



**Romans Field School
Bradwell Village School
Priory Common School**

FEDERATION

Drug and Alcohol Policy

Last reviewed on: September 2022

Next review due: September 2023

This policy will be read in conjunction with the Federation’s Child Protection Policy, Behaviour Policy, Anti-bullying Policy, PSHE Policy and SMSC Policy.

INTRODUCTION

This policy aims to set out the Federation’s approach to teaching and learning about drugs and the management of situations involving drugs. The 2017 Drug Strategy drawn up in collaboration with health and justice practitioners, commissioners, academics, service users and the Advisory Council on the Misuse of Drugs (ACMD) has informed this policy. The national aims of the 2017 drug strategy are ‘to build a fairer and healthier society, to reduce crime, improve life chances and protect the vulnerable’.

The link between drugs and safeguarding are set out in the Modern Crime Prevention Strategy (Home Office, 2016) which states that drug-related and drug-enabled activities are key drivers of both new and traditional crime: the possession of illicit substances; the crimes committed to fund drug dependence; the production and supply of harmful substances perpetrated by serious and organised criminals alongside drug market violence associated with human trafficking and modern slavery. Drugs can also play a part in facilitating child sexual exploitation and abuse’. (2017 Drug Strategy). Drug misuse is common among people with mental health problems. (2017 Drug Strategy). The Modern Crime Prevention Strategy (2016) highlights alcohol, as with drugs, as a key driver of crime and sets out a range of actions to tackle alcohol-driven crime.

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 (see appendix A).

The Federation 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, carers and local community groups and agencies including the police.

THE DRUG EDUCATION CURRICULUM

The drug education programme within the school is mainly delivered as part of the PSHE 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.

A variety of learning and teaching approaches are used in PSHE 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. 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 the class team.

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 fulfill their professional responsibilities in relation to: child protection, cooperation with a police investigation or referral to an external service. Teachers 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 our designated safeguarding leads will be informed about concerns using our 'Cause for Concern' procedure. 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 a disclosure of illegal substance use by a pupil, parents/carers will be informed in all but the most exceptional circumstances.

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. Any suspected illegal drugs found, or confiscated, on the premises will be disposed of appropriately. The designated senior member of staff for drug related situations is the Executive Headteacher, Ms S Siva.

The following procedure will be used to response to an incident of drug or alcohol misuse.

- Initial response and recording of the situation.
- Inform the Executive Headteacher or a member of the Senior Leadership Team in the absence of the Executive Headteacher who will guide the investigation, ensure a written record is made including recording the incident on a behaviour incident form, and decide about any disposal.
- Consider responses, including whether to contact police – including possible disposal and further searching.
- Contact parents/carers/social workers.
- Consider contacting the Chair of Governors, LA and other support services e.g. Children and Family Practice.
- If appropriate seek advice from the MASH (for issues relating to children and the LADO (for issues relating to staff).
- Consider sanctions/support needs of pupil(s)/staff involved.
- Draw up and implement an 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 and child protection needs and will be dependent upon individual circumstances.

The Federation 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 a parent's or carer's intoxication then discussion will be held with the adult and consideration given to moving the pupil to a safer environment and/or alternative means of travel home.

HEALTH, SAFETY AND MEDICINES

Please see the Health and Safety Policy and Medicines 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 an appropriate manner. 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.

Legitimate solvents or hazardous chemicals must always be used carefully by school staff away from pupils and stored securely in the appropriate area and managed in a way to prevent inappropriate access or use. During the response to COVID-19, alcohol-based hand sanitisers will be carefully administered and used with pupils with care.

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

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

The Federation provides for the safe and secure storage of medicines (see also our Infection Control Policy):

- all adults are responsible for the secure storage of their own medication;
- there is a member of staff responsible for the secure storage of pupils' (prescribed) medication, both at school and on school visits;
- there are first aid kits on the school site as detailed in the Federation's First Aid and Medicines Policy.

Staff only administer medicines if written parental consent has been provided and agreed to by the school and the member of staff. All staff handling medicines have been trained to do this and there should always be two staff present when medicines are being administered.

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:

- move the child or young person as little as possible;
- put into the recovery position;
- ensure the mouth is open and unobstructed;
- keep them warm and quiet;
- monitor breathing, start artificial respiration if breathing stops or becomes shallow;
- apply chest compression if there is no heartbeat.

If staff have any suspicions that a pupil is intoxicated from inhaling a volatile substance, care should be taken to not overexcite or chase 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.

EDUCATIONAL VISIT/SOCIAL EVENTS

The Federation's Drug and Alcohol 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 consumption of alcohol and smoking by staff;
- adults should keep any personal medication in a safe and secure place;
- a nominated first aider will be responsible for the safe storage of any pupils' medicines and supervision of their administration (in line with the First Aid and Medication policy);
- 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 Policy will be enforced;
- the Federation 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 in moderation.

MONITORING AND EVALUATION

This policy will be monitored and evaluated by:

- analysing behaviour data;
- monitoring and reviewing of health related incidents and injuries;
- monitoring through lesson observations, work scrutiny and learning walks.

REVIEW

This policy will be reviewed annually.

APPENDIX A

THE 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.***

A to Z guide to common drugs - From alcohol to illegal drugs

Alcohol – Booze, Bevvies

Young people are usually aged between 13-14 when they have their first alcoholic drink without their parents' knowledge.

Effects - after a couple of drinks people can feel relaxed and less reserved. A few more drinks can make someone more talkative, cause their speech to become slurred and make them physically uncoordinated.

Problems - alcohol can become dangerous in large quantities. Long-term drinking can cause physical and mental damage. Being drunk can cause people to become more vulnerable to violence, theft and assault.

The law - at 18 it is legal to be sold alcohol.

Amphetamines - Speed, Billy, Whiz, Phet

Young people may use amphetamines at clubs and parties or at exam times and situations where they want more energy.

Effects - the drug makes users feel energised and excited. It also suppresses the appetite therefore people use it to help with dieting.

Problems - after effects can include mood swings, difficulty sleeping, tiredness, low energy levels. Long term usage can cause the user to feel depressed and paranoid.

The law - Class B drug possession means up to five years prison plus a fine. Supplying means maximum 14 years imprisonment and a fine

Cannabis - Dope, Hash, Weed, Pot, Skunk, Ganga, Zoot, Spliff, Green

This is sold as a hard or crumbly resin or as a dry herb. Buds of the cannabis plant contain more drug than the stalks and leaves. Is it usually smoked with tobacco in a roll up. There are lots of different types of cannabis, including Skunk, Sensimilia, Purple Haze, etc.

Effects - users feel relaxed, giggly and talkative.

Problems - can feel anxious, paranoid and forgetful.

The law - Class B drug possession means up to five years prison plus a fine supplying means maximum 14 years imprisonment and a fine

Cocaine and Crack - Coke, Charlie, White, Snow, Sniff, White Lady

Cocaine is bought as a white powder. It is normally sniffed but can be prepared for injection. Crack comes in the form of 'small rocks' and can be smoked and injected.

Effects - users feel confident and strong.

Problems - users become dependent on the drug and find themselves running into crime and violence due to the high price of it.

The law - Class A drugs possession means up to seven years in prison and a fine supplying can mean life imprisonment and a fine

Ecstasy - E, Beans, Pills, Doves, Apples

Ecstasy is common on the club scene.

Effects - energy, followed by calmness.

Problems - some people suffer from sickness and experience stiffening of arms and legs and in particular their jaw. Ecstasy-related deaths seem to be due to heatstroke from overheating in a club atmosphere as ecstasy can dehydrate the body, drinking too much fluid and high blood pressure.

The law - Class A drug possession means up to seven years in prison plus a fine supplying ecstasy can mean life imprisonment

GBL is a party drug which is particularly popular amongst university students, and can be fatal when taken with alcohol. It caused the death of 21 year old student Hester Stewart in Brighton in 2009. Its dangers were highlighted when 22 year old Mikaela Tyhurst revealed how her looks and health had been ravaged after taking GBL over the previous four years. Read more about teenage parties.

Effects - GBL has the same effects as GHB – which is also classified as a Class C drug and known as 'liquid ecstasy'.

Produces feelings of euphoria, reduce inhibitions and cause sleepiness.

Problems - potentially serious consequences when taken with alcohol or other depressant or sedative drugs.

The law - GBL was made illegal in December 2009. It is now classified as a Class C drug under the Misuse of Drugs act 1971. Anyone caught with this drug can get up to two years in prison or an unlimited fine.

Heroin - Smack, Junk, H, Brown, Gear, Skag

Comes as a white, greyish or brown powder. Often smoked it can also be injected or sniffed.

Effects - reduces physical and emotional pain and gives warm, drowsy feeling to allow users to forget their problems.

Problems - First time users are usually sick and it can take weeks/months to become 'hooked'. Overdosing on heroin is a major risk as street heroin is mixed with other substances. Overdose can mean falling into a coma or even death. Withdrawal symptoms can mean flu-like symptoms - sweating, shaking.

The law - Class A drug possession means up to seven years in prison plus a fine supplying can mean life imprisonment and a fine

Ketamine - Green, K, Special K, Super K

Powerful anaesthetic drug with medical uses which is usually sold as a white crystalline powder or tablet.

Effects - painkilling effects as well as altering perception. Low dose users might feel euphoric, and higher dose users might hallucinate.

Problems - numbness and unexpected muscle movements as well as feeling sick. Large doses can lead to unconsciousness.

The Law - Class C Drug possession can mean up to two years in prison and a fine supplying can mean 14 years imprisonment and a fine.

Khat - Qat, Quat, Chat

Khat is a leafy green plant and the leaves are chewed.

Effects - similar effects to Speed, more talkative and more energy, appetite suppressant.

Problems - can lead to insomnia and confusion. High use can lead to high blood pressure and heart palpitations.

The Law - Khat is now a class C drug which means that you can go to prison for two years for possession or much longer for dealing. It will also be an offence to bring Khat into the UK from other countries.

LSD - Acid, Tabs, Trips

Sold as small squares of paper with cartoon designs. These are swallowed and take up to half an hour to have an effect. A trip can last for as long as 12 hours.

Effects - drug changes the way that users see and hear things. There is heightened self-awareness and users can hallucinate.

Problems - 'bad trips' can be frightening. Users might feel anxious and accidents can occur when users are not in control of their faculties.

The law - Khat is now controlled as a Class C drug under the Misuse of Drugs Act.

Magic Mushrooms - Shrooms, Mushies, Magics

Generally only available during the autumn in the wild. They can be eaten either raw or cooked, made into a tea or smoked. 20 mushrooms would be a usual dose.

Effects - hallucination can occur. It takes around half hour to take effect and can last for as long as nine hours.

Problems - picking a poisonous mushroom by mistake.

The law - Class A drug possession can mean up to seven years in prison and a fine supplying can mean life imprisonment and a fine.

Mephedrone - Meow Meow, M-Cat, Drone, Bubbles, Bounce

Mephedrone (often called 'meow meow#') is a powerful stimulant and belongs to a group of drugs that are closely related to the amphetamines - including amphetamine itself (often called 'speed'), methamphetamine and ecstasy. There is very little evidence about mephedrone and what long-term effects it has, but there have reports of people hospitalised due to the short-term effects. Also, you can never be entirely sure that what you're buying is actually mephedrone and not something else.

Effects - Euphoria, alertness and feelings of affection towards the people around you, anxiety and paranoia, can also overstimulate your heart and circulation; and can overstimulate your nervous system, with risk of seizures.

Problems - Not enough long terms tests have been done. It is said to be highly addictive too. There were six deaths involving mephedrone reported in 2010 in England and Wales.

The law - Mephedrone is a Class B drug, so it's illegal to have for yourself, give away or sell.

Tobacco - Ciggies, Fags, Tabs

5% of thirteen year olds smoke a cigarette or more a week. Around 1/3 of older teenagers smoke on average more than 10 cigarettes a day.

Effects - first time smokers often feel sick and dizzy. One or two cigarettes increase pulse rate and blood pressure.

Problems - users quickly become physically dependant on cigarettes. Long-term smoking can result in heart disease, blood clots, heart attacks and lung infections.

The law - selling any tobacco products to anyone under 18 is illegal.

Volatile substances (solvents)

Used by younger teenagers, these are particularly dangerous as they can kill unpredictably, even first time users. Substances misused can include nail varnish removers, aerosols, butane gas, glues, petrol, dry cleaning fluid.

Appendix B

County lines (Extract from Keeping Children Safe in Education 2020)

County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs (primarily crack cocaine and heroin) into one or more importing areas [within the UK], using dedicated mobile phone lines or other form of “deal line”.

Exploitation is an integral part of the county lines offending model with children and vulnerable adults exploited to move [and store] drugs and money. Offenders will often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of victims. Children can be targeted and recruited into county lines in a number of locations including schools, further and higher educational institutions, pupil referral units, special educational needs schools, children’s homes and care homes. Children are often recruited to move drugs and money between locations and are known to be exposed to techniques such as ‘plugging’, where drugs are concealed internally to avoid detection. Children can easily become trapped by this type of exploitation as county lines gangs create drug debts and can threaten serious violence and kidnap towards victims (and their families) if they attempt to leave the county lines network.

One of the ways of identifying potential involvement in county lines are missing episodes (both from home and school), when the victim may have been trafficked for the purpose of transporting drugs and a referral to the National Referral Mechanism¹⁰³ should be considered. If a child is suspected to be at risk of or involved in county lines, a safeguarding referral should be considered alongside consideration of availability of local services/third sector providers who offer support to victims of county lines exploitation.

Further information on the signs of a child’s involvement in county lines is available in guidance published by the Home Office.

Appendix C (Extract from Home Office guidance - updated September 2018)

A young person who is involved in county lines activity might show some of these signs:

- persistently going missing from school or home, or being found out-of-area;
- unexplained acquisition of money, clothes or mobile phones;
- excessive receipt of texts or phone calls;
- relationships with controlling, older individuals or gang association;
- parental concerns, and leaving home or care without explanation;
- suspicion of self-harm, physical assault or unexplained injuries;
- significant decline in school performance and changes in emotional well-being.