **Garibaldi Family Statement**

The Garibaldi Family of schools believes that it has an important role to play in helping to deliver the Government's National Drugs Strategy – (Tackling Drugs to build a Better Britain, HMSO 1998). The family is committed to a healthy environment in which neither the misuse of drugs (including legal substances) by young people, staff, or visitors, nor the legal supply of these substances is condoned. Unauthorised drugs in school are not acceptable and our first concern in managing drugs is to safeguard health and well-being.

We are dedicated to the continual development of 'healthy school'. We wish to provide an environment, ethos and curriculum that support and prepare young people for making positive, healthy choices.

Drugs education has implications for the whole family community. It is most effective when it is supported by consistent messages from the community, families, school policy and good practice. We believe this is an essential part of children and young people life skills to enable them to make positive decisions.

## **Drugs Education**

### **a) Context and Curriculum**

#### **Context**

Schools clearly have a crucial role to play in educating young people on the consequences of drug use and misuse. *'Every drug, whatever its legal or social status, has the potential to cause physical or other harm. It is this, and the fact that such a wide and changing variety of drugs is commonly and extensively available, that makes it vital for children and young people to receive relevant drug education.'* – Quality Standards in Drug Education – the Right Approach (Drug Scope 1999)

#### **Drugs Education in the Curriculum**

Section 351, Education Act 1996, requires every school to provide a balance curriculum which:

- a) Promotes the spiritual, moral, cultural, mental and physical development of pupils
- b) Prepares pupils at the school for the opportunities, responsibilities and experiences of adult life.

As part of its care for the welfare of its pupils this school views Drugs Education as a vital part of the Personal, Social and Health Education of every pupil. We therefore provide Drugs Education as an explicit, planned component of PSHE and Citizenship as well as securing learning opportunities across other curriculum subjects and through off-timetable activities.

Our planning is informed by the non-statutory frameworks for PSHE and Citizenship, and the QCA 'Drug, Alcohol and Tobacco Education, Curriculum Guidance for Schools' 2003.

Drugs education is taught to each year group, at levels appropriate to the age and needs of the pupils.

### **b) Aims of Drugs Education**

We aim to enable our children to make healthy, informed decisions by increasing their understanding of drugs issues at a level appropriate to their needs. We assist them in making positive choices through developing the appropriate skills and attitudes.

Through the curriculum and a supportive school ethos, we aim to:

- Provide accurate information about drugs, including medicines (over the counter and prescribed), volatile substances, alcohol, tobacco and illegal drugs.
- Understand that certain people, with particular medical needs will use medication as part of their every day life and that this is normal for them.
- Increase understanding about the implications and possible consequences of drug use and misuse, exploring the risks and consequences of their own and others' actions.
- Raise awareness of safety issues with regard to drugs.

- Explore and clarify attitudes towards drugs, drug use and misuse and drug users, correcting misunderstandings, promoting positive attitudes and challenging harmful ones.
- Develop children's understanding of rules and laws.
- Develop and practise the personal and social skills necessary to make informed decisions in a range of social situations and settings.
- Develop children's self-awareness and self-esteem as this may support them in making positive choices about their health.
- Ensure that all members of the school community can identify sources of appropriate personal support.
- Ensure relevance for the needs of pupils and the school community.

### **c) Teaching Methods**

*“Good teaching of drug education shares many of the features of well-taught lessons in any subject.” – Drug Education in Schools (OFSTED 1997 Ref 8)*

Our teaching will be based on an understanding that a variety of approaches should be used in order to meet the needs of our children and will be sensitive to their age and experience.

Teaching methods adopted in the classroom:

- Offer a rich variety of opportunities for active learning.
- Incorporate a range of teaching and learning styles including group discussions and role play.
- Ensure access to comprehensive, unbiased and accurate drug information.
- Specify availability of relevant and appropriate advice and support.
- Ensure continuity and progression by visiting and revisiting issues as children develop and their needs change.
- Consider the attitudes and values of children and a range of other significant groups in society, towards drugs.

In order to involve and empower children in making health - related decisions about their lives. Due to the sensitive and sometimes controversial nature of the subject, ground rules will be discussed, negotiated and adopted.

### **d) Resources and Visitors Supporting Drugs Education**

#### **Resources:**

We will provide a broad range of high quality, up to date resources that meet Quality Standards criteria, to support teaching and learning. These are carefully selected using *‘The Right Choice: Guidance on Selecting Drug Education Materials for Schools’ – Drug scope 1999.*

Links with the Health Promotions Library provides access to a range of up to date, appropriate resources.

Resources are reviewed annually to ensure currency and are stored in the staff room.

### **Support from Visitors:**

The school appreciates the valuable contribution from outside agencies, but recognises that their contribution alone does not constitute a complete Drugs Education Programme. We believe it is the responsibility of the school to ensure that the contributions made by visitors to the classroom reflect our own philosophy and approach to the subject.

The content of visitors' contributions will be carefully negotiated and a teacher will always be present during their input.

Our Drugs Education programme is supported by:

- Primary Care Health Professionals – school nurse
- Life Education Centre
- On Track
- CASE

### **e) Assessing, Monitoring and Reviewing Drugs Education**

Children's knowledge - level will be assessed prior to any Drugs Education input to ensure appropriateness of content and determine relevance to children. This regular assessment and monitoring will take the form of stories, circle time discussions and draw/write activities,

Children will have regular opportunities to feedback their views on what they feel successfully learned, how useful they consider this learning to be, what they needs feel they still have and what changes they would recommend.

The Learning Outcomes for pupils will be assessed through the completion of Science or PSHE tasks.

These assessments will be used in the formal evaluation of our Drugs Education Programme.

### **Storage and Administration of Medicines**

The school acknowledges that parents / carers have prime responsibility for their child's health and should provide school with information about their child's medical condition when appropriate. This will be recorded on the yellow form completed prior to the child's admission, on our Special Needs Register, (if appropriate) and on our school computer system. If at any point a child's medical condition change the Parent/Carers are to inform school in writing of these changes and their needs.

There is no legal duty, which requires teachers to administer medication; this is a voluntary role and will be called upon in exceptional circumstances and only

where medication is prescribed. (see 'medicines in school' leaflet) Where exceptional circumstances exist, a contract will be agreed between the school and the parent / carer and records kept appropriately. Where necessary such as where a condition is long term or life threatening school staff will receive training on specific medical conditions. The contracts between school and parents/carers, and the record of administered medicine are kept on the shelf in Mrs Anderson's office.

In this school named person to administer medication is Mrs Anderson or Mrs Renshaw if Mrs Anderson is not available. They are responsible for administering medication, its safe storage and the keeping of appropriate records. On administering the medicine the form is signed.

Other than an inhaler (which is kept in a red box in the child's classroom), no child should be in possession of medication at any time. All medication is stored in a cupboard located in Mrs Anderson's office to which access is restricted. Any medication requiring refrigeration is stored in the refrigerator in the staff room which is not accessible to children. Our school's Medicines Policy is based on 'Managing Medicines in Schools and Early Year Settings' – DfES 2005. Additional information will be provided by parents/carers as necessary to cover out of school activities/visits etc.

(See U&S policy Section 23 on storage, handling and disposal of medicinal drugs).

## **The School Culture and Environment**

This school is committed to promoting a healthy and supportive environment for the benefit of pupils, teaching and support staff and visitors.

We promote positive relationships within our school and between the school and the wider community.

We have also addressed whole school needs in relation to drugs issues and education as identified within the National Healthy School Standard.

We are supported by the Local Healthy Schools' Programme and we are working towards accreditation for our Drugs Education work.

We recognise the priorities of whole-school policies and practice that are consistent with the aims of our Drugs Education Programme.

### **Smoking:**

A no-smoking policy has been developed and accepted by staff and governors. The policy states that smoking is prohibited on any part of the school premises and reflects the NCC 2006 Smoking Policy.

### **Alcohol:**

The use of alcohol by all members of the school community, including visitors, is also prohibited except for occasional adult functions out of school hours, as

agreed by the Governors, Personnel and Pupil Committee. Alcohol for use at the function will be stored in a cupboard in the Head Teacher's Office which has a digital lock on the door.

**Solvents:**

In addition to health and safety regulations which keep the school environment safe for all, solvents or other potential intoxicants (such as lighter fuel or aerosols) must not be brought onto the school premises by any child. Any incidents involving the supply of solvents or solvent abuse will be dealt with as would any other form of drug misuse. Children should not bring aerosols into school or on school visits.

**Illegal drugs:**

This school will not condone or tolerate the possession, use or supply of illegal drugs anywhere on the school premises.

## **Whole Community Consultation**

**Giving Pupils a Voice:**

The children are fully aware of the objectives and aims in ongoing Drugs Education and members of the School Council are involved in discussions around these issues.

**Parents/Carers:**

We encourage parents' involvement in developing and reviewing this policy and in their child's drugs education. We encourage parents/carers to approach the school to discuss issues or share concerns at any time. This can be done by contacting their child's class teacher or Mrs Anderson.

**Giving the Whole School Community a Voice:**

This policy was developed in consultation with the whole school community. If any member of our community wishes to raise further issues with the school relating to drugs or drug education, we invite them to do this by contacting Mrs Anderson.

**Key Partner Agencies:**

We have established working relationships with the following local partners:

**Healthy Schools, School Nurse Service, Inclusion Service and the Police.**

Our liaison with these partners informs our Policy and Programme Development and our support for children and other members of the school community.

## Responding to Drug – related Incidents

The school will consider each drug-related incident or situation individually, recognising that a variety of responses will be necessary to manage such incidents.

We will consider very carefully the implications of any action taken and will seek to balance the interests of the persons involved with other school members and the local community.

Any sanctions enforced will reflect the seriousness of the incident and will be consistent with existing school rules relating to behaviour, discipline, equal opportunities and exclusions.

After immediate medical needs have been addressed, the nature and circumstances of any incident will be established and assessment made of the needs of the children involved.

The person responding to the incident will follow the procedure outlined on the 'Responding to incidents involving substances' flow chart (shown as an appendix). A copy of this is displayed in the staffroom.

Careful recording of each stage of the management of incidents will be made on the 'Record of Incident Involving Substances' form (shown as an appendix).

These forms are stored in the file in the staffroom. Once completed the form is handed in to the Head Teacher.

Under the Misuse of Drugs Act 1971:

*'It is an offence for the occupier or someone concerned in the management of any premises knowingly to permit or suffer on those premises the smoking of cannabis; or the production, attempted production, supply, attempted supply, or offering to supply of any controlled drug.'*

(See U&S policy Sections 14-20 on drugs and the law).

We will do our best to ensure that the school premises are safe and have identified safety procedures in the rare event that a syringe or needle or other drug-using equipment are found discarded in the school premises. These procedures are outlined on the 'Responding to incidents involving substances' flow chart.

In the event that paraphernalia (needle or syringe) is found on site contact:-

- **Mansfield District Council** (to ask them to collect and remove the equipment from the school site).  
Tel: 01623 463463
- **Police** - if applicable (to provide intelligence to support local strategies).  
Tel: 01623 420999

This school's Linked Community Police Officer is:

**PC 2701 Jeremy Bray**

This Police Officer will liaise with and advise the school in the event of a suspected criminal offence occurring. All members of staff are familiar with the recommended procedures identified in the U&S policy document. All pupils and parents/carers have been made aware of the school's policy.

## **Support and Information**

We will provide children with opportunities to gain appropriate support and information if they have worries or concerns about drugs issues. This will be through:

### **Information and Support Services**

Up to date information on local drugs support services will be made accessible for all members of the school community. Leaflets and contact numbers will be displayed in the entrance to the school and will be made available in the school office.

Useful contacts include:

- FRANK (the national drugs helpline)
- New Leaf – smoking cessation service
- WAM – support for children affected by someone else's drug use

We recognise that any child misusing drugs may be in need of our support for an extended period of time or in exceptional circumstances from an appropriate outside agency.

## **Inclusion and Equality**

### **Statement on Inclusion**

We are committed to inclusion and providing equal opportunities for all. We work closely with parents/carers and any outside agencies in meeting each child's needs.

### **Vulnerable Children**

We are committed to careful consideration of risk factors for vulnerable children who might be at greater or significant risk of harm and will seek alternative provisions for such pupils where appropriate.

### **Statement on Exclusion**

This school fully endorses the view that exclusion blights the lives of thousands of children, often those most in need of education. Many pupils excluded from school never get back into mainstream education, making it more likely that they will be excluded from society later in life, at a cost to both society and the individuals concerned. There is strong evidence to suggest that excluded pupils are at a greater risk of becoming involved in drug use. This school is therefore committed to maintaining the inclusion of all its pupils wherever possible and would only use exclusion as a last resort after a range of behaviour management strategies had been implemented.

## **Confidentiality**

Although it is important to maintain confidentiality throughout the handling of any incident or disclosure, children will be made aware that complete confidentiality cannot be guaranteed. This will help in retaining the trust of children and parents/carers and will ensure that the sharing of appropriate information is kept to a minimum.

Sensitive information is only disclosed internally or externally with careful attention to the rights and needs of individuals.  
(See U&S policy, Sections 11-13, Appendices 2&3 for confidentiality and risk assessment.)

## **Responding to the Media**

As drug-related incidents are likely to generate media interest, all members of staff have been advised not to respond to journalists and should refer all enquiries to the Head Teacher. The Head Teacher will make a considered response and, if necessary, seek assistance from the Local Authority Press Office.

## **Policy Monitoring and Evaluation**

The monitoring of this policy will be ongoing to assess its workability and ensures it remains responsive to current issues.

This policy will be evaluated bi-annually involving representatives from the whole school community.

The next review date is:  
**September 2018**

## **Reference Documents Used in the Drafting of this Policy**

- Tackling Drugs to Build a Better Britain – HMSO, 1998
- Protecting Young People – Good Practice in Drug Education in Schools and the Youth Service - DfEE, London, 1998
- The Right Approach - DrugScope, London, 1999
- The Right Responses – Drug Scope London, 1999
- Drugs – Guidance for Schools – DfES, London, 2003
- Drug, Alcohol & Tobacco Education Curriculum Guidance for Schools – QCA, 2003
- NCC Children & Young People Substance Use Policy 2003.
- Drug Education in Schools – OFSTED 1997/2005.  
Managing Medicines in Schools & Early Year Settings – DfES/DoH, 2005.