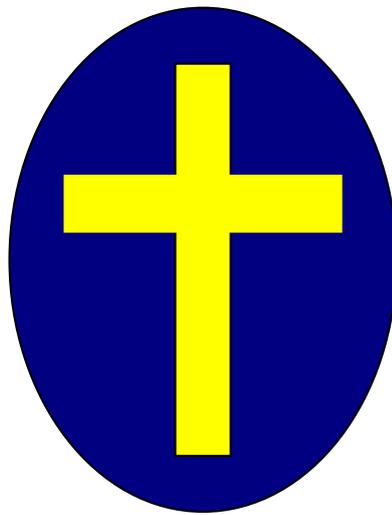


# The Batt C of E Primary School



THE BATT C.E. SCHOOL

## Drugs Education Policy

Date Written/Reviewed: January 2019

Date for next review: January 2021

Reviewed by: P&S

# **The Batt CE Primary School**

## **Drugs Education Policy**

The philosophy of The Batt C of E Primary School is to provide a supportive and nurturing environment in which all pupils are encouraged to develop their knowledge, skills, attitudes and understanding about drugs and appreciate the benefits of a healthy lifestyle. Drugs Education at The Batt C of E Primary School takes account of pupils' views, so that it is both appropriate to their age and ability, and relevant to their particular circumstances.

### **Rationale**

It is acknowledged that our school plays an important role in tackling drug misuse by providing drug education and pastoral support to all pupils. It is our aim to help all pupils to be able to take their place safely in our society where a wide range of drugs exists. We recognize that some drugs have beneficial effects, but also that every drug has potential harm. For this reason, all drugs need appropriate and responsible care and management. In order to be able to make informed choices, staff and pupils need to understand the nature of drugs, their social and legal status, their uses and effects.

### **External Guidance**

The Batt C of E Primary School actively co-operates and seeks support with other agencies such as the Thames Valley Police, Social and Health Care Services, Local Education Authority, Health and other appropriate Drug Agencies to deliver its commitment to drugs education and to manage incidents of drug use and misuse. In all our planning and responses to drug issues we take careful account of LA and national guidance, in particular *Drugs: Guidance for Schools (DFES February 2004)*

### **The role of the Head teacher and Governing body**

The Head teacher takes overall responsibility for the policy and its implementation, for liaison with the Governing body, LA and appropriate outside agencies, and for the appointment of a Drug Education and Incident Management co-ordinator, who will have general responsibility for handling the daily implementation of this policy. The Head teacher will ensure that all staff dealing with substance issues are adequately trained and supported.

### **Dissemination of the policy**

The policy will be distributed to all staff and governors and is available to parents/carers, pupils and relevant outside agencies. It is included in induction sessions for new staff, pupils, parents and governors and that this policy is a regular item in staff, SMT and governor meetings to monitor the progress of drug education.

## **Formation and Consultation Process**

This policy has been prepared following consultation with school staff, governors, pupils, parents/carers and any other group. The DFES (Drugs: Guidance for Schools (DFES February 2004) has been used during the preparation together with advice from the LEA School Drug Education Consultant

## **Aims and Objectives of the School Drug Education Policy**

- To increase knowledge and understanding of drugs and their effects by providing accurate information;
- To improve self knowledge, particularly in terms of risk-taking;
- To promote positive attitudes towards healthy lifestyles; to challenge and try to modify these when they may lead to behaviour harmful to health;
- To promote a sense of responsibility towards the use of drugs;
- To develop social skills such as making informed choices and resisting unhelpful pressures from peers and from advertising;

## **Incident management**

- The Batt C of E Primary School aims:
  - To establish and maintain an environment in which the school is free from the misuse of any drugs;
  - To clarify the appropriate procedures in the management of drug-related incidents (see appendix A of this policy);
  - Reduce situations of risk for the majority;
  - Deter future occurrences;
  - To respond to any individual in the school community in need of support.

## **Definition of Drugs**

At The Batt School, a drug is defined as '*a substance people take to change the way they feel, think or behave*'. This definition includes illegal substances and also legal substances such as: alcohol and tobacco, volatile substances, over the counter and prescription medicines. (*Drugs: Guidance for Schools (DFES February 2004)*)

## **Drugs on School Premises**

The legal definition of premises of a school includes everything within the property boundaries including buildings, outbuildings, playgrounds, fields and also extends to include other settings such as vehicles, boats, marquees or any venue managed by the school at the time e.g. premises of a school trip or visit. Pupils, staff and visitors to the premises are made aware of the school's drug education policy.

## **Illegal Drugs, smoking and alcohol on the School Premises**

All illegal substances are forbidden on the premises. The school is designated a "no smoking" area for staff and visitors and we look to everyone, including parents/carers to support this policy. If anyone is found smoking on site the Head teacher must be informed immediately.

Alcohol may only be consumed on the school premises for events organised by members of staff, governors or PTA, which take place after the end of the school day. Verbal permission must be obtained from the senior management team prior to the event. The organizers are responsible for ensuring that all those consuming alcohol are over the age of 18.

To protect the health and safety of the school community regular checks will be made of the site to ensure that drug paraphernalia, particularly needles and syringes, are cleared away safely and legally.

The school will ensure that potentially hazardous substances are stored safely and pupils will be supervised if it is necessary that they come into contact with them in the course of their work. Pupils are not permitted to be in possession of sniffable products.

### **Prescribed Drugs on the School Premises**

The Batt School follows the recommendations of the Oxfordshire Health and Safety guidelines and DfE guidance 'Supporting Pupils with Medical Needs' 1996. An up to date list of children taking prescribed drugs (e.g. asthma or diabetes) will be circulated to staff. Parents must notify in writing if any medicines need to be taken during school hours. It is the parents' responsibility to ensure safe administration of medicines during school hours. Medicines should not be kept in school, apart from asthma inhalers, which will be kept by the child or, in the case of infants, by the class teacher.

In certain cases, prescribed emergency medicines (e.g. for anaphylactic shock) may be kept on the school premises. These are to be kept in specifically allocated places out of children's reach and are to be administered by named, trained staff only. Details of these medicines and their location are kept in the staff room and the office. Supply teachers are informed of this on the supply teachers' Information Sheet.

### **Drug Incident; where substance misuse or supply is suspected.**

Staff should follow the flow chart found in the *Drugs: Guidance for Schools (DFES February 2004) pages 117 -118 (See 8A)* and inform the Head teacher who will then assess the school's legal requirements, this may include the involvement of appropriate outside agencies, and the proposed school response, the involvement of parents/carers, the arrangements for recording and informing other agencies, and the Health & Safety procedures (see Health & Safety policy) including safe handling of suspect substances (See 8C). All incidents must be recorded on an incident form. (See 8D)

In each case, a child's record and circumstances should be taken into account, their age, the substances involved, the location of the incident, nature of the offence/incident, attitude of pupil and what help can be offered.

The consequences of such incidents involving pupils will follow broadly the same procedures as laid down in the school Behaviour Policy. If incidents involve illegal drugs, the head teacher will follow the guidance set out in *Drugs: Guidance for Schools (DFES Feb 2004)*.

- **Rumour and Suspicion.** Evidence should be collected before confronting pupil
- **Caution** should govern any attempt to identify symptoms or behavioural change
- **Disclosure.** When information is passed on to staff the limits on staff retaining confidences must be clear and staff must act for the protection and interest of the pupil
- **Discovery.** Substances should be confiscated without confrontation, but with regard to safety and when possible in front of a witness. The School Liaison Officer or Area Beat Officer will help with advice and analysis.
- **Intoxication.** The intoxicated person should be kept from harm and kept under observation. Details should be recorded to help professional medical treatment.

- **Emergency.** Loss of consciousness, possibly due to drug overdose, misuse, or admitted overdose without visible symptoms.

**Drug Situations – medical emergency:** The procedures for an emergency apply when a child or Young person or others are at immediate risk of harm (see *8B*)

**PSHE Co-ordinator:** Rachel Clarke

**Date agreed by staff and Governors:** January 2019

**Date for Review:** January 2021

**Signed on behalf of the Governing Body:**



## 8B: DRUGS SITUATIONS - MEDICAL EMERGENCIES

The procedures for an emergency apply when a child or young person or others are at immediate risk of harm. A person who is unconscious, having trouble breathing, seriously confused or disorientated or who has taken a harmful toxic substance, should be responded to as an emergency.

Your main responsibility is for any pupil at immediate risk, but you also need to ensure the wellbeing and safety of others. Put into practice your school's first aid procedures.

**IF IN ANY DOUBT, CALL MEDICAL HELP.**

### **ALWAYS:**

- assess the situation
- if it is a medical emergency, send for medical help and an ambulance

### **BEFORE ASSISTANCE ARRIVES:**

#### **If the person is conscious:**

- ask the person what has happened and to identify any drug used
- collect any drug sample and any vomit for medical analysis
- **do not** induce vomiting
- keep the person under observation, warm and quiet

#### **If the person is unconscious:**

- ensure that the person can breathe and place in recovery position
- **do not move the person** if they have fallen, as a fall may have led to spinal or other serious injury which may not be obvious
- **do not** give anything by mouth
- **do not** attempt to make the person sit or stand
- **do not** leave the person unattended or in the charge of another pupil.

### **WHEN MEDICAL HELP ARRIVES:**

- pass on any available information and any vomit and drug samples.

PLEASE COMPLETE AN EMERGENCY RECORD FORM AS SOON AS YOU HAVE DEALT WITH THE EMERGENCY

## 8C: COLLECTION OF HYPODERMIC NEEDLES

Schools and colleges should be vigilant in checking premises and grounds for health and safety hazards including signs of any discarded equipment, which may be drug-related. If needles are found, they should be handled with 9½ inch sponge forceps in accordance with the guidelines below and put in a 'sharps' box. '

**Needles should not be retained in the plastic tamper-proof bags.**

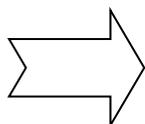
Chapter 2 Handling used hypodermic needles incorrectly can lead to needlestick injuries.

Two main blood-borne diseases can be contracted via injuries from inflected needles, Hepatitis B and HIV.

The risk to contracting these diseases however can be lowered to negligible levels if normal hygiene precautions and this Code of Practice are followed.

1. Only authorised persons are to collect needles.
2. Disposable gloves must be worn (the reason for this is to prevent material from contacting the skin). **WARNING:** gloves will not prevent needlestick injuries.
3. The tongs provided must be used to uplift needles (the unaided hands must not be used).
4. Needles must be placed in the sharps box provided.
5. Sharp boxes can be used until approximately half full when they must be disposed of.
6. Tongs that have been used for retrieving needles, must be sterilised by immersion in a 10% hypochlorite solution for a minimum of 30 minutes and then washed with clean water.

**The grounds of the school/college should be checked regularly.**



Ensure that the caretaker(s) and other grounds staff are aware of the policy and the need to check the grounds regularly.

A record should be kept of searches made and any items found of this nature.

Any concerns that the premises or grounds are being used for activities, which would endanger young people, should be referred to your Police Youth Affairs Officer.

## 8D - Record of drug-related situation

<i>Emergency / intoxication</i>	<i>Suspicion, OFF premises</i>	<i>Suspicion, ON premises</i>	<i>Discovery, OFF premises</i>	<i>Discovery, ON premises</i>	<i>Pupil disclosure</i>	<i>Parental use</i>	<i>Parent/carer expresses concern</i>
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(Tick one or more of these boxes to indicate the category)

Name of Pupil:  
Form/Class:

Date of Incident:  
Time of incident: *am/pm*

### First aid given? YES / NO

If yes:

First aid given by:

### Ambulance/Doctor called? (Delete as necessary) YES / NO

If yes:

Called by:  
at time: *am/pm*

<b>Drug involved (if known):</b> <i>(e.g. alcohol, paracetamol, ecstasy)</i>	<b>Sample found? (yes/no)</b>  <b>Where retained</b>  (or) <b>Destroyed at time:</b> <i>am/pm</i>  <b>Witness name:</b>
<b>Senior staff involved:</b> <i>(Insert name)</i>	

**Parent/carer Informed by:** *at time: am/pm*

**Brief description of symptoms/situation:**  
  
*(continue on blank sheet if necessary)*

**Other action taken:** *(e.g. other agency involved; Ed. Psych. report requested; pupils/staff informed; sanction imposed; GP/Police consulted about drug)*  
  
*(Continue on blank sheet if necessary)*

**Report form completed by:**