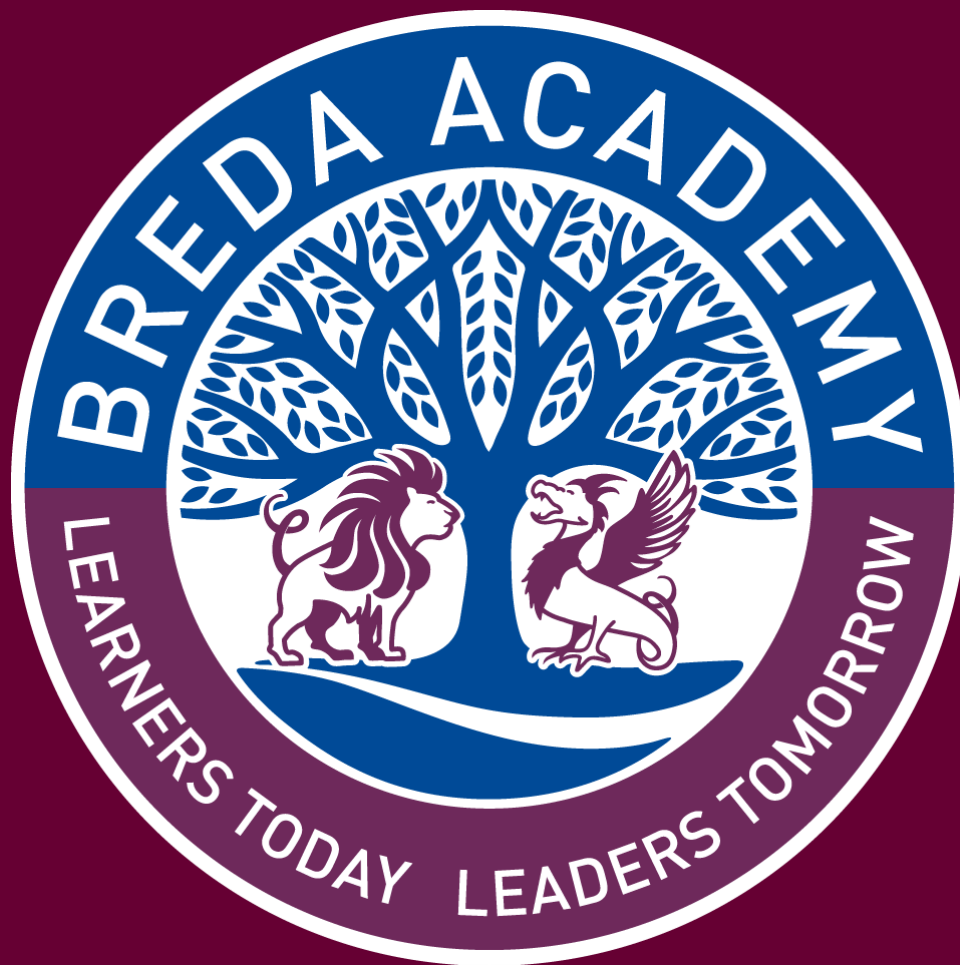


# **DRUGS EDUCATION POLICY**



**BREDA ACADEMY**

## **RATIONALE**

In today's society, most people will be exposed to and/or use some sort of drug at some time in their lives. Substance misuse affects all communities in Northern Ireland, crossing gender, cultural and social boundaries. No school, parent or carer can afford to be complacent or think that children and young people are not at risk.

Research continues to show that by post-primary school age a significant number of young people are engaging with substances such as alcohol, cigarettes, including electronic cigarettes, or solvents and/or have misused prescribed medicines or other substances.

In Breda Academy, we recognise that our students, based on this evidence, may have experiences with substances, including tobacco and tobacco-related products, electronic cigarettes, alcohol, New Psychoactive Substances (NPS), illegal drugs, volatile substances and prescribed medications.

With this in mind, we have an important role to play in enabling our young people to make informed and responsible decisions and helping them to cope with living in an increasingly substance-tolerant society.

Through our drugs education programme, it is our aim to promote opportunities for those under the age of 18 years to develop appropriate skills, attitudes and behaviours to enable them to resist societal pressures to drink alcohol and/or misuse drugs', with particular emphasis on those identified as potentially vulnerable, to reduce the harm that substance misuse causes in our community and in Northern Ireland as a whole.

Breda Academy, like all schools in Northern Ireland, has a statutory obligation to have a Drugs Education Policy and to deliver drugs education through the Personal Development (PD) strand of Learning for Life and Work. This statutory policy is in accordance with Drugs: Guidance for Schools in Northern Ireland Revised Edition 2015 and follows guidance in the CCEA Drug Education Policy Document.

## OUR SCHOOL ETHOS

Breda Academy aims to be a safe, caring community of life-long learners where positive relationships based on courtesy, commitment and co-operation, enable young people to develop their skills, resilience and confidence for success in life and society.

We actively promote and encourage a positive teaching and learning environment where everyone is expected to work hard and behave in a responsible manner by displaying consideration and respect for others at all times.

Breda Academy aims to be a school where all students are confident they can;

- **Be Safe**
- **Be Polite**
- **Be Ready** for learning

and feel and actively be part of our school community #thisiscommunity #proudtobebreda.

Our ethos underlines the need to keep our students and staff safe, in a mutually respectful community, with opportunities to provide knowledge and skills to make healthier choices and reduce problematic behaviour and risk.

There is also good liaison with parents/carers, outside agencies and specialist services to advise, support and contribute to the promotion of health within the school.

## DEFINITIONS OF TERMINOLOGY IN THIS POLICY

For the purpose of Breda Academy's Drug Education 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.

\*The term legal high is no longer used because it is misleading as the public may have 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**

These 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**

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

### **Drug Misuse**

This 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

## **AIMS AND OBJECTIVES**

*'The purpose of a Drugs Education Programme, is to provide opportunities for young people to acquire knowledge, understanding and skills which enable them to consider the effects of drugs and other substances on themselves and on others. It enables them to make informed and responsible decisions about the use of such substances within the context of a healthy lifestyle.'* [DENI Misuse of Drugs - 1996]

With this in mind, the primary aim of this policy is to protect our young people from the harm associated with the use and misuse of substances. The desired outcome of the drugs education programme is to enable our students to make healthy informed choices.

To support this aim, this policy plays an important role in;

- developing a consistent approach to drug-related issues in line with the school's pastoral care provision that all members of the school community can adopt;
- developing, implementing and reviewing a drugs education programme as part of the provision of PD within the curriculum;
- developing procedures and protocols that address drug-related issues across all areas of school life;
- establishing procedures for managing specific incidents of suspected drug misuse; and
- monitoring and evaluating the effectiveness of the policy in line with whole-school self-evaluation procedures.

## **LAW IN NORTHERN IRELAND**

All staff are aware of their responsibilities under the law. The law in Northern Ireland differs in certain aspects from elsewhere in the UK. The relevant pieces of legislation are Section 5 of the Criminal Law Act (Northern Ireland) 1967, The Misuse of Drugs Act 1971 and Powers of Arrest and the Police and Criminal Evidence Order (Northern Ireland) Order 1989).

If the Principal has reasonable grounds to suspect that drugs are being used or supplied on the school premises, he will inform the PSNI immediately in order to avoid any liability as a 'manager or occupier' of premises.

If staff have taken possession of a substance for the purposes of protecting a student from harm and from committing an offence, they should under no circumstance try to analyse or identify it. In all instances they should wear gloves when handling the substance, to avoid ingestion through the skin. The drug should be immediately stored in a safe and secure place, and the police contacted.

## **MISUSE OF DRUGS ACT (1971)**

It is an offence under the Misuse of Drugs Act (1971):

- to supply or offer to supply a controlled drug to another in contravention of the Act;
- to be in possession of, or to possess with intent to supply to another, a controlled drug in contravention of the Act;
- it is a defence to the offence of possession that, knowing or suspecting it to be a controlled drug, the accused took possession of it for the purpose of preventing another from committing or continuing to commit an offence and that as soon as possible after taking possession of it he/she took all such steps as were reasonably open to him/her to destroy the drug or to deliver it into the custody of a person lawfully entitled to take custody of it;
- 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.

**The offences listed above are arrestable offences.**

### **Section 8**

A person commits an offence if, being the occupier or concerned in the management of any premises, he/she knowingly permits or suffers any of the following activities to take place on those premises, that is to say:

- producing or attempting to produce a controlled drug in contravention of section 4 (1) of this Act;
- supplying or attempting to supply a controlled drug to another in contravention of section 4 (1) of this Act, or offering to supply a controlled drug to another in contravention of section 4 (1) of this Act;
- preparing opium for smoking;
- smoking cannabis resin or prepared opium.

### **CRIMINAL LAW ACT (NORTHERN IRELAND) 1967 Section 5**

Failing to give information. Where a person has committed an arrestable offence, it shall be the duty of every other person who knows or believes:

- that the offence or some other arrestable offence has been committed; and
- that he/she has information which is likely to secure, or to be of material assistance in securing, the apprehension, prosecution or conviction of any person for that offence;
- to give that information, within a reasonable time, to a constable and if, without reasonable excuse, he/she fails to do so then that person is committing an offence.

This places an onus on individuals to inform a Constable.

## POLICE AND CRIMINAL EVIDENCE (PACE) NORTHERN IRELAND ORDER 1989

### Article 26 (4)

Any person may arrest without warrant

- anyone who is in the act of committing an arrestable offence;
- anyone whom he/she has reasonable grounds for suspecting to be committing an offence.

### Article 26(5)

Where an arrestable offence has been committed, **any person** may arrest without warrant. These powers of arrest are available to non-police and, as the following drug offences fall within the definition of Arrestable Offence, are available for use in such circumstances:

- Possession of Controlled Drugs;
- Possession of Controlled Drugs with Intent to Supply; and
- Supply of Controlled Drugs.

It should be noted that the above information is advisory only and does not represent legal opinion.

## ROLES, RESPONSIBILITIES AND LEGAL DUTIES OF THE SCHOOL COMMUNITY

### The role of the individual staff member (teaching and non-teaching) including all ancillary staff

All staff should be familiar with the content of the 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:

- 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 students and staff, if necessary (**see Appendix 4**);
- forward any information, substance or paraphernalia received to the designated teacher for drugs, who will respond accordingly (**see Appendix 2**);
- 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 2**);
- consider the needs and safety of a student 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 and, if concerned, should discuss with the parent alternative arrangements for caring for the student); and

- invoke safeguarding procedures, if a parent or carer's behaviour may place a student at risk (**see Appendix 1.5**).

### **The Role of the Head of Learning for Life and Work**

The Head of LLW is the member of staff responsible for co-ordinating all issues pertaining to drug education programme within the school.

The role includes:

- ensuring that the Learning for Life and Work programme of study is being taught effectively;
- liaising with all staff on drug education matters, for curriculum purposes;
- organising training for staff as appropriate; and
- liaising with outside agencies for curriculum purposes.

### **The role of the Designated Teacher for Drugs**

In Breda Academy, the Designated Teacher with Responsibility for Drugs is Mrs G Scott who has procedures in place for handling cases of suspected drug misuse on the premises. Every member of the school's staff, both teaching and non-teaching, should be completely familiar with their school's procedures and know who to contact and what to do when a young person is suspected either of being in possession of drugs or being under the influence of drugs, including alcohol.

The designated teacher is responsible for:

- co-ordinating the school's procedures for handling suspected drug-related incidents and training and inducting new and existing staff in these procedures;
- ensuring that the school's disciplinary policy has an appropriate statement about any disciplinary response resulting from suspected drug-related incidents;
- ensuring that the school's pastoral care policy has an appropriate statement about any pastoral response resulting from suspected drug-related incidents;
- liaising with other staff responsible for pastoral care;
- being the contact point for outside agencies that may have to work with the school or with a student or students concerned;
- responding to advice from first aiders, in the event of an incident, and informing the principal, who should contact the student's parents or carers immediately;
- taking possession of any substance(s) and associated paraphernalia found in a suspected incident;



- student(s) involved in a suspected incident;
- completing a factual report using the schools Drug-Related Incident Form (**See Appendix 2**), which they forward to the principal; and
- reviewing and if required updating the policy at least annually and after a drug-related incident, where learning from the experience could improve practice.

In view of the responsibilities involved, the designated teacher is member of the school's senior management. In the absence of the designated teacher, the recognised deputies in Breda Academy are Mr Perry (Principal) and Mr Carrick (Vice-Principal).

### **The role of the Principal**

It is the Principal's responsibility to determine the circumstances of all incidents, but it is the responsibility of the PSNI to investigate any criminal or suspected criminal offence. In any suspected drug-related incident, the principal should contact the parents or carers of those students involved. The Principal must ensure that in any incident involving a controlled substance there is close liaison with the PSNI. Failure to inform the PSNI of a suspected incident involving controlled drugs is a criminal offence. After contacting the PSNI, the Principal should confine their responsibilities to:

- the welfare of the student(s) involved in the incident and the other students in the school;
- health and safety during the handling, storage and safe disposal of any drug or drug-related paraphernalia, using protective gloves at all times;
- informing the Board of Governors;
- agreeing any appropriate pastoral or disciplinary response;
- reporting the incident to the Education Authority for example if an incident: – is serious enough to require PSNI involvement; – requires that a child protection procedure is invoked; or – leads to the suspension or exclusion of a student; and
- completing a written report and forwarding a copy to the Board of Governors and the designated officer in the Education Authority.

### **The role of the Board of Governors**

School governors are responsible for their individual school. They should collaborate with appropriate staff, students and parents or carers to foster and support developing and reviewing its drugs policy. They should also:

- facilitate the consultative process where the school community can respond and contribute to the policy's effectiveness and quality, which the governors should examine and approve before implementing in the school;

- ensure details of the policy are published in the school prospectus and that these are reviewed at least annually and after a drug-related incident; and
- be fully aware of and adequately trained to deal with suspected drug-related incidents, including alcohol and tobacco, tobacco-related products, electronic cigarettes, and their appropriate disciplinary response.

As a matter of good practice, in Breda Academy the designated governor for drugs who has received specific training in drug-related issues is Reverend Green.

## **DRUGS EDUCATION IN THE CURRICULUM**

Drugs Education should not be seen as a one-off topic but as a continuous process which involves the development of skill and attitudes enabling students to make informed decisions. Effective drugs education should take account of not only the individual, but also the family, their peer group and the wider community. Where possible, the school promotes the partnership between the parent and child, when addressing such issues.

Drugs Education is therefore a whole staff issue. Breda Academy ensures that staff are regularly updated with changes in the curriculum and changes to the policy. Where possible, staff receive in-service training on drug issues.

In Northern Ireland, the statutory curriculum for young people includes the cross-curricular theme of Health Education. This theme provides opportunities for young people to develop their knowledge and understanding of the use, misuse, risks and effects of drugs, and other potentially harmful substances, their effects on health and lifestyle, and the personal, social and economic implications.

Drugs Education is specifically included within the Revised Curriculum as part of Personal Development.

In Breda Academy, the Head of Department in each relevant subject area is responsible to ensure that the aspects of Drug Education outlined in the Revised Curriculum are covered, and this is taught by subject specialists.

In Breda Academy, Drugs Education is specifically included in the Personal Development Programme, Learning for Life and Work Programme and OCN Personal Development qualification (Key Stage 4) across Key Stages 3, 4 and 5. A life skills approach to drug prevention is essential and students are taught about raising self-esteem and self-confidence to prepare them for making informed decisions about drug taking and use, the main focus being on knowledge, attitudes and values.

The programme is supported, at times, by education and health professionals from outside agencies or individuals in the wider community. Visitors from the wider community can bring their specialist knowledge, expertise and experience into the classroom setting and offer a new approach, which students often welcome. Staff may equally benefit from the most up-to-date information on this topic. This also increases the students' knowledge of the services available in the local community and how to access these.

Such agencies or individuals must respect the ethos of our school and are liable to verification by the Principal and Board of Governors, as to their suitability for our school and students. Safeguarding procedures must also be followed. Staff responsible for organising this extra-curricular support should prepare students for the visit, check with the methodologies being used and evaluate the session or sessions. Breda Academy staff should also ensure that staff from the agency have been vetted in relation to Child Protection.

Consultation with parents/carers is also recommended to let them know what is going on and this further strengthens links between home and school.

## **PROCEDURES FOR MANAGING SUSPECTED DRUG-RELATED INCIDENTS**

**A suspected drug related incident is described as:**

- Suspect drugs or substance-related paraphernalia is found on the school premises;
- A student suspected of being in possession of drugs;
- A student found to be in possession of drugs;
- A student found suspected of possession with intention to supply any substances listed on pages 2 and 3
- A student is suspected of being under the influence of drugs because of their unusual or uncharacteristic behaviour **(See appendix 3 for Recognising Signs of Substance Use)**.

**When an incident occurs the member of staff involved should:**

- Assess the situation;
- Notify the Principal and designated teacher for drugs at the earliest opportunity;
- Make the situation safe;
- Send for support;
- Administer first aid if necessary;
- If a controlled drug is found it should be secured in a safe place until dealt with by the police;
- Complete the school's Drug Incident Report Form **(See Appendix 2)** and forward to the designated teacher for drugs;
- Consider the needs and safety of the student 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. discuss with the parent alternative arrangements for caring for the student **(See Appendix 1.5)**;
- invoke safeguarding procedures, if a parent or carer's behaviour may place a student at risk.

The incident will be in the first incidence reported to the Designated Teacher Mrs Scott, Vice-Principal (Pastoral) and then to the Principal, who will contact the PSNI. The parents/carers will also be contacted and made aware of the situation, unless advised to the contrary by the PSNI. The incident will be recorded by the member of staff involved and by the designated teacher. A 'Drug Incident Record Form' **(See Appendix 2)** will be filled out. One copy will be sent to the Education Authority - South Eastern Region designated officer for Drug Education, and a copy will be retained for the school's confidential file. The Board of Governors will also be informed.

All staff are made aware of the procedure, which follow the guidelines issued by CCEA 2015 in the document '**Guidelines on Handling Suspected Incidents of Drug Misuse on School Premises**'. This is outlined in **Appendix 1** of this policy.

Taking possession of a suspected controlled substances and/or associated paraphernalia. The law permits school staff to take temporary possession of a substance suspected of being a controlled drug to protect a student from harm and prevent the student from committing the offence of possession. It should be given to the designated teacher for drugs for safe-keeping before being handed over to the PSNI. An adult witness should be present when staff confiscate the substance and the school should keep a record of the details, using the school's Drug's Incident Report Form. No attempt should be made to analyse or taste an unidentified substance.

## **CARRYING OUT A SEARCH**

If the designated teacher for drugs receives an allegation of possession, he or she may need to search a student's desk or locker, if he or she has cause to believe it contains unlawful items, including controlled drugs. However, teachers cannot search personal belongings in the desk or locker without consent. Staff should only search the student's personal belongings, including schoolbag, coat or other items with the student's consent. Staff should carry out this search in the presence of the student and another adult witness.

## **EMERGENCY PROCEDURES**

For the purpose of this policy, an emergency is considered to be either;

- a situation in which a student or member of staff is in danger, or;
- a sequence of events which requires urgent attention.

A flowchart for dealing with emergencies is contained in **Appendix 4** of this policy.

## **CONFIDENTIALITY**

The spirit of confidentiality is of primary importance to those who work professionally with young people in a trusting and secure environment. However, the legal requirements of drug legislation will mean that in certain circumstances there will be a change in the convention of confidentiality. The Children (Northern Ireland) Order (1995) makes it clear that the welfare of the young person is paramount and therefore confidentiality must be included.

Where a student discloses to a member of staff or the school counsellor that he or she is taking drugs, the teacher should make it clear that **he or she can offer NO guarantee of confidentiality** and the staff member must pass this on to the designated teacher for drugs. The member of staff or school counsellor can direct the student to sources of confidential information and advice (**See Appendix 6**). The Designated Teacher for Drugs shall also be able to arrange support from external agencies. Students should also be encouraged to talk to their parents/carers.

## DISCIPLINARY AND PASTORAL CARE RESPONSES

Disciplinary procedures will be carried out in line with the Positive Behaviour Policy. Each case will be treated separately, with the sanctions and actions in the best interests of the student or students involved carefully considered in the longer term, while ensuring the safety and well-being of other students.

However, Breda Academy views the possession, use of or supply of controlled substances as a serious breach of the discipline code and sanctions will reflect this.

## PROVISION OF COUNSELLING SERVICES IN SCHOOL

Counselling rarely focuses on drug misuse alone. It can consider more holistic needs that may underlie or indicate drug-related problems, for example the 'toxic three':

- hidden harm, where a young person is affected by their parents' or carers' substance misuse;
- domestic violence; or
- parental mental health.

Counselling is only appropriate when a student wishes to take advantage of what it offers. The Independent Counselling Service for Schools (ICSS), funded by DE, offers a free school-based service to post-primary aged students in mainstream and special schools. Students can refer themselves or a parent or member of school staff can refer them. **See Appendix 5 for the Referral Pathway for Specified School Incidents and Appendix 6 for support Services available for Parents/Carers.**

The school counsellor, where present, and/or the school's pastoral lead may assess appropriate support needs for individual students and identify who is in the best position to meet these.

The student's consent must always be sought before referring them for counselling/support and confidentiality in line with the school's Child Protection and Safeguarding Policy should be explained.

## LINKS WITH PARENTS, THE COMMUNITY AND THE POLICE

Parents/carers play a supportive role in the drugs education programme. They are encouraged to discuss drug issues with their child whenever possible. The drugs education policy will be available for consultation and on the school website. The school endeavours to work closely with the local community to help reduce the number of drug-related incidents.

Breda Academy has developed good working relationships with the local community PSNI and other external support agencies. This helps to ensure that if a drug-related incident is reported, it will be dealt with in a professional and discrete manner, and in keeping the best interests of the student concerned in mind. Community Support PSNI Officers offer advice and support when it is needed.

**(See Appendix 7).**

## DEALING WITH THE MEDIA

If the school receives an enquiry from the media, the caller should be referred **only to the Principal**.

## PROCEDURES FOR HANDLING ALCOHOL MISUSE

The school premises are an alcohol free zone. The school does not allow any alcohol to be brought onto or consumed in school premises. This applies to visitors, staff and students. Adults breaking this rule will be referred to the Principal directly. Students breaking this rule will be dealt with under the school's Positive Behaviour Policy.

When attending school functions or on school trips, Senior students (aged 18) and staff must always behave in an appropriate manner, remain fully in control and not jeopardise the safety or reputation of themselves or the school.

## **PROCEDURES FOR HANDLING TOBACCO MISUSE**

The school is a restricted environment with no-one being permitted to smoke on the school premises. Visitors are not permitted to smoke whilst in the building. This includes the smoking of electronic cigarettes. Adults breaking this rule will be advised by other members of staff.

Students breaking this rule will be dealt with under the school's Positive Behaviour Policy.

## **THE MANAGEMENT OF PRESCRIBED MEDICINES**

At the beginning of the year or on entry to schools, parents/carers must complete, or update, a medical form indicating any medical illness their child has. The management of prescribed medicines is set out in the Medications and Medical Conditions Policy.

Before embarking on school trips, the teacher-in-charge should have in place a procedure with regard to the storage and administration of medication, as part of the trip risk assessment. They must also make it clear at the outset, to students and parents, the procedure for dealing with a student found smoking, including using electronic cigarettes, drinking alcohol, or misusing drugs whilst on the school trip.

## **THE MANAGEMENT OF SOLVENTS**

Students are not permitted to bring solvents or aerosols into school. This includes correction fluid, thinners, glue, marker pens and spray deodorants. Students are permitted to bring felt tip pens to school.

All members of staff are responsible for the safe storage and usage of solvents in their classroom. Where possible they should be locked away when not in use. The cleaners and caretakers should also ensure that their stores are locked when not in use and that solvents are held in a secure place.

## **MONITORING AND EVALUATING**

The school Drug Education Policy is reviewed every three years to reflect changing circumstances and trends in drug use and this involves input from parents/carers and ratification from the Board of Governors. Amendments to the policy will be communicated to all staff and staff training organised, as required. All new staff are required to be familiar with the policy and procedures, as with other Child Protection and Safeguarding-related policies. An abridged summary for substitute staff on how to deal with a drugs-related incident will be available in the substitute teacher pack.

Monitoring and evaluation of the policy and associated procedures, in particular post-incident reviews, will be the responsibility of the Designated Teacher for Drugs, Deputy Designated Teacher for Drugs, the

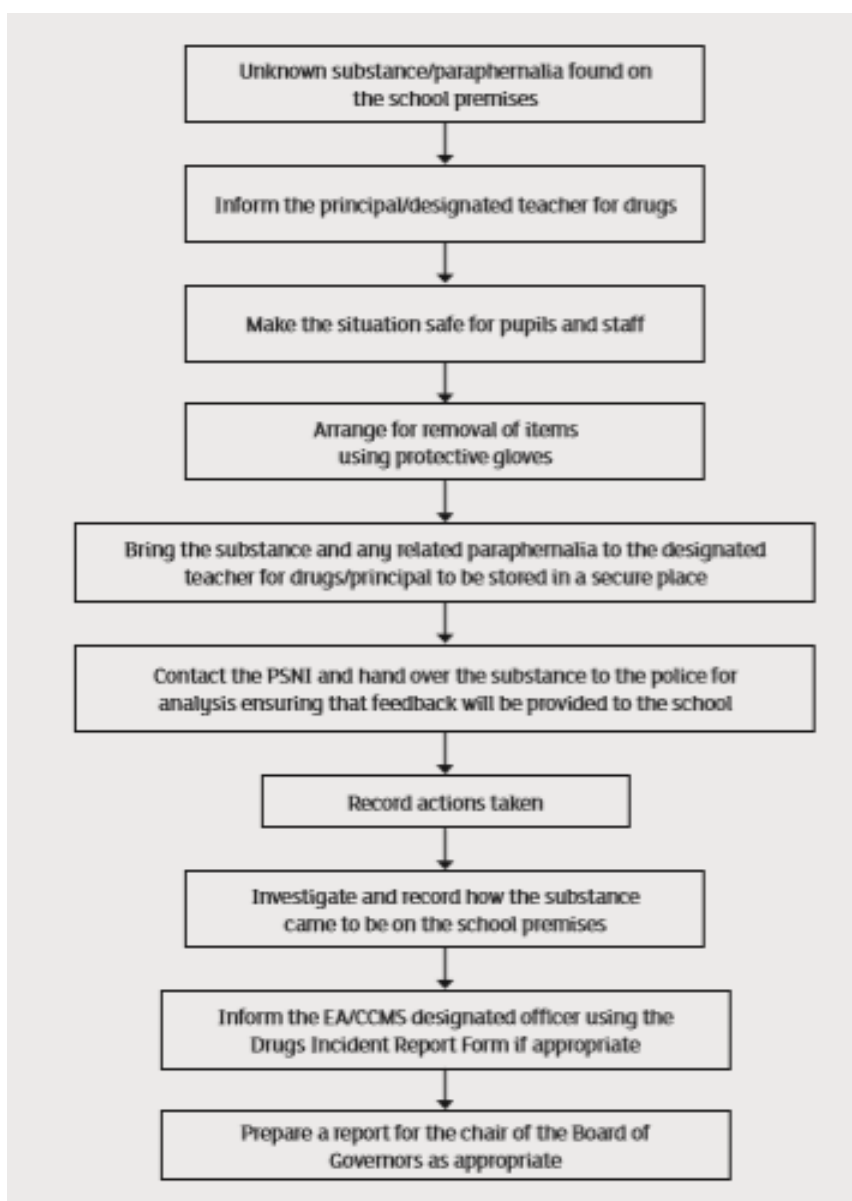
Principal and Designated BOG for drugs. This will be part of the whole-school monitoring and evaluation process.

The programmes of study for drug education are continually reviewed and any changes are implemented and communicated directly to the staff involved in the delivery of the PD programmes by the Head of LLW or relevant Pastoral Leaders. Staff training may be arranged following these amendments. Staff will also provide opportunities to gather feedback from students following class activities or group events involving outside agencies.

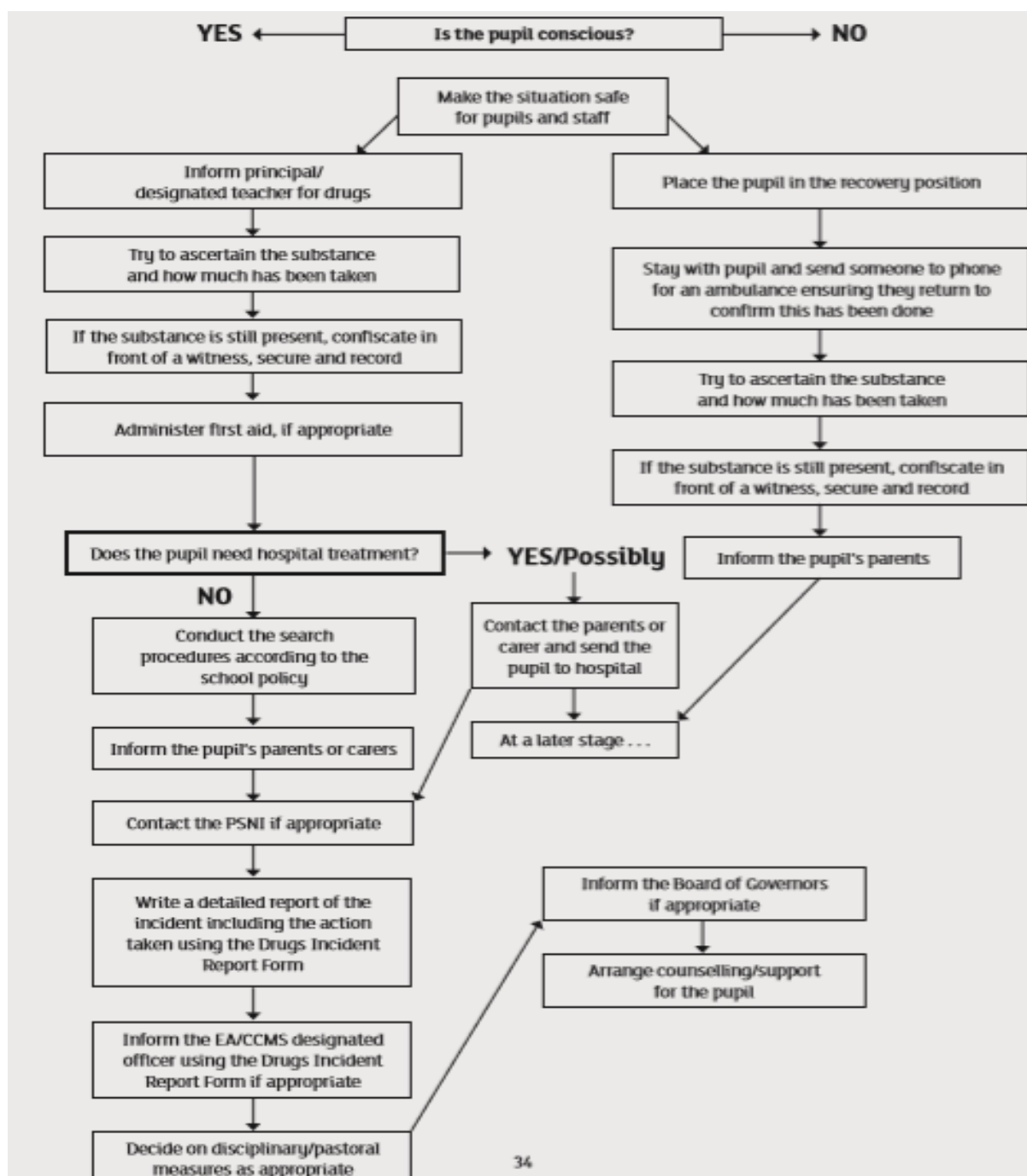
The policy is available to parents/carers on the school website and a copy may be provided, on request.

## Appendix 1 Handling Drug-Related Incidents

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

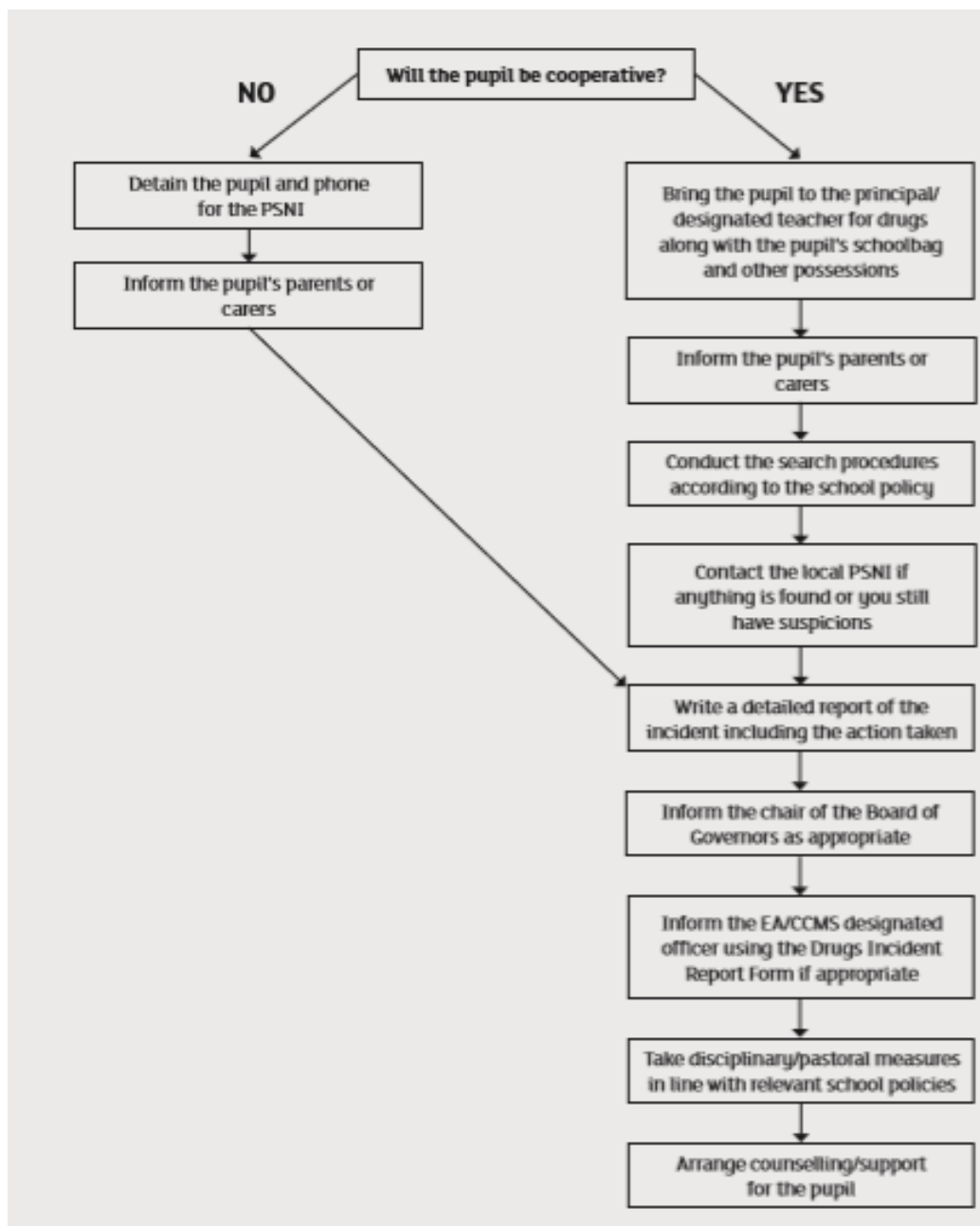


## 1.2 Student suspected of having taken drugs/alcohol on school premises.

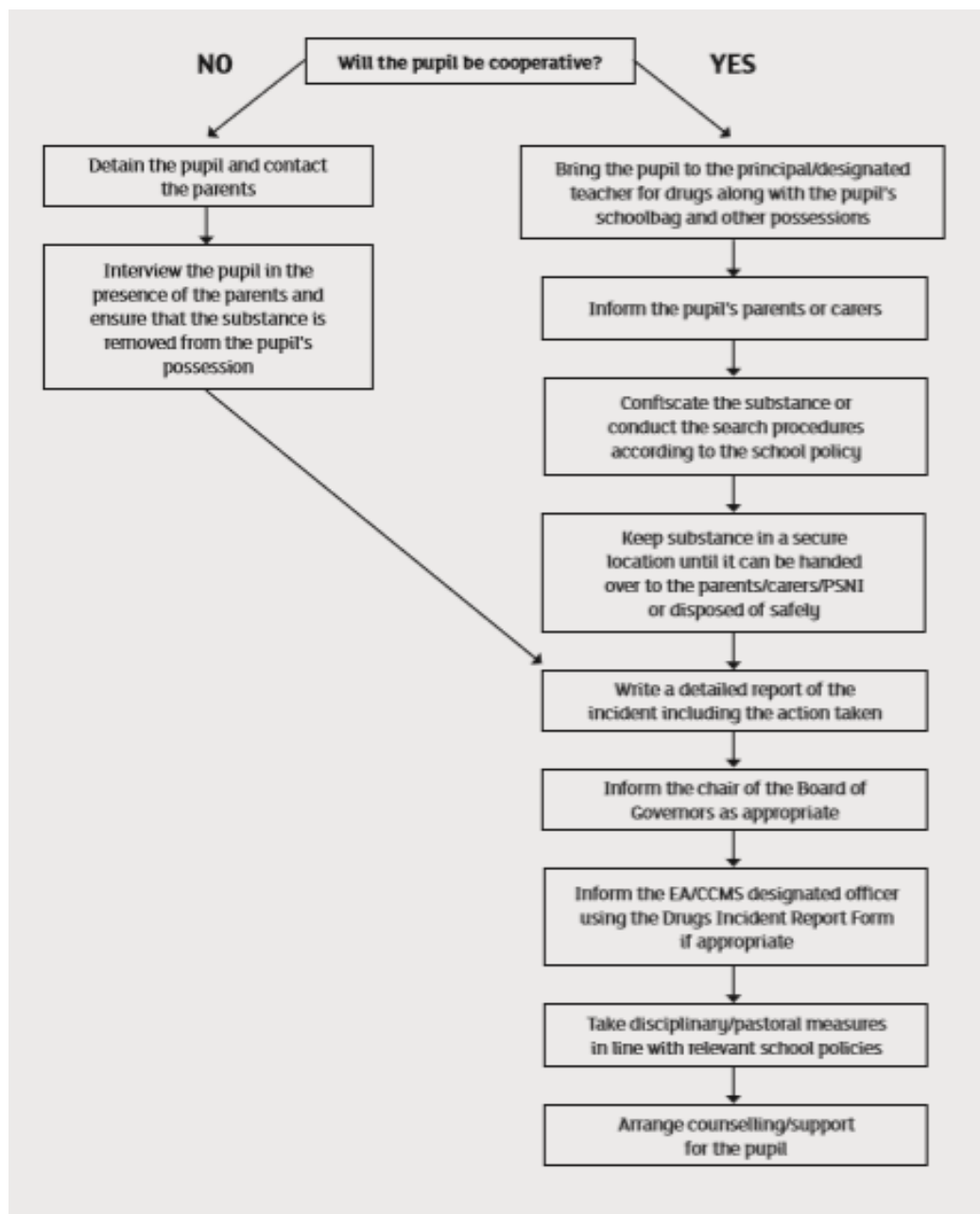




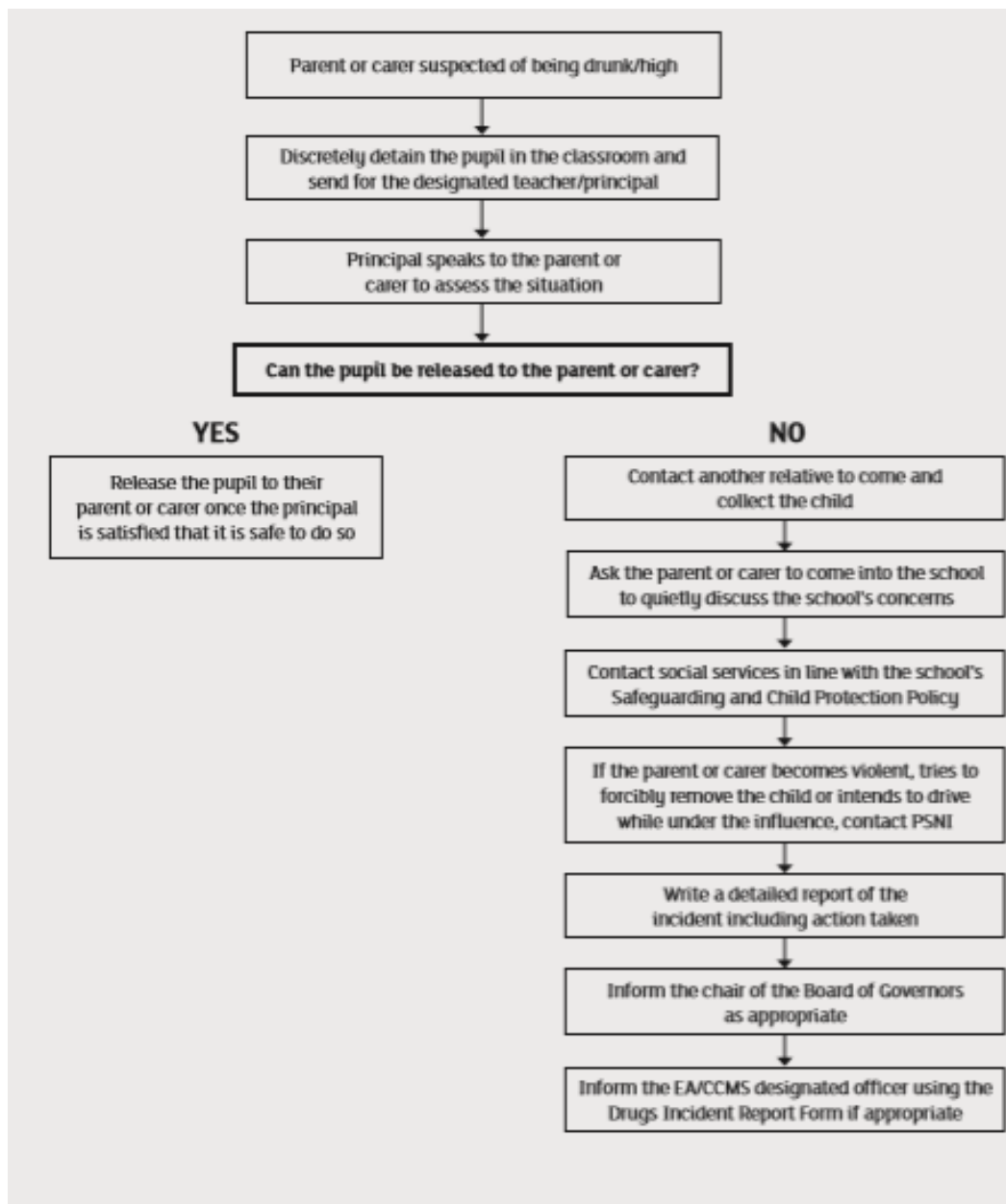
### 1.3 Student suspected of possessing/distributing an illegal substance.



#### 1.4 Student in possession of alcohol or unauthorised prescribed medication on the school premises.



**1.5 A parent or carer arrives at school to collect a child and appears to be under the influence of alcohol or another substance**



## Appendix 2 Drugs Incident Report Form

1.	Name of Pupil _____ DOB _____ Address _____ _____
2.	Date of Incident _____ Reported by _____ Time of Incident _____ Location of Incident _____ _____
3.	First Aid given YES/NO Administered by _____ Ambulance/Doctor Called YES/NO Time of Call _____
4.	Parent or carer informed YES/NO Date _____ Time _____
5.	Where substance is retained _____ or Date substance destroyed or passed to PSNI _____ Time _____
6.	PSNI informed YES/NO Date _____ Time _____
7.	Education Authority or CCMS Designated Officer informed, as appropriate YES/NO Date _____ Time _____
8.	Form completed by _____ Date _____ Position _____

**Description of the Incident**

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**Actions taken**

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**Incident form completed by**

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**Date**

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## Appendix 3 Recognising Signs of Substance Misuse

### 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.

## Appendix 4 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.

## Appendix 5 Referral Pathway for Specified School Incidents

Type of incident:

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Internal Staff referral:

Refer incident to:

a. \_\_\_\_\_

b. \_\_\_\_\_

External agency referral:

Contact details of relevant agencies or personnel.

Name of Agency _____
Name of contact _____
Address _____
_____
Relevant Details _____
_____
Contact number _____
Email address _____

Name of Agency _____
Name of contact _____
Address _____
_____
Relevant Details _____
_____
Contact number _____
Email address _____

Name of Agency _____
Name of contact _____
Address _____
_____
Relevant Details _____
_____
Contact number _____
Email address _____

Name of Agency _____
Name of contact _____
Address _____
_____
Relevant Details _____
_____
Contact number _____
Email address _____



## Appendix 6 Useful Contacts in Northern Ireland

Education Authority (formerly Education and Library Boards)		
Belfast Region	Tel: 028 9056 4000	<a href="http://www.belb.org.uk">www.belb.org.uk</a>
North-Eastern Region	Tel: 028 9448 2200	<a href="http://www.neelb.org.uk">www.neelb.org.uk</a>
South-Eastern Region	Tel: 028 9056 6200	<a href="http://www.seelb.org.uk">www.seelb.org.uk</a>
Southern Region	Tel: 028 3751 2200	<a href="http://www.selb.org">www.selb.org</a>
Western Region	Tel: 028 8241 1411	<a href="http://www.welbni.org">www.welbni.org</a>

Diocesan Advisers		
Diocesan Advisers provide support for maintained schools, you can contact them at the Diocesan Offices below: The Council for Catholic Maintained Schools (CCMS)	Tel: 028 9042 6972	<a href="http://www.onlineccms.com">www.onlineccms.com</a>

Department of Education		
The Department of Education has produced information and sources of help on a range of topics, including smoking and drugs, as part of the iMatter programme.		<a href="http://www.deni.gov.uk">www.deni.gov.uk</a>

Independent Counselling Service for Schools		
The Department of Education funds the Independent Counselling Service for Schools (ICSS). It is available to all post-primary aged pupils, including those in special schools, during school hours and on school premises. Contact is through the school.	Tel: 028 9127 9729 for further information from the ICSS Regional Co-ordinator	

Health and Safety		
The Health and Safety Executive	Tel: 028 9024 3249 for Northern Ireland (HSENI)	<a href="http://www.hseni.gov.uk">www.hseni.gov.uk</a>

Public Health Agency for Northern Ireland		
The Public Health Agency (PHA) is a regional organisation that aims to protect and promote the health and well-being of the population. It was established in April 2009 as part of the reforms to Health and Social Care (HSC) in Northern Ireland. The PHA addresses the causes and associated inequalities of preventable ill health and lack of well-being. It is a multidisciplinary, multi-professional body with a strong regional and local presence. The PHA is responsible for commissioning services to address alcohol, tobacco and drug issues across Northern Ireland.		<a href="http://www.publichealth.hscni.net">www.publichealth.hscni.net</a>

Local Drug and Alcohol Co-ordination Teams		
Contact details for local services in the Local Service Directories prepared by the DACTs		<a href="http://www.publichealth.hscni.net">www.publichealth.hscni.net</a>

Police Service for Northern Ireland (PSNI)		
Drugs Squad	Tel: 028 9065 0222	
Community Involvement	Tel: 028 9070 0964	
Crimestoppers	Tel: 080 0555 111	

Treatment, Counselling and Support Agencies		
Health and Social Care Organisations		<a href="http://www.publichealth.hscni.net">www.publichealth.hscni.net</a>
Family Support NI		<a href="http://www.familysupportni.gov.uk">www.familysupportni.gov.uk</a>
Children and Adolescent Mental Health Services, Belfast		<a href="http://www.belfasttrust.hscni.net">www.belfasttrust.hscni.net</a>

Local Organisations		
A list of local organisations that provide information and advice and/or resources about drugs.		<a href="http://www.mindingyourhead.info">www.mindingyourhead.info</a>
		<a href="http://www.fasaonline.org">www.fasaonline.org</a>
		<a href="http://www.talktofrank.com">www.talktofrank.com</a>
		<a href="http://www.thesite.org/drinkanddrugs">www.thesite.org/drinkanddrugs</a>
		<a href="http://www.nhs.uk/Livewell/Pages/Topics.aspx">www.nhs.uk/Livewell/Pages/Topics.aspx</a>

## National Organisations

A list of national organisations that provide information and advice and/or resources about drugs:		
Adfam, London		<a href="http://www.adfam.org.uk">www.adfam.org.uk</a>
Action on Smoking and Health (ASH), London		<a href="http://www.ash.org.uk">www.ash.org.uk</a>
Alcohol Concern, London		<a href="http://www.alcoholconcern.org.uk">www.alcoholconcern.org.uk</a>
CAMH, UK		<a href="http://www.camh.org.uk">www.camh.org.uk</a>
FRANK, UK		<a href="http://www.talktofrank.com">www.talktofrank.com</a>
Drugscope, London		<a href="http://www.drugscope.org.uk">www.drugscope.org.uk</a>
HIT, Liverpool		<a href="http://www.hit.org.uk">www.hit.org.uk</a>
Lifeline, Manchester		<a href="http://www.lifeline.org.uk">www.lifeline.org.uk</a>
Release, London		<a href="http://www.release.org.uk">www.release.org.uk</a>
Lions Lifeskills		<a href="http://www.lionslifeskills.co.uk">www.lionslifeskills.co.uk</a>
Want 2 Stop, Public Health Agency		<a href="http://www.want2stop.info">www.want2stop.info</a>
National Drugs Helpline	0800 776600 text 82111	
AA National Helpline	0845 769 7555	

### Using outside agencies and individuals

Schools may wish to use the expertise and skills of education and health professionals from outside agencies or individuals in the wider community. Visitors from the wider community can bring their specialist knowledge, expertise and experience into the classroom setting and offer a new approach, which pupils often welcome. This also increases the pupils' knowledge of the services available in the local community and how to access these. Sessions delivered by outside agencies can also help teachers to up-date their knowledge or pedagogy in line with that of the outside agency. Teachers should, however, only use outside agencies as part of a planned programme with adequate preparation and follow up. Local Drug and Alcohol Co-ordination Teams (DACTs) can provide advice and guidance, as well as links to local community and voluntary groups. (You can find contact details for DACTs in Appendix 10).

### Supporting school policy

It is vital that any agency or individual entering a school to support any aspect of the PDMU or PD curriculum, including drugs education, is given a copy of the school's Drugs Policy. They must agree to respect the ethos of the school and be aware of confidentiality issues. Schools should ensure that they adhere to the guidance on vetting requirements provided in DE Circular 2012/19 and DE Circular 2013/01 and any separate or additional policy that the school provides.

### Supporting curricular provision

Teachers must be present at all times when a representative from an agency or other individual is taking a session with a class. Teachers should prepare pupils thoroughly for the visit. They should check that pupils are not uncomfortable or unhappy with the topics being dealt with and the methodologies used. After the session, teachers should give pupils the opportunity to discuss their experience and evaluate the session.

Despite the many positives associated with using outside agencies, it is important that schools do not rely overly on their use. Schools should not use outside agencies as a vehicle for teaching aspects of drugs education that teachers do not want to teach. Teachers must also ensure the activities the agency or individual undertakes complement and support their school's ongoing drugs education programme as part of the overall provision for PDMU or PD.

### Supporting parents or carers

It is important that schools inform parents or carers before an agency or individual comes into the school to support its drugs education programme. Contacting parents or carers and explaining the type of activities that are taking place will ensure that they have the opportunity to raise any concerns they might have before the visit. This consultation has the added benefit of letting parents or carers know what is going on and strengthening ties between home and school.

### Sample questions to ask an outside agency before engagement

- What are the aims and objectives of your programme?
- How do they link to the Northern Ireland Curriculum and support the ethos of our school?
- What are the skills and experience of those delivering the programme and are these appropriate?
- How will your programme support the delivery of PDMU or PD in our school?
- What activities can the classroom teacher do to introduce your programme?
- How will the teacher be involved in delivering your programme?
- What information do you provide for parents about the content of your programme?

The policy will be reviewed again before January 2024



Signature – Principal

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Signature – Chairperson of the Board of Governors

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Date: 19<sup>th</sup> January 2021

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