



TROTTS HILL PRIMARY SCHOOL AND NURSERY

Drugs Education and Incident Policy

Last review: November 2016

To be reviewed: November 2017

Adopted by Governors:

Date:.....

Staff responsible: Cheryl Sweeney(PSHE coordinator)
Miss Pidgeon (Interim Headteacher)
Teaching and Learning Committee (Governors)

The process of writing this policy involved consultation between Headteacher, teaching and non-teaching staff and school governors.

Further guidance came from Herts County Council Drug Education Guidance and the Mentor UK toolkit.

This school defines the term 'drug' as:

"A substance people take to change the way they feel, think or behave"
and therefore includes tobacco, alcohol, solvents, over-the-counter and prescribed medicines as well as illicit substances.

1 Aims and objectives

1.1 We aim to equip children with the knowledge, understanding and skills that enable them to make the sort of choices that lead to a healthy lifestyle. Set in the broader context of Personal, Social, Health and Economic Education, Citizenship and Sciences, our drugs education programme has the primary objective of helping children to become more confident and responsible young people who respect themselves and others and take responsibility for their own actions. We teach children about the dangers to health posed by drug-taking, and we aim to equip them with the social skills that enable them to make informed moral and social decisions in relation to drugs in society. We are committed to the health and safety of all members of the school community and will take action to safeguard their wellbeing.

1.2 The objectives of our drugs education programme are:

- enable children to make healthy, informed choices through helping them to increase their knowledge, challenging and exploring attitudes and developing and practicing skills;
- to help children develop further a sense of self-worth and self-esteem and to become more self-confident so that they are able to make sensible and informed decisions about their lives;
- to provide children with knowledge and information about illegal drugs and the harmful effects and consequences they can have on people's lives;
- to help children to distinguish between different substances, consider their use, misuse, benefit and harm;
- to enable children to discuss moral questions related to drug taking, and so provide a safe environment for young people to share their thoughts and ideas;
- to let children know what they should do if they come across drugs, or are aware of other people misusing drugs;
- to help children respect their own bodies and, in so doing, reduce the likelihood that they will be persuaded to become involved in drug abuse;
- to show that taking illegal drugs is a moral issue, and that choices about drugs are moral choices;
- to ensure that all children are taught about drugs in a consistent manner, following guidelines that have been agreed by parents, governors and staff.

2 Organisation

2.1 We regard drugs education as a whole-school issue, and we believe that opportunities to teach about the importance of living a healthy lifestyle occur throughout the curriculum. Each class teacher answers questions about drugs sensitively and appropriately, as they occur. In the routine circle-time sessions, we encourage children to discuss issues that are important to them, and we help children to be aware of the dangers of the misuse of drugs. For example, if a child raises the issue of smoking, the teacher takes time to discuss its harmful effects with the whole class. In science lessons we teach children what a drug is, and how drugs are used in medicine. We also teach them the difference between legal and illegal drugs.

2.2 Drugs education is an important part of our school's personal, social and health education (PSHE) curriculum. As a school we follow the Christopher Winter Programme of study. All classes are taught about drugs at an age appropriate level. In Year 3 and 4 the focus is on legal forms of drugs including tobacco and alcohol. The main teaching about illegal drugs takes place in Year 5 and 6, where the children are taught about the dangers involved to those who take them, peer pressure and where to go for help. Our focus is to promote in children a healthy lifestyle.

2.3 The children's class teacher teaches them drug education in normal lesson time. Sometimes the class teacher seeks support from the school nurse or another health professional. The teaching style that we use encourages children to ask questions and reflect on the dangers to health of drug misuse. We particularly encourage active and accelerated learning methods, which involve children's full participation. Children explore issues, such as why people take drugs, and how they can avoid putting themselves in danger in the future. We give children the opportunity to talk in groups or to the whole class. We encourage them to listen to the views of others, and we ask them to explore why drugs are such a problem for society. Ground rules will be negotiated when appropriate and the sensitivity of work will be recognised, safeguarding the interests of the children and everyone.

Confidentiality

Some children may choose to mention instances of drug use in class or to individual members of the school community. While staff will want to be supportive, they need to follow our Child protection guidelines and clearly state that they may not be able to guarantee confidentiality. (See safeguarding checklist and child protection policy-copies in staff room)

Planning

Opportunities for drug education will be clearly identified on long, medium and short-term plans.

Special Educational Needs and/or Disabilities

In planning drug education for pupils with SEND, our teachers consider a range of responses. For example:

- Additional support given by staff;
- Activities may be differentiated or adapted;
- Programme aspects may need to be emphasised or expanded;
- Revisiting knowledge and skills in different contexts
- Using strategies to increase access to drug education

Teaching – curriculum, materials and approaches

Drug Education opportunities include:

- Through planned elements of National Curriculum subjects, including Science, Religious Education, History, Drama or Physical Education
- PSHE lessons

- Pastoral time
- Assemblies
- Through occasional planned visits from school nurse, police officer or other organisations
- Through informal curricular / extra-curricular activities

Work will be regularly monitored and evaluated by all staff and pupils.

2.4 Medical Forms

Medical forms are used to record medication given to children. Forms are kept in the school office. Written parental permission must be given before any medications are given. Following permission being granted from parents the office staff or teaching assistants administer medications. Prescribed medication e.g. Ritalin or anti-biotics, is kept locked in a safe place at all times or in the staff room fridge if required. Inhalers are kept in classrooms stored in a named container with the child's photo attached and kept in a cupboard. A generic inhaler is kept in the office resource cupboard which can be administered in an emergency. Written consent has been obtained from parents of students with inhalers. Medication can only be handed back to a responsible adult at the end of each school day. Children are not permitted to take medication home.

2.5 Response to possible drug related incidents

Since our definition of 'drug' includes medicines, alcohol and tobacco it is important that all aspects of an incident are considered. The needs and circumstances of the pupil are paramount.

We will consider each situation individually and recognise that a variety of responses may be necessary to drug related incidents as recommended by the LEA and national guidance.

In the first instance the headteacher or deputy headteacher will be informed of any drug related incident. Parents or guardians will be informed at the earliest opportunity and if necessary other professional colleagues, such as the school's Education Welfare Officer or local Police liaison Officer may be contacted to obtain advice and support.

If the situation leads to a medical emergency the school emergency aid procedures will be followed immediately. (See first aid policy)

Should a substance suspected of being illicit be found on the school premises it will be handed to the Headteacher and, in the presence of another member of staff, placed in a sealed container and both signed and dated. It should then be safely stored until it can be collected by a police officer. S/he will also be involved in advising the school on the most appropriate response to the situation. All such incidents will be recorded in the incidents folder kept in the school office.

Roles and responsibilities

This policy relates to all members of the school community. All staff have a responsibility for drug education and must be fully aware of this policy and its implications for themselves and for others in the community. Whenever adults interact with children, they recognise that they may be influencing attitudes and behaviour.

All staff should consider themselves as role models whose behaviour the children are likely to notice and often follow. Staff also have a responsibility to know how they should respond to any drug related incidents.

Teaching and support staff have a responsibility to contribute to the taught curriculum for drug education. They listen to the pupils and determine their specific needs. These needs are met in specific drug education inputs as well as through a wider programme of personal and social skills development.

3 The role of the headteacher

3.1 It is the responsibility of the headteacher to ensure that staff and parents are informed about this drugs education policy, and that the policy is implemented effectively, including appropriate curriculum content and response to drug related incidents. It is also the headteacher's role to ensure that staff are given sufficient training, so that they can teach effectively and handle any difficult issues with sensitivity.

3.2 The headteacher will liaise with external agencies regarding the school drugs education programme and ensure that all adults who work with children on these issues are aware of the school policy and work within this framework.

3.3 The headteacher will monitor the policy on a day to day basis and report to governors, when requested, on the effectiveness of the policy.

4 The role of governors

4.1 The governing body has the responsibility of setting down these general guidelines on drugs education. The governors will support the headteacher in following these guidelines. Governors will inform parents about the drugs education policy- the policy is published on the school website. Governors will also liaise with the LEA and health organisations so that the school's policy is in line with the best advice available.

5 The role of parents

5.1 The school is well aware that the primary role in children's drugs education lies with parents. We wish to build a positive and supporting relationship with the parents of children at our school through mutual understanding, trust and co-operation. In promoting this objective we will:

- inform parents about the school drugs education policy and practice;(on school website)
- answer any questions parents may have about the drugs education their child receives in school;
- take seriously any issue which parents raise with teachers or governors about this policy or the arrangements for drugs education in the school;

6 Monitoring and review

6.1 The PSHE and citizenship subject leader is responsible for monitoring the standards of children's work and the quality of teaching and for overseeing both curriculum implementation and other elements of school life contributing to drug education. The subject leader supports colleagues in the teaching of Drugs Education

and Incident, by giving them information about current developments in the subject and by providing a strategic lead and direction for the subject in the school. The subject leader will work with other Co-ordinators to identify where other learning experiences contribute to drug education. The subject leader is also responsible for giving the headteacher an annual school improvement plan for the subject indicating areas for further improvement. We allocate special time for our subject leader to enable him/her to fulfil this role by reviewing samples of children's work and visiting classes to observe teaching in the subject.