Anti-Drugs Policy
Reviewed November 2018
Next Review November 2021

Linked Policies:
Confidentiality
Behaviour Management Policy
Anti-Bullying
Child Protection and Safeguarding Policies
Searching, Screening and Confiscation
POLICY ON THE USE AND MISUSE OF DRUGS (CONTROLLED SUBSTANCES)

AIMS
• To develop positive pro-active attitudes, values and skills in the students to equip them to make appropriate informed decisions about their personal patterns of behaviour and lifestyles
• To provide accurate information about potentially harmful substances
• To inform students and increase understanding about the implications and possible consequences of use and misuse
• To widen understanding about related health and social issues e.g. sex and sexuality, crime, drug related infections

DRUGS – A DEFINITION
A drug is any substance the use of which alters the physiological functioning of the body. These fall into four main categories:

1. Those it is illegal to possess, supply or use – e.g. cannabis, Ecstasy, LSD, amphetamines, cocaine, heroin, etc. (see Appendix 1)
2. Those it is legal to obtain as prescribed medicines but which have the potential to cause harm if misused or obtained illegally.
3. Those it is legal to possess, supply or use – e.g. tobacco, e-cigarettes, alcohol, volatile substances (solvents, glues, etc.).
4. The “new psychoactive substances” (formally “legal highs”) which are illegal to supply under the “New Psychoactive Substances Act” of May 2016.

POLICY INTO PRACTICE – DRUG RELATED INCIDENTS (See Appendix 3 – Flowchart)

Principles
• In instances involving substance misuse, the Headteacher or another member of the Senior Leadership Team (SLT) will inform parents at the earliest opportunity. (Substance misuse by students in school means using, supplying or preparing drugs on school premises, including alcohol and tobacco).
• The school will consider each substance incident individually and recognises that a variety of responses may be appropriate to deal with incidents. The school will consider very carefully the implications of any action that may be taken as it seeks to balance the needs of the student involved, their parents, other students and the interests of the local community.
• The school cannot allow its premises to be used for the production or supply of any controlled drug. Information about such incidents would automatically be referred to the police. Any students involved in the illegal supply of drugs on the school premises, or elsewhere within the jurisdiction of the school, will normally be permanently excluded.
• The Headteacher, in consultation with the appropriate senior members of staff, will take overall responsibility for co-ordinating the school’s approach to drug related incidents.
• In instances involving suspected or actual substance misuse or supply on the school premises ALL members of staff should follow the lines of action outlined in the practice section below.

Practice
• Staff who become aware of students being in possession of drugs, or using drugs on school premises should inform the Headteacher or Deputy Headteacher of the possible signs of substance misuse (see Appendix 2)
• If appropriate, First Aid should be administered in accordance with the Health and Safety policy.
• Where staff discover substances, suspected to be harmful, illegal or needing investigation, and are unable to get immediate intervention from a member of the SLT or a PSC/HOY, they should be removed as follows

- From a place – remove the substance, if possible in front of a witness (colleague or student). DO NOT, however, leave the substance even if a witness is not available.
- From a person – Remove or receive substances from a student in front of a witness.

If, in the professional judgement of a member of staff, the substance may be harmful, it should be removed or received without a witness.
• All staff should record the time, place and circumstances by which the substance comes into their possession. Do not investigate the substance, but record its size and appearance. Where possible, staff should have their recordings countersigned by a witness
• The child (and the substance) should be taken immediately to the Headteacher or Deputy Headteacher.
• The Headteacher or Deputy Headteacher will place the substance in a sealed container which will be signed and dated by himself and the member of staff.
• Any equipment associated with the substance use, especially needles and syringes, should be handled in line with the LA Health and Safety guidelines as outlined in the school’s Supporting Children with Medical Conditions policy.
• The Headteacher or Deputy Headteacher will arrange for the Police to remove the substance.
• The Headteacher or Deputy Headteacher will meet with the appropriate Head of Year to discuss the student and the incident, and agree upon an appropriate plan of action.
• The Headteacher or Deputy Headteacher will interview the student and, where appropriate, any witnesses, and explain why the investigation is taking place.
• Parents will be informed at the earliest opportunity by the Headteacher or Deputy Headteacher.
• All information should be recorded using the school’s Serious Incident Report sheet and written statements made by witnesses and students concerned. Appropriate further courses of action may include:
  • Contact with parents
  • Isolation
  • Fixed Exclusion – short term with a planned reintegration meeting at which targets for a negotiated return and appropriate care plan can be agreed
  • Permanent Exclusion
  • Involvement of the Locality Team (Early Help Hub)
  • Involvement of outside agencies (Police, Community Safety Team, Local Health Services).
• If students disclose that they are using drugs off the school site, members of staff should inform the Headteacher or Deputy Headteacher. **Total confidentiality should never be promised.**

**Specific Issues**

*Medicines in School*
• Parents of any student on prescribed medication should inform the school of its usage and dosage and, with the exception of asthma inhalers, the medication should be given to the School Nurse for safe keeping during the day.
• School is only able to administer non-prescribed medication to students, e.g. paracetamol, if given written permission by parents.

*Contact with the media*
• The Headteacher will take responsibility for liaison with the media, in conjunction with the Chair of Governors and the LA, if it becomes necessary to do so.
• The Headteacher will seek to ensure that any reporting of incidents remains in the best interests of the students, their families and the school.

*Involvement of the Police*
• There is no legal obligation to inform the Police of an incident but the school may seek relevant support and advice when dealing with a drug related incident.
• School cannot knowingly allow its premises to be used for the production or supply of any **controlled substance** and the Police will be informed immediately of any such activity.
• The Police may also be involved as outside speakers within the drug awareness education programme.

*Parental Involvement*
• Parents will be involved at the earliest possible time in any drugs related incident, and kept well informed of subsequent actions.
• Parents will be involved in and contribute to any Care Plan for students involved in such incidents.
• The school will involve parents in any drug awareness education programme and will provide opportunities for parents to increase their own knowledge of drugs, alcohol and other substances, their effects and the relevant support agencies and groups working with young people and their families.
• The Pastoral Care structure will always seek to help individual parents who have concerns regarding drug, alcohol or substance misuse.
• If Police come into school and wish to interview a student the parent must give consent. The Headteacher or Deputy Headteacher may give permission for an interview to take place if all reasonable steps to contact parents have been made. A parent can refuse permission for their child to be interviewed. An appropriate adult must be present if a child is interviewed.

*Staff involvement in Drug Misuse*
• The school will follow the LA guidelines concerning employees who may misuse substances during the course of their employment.
• Whilst seeking to support the member of staff concerned, the school will also have regard to its legal obligations to promote the Health and Safety of its students.
Students reporting drug related incidents
• Information will be dealt with in the same way as outlined in the Child Protection Policy.
• Information regarding support groups and help lines outside school will be made available to all students.
• Students should seek immediate help from a member of staff (or another responsible adult if they are not available) if they find any student who appears to be ill as a result of drug, alcohol or substance misuse.
• Information regarding drug use by students from other schools will be passed on to the relevant Senior Teacher who will contact the local Police Officer linked to the school.

POLICY INTO PRACTICE – DRUG EDUCATION
Principles
• The welfare of the students should be the overriding priority.
• All students should be encouraged to discuss concerns regarding drug, alcohol or substance misuse with any member of staff with whom they feel confident enough to do so.
• The school will actively cooperate with other agencies such as the Police, LA, Health and Drug Agencies such as Catch 22 to deliver its commitment to drug education.

Through its education programme the school will:
• provide students with accurate knowledge of different types of drugs so that they can make appropriate, informed decisions about their personal patterns of behaviour and lifestyles;
• increase student understanding about the implications and possible consequences of use and misuse (including widening their understanding about related health and social issues e.g. sex and sexuality, crime, S.T.I.s);
• develop skills and self-esteem to handle drug, alcohol and other substance situations
• provide sources of help and support both inside and outside school.
• All information should be appropriate to the age/gender/ethno-cultural background of students.
• The Drug Education programme will also recognise the need to provide accurate information and support for parents as part of the schools commitment to the Home School Partnership.

Practice
• Drug education is provided in the taught curriculum as part of the Citizenship programme throughout the school and through Science, R.E. and other parts of the teaching programme.
• The curriculum follows recommendations outlined by the LA and National Healthy Schools Programme.
• Teachers are supported in their delivery of drug education by advice from external agencies such as Catch 22, Health Professionals and the Police.
• A variety of teaching approaches are used to give students relevant information to enable moral issues to be explored through discussion and for students to acquire appropriate skills.
• The SLT are responsible for arranging appropriate training for staff who deliver drug education. The PDC co-ordinator will keep abreast of developments in drug education and revise the schemes of work to ensure the information is accurate and relevant.

Monitoring and Review
The school will review this policy every three years and assess its implementation and effectiveness.

__________________________________________________________
GOVERNORS’ ANTI-DRUGS POLICY
PASTORAL COMMITTEE

Date reviewed - November 2018
Date of Next review - November 2021

Approved ____________________________ Date _______________

Head of School (Mr Jim Eddie)

Approved ____________________________ Date _______________

Committee Chair (David Ross)
# Appendix 1

## EXTERNAL CONTRIBUTORS TO DRUG EDUCATION IN SCHOOLS BRIEFING PAPER

The purpose of this paper is to give schools a quick checklist for external contributors’ input to drug education in schools. ‘Teachers should always maintain responsibility for the overall drug education programme. External contributors should not be used as substitute teachers, nor should they constitute the entirety of a schools drug education programme. When working directly with pupils they should add a dimension to the drug education programme that the teacher alone cannot deliver’. (DfES Drugs Guidance for Schools Document p 38).

### External contributors:
Schools are strongly recommended to liaise with HCC and their local Healthy Schools Programmes, who will inform the schools of a wide range of individuals and agencies who can support drug education programmes.

<table>
<thead>
<tr>
<th>List of contributors</th>
<th>Write down</th>
<th>Contact numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>• School nurses</td>
<td></td>
<td>Toni Horwood 01256 376330</td>
</tr>
<tr>
<td>• Youth workers</td>
<td></td>
<td>07540 238216</td>
</tr>
<tr>
<td>Other agencies</td>
<td></td>
<td>Write down</td>
</tr>
<tr>
<td>• Community pharmacists</td>
<td></td>
<td>Assura Pharmacy 01256 383420</td>
</tr>
<tr>
<td>Specialist drug or alcohol services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Catch 22</td>
<td></td>
<td>0845 459 9405</td>
</tr>
<tr>
<td>Health promotion specialists</td>
<td></td>
<td>01256369160 ((High tier intervention &amp; parent support)</td>
</tr>
<tr>
<td>• Young people services</td>
<td></td>
<td>YPI 01256 423878</td>
</tr>
<tr>
<td>• The police</td>
<td></td>
<td>O8450454545</td>
</tr>
<tr>
<td>• Talktofrank.com (national drug education service and helpline)</td>
<td></td>
<td>Frank 03001236600</td>
</tr>
<tr>
<td>• Primary Care Trust Representatives</td>
<td></td>
<td>01256 332288</td>
</tr>
</tbody>
</table>
Appendix 2: Substances recognised as drugs
The World Health Organisation classes a drug as “a substance which, on entering the body, changes the way that the body functions”.
This list outlines some of the substances which are classed as drugs and are banned from school.

<table>
<thead>
<tr>
<th>Class A</th>
<th>Class B</th>
<th>Class C</th>
<th>Legal but Unauthorised</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cocaine, crack, heroin, opium, morphine, methadone, LSD, ecstasy, magic mushrooms (prep), crystal meth.</td>
<td>Amphetamines, codeine, barbiturates, Ritalin, cannabis, synthetic cannabinoids, Mephedrone (M-Cat), ketamine.</td>
<td>Benzodiazepines, Anabolic steroids, ketamine, GBL, GHB, BZP Khat.</td>
<td>Alcohol, tobacco, solvents, akyl nitrates (Poppers). E-cigarettes &amp; ‘vapes’</td>
</tr>
</tbody>
</table>

Those drugs formerly known as ‘legal highs’ have either been reclassified individually or are now under the term ‘new psychoactive substances’ which are illegal to supply (sell or give to people).

Appendix 3: Indicating signs that a person may have misused substances
All of the following signs can be caused by many other psychological and behavioural changes

<table>
<thead>
<tr>
<th>Social Behaviour</th>
<th>Appearance / Dress</th>
<th>Physical Condition</th>
<th>Learning Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Significant changes in the availability and use of money</td>
<td>• Stains on clothes</td>
<td>• Paleness</td>
<td>• Reduced concentration</td>
</tr>
<tr>
<td>• increased activity e.g. hyperactive behaviour</td>
<td>• Smells on clothes</td>
<td>• Tiredness</td>
<td>• Loss of powers of recall</td>
</tr>
<tr>
<td>• increased lethargy</td>
<td>• Lowering of personal standards</td>
<td>• Weight loss</td>
<td>• Incoherence</td>
</tr>
<tr>
<td>• rapid changes in energy levels</td>
<td></td>
<td>• Lack of cooperation</td>
<td>• Loss of dexterity and / or practical skills</td>
</tr>
<tr>
<td>• increased withdrawal</td>
<td></td>
<td>• Poor hygiene</td>
<td>• Reduced output</td>
</tr>
<tr>
<td>• changing friendship patterns</td>
<td></td>
<td>• Spots around mouth and nose</td>
<td>• Reduced homework</td>
</tr>
<tr>
<td>• rapid changes in disposition from elation to depression</td>
<td></td>
<td>• Blisters in the region of the mouth</td>
<td>• Lack of interest</td>
</tr>
<tr>
<td>• uncooperative behaviour</td>
<td></td>
<td>• Inflamed eyes</td>
<td>• Unpunctuality</td>
</tr>
<tr>
<td>• truancy</td>
<td></td>
<td>• Injection marks</td>
<td>• Failure to bring equipment</td>
</tr>
<tr>
<td>• use of substance related language</td>
<td></td>
<td></td>
<td>• Personal disorganisation</td>
</tr>
<tr>
<td>• concealment and denial – keeping secret and private places</td>
<td></td>
<td></td>
<td>• Loss of interest in extra-curricular activities</td>
</tr>
<tr>
<td>• aggressiveness</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>• post registration truancy / truancy from lessons</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>• increased involvement in conflict situations</td>
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<tr>
<td>• keeping a friends belongings for ‘safe keeping’</td>
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</tbody>
</table>
Appendix 4: Flowcharts

**ILLEGAL DRUGS**
Student believed to be under the influence

Ensure medical safety of the student and treat as an emergency if appropriate

Record and report all evidence to Headteacher or Deputy Headteacher

Contact Parent
Confiscate and store any substances found
Contact Police

Counselling, guidance, punishment as appropriate