

Ashmole Primary school

PSHCE: Drugs Education



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Updated on:	Changes made / notes:

Drug Awareness and Education Policy Including Drug Incident Guidelines

This policy comes within the overall school policy on PSHCE (Personal, Social and Health Education) working towards the Silver National Healthy School Standard. Drug Education is taught as part of the National Curriculum for Science and as part of the school's scheme of work for PSHCE.

This policy has been developed through a consultation process that has included representatives of the governing body, school staff, parents and pupils. The school has an appointed governor to take a lead around PSHCE on behalf of the governing body.

This policy is available on request for parents and this is made clear in the school prospectus.

It will be evaluated and reviewed in Autumn Term 2017

1. Legal requirements

1.1 The National Curriculum Science Order:

- Pupils in KS1 should be taught about the role of drugs as medicines (Sc2, 2d).
- Pupils in KS2 should be taught about the effects on the human body of tobacco, alcohol and other drugs, and how these relate to their personal health and affect social relationships (Sc2, 2g).

1.2 Ofsted Drug Education Report 2005 every school, has a responsibility to consider its response to drugs. The key aim of drug education is to enable pupils to make healthy informed choices.

1.3 The Children Act 2004 sets out proposals for improving the delivery of services for children, young people and families. It requires services to work together to maximise opportunity and minimise risk for every child and young person, through achieving five shared outcomes based on those identified by children and young people as being most important to them.

1.4 A new relationship with schools (DFES 2004) sets out changes to the school inspection system and emphasises that school inspections must demonstrate how schools contribute to the 5 outcomes for children and young people set out in Every Child Matters.

1.5 Unicef Children's Rights Article 33 states 'Governments must protect children from the use of illegal drugs.'

2. Drug definition.

2.1 For the purpose of this policy, the term 'drugs' refers to substances that change the way the body or mind work, including:

- Alcohol
- Tobacco
- Volatile substances
- Caffeine
- Over the counter prescribed drugs e.g. painkillers, antibiotics
- Illegal drugs e.g. ecstasy, cannabis, cocaine, crack and heroin

2.2 'Drugs misuse' is defined as the non-medical use of drugs that are only intended for use in medical treatment, the use of drugs that have no accepted medical purpose (DfE circular 4/95).

3. Aims and Objectives

3.1 At Ashmole Primary School we recognise that drugs are part of society. Drug education is an integral part of a child's personal, social & health education. At Ashmole we believe that Drug Education should equip children with the knowledge, skills and attitudes they need to make informed decisions and choices.

3.2 Drug education contributes to children's health and safety and, therefore, it is crucial for the implementation of Every Child Matters across our school. An understanding of drugs enables children to make informed decisions about their lifestyle through science lessons, PSHCE lessons and Philosophy for Children discussions.

3.3 At Ashmole the purpose of having a drug education policy is to ensure that all pupils have access to consistent, clear and thoroughly planned approaches to drug education that is appropriate to the age and maturity of the pupils. This document serves to inform parents and the school community of the procedures at Ashmole.

Drug Education at Ashmole aims to:

- Enable pupils to make informed healthy and safe choices by increasing their knowledge, challenging their understanding and developing their skills.
- Support children in developing their communication skills to help them to assert themselves, resist pressure and make responsible decisions.
- Provide accurate and comprehensive information about substances.

4. Teaching and learning style

4.1 While we carry out the main teaching in our Personal, Social and Health Education (PSHCE) curriculum, many national curriculum subjects for example science, P4C discussions and pupil's understanding of their right to good health (Article 24) can make very valuable contributions towards the teaching of drug education.

4.2 A wide range of teaching and learning approaches will be adopted to ensure that our drug education programme is thoroughly taught:

4.3 Lessons should always start at a point to which pupils can relate and then progress into new areas of learning. However because drugs are a sensitive and controversial subject extra care needs to be taken to match learning activities to pupils previous knowledge and learning needs.

4.4 Before embarking on drugs lessons teachers will facilitate some kind of informal needs assessment to find out; what pupils already know, the type of language/substances they are familiar with, misconceptions and what their anxieties and questions are.

This needs assessment can take the form of

- An informal discussion with pupils about what they understand by the word "drug"
- Confidential question box
- A questionnaire or quiz
- Brainstorm or mind mapping.

4.5 This is a helpful way of establishing a safe environment in which pupils and staff will not feel embarrassed or anxious. A group agreement, established through discussion and negotiation with pupils fosters mutual respect - some ideas are set out below:

- No one (teacher or pupil) will have to answer a personal question

- No one will be forced to take part in a discussion
- Meanings of terms will be explained in a sensible and factual way
- Each person's views and beliefs will be respected and listened to
- **A lesson is not an appropriate setting for pupils or teachers to disclose or discuss their personal or family drug use**
- An opportunity for one-to-one confidential support should be offered with an appropriate adult after the lesson, if personal issues have been raised that pupils wish to discuss

5. Drug education curriculum planning.

5.1 The PSHCE Framework at Key Stages 1 and 2 is developed through four broad themes:

- Developing confidence and responsibility and making the most of pupils' abilities
- Developing a healthier, safer lifestyle
- Developing good relationships and respecting differences between people
- Preparing to play an active role as citizens.

5.2 Pupils will have opportunities to:

- Develop personal and social skills
- Reflect on personal experience in relation to content taught
- Appreciate and respect other cultures, values and beliefs, explore moral and spiritual issues
- Reflect on issues relating to the family.

5.3 See **Drug Education Curriculum overview for Lambeth Primary Schools** for details of the drug education programme for each year group.

6. Confidentiality and child protection.

6.1 Generally teachers will encourage all pupils to discuss their concerns about drugs with parents and carers. The negotiation of '**Ground Rules**' in Drug Education sessions will be important. Teachers will make it clear to pupils the level of confidentiality that they can offer. Due to the guidelines in the Child Protection Policy, teachers cannot offer or guarantee absolute confidentiality.

6.2 A rare occasion of a child disclosing his/her intention to use, or claims to have used drugs will be dealt with as a child protection matter. Teachers will consult with the school's designated Child Protection leader for advice on all child protection matters.

7. Managing medicines

7.1 In most cases, parents/carers, not teachers, will administer medicines to their children themselves outside school hours. Where this is not possible:

- Parents/carers of children in need of medication must ensure that the school is accurately advised in writing about the medication, its usage and administration.
- Primary aged children may be able to administer their own medication, under supervision, but only with the written agreement of their parents/carers.
- The decision for staff to administer medicines will be made by the Head of School.
- All medicines will be stored securely with a signing in/out form to be filled out each time the medicine is removed and returned.
- In the case of asthma, please refer to the school policy on managing asthma reliever inhalers.

8. Responsibilities of staff and governors

- Overall responsibility for this Policy is with the Named Governor for PSHCE.

8.1 The governing body is responsible for:

- Authorising the Drug Education Policy and any subsequent reviews of the Policy and ensuring that the terms and ethos of this policy are followed.

8.2 The Personal Social Health Education Co-ordinator is responsible for

- Writing and updating the Drug Education Policy and Scheme of Work in light of initiatives and change, and monitoring the development of the subject throughout the school.
- Guiding and supporting teachers in this subject, to include refresher training for Drug Education.
- Co-ordinating external agency support for Drug Education.
- Monitoring the effectiveness of the planned and delivered curriculum for Drug Education.
- Co-ordinating classroom practices and guidelines across the curriculum and ensuring the development of subject skills.
- Auditing and monitoring resources throughout the school to ensure that there are sufficient age-appropriate and ability-appropriate resources for effective teaching and learning.

8.3 The Head of School is responsible for:

- Ensuring that the terms and ethos of this policy are followed.

8.4 Other members of the staff team are responsible for:

- Following the terms and ethos of this policy.

Drug Incident Guidelines

The Incident Guidelines are required to:

- ❑ Send a clear message to the school community that the possession or use of legal or illegal drugs on the premises is unacceptable and will be dealt with consistently and promptly
- ❑ Clarify the management of authorised drugs such as medicines and cleaning fluids
- ❑ Establish clear rules for everyone in the school community

For the purpose of these guidelines, the terms ‘authorised’ and ‘unauthorised’ drugs refers to:

Authorised drugs - medicines or legal drugs such as alcohol or tobacco. Also commonly available substances such as cleaning fluids, chemicals and solvents are ‘authorised’ and can cause mild irritation or be harmful when used inappropriately.

Unauthorised drugs – illegal substances, medicines prescribed for another person’s use.

Incident Management:

Procedures:

- All drug related incidents will be referred to the head teacher in the first instance
- Medical advice will be gained if necessary – it is important to establish what the substance is if medical treatment is needed
- The school will contact the child’s parent/legal guardian in **all** incidents
- All actions taken by members of staff, relating to drugs incidents, will be recorded through an incident form
- Teachers and support staff can not search children

Examples of how staff agreed to manage drug related incidents at Ashmole Primary School:

Incident:	Agreed procedure:
<p>Drugs, alcohol or solvents have been found on the school premises:</p>	<ul style="list-style-type: none"> ▪ Member of staff will report to the Designated Safeguarding Lead immediately, who will arrange for the items to be safely disposed of by the Premises Officer/ or Lambeth's Safe Syringe Disposal Team. ▪ Staff/ Governors will be alerted. ▪ Incident will be recorded (if a syringe is found, inform the LA) in the school 'Incident Book.' ▪ General discussion with the children about what to do if they find something unusual. ▪ Parents/ carers need to be informed.
<p>A pupil is found in possession of drugs, alcohol or solvents:</p>	<ul style="list-style-type: none"> ▪ Remove the substance from the pupil and put it somewhere secure. If possible, place in a sealed envelope and put it in the school safe. ▪ If it is an illegal drug, put it in a sealed envelope, date it and store in the school safe, inform the police what action you have taken and request for them to arrange collection. This can only be given to the police. ▪ Immediately inform the Designated Safeguarding Lead. ▪ Incident will be recorded in the school 'Incident Book.' ▪ Member of staff to take advice from Designated Safeguarding Lead about informing Social Services. ▪ If other children are aware of the incident, discuss it as a class (e.g. PSHCE lesson/circle time) and the dangers of misusing unknown substances (timing left to class teacher's own discretion.) ▪ Pupils will be given the opportunity to confide any previous incidents that may have gone unnoticed. ▪ Parent/carers of the child will be contacted immediately. ▪ Seek medical advice/emotional support if necessary.
<p>A teacher suspects a pupil of being under the influence of drugs, alcohol or solvents:</p>	<ul style="list-style-type: none"> ▪ If a child's behaviour is very different and is causing alarm – they could be under the influence of drugs, alcohol or solvents. The child will be calmly removed from the classroom, kept under surveillance at all times and the Designated Safeguarding Lead informed. ▪ A member of staff will talk to the child 'one- to-one' to ascertain if s/he has taken 'something.' ▪ Medical details will be checked and the child's

	<ul style="list-style-type: none"> ▪ parents/carers will be contacted immediately. ▪ If child is disorientated, seek medical advice from family G.P. or the emergency services immediately. ▪ If other children are aware of the incident, discuss it as a class and the dangers of misusing substances (timing of this will be left to the class teacher's own discretion.) ▪ Head of School will discuss with Designated Safeguarding Lead whether to contact Social Services to report the incident and Governors informed. ▪ Incident will be recorded in the school 'Incident Book.'
<p>A pupil discloses that a friend (or family member) is misusing/selling drugs, alcohol or solvents:</p>	<p>Disclosed publicly</p> <ul style="list-style-type: none"> ▪ Member of staff will consider the child's reason for the disclosure and will pursue a conversation on a one- to- one basis. ▪ If the disclosure is within the context of a PSHCE lesson or Circle Time, teacher will discuss general health risks and legalities if appropriate (this will be left to the teacher's own discretion.) ▪ Inform the Designated Safeguarding Lead of the discussion and record the incident using an incident sheet. <p>Disclosed privately</p> <ul style="list-style-type: none"> ▪ Listen to the child and record what is said. Remain non-judgmental and stay calm/supportive. ▪ Consider contacting Social Services (after Designated Safeguarding Lead has been informed.) ▪ Consider any other forms of action, (e.g. informing parents/carers ask 'Are the children being adequately supervised?' Counseling for the child.)
<p>A pupil discloses his/her parents/carers/ relatives are misusing/selling drugs, alcohol or solvents:</p>	<ul style="list-style-type: none"> ▪ Listen to the child and record what is said. Remain non-judgmental and stay calm/supportive throughout the conversation. ▪ Consider if the story 'holds credence.' ▪ <u>Don't report the disclosure directly to the child's parents.</u> ▪ Record any further disclosures the pupil makes (following the same procedures) ▪ Inform the Designated Safeguarding Lead. ▪ Learning Mentor to support the child if

	<p>necessary.</p> <ul style="list-style-type: none"> ▪ Designated Safeguarding Lead may contact the ESW (Education Social Worker) and will arrange a home visit.
<p>Designated Safeguarding Lead becomes aware of the availability of drugs/alcohol/solvents in the local vicinity:</p>	<ul style="list-style-type: none"> ▪ Designated Safeguarding Lead will contact the police and LA (to investigate perpetrators.) ▪ Whole School and Class assemblies will be coordinated to discuss/address topical issues. ▪ All staff will be informed and will be vigilant in dealing with pupil behaviour
<p>Parent arrives on the school premises in an intoxicated state:</p>	<ul style="list-style-type: none"> ▪ Member of staff will make a judgment about whether the child should go home with adult. ▪ Judgment will be made by engaging the adult in conversation first to establish the degree of intoxication. ▪ Make a note of the incident on the child's file (with date and any relevant observations.) ▪ If the adult is seriously intoxicated, stay calm and explain that, 'It is against school policy to allow any child to leave the premises whilst their parent/carer is in an intoxicated state.' ▪ Contact the child's emergency number and keep the child in the school building with a member of staff until another 'named person' collects him/her. ▪ In an extreme situation (when this happens on a regular basis) the Designated Safeguarding Lead will contact Social Services.
<p><u>For details on other Drug Incidents/scenarios refer to:</u> Lambeth Education's Drug Education & Policy Guidelines Handbook Stored in the Drug Education box of the PSHCE resource area.</p>	

Authorised Drugs in School:

Medication should be taken before and after school hours. Where taking medication during school hours is unavoidable, the medicines should be clearly labeled (name of child, class and date) and handed in to the school office by the parent/carer, where they will be asked to sign a form.

Children under medication should report to the 'Senior First Aider' who will organise the supervision of the child as they take their medicine. Most children will keep their inhalers with them in their classroom; some may have a second inhaler in the office.

School Journeys:

A teacher will be identified as being responsible for supervising medications. All medicines, apart from asthma pumps, should be clearly labeled and handed to the named person by the child's parent/carer with clear instructions.

School Trips:

Children should be reminded to take their inhalers by their class teacher on a school trip.

Smoking:

Ashmole Primary School is a no smoking area.

Alcohol:

Any alcohol stored on the school premises must be authorised by the Headteacher and should be kept in a secure place at all times.

Workplace Health:

Staff under the influence of alcohol and other authorised/unauthorised substances should be referred to the Head of School. Professional advice and support should be offered.

Hazardous Substances:

All cleaning fluids, chemicals and solvents are kept in a locked cupboard during school hours. During times when children are in the school building (at after school clubs), the cleaning staff will be responsible for these substances and should return them to the designated secure cupboard when they leave the school building.

PSHCE Subject Leader: Kirsty Williams

Date: 2nd February 2016

PARENT / CARERS Health Education Questionnaire
Medicines, Alcohol, Tobacco and Other Drugs

School:

Date:

Not very ← → very

1. How confident do you feel talking to your children about Medicines?
1 2 3 4
2. How confident do you feel talking to your children about Alcohol?
1 2 3 4
3. How confident do you feel talking to your children about Tobacco?
1 2 3 4
4. How confident do you feel talking to your children about Illegal drugs?
1 2 3 4
5. How important do you feel drug education (including medicines, tobacco, alcohol and for older children illegal drugs) is for your children?

6. Have you spoken to your child / children about drugs? **YES** **NO**
(please circle)

If YES which drugs did you talk about and what did you discuss?

7. Would you attend if the school arranged an advice and information session for parents/carers about talking to children about drugs?
YES **NO**
(please circle)

8. Is there any other drug information you would find useful? **YES** **NO**

9. Would you like to offer your opinion about what the school teaches children about medicines and other drugs? **YES** **NO**

10. Are you interested in finding out more about the schools drug policy ?
YES **NO**

THANK YOU PLEASE RETURN THIS FORM TO THE OFFICE