

SPRINGHEAD SCHOOL

DRUG EDUCATION AND INCIDENTS POLICY.

Date of Policy: Updated March 2016 Reviewed 16.3.21

Rationale

The school's stance on drugs

The school does not permit the misuse of drugs nor the use or presence of unauthorised drugs on site or associated with any activity, anywhere, for which the school is responsible.

Medicines may be authorised to be brought on site by arrangement in accordance with our Medicine in School Policy.

Drug incidents will be dealt with fairly with the well-being, health and safety of the whole school community being paramount as well as acknowledging the pastoral needs of individual pupils.

Drug education and the school ethos

A programme of drug education at Springhead School will enable pupils to develop their knowledge, skills, attitudes and understanding about legal and illegal medicines and drugs, and appreciate the benefits of a healthy lifestyle.

Definition

A drug is any substance that affects the way in which the body functions, physically, emotionally, or mentally. It includes legal substances, such as alcohol, tobacco, and solvents, volatile substances, over the counter and prescribed drugs and illegal drugs such as cannabis, ecstasy, heroin, crack/cocaine, LSD, GHB, Ketamine, alkyl nitrites (poppers) and novel psychoactive substances (legal highs).

Principles

This policy is for all staff, pupils, parents/carers, governors and agencies working with the school.

Whilst it is important to maintain a clear distinction between legal and illegal drugs, our policy is to place drugs education firmly in the context of an overall health education programme. Our aim is to enable students to make informed decisions highlighting the functions, benefits and potential dangers that all forms of drug use have in individual lives and society as a whole.

Values and Aims

Set in the broader context of personal, social, and health education, our drugs education reflects whole-school aims to provide a caring community in which young people can learn to respect themselves and others and take responsibility for their own actions. We are committed to the health and safety of all member of the school community.

We aim to enable pupils to develop their knowledge, skills, attitudes and understanding about drugs and appreciate the benefits of a healthy lifestyle, relating this to their own and others' actions.

Drugs education will: -

- Provide accurate information
- Correct misunderstandings
- Build on knowledge and understanding
- Explore attitudes and values towards drugs, drug use and drug users
- Develop pupils' understanding of rules and laws
- Develop pupils' interpersonal skills
- Develop pupils' self-awareness and self-esteem
- Develop assertiveness in appropriate situations.
- Explore the risks and consequences of their own and others' actions relating to drugs
- Be relevant to the needs of pupils and the school community.

We will aim through implicit and explicit learning experiences to:

- help pupils to understand the beneficial part drugs play in society.
- teach children that all medicines are drugs, but not all drugs are medicines.
- help pupils to understand how to use prescribed medicines appropriately
- educate pupils on how to make informed choices.
- increase pupils' knowledge of the dangers of smoking, alcohol abuse, the use of solvents and drug abuse
- teach strategies to help pupils resist pressure from their peers and others.

Organisation of Drugs Education

The programme of study for Drugs education for Key stages 1-5 is found in the PSHCE scheme of work. This programme offers the opportunity to reinforce the benefits of a healthy lifestyle and give pupils the knowledge, understanding, attitudes and personal and social skills to make informed and responsible choices now and later in life without glamorising the subject of drugs education by singling it out for separate treatment.

Staff will decide the most effective methods to use in the classroom. We know that learning about personal matters is increased if students work in a supportive group where they feel safe, and if active methods are used which encourage practice of relevant skills. We understand the need for constant repetition and reinforcement.

The detailed programme will be drawn up by the teachers responsible for each class as outlined in the scheme of work for PSHCE, in order to make it entirely appropriate to the needs of individuals. The components of drug education at the

different key stages, set in the context of developing and maintaining a healthy lifestyle, are outlined below:

- Early Years and Key stage 1: There is no discrete provision for Drug education at this age. The focus is on pupils developing the knowledge, skills and understanding they need in everyday situations to make informed choices, build relationships and develop their self-awareness and esteem.
- Key stage 2: Pupils will begin to find out about medicines and drugs and how these are used safely. They will continue to develop skills in self-awareness and in making informed choices leading to assertiveness. They will study their role in the community and how to stay safe within that community.
- Key stage 3: Pupils will build upon work from Key Stage 2, developing their assertiveness skills and their understanding of the benefits to health versus the potential harm of taking medicines. They will build up their knowledge of the potential harmful effects of using legal drugs i.e. tobacco and alcohol. They will develop their skills in making informed choices.
- Key stage 4: Pupils will build on their knowledge of the harmful effects of using legal drugs and how to avoid pressures to use them. Pupils will develop their skills and understanding about how they can lead healthy and safe lives and assert their views with peers and others.
- Key stage 5: Pupils will build on their work at key stage 4. They will be informed about the law, the dangers of illegal drugs and their potentially fatal consequences. They will develop their understanding of keeping themselves safe in a range of situations and of how to manage risk effectively. Pupils will be helped to develop their understanding of the responsibility they have in ensuring they take prescribed medication safely.

We expect that our General, Advanced, Senior and Higher Level Teaching assistants, who have extensive experience of our pupils, will be involved in planning, taking part in and evaluating classroom work, although the overall responsibility rests with the teaching staff.

Specific Issues Statements

Confidentiality

Some pupils may choose to mention instances of drug use in class or with individual members of the school community. While staff will want to be supportive, they work within child protection guidelines and clearly state that they may not be able to guarantee confidentiality.

Any concerns must be reported to the Head teacher.

Use of outside visitors

The contribution of visiting speakers complements our own teaching and is part of a planned overall programme. Visitors are never left alone to work with students and

teachers are always involved in planning these sessions to ensure that they are entirely appropriate for our pupils.

Health and Safety

All forms of illegal substance are forbidden on the school premises.

The school follows DfE and ACPO drug advice for Schools Sept.'12 which remains current on 16.3.21.

The school building and grounds are 'no smoking' areas, including e-cigarettes.

Alcohol is not permitted on the premises in any instance.

Medicines

Parents/Carers are expected to send in prescribed medication clearly marked with name, type of medication, dosage and time. Some pupils can be given paracetamol etc. when the school holds written instructions from parents/carers (See Head teacher or Deputy).

- Only staff (teachers, HLTAs, nominated ATAs) who have been trained in administering medicines to give them. This is generic training in procedures, not specific training in, for example, midazolam.
- When medicines arrive in school, it should be kept in a secure place such as the medicine cabinet or locked cupboard in the Therapy Room. A member of staff will prepare a medication sheet accurately completing all details.
- When it is time to give the medication, go to the medical room to collect medicine, check that the dosage on the bottle matches that on the record, check the record book to ensure that it hasn't already been given and take the medicine to the child, locking the medicine cabinet immediately and returning the key to the cupboard. **Do not sign as given until you return to the medical room once the child has taken the medication.**
- Before administering the medication, ask a colleague to 'check medication for' This is so that more than one person knows it has been given.
- Immediately return the medication to the medical room and complete the record. **Do not leave this until later – do it straight away.**
- Some medicines are kept with the pupil, for example rescue medication such as midazolam or inhalers. A note should be kept (date, time, quantity) with the medication (eg in a small notebook) and the central copy in the medical room should also be completed immediately.
- The record needs to be completed meticulously. They will be monitored regularly by the Headteacher

As a general guideline before administering medication to a child the staff member should:

- Wash their hands
- Ensure that a drink is available if appropriate (some tablets can irritate and damage the throat and oesophagus if administered without a drink)
- Check the label on the medication: name of child, dose, route of administration (eg by mouth, into ear/eye, rubbed on the skin) and any special instructions and expiry date

If there is any doubt about any procedure staff should not administer, but seek advice from parents/carers or health professionals.

If a child refused the medication, they must not be forced. Staff can try to encourage them or perhaps get someone else to try. Under no circumstances should you attempt to hide the medicine in food or drink, unless you have written permission from parents/carers to do so.

It is normally considered poor practice to give medicines covertly, although in rare cases where the health professionals judge that it is in the child's interests to do so, this is acceptable. Some children do find tablets difficult to swallow so may be given them, with their full knowledge, in, for example, a spoonful of jam. Even in these circumstances parents must give written instructions. As some medicines can react with certain foods it is advisable that they have sought advice from their pharmacist.

When administering rescue medication staff should already be familiar with the contents of the Health Care Plan and follow the instructions accurately, contacting the emergency services when necessary.

Occasionally mistakes will happen. In most cases, whether it is a missed dose or a medicine given in error there will be no harm done. Tell the headteacher, who will contact parents/carers and explain the mistake to them. In the case of a missed dose, you may be able to give it at a later time. Where a dose has been given in error, it is important that the child is monitored for any reactions and medical advice sought if you are in any way concerned.

Drug Related Incidents

The misuse of any drug is regarded as a drug related incident. In the event of any drug related incident, staff should immediately inform the Head Teacher who will then assess, according to North Yorkshire LA guidance:

- The legal requirements.
- The involvement under defined circumstances of outside agencies, including informing the police where appropriate.
- The types of behaviour, and the school's proposed course of action in response to them.
- The involvement of parents/carers.
- Arrangements for recording incidents and informing others of incidents: Compass REACH referral, Insite Youth Support Centre, 01609 777662.
- Arrangements for safeguarding samples.
- Health and Welfare procedures.

Working With Parents/Carers

A partnership with families

We place the utmost importance on sharing equal and joint responsibility with parents/carers for their children's education.

We will take every opportunity to inform parents/carers:

- by making our commitment clear in the school prospectus
- by inviting parents to discuss personal development when their child enters each department of the school
- by raising personal development issues at each Annual Review meeting
- by making this policy available to parents/carers

Staff are willing to discuss with parents/carers any matters which they are concerned about.

Procedures for Policy Monitoring and Evaluation

The school will need to assess the effectiveness of the aims, content and method in promoting pupils' learning. Feedback from staff, parents/carers and pupils will help judge this. The PSHCE co-ordinator will be responsible for developing ways of collecting this information, monitoring teaching with support from the management team, reporting to the head teacher and presenting it to the governors within the school development plan.

North Yorkshire Guidance on Developing a Drugs Policy (January 2015) (**checking to see if this is current**) was used to update this policy.

Signed Date
Chair of Governors