

Enniskillen Integrated Primary School and Nursery Unit



Drugs Policy

Ratified by Board of Governors:

As per statement on Website

THE SCHOOL ETHOS

Enniskillen Integrated Primary School and Nursery Unit is committed to:

- The aims of Integrated Education.
- A Child Centred Education.
- Working closely with parents in the education of their children
- High academic standards.
- Developing positive and effective pastoral care systems in our school.

The school and nursery unit provides a secure and stimulating environment that encourages pupils to be conscious of health and safety issues and to exercise responsibility.

Central to pastoral care is the building of strong relationships and the fostering of mutual respect between staff and pupils.

Respect for diversity, and the valuing of all members of the school community as equals, are at the heart of our ethos.

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

INTRODUCTION

The School's Drugs Education Policy is a statutory document, in accordance with **Drugs: Guidance for Schools in Northern Ireland Revised Edition 2015**. The policy follows the guidance given in the **CCEA Drug Education Policy Document**. We believe that the misuse of drugs endangers not only our pupils but also affects the wider community in which we live. It is our responsibility to ensure the health and safety of the young people while they are in our care, and we also strive to promote their personal and social well-being. Drug misuse undermines this and hinders the development of the young person. The policy provides a focus for us to consider how drug education should be implemented and developed within the curriculum. The policy outlines the roles, responsibilities, and legal duties of key staff. From a wider perspective, it gives parents and the local community an opportunity for positive involvement in issues surrounding drugs.

RATIONALE

Enniskillen Integrated Primary School and Nursery Unit recognises that young people today are exposed to the risks associated with the existing drug culture in society. Young children are exposed to messages about drug use from an early age. The messages they receive from television and the media tend to glamorise the use of drugs. They are likely to have seen people using tobacco-related products, e-cigarettes, alcohol, prescribed medication in real life and may even be aware of drug misuse in their locality, hence it is important that they are educated as to the side effects and risks of drug use. We wish to promote the development of the 'whole person' which encompasses physical, mental, emotional, social, and environmental health; by equipping pupils with the knowledge, skills, attitudes and values to handle their lives effectively in the present and prepare them for adulthood. Research cites personal inadequacy, a lack of self-esteem and peer pressure as the main reasons for drug misuse among young people. This places a responsibility on the school to 'better prepare young people for adult life' -**Education Reform [NI] Order 1989**. Drugs education should therefore form an integral part of the school curriculum.

THE AIMS OF OUR DRUGS EDUCATION POLICY

- To have a clear and agreed understanding among everyone in the school community about the implications and possible consequences of drug use/misuse.
- To provide all staff (teaching and non-teaching) with adequate training and support to enable them to deal effectively and confidently with incidents of suspected drug misuse, and to ensure that the agreed procedures are consistently and sensitively applied in all situations.
- To empower teaching staff through appropriate training and support to develop and deliver an effective drug education programme.
- 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, alcohol, and volatile substances, 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 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.

RANGE OF SUBSTANCES

Our policy on drug education covers any substance under the **CCEA definition**; 'A drug is any substance which, 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 substances such as tea and coffee, substances include:

- alcohol and tobacco and tobacco-related products, including nicotine replacement therapy (NRT) and electronic cigarettes;
- 'over the counter medicine' such as paracetamol and cough medicines;
- prescribed drugs, such as antibiotics, painkillers, antidepressants, anti-psychotics, inhalers and stimulants such as Ritalin;
- volatile substances such as correcting fluids, thinners, gas lighter fuel, glues, petrol and aerosols;
- 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 as ‘not for human consumption’ to avoid prosecution, and;
- other substances such as amyl or butyl nitrite (known as poppers) and unprocessed magic mushrooms;

*We no longer use the term legal high because it is misleading. The public 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. The UK Government has published an NPS resource pack for informal educators and practitioners. It is available on the C2k digital library, Equella. You can find further information on NPS at www.drugscope.org.uk

Controlled substances 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 offence 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. **Appendix 1**

ELECTRONIC CIGARETTES ON SCHOOL PREMISES

Electronic cigarettes are battery-powered vapour inhaler devices that generally contain nicotine, along with propylene glycol and glycerine. They were developed as an alternative to tobacco products and have become increasingly popular. Although we perceive electronic cigarettes to be less harmful than tobacco, there are concerns about their safe use, particularly when children and young people use them, because the electronic cigarette market is unregulated. The Chief Medical Officer (CMO) for Northern Ireland has advised that schools prohibit electronic cigarettes on their premises, in line with tobacco products, because:

- nicotine is very addictive and there is a risk that using electronic cigarettes could act as a gateway into smoking for many young people;
- evidence suggests that adolescent exposure to nicotine may also have long term consequences for brain development;
- the availability and promotion of electronic cigarettes is reversing progress made by smoke-free legislation to de-normalise smoking; and
- there is insufficient evidence to determine whether the vapour produced by electronic cigarettes causes damage to users’ health in the long term. The same applies to the impact of second-hand vapour the user exhales. There is also a potential risk that users might fill the refillable cartridges used in some electronic cigarettes with substances other than nicotine. This has the potential to serve as a new and potentially dangerous way to deliver other drugs. The CMO recommended that the Department of Education extend its current guidance to schools, which encourages them to implement a complete smoking ban on both internal and external premises, to include electronic cigarettes. Reflecting this advice, the Department issued **Circular 2014/25** to all schools on 15 December 2014. You can find the **Employing Authority’s Smoking Policy for Schools (TNC 2000/3)** at www.deni.gov.uk

For more information about tobacco and NRT, visit www.want2stop.info

For information on electronic cigarettes visit www.publichealth.hscni.net

PROCEDURES for handling alcohol and tobacco misuse, prescribed medicines and solvents, are found in **Appendix 2**. This policy complements The Child Protection and Safeguarding Policy, and Pastoral Care Policies. It does not exist in isolation.

ROLES AND RESPONSIBILITIES

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.

Parents/Guardians

- Support the school in the development and implementation of this policy, including the school's procedures for handling incidents of suspected drug misuse and the drug education programme.
- Support your son/daughter if they have become involved with drugs.

All staff (teaching and non-teaching)

- Be alert to the possibility of drug use/misuse.
- Be familiar with the school's procedures in the handling of suspected drug-related incidents.
- It is not the responsibility of the individual staff member to investigate the circumstances surrounding an incident, however he/she should deal with any emergency procedures if necessary.
- Any information, substance or paraphernalia received should be forwarded to the designated teacher for drugs who may have to take immediate action.

Teachers delivering the Drug Education programme

In addition to the above:

- Deliver the school's drug education programme.
- Try to create an atmosphere in the classroom in which pupils can freely contribute to discussion, safe in the knowledge that the comments, ideas, and feelings of the group are valued.
- Support pupils in their class if necessary.
- Liaise with the designated teacher for drugs regarding any aspect of the programme/policy, as necessary.

The Designated Teacher for Drugs (Name: Adele Kerr)

- Ensure that all staff and parents are aware of and have access to a copy of the policy.
- Have oversight and co-ordination of the planning of curricular provision in compliance with the statutory requirements including periodic update and review of the policy.
- Liaise with other staff responsible for pastoral care in co-coordinating the delivery of the drug education programme.
- Be responsible for co-coordinating the school's procedures for dealing with incidents of suspected drug misuse.
- Co-ordinate training and induction of all staff in the procedures for dealing with incidents of suspected drug misuse.
- Determine the circumstances surrounding any suspected drug-related incident.

- Complete a suspected incident report form and forward to the Principal.
- Ensure the engagement and active participation of parents in all aspects of drug education.
- Act as the point of contact for outside agencies working with the school.

The Principal

- Ensure that members of the Board of Governors have been consulted on and ratified the policy.

In the case of incidents of suspected drug misuse:

- Ensure the welfare and well-being of the pupil(s) involved in the incident and the rest of the school community.
- Ensure that the following people are informed (where relevant):
 - * Parents/guardians
 - * PSNI - preferably the Community and Schools Involvement Officer (CSIO)
 - * Board of Governors
 - * Designated Officer in EA
 - * Members of staff
 - * Other pupils and parents informed within the confines of confidentiality
- Agree, in consultation with the Board of Governors, appropriate pastoral and disciplinary responses in relation to the incident, including counselling services/support.
- Retain written records of the incident and ensure a copy of the report is submitted to Board of Governors and EA as appropriate.
- Review procedures and amend as appropriate.

The Board of Governors

- Examine and approve the completed policy and education programme, prior to their implementation in the school.
- Ensure the policy is published in the school prospectus and that it is reviewed at regular intervals.
- Be fully aware of and adequately trained to deal with suspected incidents of drug misuse, including tobacco and alcohol, and their appropriate disciplinary response.
- Agree in consultation with the principal appropriate pastoral and disciplinary responses in relation to suspected drug related incidents.
- Designate a Governor to work with the Principal and designated teacher for drugs in relation to drug-related incidents.

The Building Supervisor

- Be vigilant around and conduct regular checks of the school grounds for drug-related paraphernalia, and inform the designated teacher for drugs as appropriate.
- Ensure the safe storage, handling and disposal of potentially harmful substances such as solvents and cleaning fluids.

ROLES AND RESPONSIBILITIES WHEN MANAGING AN INCIDENT – Appendix 3

Handling Drug Related Incidents – Appendix 4

THE LAW IN NORTHERN IRELAND

All staff employed by The Board of Governors of Enniskillen Integrated Primary School and Nursery Unit 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: **The Misuse of Drugs Act 1971, Section 5 of the Criminal Law Act [Northern Ireland] 1967, and Powers of Arrest, Police and Criminal Evidence Order [NI] 1989.**

If the Principal has reasonable grounds to suspect that drugs are being used or supplied on the school premises, they 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 pupil 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 PSNI contacted. **Appendix 4.**

PROCEDURES FOR HANDLING AND REPORTING INCIDENTS A suspected drug-related incident is described as:

- suspect drugs or substance-related paraphernalia found on the school premises;
- a pupil suspected of being in possession of drugs;
- a pupil found to be in possession of drugs;
- a pupil suspected of possession with intention to supply any substance listed on **Appendix 1**
- a pupil suspected of being under the influence of drugs because of their unusual or uncharacteristic behaviour.

When an incident occurs the member of staff involved should:

- assess the situation;
- notify the Principal who is The 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 (**Appendix 5**) and forward to the designated teacher for drugs/Principal;
- consider the needs and safety of the pupil 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 pupil;
- invoke safeguarding procedures, if a parent or carer’s behaviour may place a pupil at risk.

The incident will, in the first instance, be reported to the designated teacher/ Principal, who will contact the PSNI. The parents 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' will be filled out. One copy will be sent to the Education Authority - Western 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 4** 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 pupil from harm and prevent the pupil from committing the offence of possession.

It should be given to the designated teacher 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 receives an allegation of possession, he or she may need to search a pupil's desk if he or she has cause to believe it contains unlawful items, including controlled drugs.

However, staff cannot search personal belongings in the desk or cloakroom without consent.

Staff should only search the pupil's personal belongings including schoolbag, coat or other items with the pupil's consent.

Staff should carry out this search in the presence of the pupil and another adult witness.

PROCEDURES RELATING TO DISCIPLINE AND COUNSELLING

Procedures will be carried out in line with the Positive Behaviour Policy and each case will be treated separately. However, the school views the possessions of drugs as a serious breach of the discipline code and will treat it as such. The supply of drugs to others is an even more serious offence and any punishment given will reflect this. Deciding on appropriate sanctions

The Principal is responsible for deciding how to respond to particular incidents, taking account of factors such as:

- the age of the pupil concerned;
- whether the incident involved one pupil or a group of pupils;
- whether there has been evidence of particular peer group pressure; and
- the level of a pupil's involvement.

In accordance with the Positive Behaviour Policy, the School will consider what sanctions or actions are most appropriate and in the best interests of the pupil in the longer term, whilst ensuring the safety

and wellbeing of other pupils. The school will determine the seriousness of the incident and the needs of those involved before responding accordingly.

Factors for consideration include:

- Does the pupil admit to or deny the allegations?
- Is this a first offence?
- Is the substance legal or illegal?
- What quantity of the substance was involved?
- What was the pupil's motivation?
- Is the pupil knowledgeable and careful or reckless about their own and others' safety?
- Does the pupil have a parent, carer or family member who is misusing drugs?
- Does the pupil know and understand the policy and School rules?
- Where does the incident appear on a scale from 'possession of a small quantity' to 'persistent supply'?
- If the School suspects the pupil of supplying, how much was supplied and was the pupil coerced into the supply role for others, or is there evidence of organised or habitual supply?

Enniskillen Integrated Primary School and Nursery Unit will develop a range of strategies for responding to the identified needs of those involved in a specific drug-related incident. Whatever response is put in place will always aim to give pupils the opportunity to learn from their mistakes and to develop as individuals.

The school will justify any sanction it imposes, according to:

- the seriousness of the incident;
- the identified needs of the pupil, which are particularly important under such circumstances;
- the needs of other pupils, the School and the community;
- the published School rules and expectations; and
- any related breaches of other School rules (such as theft, violence or bullying).

We will take into account whether a pupil involved in an incident has previously displayed good behaviour and engagement with the school, how proposed sanctions might affect the pupil's educational outcomes, and any other relevant pastoral issues when deciding on responses to drug-related incidents.

Suspension or Exclusion

Schools are advised that they should not automatically exclude a pupil because they have broken the law. However, schools have a duty to protect all pupils from exposure to potentially dangerous substances. Enniskillen Integrated Primary School and Nursery Unit will consider and carry out any suspension or exclusion within the terms of schemes prepared by the Board of Governors. When the School permanently excludes a pupil on a drug related offence, the Education Authority will work to secure an alternative school place for the pupil.

Role of counselling

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

1. Hidden harm, where a young person is affected by their parents' or carer's substance misuse.
2. Domestic violence.
3. Parental mental health.

Counselling is only appropriate when a pupil wishes to take advantage of what it offers.

EMERGENCY PROCEDURES

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

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

The reference pathway for specified school incidents is contained in **Appendix 5**, and useful contacts and websites in **Appendix 11**.

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 requirement 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 pupil discloses to a member of staff or the school counsellor that he or she is taking drugs, the member of staff or the counsellor should make it clear that he or she cannot offer confidentiality and report it to the teacher who is designated to deal with drug-related incidents. The member of staff or the counsellor can advise the pupil of sources of confidential information or advice. Pupils should also be encouraged to talk to their parents.

DEALING WITH THE MEDIA

If the school receives an enquiry from the media, the caller should be referred only to the Principal. When responding to the media, the privacy of the pupil should be respected, they are only to give short, factual statements, and the concluding statement should be positive, and reassuring. No further comments should be given.

THE PLACE OF DRUGS EDUCATION WITHIN 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 pupils to make informed choices. Effective drug education should take account of not only the individual, but also the family, their peer groups, and the wider community. Where possible, the school promotes the partnership between the parent and child, when addressing drug issues.

In Northern Ireland, the statutory curriculum for primary school children includes The Area for Learning, Personal Development and Mutual Understanding. This area of learning provides opportunities for children 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.

Our Teaching and Learning is through our school Health Education Programme – **Appendix 6**

OUTSIDE AGENCIES

The content and delivery of the programme must be jointly agreed and the programme and methods of delivery are consistent with the aims and objectives outlined in this policy.

Referrals – **Appendix 8**

MONITORING AND EVALUATING

Our school Drug Policy is reviewed every three years to reflect changing circumstances and trends in drugs use. The programmes of study for drug education are continually reviewed and any changes deemed necessary are implemented. The policy appears as an item on the agenda of staff meetings as required and all new staff are familiarised with it. The policy is available to parents if they request it. The policy can also be accessed from the school website.

ADDITIONAL

Appendix 9 – Checklist for Handling Suspected Drug Related Incidents in School

Appendix 10 – Summary of Relevant Legislation Applicable to N Ireland

Appendix 11 – Alcohol and Drug Services for Young People

Appendix 1

Main Types Of Controlled Substances by Class

The Misuse of Drugs Act (1971)

Class	Substance	Possession	Supply and production
	Crack cocaine, cocaine, ecstasy (MDMA), heroin, LSD, magic mushrooms, methadone, methamphetamine (crystal meth)	Up to 7 years in prison, an unlimited fine or both	Up to life in prison, an unlimited fine or both
	Amphetamines, barbiturates, cannabis, codeine, methylphenidate (Ritalin), synthetic cannabinoids, synthetic cathinones (for example mephedrone or methoxetamine)	Up to 5 years in prison, an unlimited fine or both	Up to 14 years in prison, an unlimited fine or both
c	Anabolic steroids, benzodiazepines (diazepam), gamma hydroxybutyrate (GHB), gamma-butyrolactone (GBL), ketamine, piperazines (BZP)	Up to 2 years in prison, an unlimited fine or both	Up to 14 years in prison, an unlimited fine or both
Temporary class substance*	NBOMe and Benzofuran compounds	None, but police can take away a suspected temporary class substance	Up to 14 years in prison, an unlimited fine or both

www.gov.uk/penalties,,drug-possession-dealing

Please note the above table refers to some commonly available drugs. It is not a complete list of controlled drugs.

Offences under the Misuse of Drugs Act (1971)

These include:

- possession — to knowingly be in possession of a relatively small quantity of a controlled substance for personal use; the police decide what constitutes a small quantity;
- possession with intent to supply another person a controlled substance — possessing a larger quantity of a substance or packaging it in a way that indicates it is going to be supplied to others;
- supplying another person a controlled substance — giving or selling a substance to someone else, including friends; and
- supplying or offering to supply substance paraphernalia — this includes equipment for smoking cannabis or crack cocaine, but needles and syringes are exempt.

Appendix 2

The school does not allow the abuse of alcohol on the premises. This applies to visitors, staff, and pupils.

Adults breaking this rule will be referred to the Principal directly. Pupils will be dealt with under the school's Positive Behaviour Policy.

Code of Conduct using alcohol / tobacco misuse

- i. Pupils may not be in possession of alcohol.
- ii. Smoking is strictly forbidden on all school trips.
- iii. The school is a restricted environment with no-one being permitted to smoke or vape on the school premises.
- iv. Adults breaking this rule will be advised by other members of staff.
- v. Pupils breaking this rule will be dealt with under the school's Positive Behaviour Policy.

The management of prescribed medicines

At the start of the school year, parents must complete, or update, a medical form indicating any medical illness their child has. Parents should inform class teachers if a pupil wishes to carry their own medication in school. In some circumstances, the task of administering a prescribed medicine may be delegated to a teacher or classroom assistant.

The teacher/classroom assistant has to agree to carry out this task and is not obliged to do so. Before embarking on school trips, the teacher-in-charge should have in place a procedure with regard to the storage and administration of medication. They must also make it clear at the outset, to pupils and parents, the procedure for dealing with a pupil found smoking, including electronic cigarettes, drinking alcohol or misusing drugs whilst on the school trip.

The management of solvents

Pupils are not permitted to bring solvents or aerosols into school. This includes Tipp-Ex fluid and pens, Tipp-Ex thinners, solvent-based glue, permanent markers and spray deodorants. Pupils are permitted to bring felt tip pens into 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. This includes white board markers, glues and paints. 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

Appendix 3

Checklist of Roles and Responsibilities When 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 should:

- respond to first aider's advice or recommendations;
- inform parents or carers 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 (see Appendix 5) and forward it to the principal.

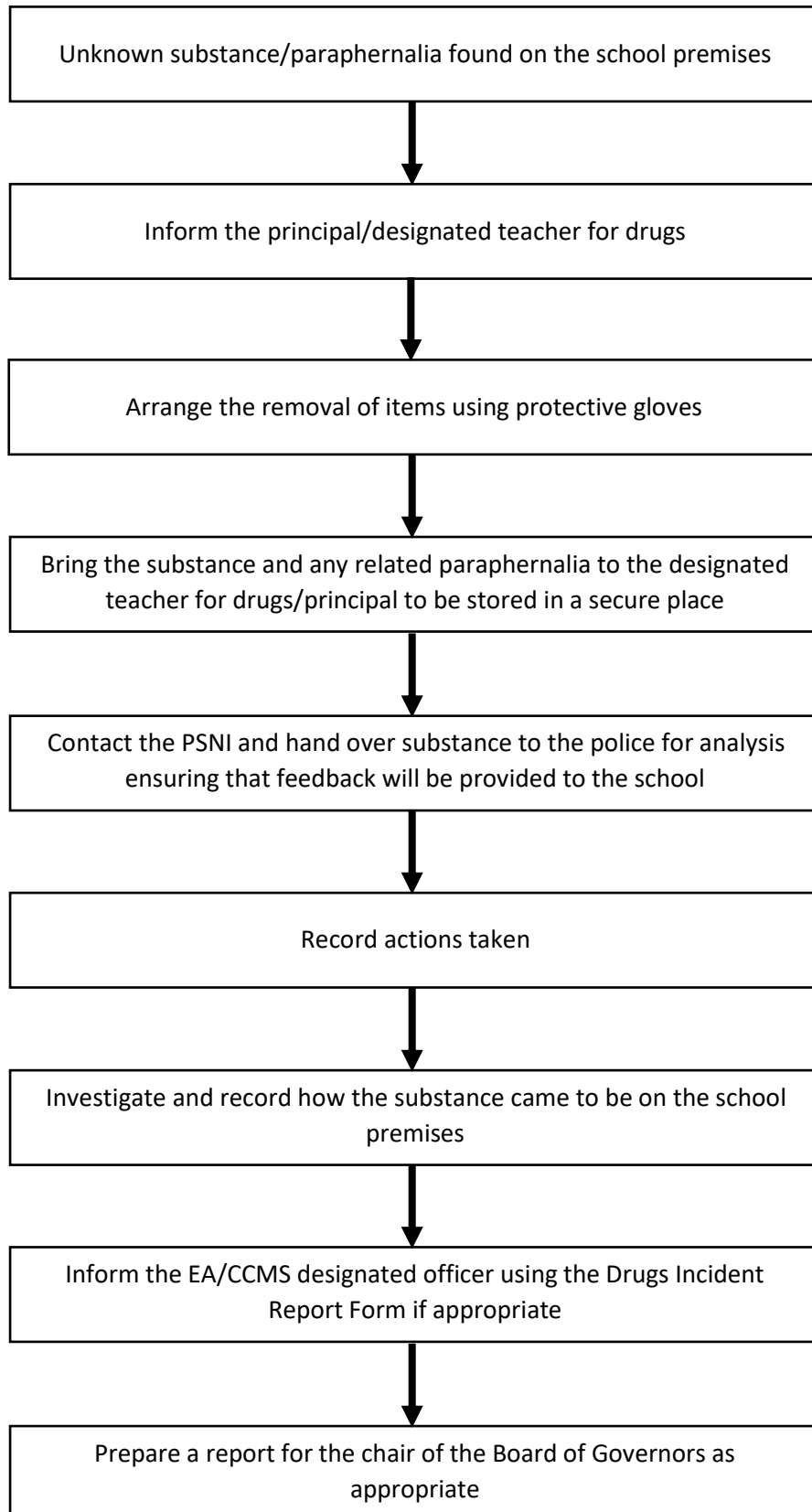
The principal should:

- determine the circumstances surrounding the incident;
- ensure that the following people are informed:
 - parents or carers;
 - designated officer in the local PSNI area; _ Board of Governors; and _ designated officer in Education Authority or CCMS.
- consult and agree pastoral and disciplinary responses, including counselling services or support;
- forward a copy of the Incident Report Form to the chairperson of the Board of Governors and the designated officer in the Education Authority or CCMS, if appropriate; and
- review procedures and amend, if necessary.

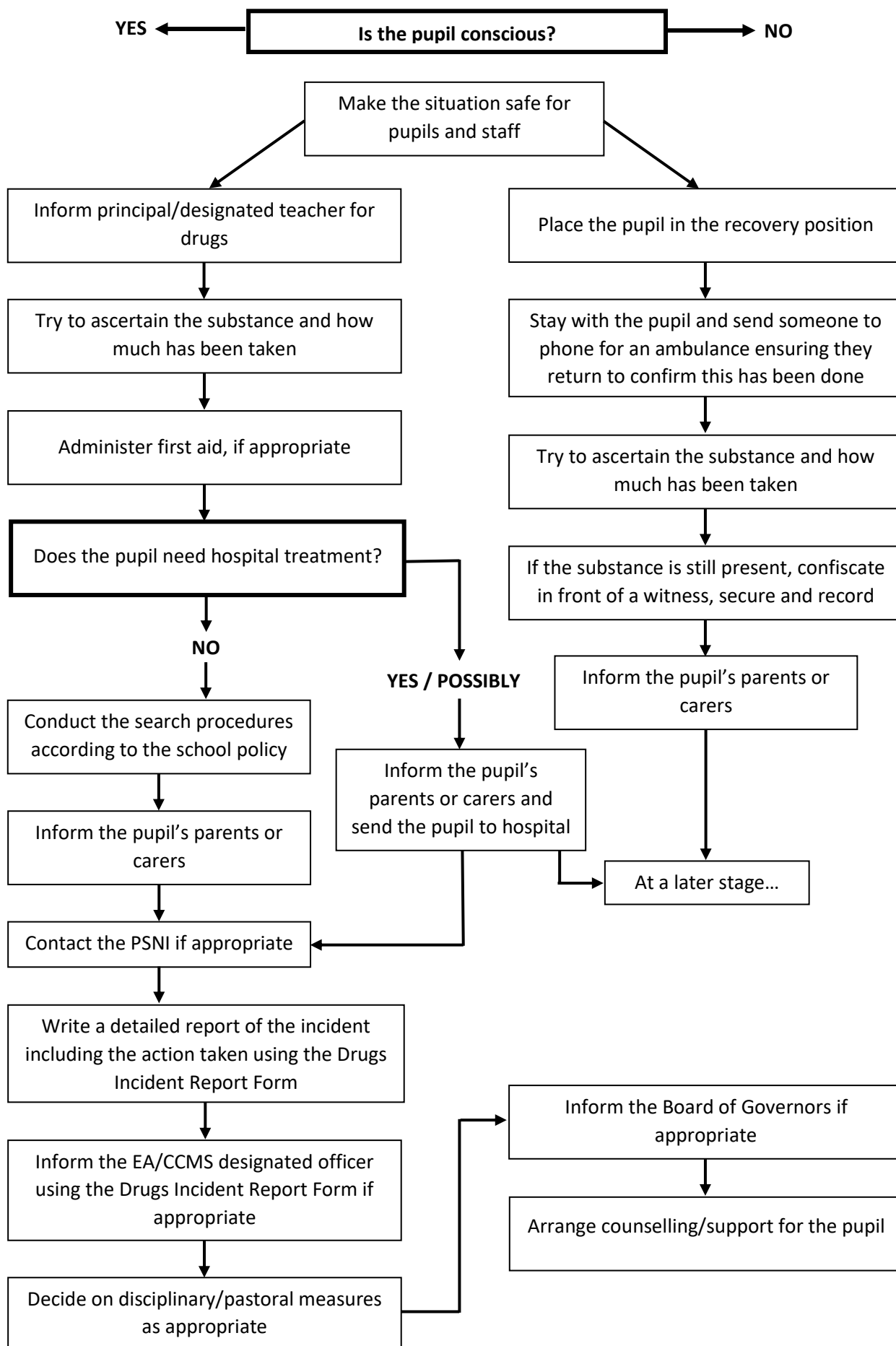
Appendix 4

Handling Drug-Related Incidents

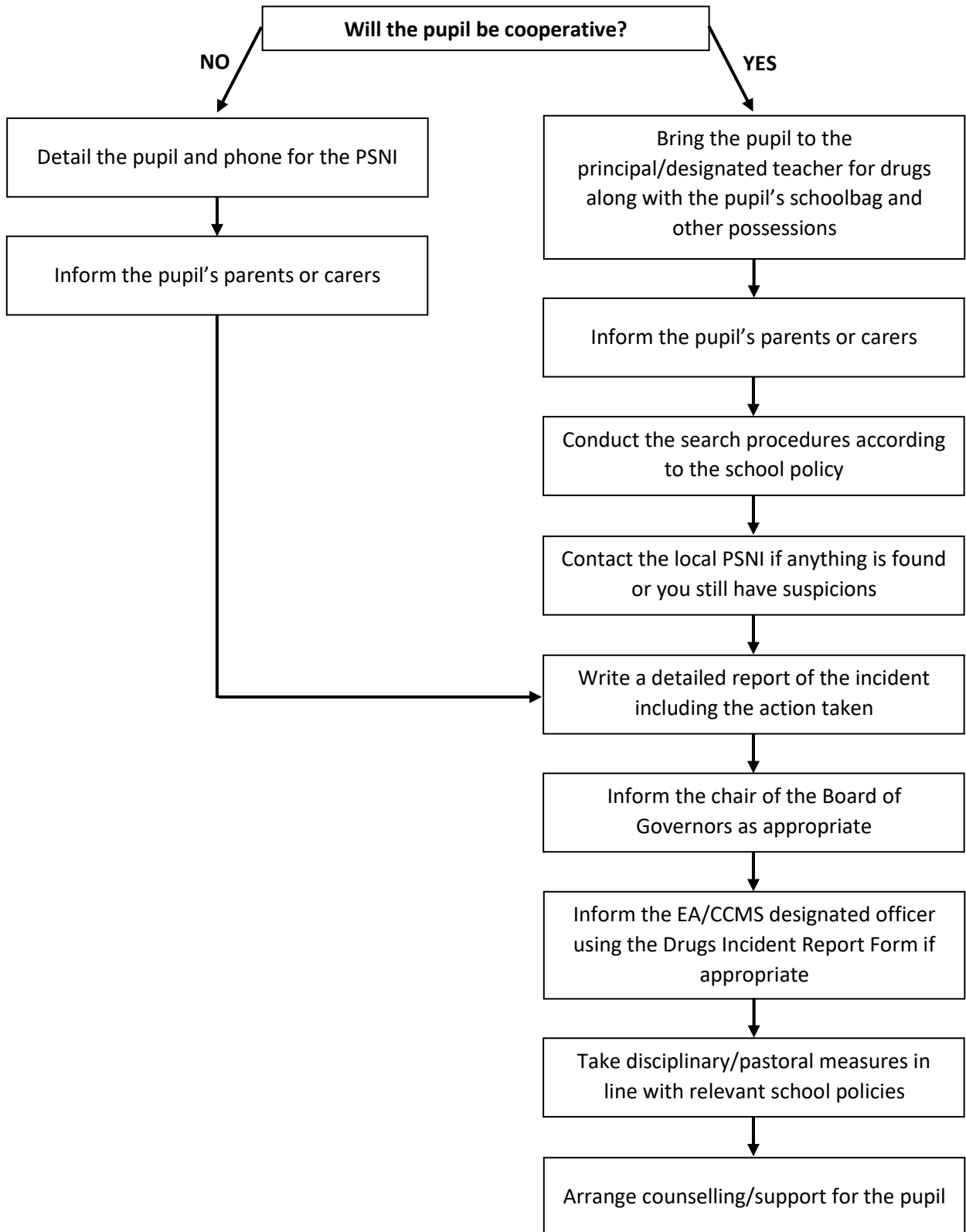
4.1 Finding a suspected substance or drug-related paraphernalia on or close to the school premises



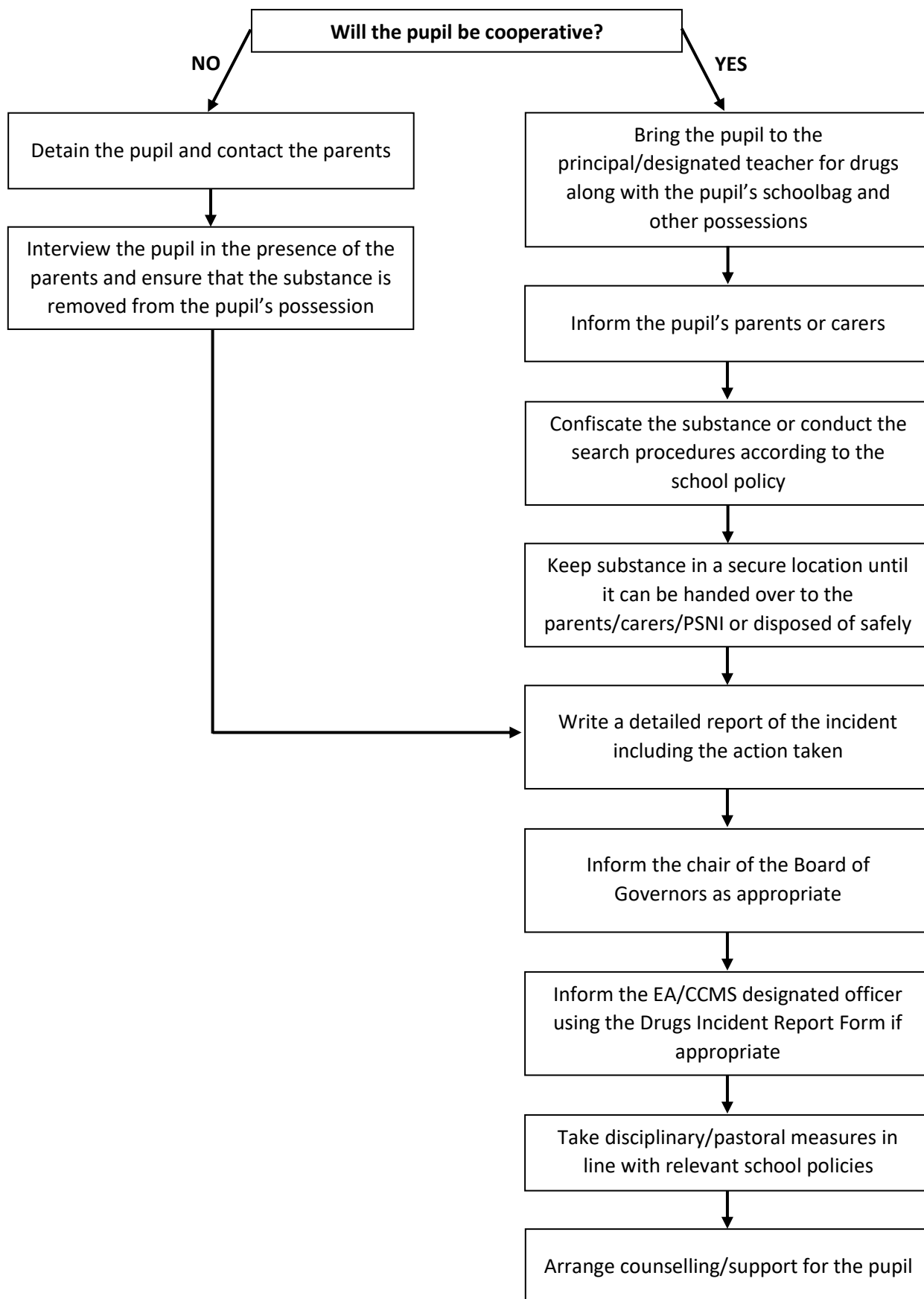
4.2 Pupil suspected of having taken drugs/alcohol on school premises



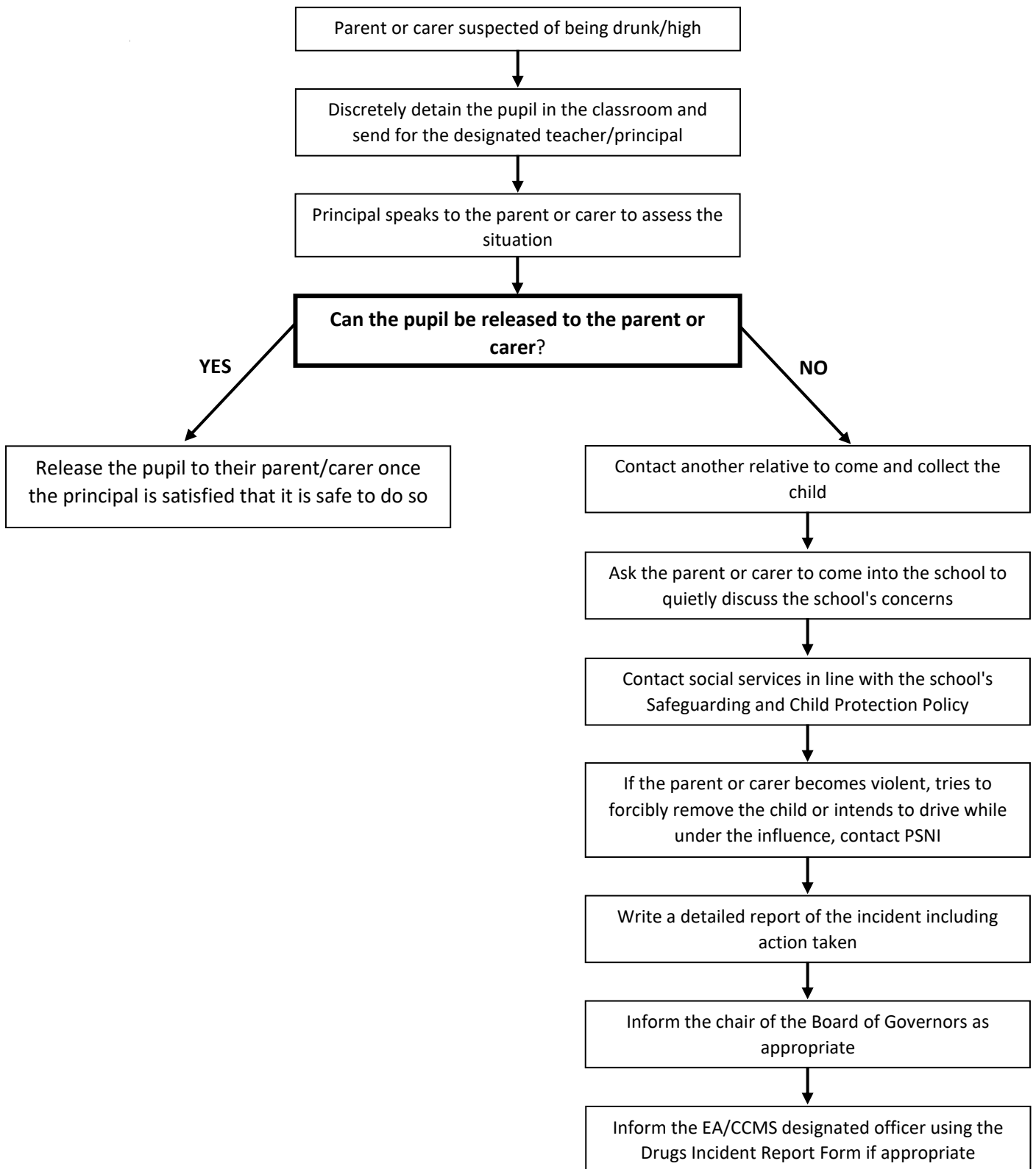
4.3 Pupil suspected of possessing/distributing an illegal substance



4.4 Pupil in possession of alcohol or unauthorised prescribed medication on the school premises



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



Appendix 5

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 _____ Time _____ Date _____
7.	Education Authority or CCMS Designated Officer informed, as appropriate YES/NO _____ Date _____ Time _____
8.	Form completed by _____ Date _____ Position _____

Year 1

- All About Me Topic
- People Who Help Us
- Water Topic—focus on drinking water and hygiene
- Growing and Living Things Topic—good diet and exercise—healthy/unhealthy foods
- Dental health
- Sun Safety
- Daily use of Road Safety Calendar

Year 2

- Day and Night Topic—morning and evening routines—hygiene, teeth and sleep
- On the Move Topic—Colour Topic—signs associated with Road safety
- Beach /Sun Safety
- Dangers in the home—poisonous substances



Mental Health and Emotional Well - Being

NSPCC Keeping Safe Programme—Year 1—7

Term 1—Theme: Healthy Relationships

Term 2—Theme: My Body

Term 3—Theme: Being Safe

PATHS Programme—Years 1—7—Model School Status

This programme is to enhance the social competence and social understanding of our children and to facilitate educational processes in our classrooms.

Anti-Bullying Ambassador Programme—accredited school

Emotional Health and Well-Being Notice Board in school with 'tips' and useful numbers for the children to use if they need help.



Year 3

- Family Topic—focus on own physical appearance and emotional well-being
- Food Topic—packaging, FAIRTRADE, food from different countries, recipes—link to mathematics—weighing, measuring
- Water and Growing—Topic focus on the dangers of smoking and medicine safety
- Road Safety
- Electrical danger in the home

Year 4

- Houses and Homes Topic—daily walks, walking tour of Enniskillen
- World Celebrations
- Harvest
- Weather Topic—climate change, comparing and contrasting weather environments
- Minibeasts—Life Cycles

Appendix 7

Strengthening the Partnership Between School and the Wider Community

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?

Appendix 8

Referral Pathway for Specified School Incidents

Type of Incident:

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 9

CHECKLIST FOR HANDLING SUSPECTED DRUG RELATED INCIDENTS IN SCHOOLS

This is a guide on the key procedures to undertake when a drug-related incident occurs in schools.

1. Ensure the safety of the individual pupil involved, of other pupils, yourself and other staff. On finding a situation with a suspected substance: -

- Get help immediately from another adult.
- Assess situation, to see if this is a life-threatening situation or not.

If an emergency: -

- If necessary contact an ambulance.
- Put person under the influence of the drugs in the recovery position.
- Ensure airways are cleared.
- Remove any other bystanders from the immediate vicinity.

Then in all cases: -

- Carefully gather up any drugs / paraphernalia / evidence lying around and keep safely.
- Ascertain which substances / drugs have been taken and how much.
- Secure all drugs and paraphernalia and give to the Principal / designated teacher for drugs immediately, and lock them away.
- Contact the parents/guardians as soon as possible.

2. Ensure all incidents are properly investigated and recorded: -

- Never accuse pupils of drug dealing/possession; these are alleged illicit substances until substantiated by the PSNI.
- Conduct search procedures according to school policy. (**Never search personal belongings without permission.** It is okay to search school property such as lockers, cupboards or desks).
- Ensure all drugs are safely and securely stored making sure that this is witnessed by another adult and recorded.
- Gather details and data from all the eyewitnesses at the scene.
- All statements and phone calls should be recorded, signed and dated.
- Record all information on official incident form and sign and date, or ensure accurate details are given to whoever is writing the form and co-sign.
- Ensure an incident form is filled in and forwarded to the WELB/CCMS, as appropriate.
- Ensure that you follow all the procedures in your School's Drugs Policy.

3. Ensure appropriate individuals and agencies are informed and contacted as needed: -

- Principal and designated teacher for drugs
- Parents / guardians
- PSNI (CSIO)
- EA/CCMS as appropriate
- Chairperson initially and subsequently the Board of Governors
- The Education Welfare Officer
- No media statements, only the Principal should do this
- Other pupils, parents and staff are only told on a need-to-know basis

Summary of Relevant Legislation Applicable to Northern Ireland (PSNI, PHA)

Appendix 10

1 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.

2 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; • 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.

3 Police and Criminal Evidence (PACE) (Northern Ireland) Order 1989

Article 26 (4)

- Any person may arrest without a warrant:
 - (a) anyone who is in the act of committing an arrestable offence; or
 - (b) anyone whom he/she has reasonable grounds for suspecting to be committing such an offence.

Summary of Relevant Legislation Applicable to Northern Ireland (PSNI, PHA)

Article 26 (5)

- Where an arrestable offence has been committed, any person may arrest without a warrant:
 - (a) anyone who is guilty of the offence; or
 - (b) anyone whom he/she has reasonable grounds for suspecting to be guilty of the offence.

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.

- (a) Possession of Controlled Drugs;
- (b) Possession of Controlled Drugs with Intent to Supply; or (c) Supply of Controlled Drugs.

NB: The above information is advisory only and does not represent legal opinion.

The Medicines Act (1968)

This Act divides medicines into three distinct categories:

- restricted medicines or prescription-only medicines, which can only be supplied by a pharmacist on receipt of a doctor's prescription;
- pharmacy (or over-the-counter) medicines, which can be sold without a prescription but only by a pharmacist in a pharmacy;
- general sales medicines, which can be sold without a prescription by any shop; and
- pharmacists and other retailers can be prosecuted and fined for offences under this Act. Possession of some prescription-only medicines, such as Temazepam, is illegal under the Misuse of Drugs Act (1971) if no prescription is held.

Tobacco Laws

It is an offence under section 7 of the Children and Young Persons Act 1933 (as amended by the Children and Young Persons (Protection from Tobacco Act 1991) for a vendor to sell tobacco products to anyone under the age of 16. Children under the age of 16 who purchase tobacco products are not themselves committing an offence. Police have the power to confiscate tobacco products from under 16s who are found smoking in a public place.

Alcohol Laws

It is an offence under the Children and Young Persons Act (Northern Ireland) 1968 to give alcohol to any child or young person under the age of 14. A person under the age of 14 is only allowed to consume alcohol in a private residence for medical purposes only. It is illegal for vendors to knowingly sell alcohol to anyone under the age of 18. Police have the power to confiscate alcohol from under 18s who are found drinking in a public place.



Summary of Relevant Legislation Applicable to Northern Ireland (PSNI, PHA)

Intoxicating Substances (Supply) Act (1985)

Solvents (e.g. aerosols, gases, glues) are not illegal to possess, use or buy but this Act makes it an offence for a shopkeeper to sell them to anyone under the age of 18 in the United Kingdom (excluding Scotland), knowing they are to be used for intoxicating purposes.

Cigarette Lighter Refill (Safety) Regulations 1999

In recognition of the high number of butane-related deaths, butane product sales, such as lighter refills, are further restricted under the Cigarette Lighter Refill (Safety) Regulations 1999. These regulations make it an offence for retailers to sell butane products to anyone under the age of 18, in any circumstances.

Alcohol and drug services for young people

Appendix 11

If you think your child may be using drugs and/or alcohol, and this is causing significant problems, the five Health and Social Services' Trusts have services for young people.

Each of the Northern Ireland Drug and Alcohol Co-ordination Teams (DACTs) in the five Health Trust areas has produced a directory of services available. You can find these at www.publichealth.hscni.net

You can also consult your GP to find out where your nearest support agency is.

If you need more urgent support and advice, contact:

- your GP or the out of hours GP service;
- the emergency department of your local hospital; or
- Lifeline: 0808 808 8000

ASIST (Applied Suicide Intervention Training) deals with the issue of suicide in communities. Contact your local Health Development Department for further information.

Support for you: in the Belfast or South Eastern Trust areas, Alcohol and You and the Belfast Alcohol Service provide one-to-one help for adult family members affected by someone else's alcohol misuse or addiction. Contact ASCERT at 028 92 604422

The person misusing alcohol does not need to be seeking help for a family member to use this service.

Support for young people affected by parental alcohol misuse: Steps to Cope offers support for young people aged 11–18 years in Northern Ireland, who are living with parental alcohol misuse.

Young people can receive support from: • face-to-face contact with a Steps to Cope worker; • the dedicated interactive website; or • a range of trained practitioners across Northern Ireland.

Telephone: 0800 254 5123

Website: www.stepstocope.co.uk

The Alcohol and You Partnership has useful information for parents and family members as well as a self-help section to help people address their drinking. Website: www.alcoholandyou.org