Rasharkin Primary School



Drugs Policy

Rationale

Children and young people are exposed to messages about drug use from an early age. Their exposure to the use and misuse of drugs may come through parents/guardians, older brothers and sisters, friends, television programmes, the media and popular music.

Research shows that by post-primary school age, some young people are likely to have tried substances such as alcohol, cigarettes or solvents, and/or to have misused prescribed medicines or other drugs. Research also shows that the age at which children and young people are being offered drugs is getting younger. The steady increase in the use of drugs by young people might also be influenced by three additional factors:

- a significant fall in the price of controlled drugs;
- an increase in the availability of a wider range of drugs within local communities; and
- an increase in the amount of spending money that children and young people have.

There also appears to be an increasing focus on the use of performance enhancing drugs in certain sports and leisure pursuits. Furthermore, the use of substances, such as cannabis, in a therapeutic setting provides a context in which drug use is seen as being more acceptable.

We recognise that our children may be exposed to drugs and therefore we feel it is important that children have the opportunity to develop the skills that they need to make informed choices, this would include developing assertive skills, especially in preparing children for transition to post primary.

School Ethos

The care, welfare and safety of the pupils at Rasharkin Primary School are of paramount importance to the Board of Governors and the staff of the school. We feel that our drugs education programme will promote that sense of wellbeing, as well as the safety and security of pupils within our school.

This policy has written based on the guidance provided by the Department of Education for Northern Ireland (DENI) (DENI Circular 2015/23).

Definitions

For the purpose of this policy, the terms 'drug' and 'substance' include any product that, when taken, has the effect of altering the way the body works or how a person behaves, feels, sees or thinks.

As well as everyday products such as tea and coffee, substances include:

- alcohol, tobacco and tobacco-related products, including nicotine replacement therapy (NRT), and electronic cigarettes;
- over-the-counter medicines such as paracetamol and cough medicine;
- prescribed drugs, such as antibiotics, painkillers, antidepressants, antipsychotics, inhalers and stimulants such as Ritalin;
- volatile substances such as correcting fluids or thinners, gas lighter fuel, aerosols, glues and petrol;

- controlled drugs such as cannabis, LSD, ecstasy, amphetamine sulphate (speed), magic mushrooms, heroin and cocaine;
- new psychoactive substances (NPS), formerly known as legal highs*, which contain one or more chemical substances that produce similar effects to illegal drugs and are sold as incense, salts or plant food and marked 'not for human consumption' to avoid prosecution; and
- other substances such as amyl or butyl nitrite (known as poppers) and unprocessed magic mushrooms.
- *We no longer use the term legal high because it is misleading. The public perceived that 'legal' meant safe. This is not the case, as these substances are not regulated and there is no way of knowing what chemicals they contain.

Controlled substances are legally classified according to their benefit when used in medical treatment or harm if misused. The Misuse of Drugs Act sets out a range of substances that are controlled under the act. It is an offense to possess, possess with intent to supply, supply, or allow premises you occupy or manage to be used unlawfully for the purpose of producing or supplying controlled drugs. The Act has four separate categories: Class A, Class B, Class C and temporary class drugs. Substances may be reclassified.

The Misuse of Drugs regulations, created under the Misuse of Drugs Act, license production, possession and supply of substances classified under the act. These include five schedules that classify all controlled medicines and drugs.

- Schedule 1 has the highest level of control, but drugs in this group are very rarely used in medicines.
- Schedule 5 has a much lower level of control.

Drug Use: refers to taking a drug; there is no value judgement, although all drug use has an element of risk.

Drug Misuse: refers to legal, illegal or illicit drug taking or alcohol consumption, which leads a person to experience social, psychological, physical or legal problems related to intoxication or regular excessive consumption and/or dependence. Drug misuse is therefore taking drugs, including prescribed drugs and NPS, that cause harm to the individual, their significant others or the wider community.

(Ref CCEA, Drugs, Guidance for Schools, 2015, p3)

The Aim of Our Policy is to:

- a. Protect young people from the harm associated with the use and misuse of substances.
- b. make a clear statement of our views on drugs and drug education
- c. to ensure a consistent and sensitive approach amongst staff in drugs education and in the handling of drug related incidents
- d. to safeguard good practice for the future.

Roles and Responsibilities Individual Staff Members (all staff)

All staff should be familiar with the content of Rasharkin Primary School's drug policy. They should also be fully aware of their responsibilities, should a suspected drug-related incident

occur. It is not the staff's responsibility to determine the circumstances surrounding the incident, but they should: (see Appendix 1 & 3)

- assess the situation and decide on the appropriate actions to take;
- notify the principal and the designated teacher for drugs at the earliest opportunity;
- deal with any emergency procedures to ensure the safety of pupils and staff, if necessary;
- forward any information, substance or paraphernalia received to the designated teacher for drugs, who will respond accordingly;
- use the school's Drugs Incident Report Form to complete a brief factual report on the suspected incident and forward this to the designated teacher for drugs (see Appendix 1.6);
- consider the needs and safety of a pupil when discharging him or her into the care of a parent or carer who appears to be under the influence of alcohol or another substance (staff, who are in loco parentis, should maintain a calm atmosphere when dealing with the parent (see Appendix 1.5); and
- invoke safeguarding procedures, if a parent or carer's behaviour may place a pupil at risk (see Appendix 1.5).

The Role of the Designated Teacher for Drugs

Designated Teacher- Mrs R Howe Deputy Designated Teacher – Mrs R Henry

The duties of the designated teacher will include the oversight and co-ordination of the planning of curricular provision, in compliance with the statutory requirements, and liaison with other staff responsible for pastoral care.

The designated teacher is responsible for the co-ordination of the school's procedures for handling suspected drugs-related incidents and the training and induction of these procedures with new and existing staff.

The designated teacher will act as a contact point, for outside agencies that may have to work with the school or with a pupil. In the absence of the designated teacher a deputy will be available. It is the responsibility of the designated teacher for drugs to take possession of any substance(s) and associated paraphernalia found and complete a factual report.

The Role of the Principal

It is the principal's responsibility to contact the P.S.N.I. if there are any incidents. It is the responsibility of the P.S.N.I. to investigate any criminal offence.

The principal is able to search school property but will not search a pupil's property unless the pupil agrees to this. If this happens, another member of staff will be present. However, if the pupil does not agree, the police will be called to conduct the search. The pupil will be asked to remain in the school until the police arrive. In any suspected drug-related incident the principal will make every effort to contact the parents/carers of those pupils involved.

The principal will ensure that in any incident involving a controlled drug that there is a close liaison with the police. After contacting the police, the principal will confine his responsibilities to the welfare of the pupil(s) involved in the incident, the other pupils in the school and the handling, storage and safe disposal of any drugs/drugs-related paraphernalia. This will also include informing the Board of Governors, agreeing any appropriate pastoral/disciplinary response, reporting the incident to the relevant Education Authority Officer and if appropriate,

completing a written report and forwarding a copy to the Board of Governors and the designated officer within the Education Authority.

The Principal will ensure that all staff (teaching and non-teaching) are aware of the school's Drugs Policy and procedures in the event of a suspected drugs related incident. The Principal will also make any new members of staff aware of the contents of this policy as part of their induction training.

The Role of the Board of Governors

The school governors have responsibility for Rasharkin Primary School and will foster and support the development and on-going review of the Drugs Policy and education programme by collaborating with appropriate staff, pupils and parents/carers. They will facilitate the consultative process where the school community can respond and contribute to the effectiveness and quality of the policy and programme, which the governors will examine and approve prior to their implementation in the school. They will ensure that the policy is summarised and is published in the school prospectus and that it is reviewed at regular intervals. All school governors should be fully aware of (and one member will be trained to deal with) suspected drugs-related incidents and their appropriate disciplinary response.

The Role of the Parents/Carers

All parents/carers are made aware that the school has a 'Drugs Policy' and how it applies to them and their children, in our school prospectus. Parents/carers have had a role in the creation of this policy and form part of the consultative process. Any comments made will be taken to the Board of Governors.

Overview of the Drugs Education Programme

The drugs education programme in Rasharkin Primary School will be included in teachers' planning and will form part of the curricular area 'Personal Development and Mutual Understanding (PDMU). It will also be supported by the pastoral care programme and policy throughout the school and will link with other subject areas such e.g. Religious Education and Physical Education.

When available the school will use the PSNI staff to deliver a specialised drugs education lessons.

The programme is a preventative one and is pupil centred, delivered through active learning. The aims of the programme are:
☐ To promote positive attitudes towards personal health;
\Box To inform pupils of the effects of drug use and abuse;
☐ To help pupils acquire skills to resist peer pressure;
☐ To build up the self-esteem of pupils;
\Box To help pupils acquire decision making and problem solving skills that will empower them to take responsibility for their own health and safety.

Procedures for Managing Drug Related Incidents

Dealing with a suspected incident requires extreme sensitivity on the part of all those involved. All staff should be aware of the procedures as per flow charts in Appendix 1.

Disciplinary Measures

The principal will retain responsibility for deciding how to respond to a particular incident and
will take into account factors such as:
□ Age of pupil;
☐ Does the pupil admit or deny the allegations?
☐ Is this the first or subsequent offence?
☐ Is the drug legal or illegal?
□ What quantity of the drug was involved?
☐ What was the pupil's motivation?
☐ Does the pupil have a parent/guardian or family member who is misusing drugs?
☐ Does the pupil know and understand the school policy and school rules?
☐ Where does the incident appear on a scale from possession of a small quantity, to persistent
supply?
☐ If illegal supply is suspected, how much was supplied and was the pupil coerced to buy for
others, or is there evidence of organised or habitual supply?
At all times the needs of individual pupils will be considered and appropriate interventions and
support mechanisms will be put in place. Any sanction imposed will be justifiable in terms of:
☐ The seriousness of the incident;
☐ The identified needs of the pupil, other pupils and the community;
☐ Consistency with published school rules;
☐ Consistency with disciplinary action for breaches of other school rules (such as theft, violence
and bullying).

Confidentiality

Should a pupil reveal any personal drugs information, which puts them, or any other pupil at risk, this has to be passed onto the principal/designated teacher. Confidentiality can never be guaranteed, as we are responsible for all the pupils in our school. The teacher will remain in the class with the pupils whenever a visitor is present, to ensure that nothing untoward could take place and that the content is appropriate.

Responses in the event of a Suspected Drugs Related Incident Illness/Inappropriate Behaviour

Young people's behaviour may be unpredictable and bizarre for many reasons during their time at school. Changes in behaviour may indicate a range of difficulties and problems, and may be related to a medical condition, rather than drug misuse.

Details in recognising the physical and behavioural signs of drug use can be found in Appendix 3. It is, however, important to note that intoxication, physical collapse or unconsciousness can also result from an initial experiment with drugs. Any indications of illness/inappropriate behaviour as a result of suspected drug misuse should be brought to the attention of the designated teacher for drugs. No judgement should be made until the circumstances surrounding the incident have been determined.

Where it is considered that a pupil may have taken a substance suspected to be a drug, medical assistance should immediately be sought and the parents/carers and police informed if appropriate.

Taking Possession of a Suspected Controlled Drug and/or Associated Paraphernalia

The law permits school staff to take temporary possession of a substance suspected of being a controlled drug for the purposes of protecting a pupil from harm and from committing the offence of possession. The teacher should take the suspected drug and any associated equipment and/or paraphernalia as soon as possible to the designated teacher for drugs who should arrange for its safe storage until it can be handed over to the local police to identify whether or not it is a controlled drug. *School staff should not attempt to analyse or taste an unidentified substance*. An adult witness should be present when confiscations occur and a record kept of the details. There may be cases where it is appropriate for the staff member to take immediate action. This may involve calling an ambulance, administering first aid and/or contacting parents/carers. In other cases, it may be more appropriate to approach the pupil quietly and establish the particular circumstances surrounding the incident and respond accordingly.

Searching Pupil's Property

If the designated teacher for drugs receives an allegation of possession it may be appropriate to search a pupil's belongings if they have cause to believe it contains unlawful items, including controlled drugs. However, personal belongings cannot be searched without consent. A search of the pupil's personal belongings, including schoolbag, coat or other items should only be made with the pupil's consent, in the majority of cases*. Such a search should be made in the presence of the pupil and another adult witness.

Where a pupil is suspected of concealing controlled drugs on his/her person or in their personal belongings, every effort should be made to secure the voluntary production of these substances, by asking them to turn out their pockets or schoolbags. If the pupil refuses, the parents/carers and police should be contacted, if appropriate, to deal with the situation. A member of staff should never carry out a physical search of a pupil. If a substance or object is recovered which may be linked to the allegation, this should be taken possession of and a full record should be made.

*In the most serious cases, where consent is refused, the staff will balance the likelihood that an offence has been committed against the risk that the pupil's right to privacy may be infringed without just cause, before deciding whether to proceed with the search without consent. It is our policy that such a search is only completed with:

- with the principal's agreement
- in the presence of another adult witness
- in the presence of the pupil

Possession, Possession with Intent to Supply and Supply of Controlled Drugs

In handling suspected controlled drugs-related incidents in schools, it is necessary to distinguish between cases in which the pupil(s) involvement may take several forms.

This could include possession, possession with intent to supply and the supply of controlled drugs. It is illegal for pupil(s) to be in possession of a controlled drug. If a member of staff comes across a pupil in possession of what they believe to be a controlled drug, he/she should immediately attempt to take possession of the drug and escort the pupil(s) to the designated teacher for drugs who will deal with the incident.

Staff Training

Staff will be trained every two years. All staff, teaching and non-teaching will be trained in drugs awareness and what to do if drugs or drug related items are found. This training will be combined with Child Protection Training.

Procedures for Using Outside Agencies in School

Any visitor providing an input to the drugs education programme will be given a copy of the Drugs Policy. They will have a clear set of aims and objectives as well as the lesson plan. The teacher will view these to ensure they are appropriate and will remain in class with the visitor.

Guidance for Confiscation and Storage of Harmful Substances

Any confiscated drugs or drug- related items would be given to the principal for storage in a locked cabinet in the principal's office and then given to the P.S.N.I.

Staff Policy on Smoking and Alcohol

Rasharkin Primary School is a smoke and alcohol free zone. For further information, refer to the Health & Safety Executive's website. (www.hse.gov.uk\)

Monitoring and Evaluating

The policy will be reviewed every two years or after a drug related or suspected drugs related incident, to see if there are any weaknesses or improvements to be made.

Ref: Medication Needs Policy for guidance on the administration of medication in school

Date: 30/11/2021

Signed: (BOG Chair)

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APPENDICES

1 Handling Drug Related Incidents*

- 1. Finding a suspected substance or drug-related paraphernalia on or close to the school premises
- 2. Pupil Suspected of Having Taken Drugs / Alcohol on School Premises
- 3. Pupil Suspected of Possessing/Distributing an Illegal Substance
- 4. Pupil in Possession of Alcohol or Unauthorised Prescribed Medication On the School Premises
- 5. A Parent or Carer Arrives at School to Collect a Child and Appears to Be Under the Influence of Alcohol or Another Substance
- 6. Drugs Incident Report Form

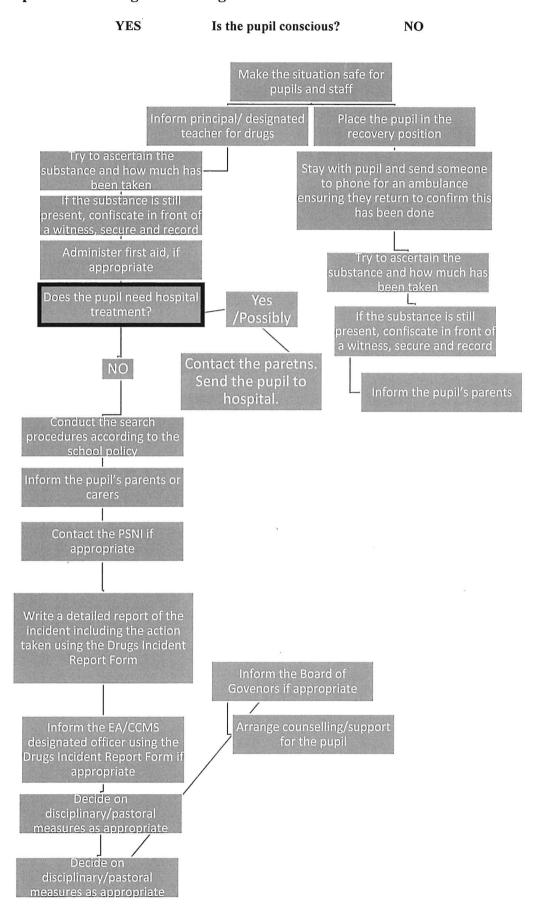
*These procedures are outlined in the 'Department of Northern Ireland's Drugs Guidance for Schools: Section 2 - Guidance on Managing Suspected Drugs-Related Incidents'. By following this guidance, the staff will ensure that those handling such incidents will do so fairly and consistently. This guidance can be found on the Department of Education for Northern Ireland's Website or on request from the school office. A copy is saved centrally for all staff (Central Resource Library, Policies, Drugs Policy).

- 2. Recognising Signs of Substance Abuse
- 3. Emergency Procedures

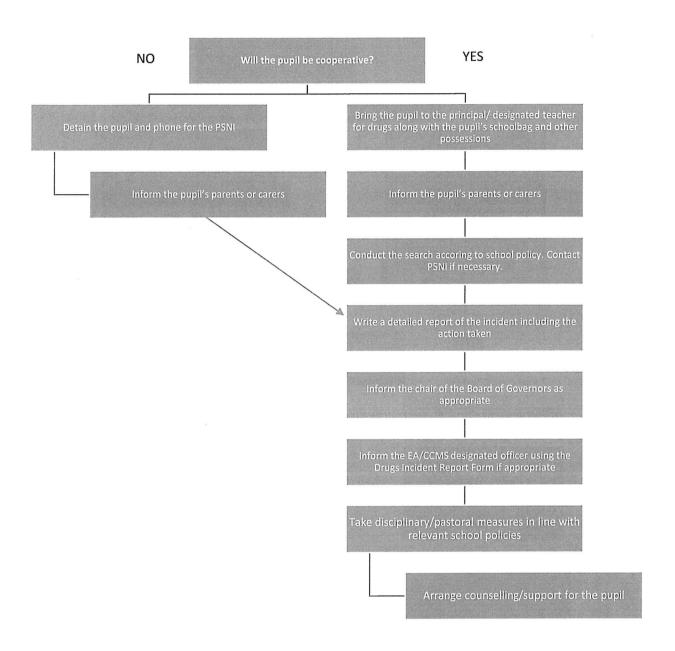
Finding a suspected substance or drug-related paraphernalia on or close to the school premises

Arrange for removal of items using protective gloves Bring the substance and any related paraphernalia to the designated Contact the PSNI and hand over the substance to the police for analysis ensuring that feedback will be provided to the school Inform the EA designated officer using the Drugs Incident Report Form if Prepare a report for the chair of the Board of Governors as appropriate

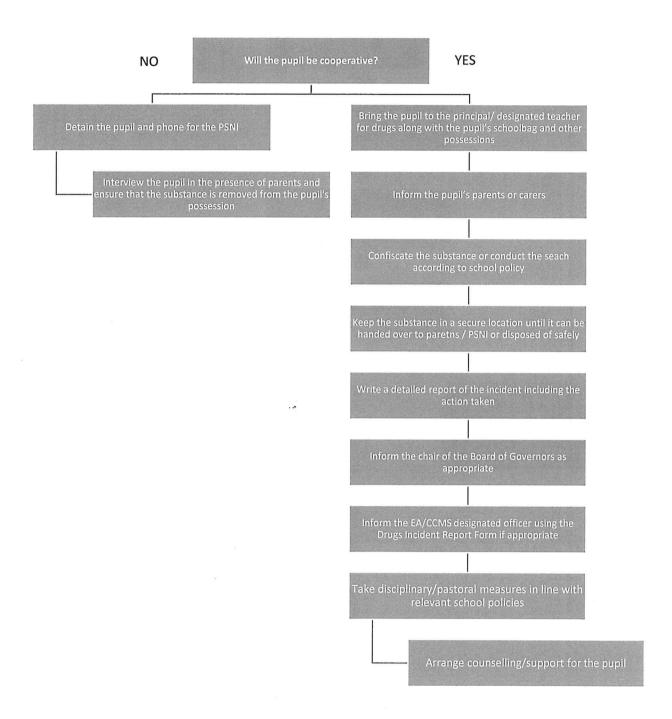
Pupil Suspected of Having Taken Drugs / Alcohol on School Premises



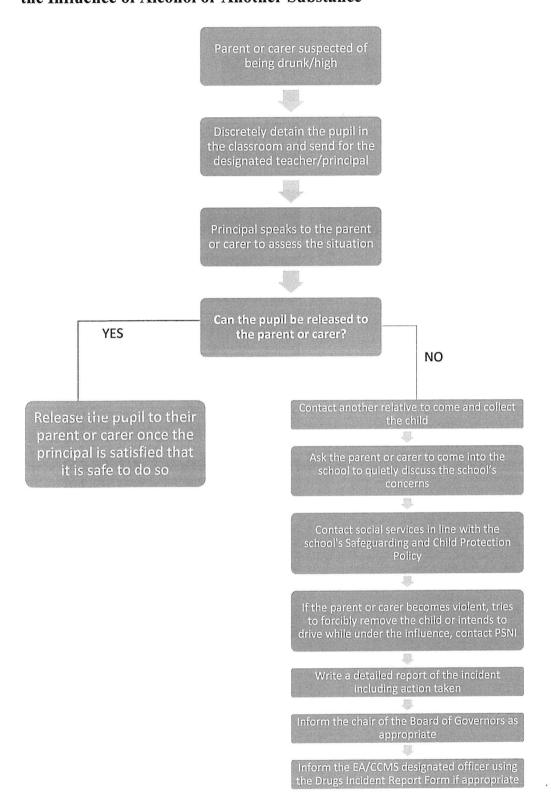
Pupil Suspected of Possessing/Distributing an Illegal Substance



Pupil in Possession of Alcohol or Unauthorised Prescribed Medication On the School Premises



A Parent or Carer Arrives at School to Collect a Child and Appears to Be Under the Influence of Alcohol or Another Substance



Drugs Incident Report Form

Name of Pupil		DOB	
Address			
Date	Time	_ Location	
Reported by	First Aid Giv	en NO / YES	by
Ambulance Called No / Ye	es Time		
Parent informed No / Yes	Ву	Time _	
Where substance is retaine	ed		
Date substance destroyed /	passed to PSNI		Time:
PSNI informed No / Yes	by	Time:	
EA informed No / Yes by		Time:	
Description of Incident			
Actions taken			
	d.		

Completed by ______-

Recognising Signs of Substance Abuse

What to look out for

If someone is having a bad time on drugs, they may be:

- anxious;
- · tense;
- · panicky;
- · overheated and dehydrated;
- drowsy; or
- having difficulty with breathing.

What to do

The first things you should do are:

- stay calm;
- calm them and be reassuring, don't scare them or chase after them;
- try to find out what they've taken; and
- stay with them.

If they are anxious, tense or panicky, you should:

- sit them in a quiet and calm room;
- · keep them away from crowds, bright lights and loud noises;
- tell them to take slow deep breaths; and
- stay with them.

If they are really drowsy, you should:

- sit them in a quiet place and keep them awake;
- if they become unconscious or don't respond, call an ambulance immediately and place them in the recovery position;
- don't scare them, shout at them or shock them;
- don't give them coffee to wake them up; and
- don't put them in a cold shower to 'wake them up'.

If they are **unconscious** or having difficulty breathing, you should:

- immediately phone for an ambulance;
- place them into the recovery position;
- stay with them until the ambulance arrives; and
- if you know what drug they've taken, tell the ambulance crew; this can help make sure that they get the right treatment straight away.

Emergency Procedures

This is the current best advice on what to do if someone is in difficulty because of misusing drugs.

- It is important to find out what they have taken as this could affect emergency aid, for example it will help the ambulance crew. Loosen clothing and call for an ambulance immediately.
- If the person has taken a depressant substance, for example solvents, alcohol, sleeping pills or painkillers, it is likely that they will be drowsy or unconscious. If the person is drowsy, it is important to try to keep them awake by talking to them or applying a cool damp cloth or towel to the back of their neck. You should not give them anything to eat or drink as this could lead to vomiting or choking.
- If they are or become unconscious, put them into the recovery position, clear their airway if blocked and keep checking on any changes to pulse and breathing rates.
- If they stop breathing, begin mouth-to-mouth resuscitation, starting with chest compressions. (If you have not been trained in CPR or are worried about giving mouth to-mouth resuscitation to a stranger, you can do chest compression-only (or hands-only) CPR). Stay with the person until the ambulance crew arrive and then tell them all the facts, including what the person has taken. This is very important as it could save his or her life.
- If the person has taken a stimulant, such as amphetamines (speed) or ecstasy, they may show various signs of distress. If the person is panicking, try to reassure them. It is important that they calm down and relax. Get them to breathe in and out, deeply and slowly. Help them by counting aloud slowly. If they start to hyperventilate that is they can't control their breathing ask them to breathe in and out of a paper (not a plastic) bag, if there is one available.
- If the person has taken a hallucinogen, such as LSD, magic mushrooms or cannabis in combination with ecstasy, they may become very anxious, distressed and fearful. They may act in an unusual way. It is very important to reassure the person tell them that you will look after them, that they are in no danger, that it is the effects of the substance and that these will soon wear off. You may want to take them to a quiet place, keep other people away and continue to reassure them. Just stay with them and talk calmly to them until the ambulance arrives.

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