



# **St. Mary's Primary School & Nursery Unit, Killyclogher**

## **Drugs Policy**

**Designated Teacher for Drugs: Vice Principal**

Review of Policy	September 2024
Ratification of Policy by the Board of Governors	November 2024
Next Review Date	September 2027

## Rationale

There is an awareness that there has been a considerable increase in the abuse of drugs in recent years in Northern Ireland. Children and young people are exposed to messages about drug use from an early age. This exposure may come through parents / guardians, older siblings, friends, television, the media and popular music. The so-called "recreational" use of drugs can lead to a dangerous acceptance of illegal and harmful drug misuse as part of everyday life.

St. Mary's Primary School, Killyclogher, sees its role as that of a caring community committed to the physical, mental, social, emotional, moral and spiritual health, safety and wellbeing of our pupils and staff. We believe that we have a vital preventative role to play in combating the misuse of drugs by young people and we therefore include a drugs education programme as part of the statutory curriculum for Personal Development and Mutual Understanding (PDMU). We want our pupils to make informed and responsible decisions about drugs, by increasing their knowledge and by developing in them appropriate values, attitudes and skills. However, we recognise that drug misuse is a whole community issue and that schools alone cannot solve the problem; the school is only one of a number of groups and agencies which must play a part in the education of young people, and we make use of their expertise where possible in the delivery of the programme.

The guidance on which this policy is based is available from the Department of Education website [www.deni.gov.uk](http://www.deni.gov.uk) (Circular 2004/09) 'Drugs: Guidance for schools in Northern Ireland'.

## Ethos

St. Mary's Primary School, Killyclogher, promotes the rights of the child based on the United Nations Convention on the Rights of a Child. This policy therefore takes into account Article 3 which states:

*'The best interests of the child must be a top priority in everything we do.'*

In St. Mary's, the welfare and safety of our pupils is paramount. We feel that our drugs education programme will promote that sense of wellbeing, as well as the safety and security of the pupils within our school.

This policy is based on the guidance provided by the Department of Education for Northern Ireland in the following documents:

- DE Circular 2015/23 Drugs Guidance
- CEA Drugs Guidance for Schools in Northern Ireland (Revised Edition 2015)  
[http://ceea.org.uk/sites/default/files/docs/curriculum/area\\_of\\_learning/pdmu/drugs/Drugs\\_Guidance\\_for\\_Schools.pdf](http://ceea.org.uk/sites/default/files/docs/curriculum/area_of_learning/pdmu/drugs/Drugs_Guidance_for_Schools.pdf) 3

## Definition

For the purpose of this policy, the term **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 medicines;
- 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 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 as it is misleading. The public perceived that 'legal' meant safe, but as these substances are not regulated there is no way of knowing what chemicals they contain.*

## **Aims**

- To provide a clear statement of the school's view on drug education.
- To ensure a consistent approach from staff to drug education and in the handling of drug related incidents.
- To safeguard good practice in the future.
- To inform pupils of the effects of drug use and abuse.
- To provide a drug education programme which:
  - develops pupils' self-esteem and promotes positive attitudes in their relationships with others;
  - gives pupils opportunities to develop the values, skills, knowledge and understanding necessary to make informed and responsible decisions about the use/misuse of drugs, including tobacco, tobacco related products, alcoholic, ecigarettes, volatile substances etc. within the context of a healthy lifestyle; and
  - helps pupils develop the skills necessary to assert themselves confidently and resist negative pressures and influences.
- To provide appropriate support and assistance for those pupils affected by drug-related issues.
- To inform parents/guardians of the content of this policy and the procedures to be implemented in the management of incidents of suspected drug misuse.
- To establish an environment in which the school is free from the misuse of all drugs.

## **Roles and Responsibilities**

### The Role of the Board of Governors

The Board of Governors will be fully aware of this policy and will support its development and on-going review. The Board will also designate a Governor to work with the Principal and Designated Teacher for Drugs in relation to drug-related incidents.

### 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/guardians of those pupils 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 her responsibilities to:

- the welfare of the pupil(s) involved in the incident and the other pupils 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 EA if appropriate, 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 pupil; and
  - completing a written report and forwarding a copy to the Board of Governors and the designated officer in the EA.

### The Designated Teacher for Drugs – Vice Principal

The duties of the Designated Teacher for Drugs will include the oversight and co-ordination of the planning of curricular provision, in compliance with the statutory requirements and liaison with other staff responsible for pastoral care.

The Designated Teacher for Drugs is responsible for the co-ordination of the school's procedures for handling suspected drugs-related incidents and the training and induction of these procedures with new and existing staff.

The Designated Teacher for Drugs will act as a contact point for outside agencies that may have to work with the school or with a pupil(s). In the absence of the designated teacher a deputy will be available. It is the responsibility of the Designated Teacher for Drugs to take possession of any substance(s) and associated paraphernalia found and complete a factual report.

### The Building Supervisor

The Building Supervisor will be vigilant and conduct regular checks of the school grounds for drug-related paraphernalia, and inform the Designated Teacher for Drugs as appropriate. The Building Supervisor will also ensure the safe storage, handling and disposal of potentially harmful substances such as solvents and cleaning fluids.

### All Staff (teaching and non-teaching)

Individual staff members are likely to be the first to encounter a suspected drugs related incident. It is not their responsibility to determine the circumstances surrounding the incident. However, they should deal with any emergency procedures, if necessary (see Appendix 1, 3 and 4). Any information, substance or paraphernalia received should be forwarded to the Designated Teacher for Drugs. A brief factual report of the suspected incident should be forwarded to the Designated Teacher for Drugs.

### The Role of Parents / Guardians

All parent/guardians should be made aware that the school has a 'Drugs Policy' and how it applies to them and their children. Parents/guardians form part of the consultative process.

### Pupils

Be aware of and adhere to school rules in relation to drug use/misuse, including tobacco, alcohol, over-the-counter and prescribed medication, volatile substances and controlled drugs.

## **Drugs Education in the Curriculum**

The drugs education programme in St. Mary's Primary School will be included in the curricular area of Personal Development and Mutual understanding (PDMU). It will also be supported by the pastoral care programme and policy throughout the school and will link with other subject areas such as Religious Education, health education and P.E. When available, the school will use the PSNI to deliver specialised drugs education lessons. The programme is a preventative one and is pupil centred, delivered through active learning.

The aims of the programme are:

- to promote positive attitudes towards personal health;
- to inform pupils of the effects of drug use and abuse;
- to help pupils acquire skills to resist peer pressure;
- to build up the self-esteem of pupils;
- to help pupils acquire decision making and problem solving skills that will empower them to take responsibility for their own health and safety.

## **Responses in the Event of a Suspected Drugs-related Incident**

Dealing with a suspected incident requires extreme sensitivity on the part of all those involved. All staff should be aware of the procedures for:

- dealing with substances found on the school premises;
- finding / suspecting a pupil / adult of possessing / distributing an illegal substance;
- pupil suspected of having taken drugs in school.

These procedures are outlined in the 'CEA Drugs Guidance for Schools in Northern Ireland (Revised Edition 2015) Section 3: Responding to Drug-related Incidents'.

## **Illness, Unusual or Uncharacteristic Behaviour**

Children's behaviour may be unpredictable and bizarre for many reasons during their time at school. Changes in behaviour may indicate a range of difficulties and problems and may be related to a medical condition, rather than substance misuse. It is, however, important to note that intoxication, physical collapse or unconsciousness can also result from initial experiment with drugs.

Staff should bring any indications of illness, unusual or uncharacteristic behaviour because of suspected substance misuse to the attention of the Designated Teacher for Drugs. They should not make any judgement until they have determined the circumstances surrounding the incident. Where staff believe a pupil may have taken a substance they suspect is a drug, they should seek medical assistance immediately after following the recommended emergency procedures. The school must inform parents and the PSNI.

## **Taking Possession of a Suspected Controlled Drug 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 pupil from harm and prevent the pupils committing the offence of possession. The teacher should, using appropriate safety precautions, take the suspected substance and any associated equipment and/or paraphernalia to the Designated Teacher for Drugs as soon as possible. They should arrange for its safe storage until the school can hand it over to the local PSNI Officer to identify whether it is a controlled substance. School staff should not attempt to analyse or taste an unidentified substance. 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 Incident Report Form.

## **An Allegation of a Suspected Controlled Drug-related Incident**

### Carrying Out a Search

If the Designated Teacher for Drugs receives an allegation of possession, he may need to search a pupil's desk or belongings, if he has cause to believe it contains unlawful items, including controlled drugs. However, teachers cannot search personal belongings in the desk or belongings without consent. Staff should only search the pupil's personal belongings, including school bag, coat and other items with the pupil's consent. Staff should carry out this search in the presence of the pupil and another adult witness. If the school suspects pupils of concealing controlled drugs on their person or in their personal belongings, staff should make every effort to encourage them to produce these substances voluntarily. Staff should ask pupils to turn out their pockets or schoolbags. If the pupils refuse, staff should contact their parents or guardians and the PSNI to deal with the situation. A member of staff should never carry out a physical search of a pupil, unless there is compelling evidence that the pupil has committed an offence. If staff recover a substance or object that they suspect has a connection with drugs, they should take possession of it and make a full record using the school's Drug Incident Report Form.

### Possession, Possession with Intent to Supply and Supply of Controlled Drugs

Schools must be aware that pupil involvement in suspected controlled drug-related incidents may take several forms.

These could include:

- possession;
- possession with intent to supply; and / or
- the supply of controlled drugs.

It is illegal for pupils to be in possession of a controlled drug. If a member of staff comes across a pupil(s) in possession of what they believe or suspect to be a controlled drug, they should immediately attempt to take possession of the substance and escort the pupil(s) to the Designated Teacher for Drugs who will deal with the incident as outlined in the school policy.

## **Staff Policy on Smoking and Alcohol**

St. Mary's Primary School, Killyclogher, Primary School is a smoke (including e-cigarettes) and alcohol free zone. For further information refer to the Health and Safety Executive's website ([www.hse.gov.uk](http://www.hse.gov.uk)).

## **Confidentiality**

Should a pupil reveal any personal drugs information, which puts them or any other pupil at risk, this must be passed on to the Designated Teacher/Principal. Confidentiality can never be guaranteed, as we are responsible for all of the pupils in our school.

## **Disciplinary / Pastoral Care Responses**

The Principal will retain responsibility for deciding how to respond to a particular incident and will take into account factors such as:

- the age of the pupil
- does the pupil admit or deny the allegations?
- is this the first or subsequent offence?
- is the drug legal or illegal?
- quantity of the drug involved?

- what was the pupil's motivation?
- does the pupil know and understand the school policy and school rules?
- where does the incident appear on a scale from possession of a small quantity to persistent supply?
- if illegal supply is suspected, how much was supplied and was the pupils coerced to buy for others, or is there evidence of organised or habitual supply?

At all times the needs of individual pupils will be considered and appropriate intervention and support mechanisms will be put into place.

Any sanction imposed will be justifiable in terms of:

- the seriousness of the incident;
- the identified needs of the pupil, other pupils and the community;
- consistency with published school rules;
- consistency with disciplinary actions for breaches of the school rules (e.g. theft, violence and bullying).

### **Procedures for Using Outside Agencies**

Any visitor providing an input to the drugs education programme will be given a copy of the 'Drugs Policy'. They will have a clear set of aims and objectives as well as a lesson plan. The teacher will view these to ensure they are appropriate and will remain in class with the visitor.

### **Guidance for Confiscation and Storage of Harmful Substances**

Any confiscated drugs or drug-related items should be given to the Principal for storage in a locked cabinet in the Principal's office and then given to the PSNI.

### **Guidance on the Administration of Medication in School**

Please refer to the school policy on the Administration of Medication. Medication will only be given on school trips if the parent/carer has signed a consent form. If a child needs any other medication, he/she will be taken to the nearest hospital.

### **Training and Development**

The Principal has responsibility for providing guidance to staff on handling drug-related incidents and for overseeing the implementation of the school's procedures and education programme. All staff will receive appropriate training and development, in line with the school's Staff Development Policy.

### **Communication and Dissemination of this Policy**

The school will publish this policy on its school website. A paper copy is available upon request.

### **Monitoring and Evaluation**

This policy will be reviewed every three years and/or after any drug related or suspected drug related incident to see if there are improvements to be made.

## Appendices

Appendix 1	Managing an Incident
Appendix 2	Finding drugs on school premises
Appendix 3	Recognising Signs of Substance Abuse
Appendix 4	Emergency Procedures
Appendix 5	Drugs Incident Report Form



## **Appendix 1**

### **Managing an Incident**

#### Individual staff members should:

- assess the situation and decide the action;
- make the situation safe for all pupils and other members of staff, secure first aid and send for additional staff support, if necessary;
- carefully gather up any drugs and/or associated paraphernalia or evidence and pass all information or evidence to the designated teacher for drugs; and
- write a brief factual report of the incident and forward it to the designated teacher for drugs.

#### The Designated Teacher for Drugs (Vice Principal) should:

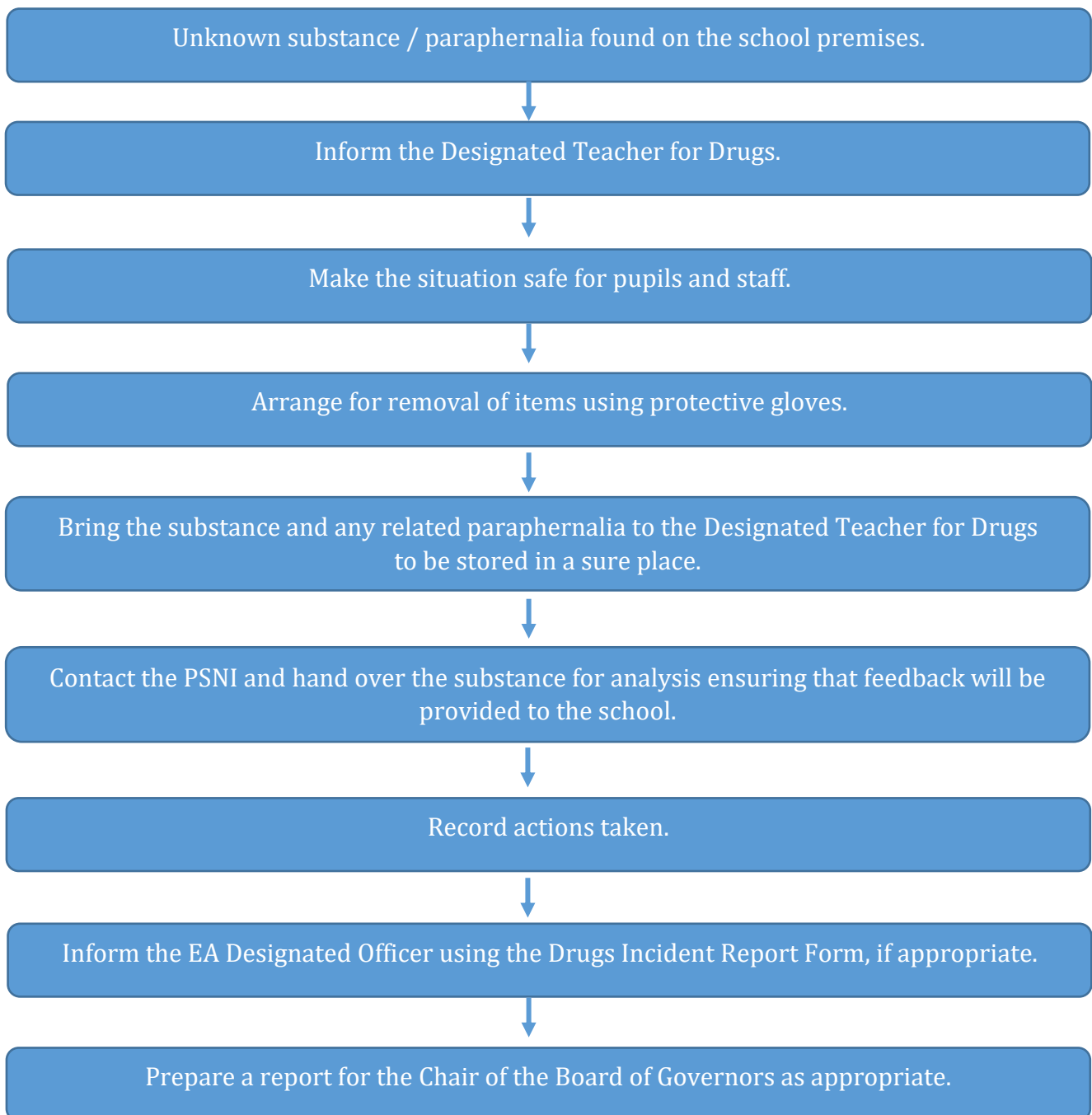
- respond to the first aider's advice or recommendations;
- inform parents or guardians immediately, in the case of an emergency;
- take possession of any substance(s) and associated paraphernalia found;
- inform the Principal;
- take initial responsibility for pupil(s) involved in the suspected incident; and
- complete a Drugs Incident Report Form, and forward it to the principal.

#### The Principal should:

- determine the circumstances surrounding the incident;
- ensure that the following people are informed:
  - parents or guardians;
  - Designated Officer in the local PSNI area;
  - Board of Governors; and
  - Designated Officer in EA;
- consult and agree pastoral and disciplinary responses, including support;
- forward a copy of the Incident Report Form to the Chairperson of the Board of Governors and the Designated Officer in the EA; and
- review procedures and amend, if necessary.

## Appendix 2

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



## Appendix 3

### Recognising Signs of Substance Abuse

The following guidance can be found in 'CEA Drugs Guidance for Schools in Northern Ireland (Revised Edition 2015)' page 42.

#### What to look out for:

If someone is having a bad time on drugs, they may be:

- Anxious
- Tense
- Panicky
- Overheated and dehydrated
- Drowsy
- Having difficulty 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 have 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 in 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 they get the right treatment straight away.

## Appendix 4

### Emergency Procedures

The following guidance can be found in 'CEA Drugs Guidance for Schools in Northern Ireland (Revised Edition 2015)' page 44.

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 compressions 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 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

### St. Mary's Primary School, Killyclogher, Drugs Incident Report Form

1	Name of Pupil: _____ Year Group: _____ 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 / Guardian informed: YES / NO Date: _____ Time: _____
5	Where substance(s) retained: _____ or Date passed to PSNI: _____ Time: _____
6	PSNI Informed: YES / NO Date: _____ Time: _____
7	Education Authority Designated Officer informed: YES / NO Name of EA Officer: _____ Date: _____ Time: _____
8	Form Completed by: _____ Date: _____ Position: _____

Description of the Incident:

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Incident form completed by: Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Countersigned by School Principal: \_\_\_\_\_

Date: \_\_\_\_\_

## Overview of the Drugs Education Programme

Year Group	Element	Outline
Foundation Stage	<p>Knowledge &amp; Understanding</p> <p>Skills</p> <p>Attitudes</p>	<p>How the body works, naming body parts etc.            Learning about medicines and drugs through play.            Identifying people who may help with concerns.            Expressing personal dislikes and preferences with teacher and peers in circle time.            Developing social skills required for friendship.</p> <p>Respect and caring for others – learning about whom to trust and being aware of the limits of friendship.            Healthy eating – importance of fruit and vegetables.</p> <p>Identifying and classifying dangerous substances around the house.            Following safety instructions.            Considering the positives of keeping a healthy body.</p>
Key Stage 1	<p>Knowledge &amp; Understanding</p> <p>Skills</p> <p>Attitudes</p>	<p>Sorting healthy and unhealthy things.            Revise and extend knowledge of harmful substance found at home.            Communicating ideas related to exercise and fitness.            Caring for your body.            Consider extremes of diet and their effects.            Taking advice from adults.</p> <p>Build on concepts of hygiene and nutrition acquired in previous years.</p>
Key Stage 2	<p>Knowledge &amp; Understanding</p> <p>Skills</p> <p>Attitudes</p>	<p>Develop greater awareness of safety concerning household and other waste – chemicals, dangerous containers, needles etc.</p> <p>Dangers of smoking – experimental work to demonstrate the dangers of smoking and the resultant effects on the lungs.            Passive smoking.            Communicating feelings about smoking in society – relatives etc. Knowing that adults do not always set a good example.            Respecting own health by choosing not to smoke.            Discussing ways to say 'NO'.</p> <p>Damage to organs caused by alcohol and smoking.            Potential benefits and dangers associated with drug intake.            Overdose and side effects.            'Good' v 'bad' drugs.            Using prescribed medicines safely. Following dosage instructions.            Considering place of alcohol in society.            Valuing health by making correct choices about diet, exercise etc.            Considering how to counter peer pressure as they get older.</p>