



Where each child is special and every child matters

## **Drug and Alcohol Education Policy**

### **Aims of Drug and Alcohol Education at Torpoint Nursery and Infant School**

- To help children to develop their knowledge and understanding of medicines and other drugs and how they are used.
- To help children to accept the increasing responsibility they have for maintaining a healthy lifestyle not involving drugs and other substance misuse.
- To help children develop their knowledge and understanding of themselves.
- To help children to recognise that each is unique, valuable and irreplaceable.

### **Objectives of Drug and Alcohol Education**

- To provide a range of activities and opportunities for learning about drugs and the issues raised by their use.
- To create a climate in which children feel comfortable discussing their perceptions of drugs
- To develop children's decision making skills
- To encourage children to participate in healthy activities
- To present opportunities for children to explore their feelings, attitudes and needs.
- To help children to maintain their own and each other's self-esteem.

## **How will Drug and Alcohol Education be taught?**

- Drug and alcohol education will be delivered through cross-curricular topics or as appropriate in Circle-time.
- Aspects of drug and alcohol education will be taught during PSHE sessions.
- The school acknowledges that a positive, health promoting ethos helps children to feel valued and part of the school community and in doing so helps to build self esteem and self images that may help children to cope more effectively in drug related situations.
- The use of visitors and outside agencies (e.g. school nurse, community police officers) will also be included where appropriate.
- Teachers will be prepared to respond to pupils questions as and when they arise.

### **Learning and Teaching Methods**

In keeping with the school's approach to PSHE a variety of teaching and learning methods will be used as appropriate to the topic and needs of the children, e.g. brainstorming, role play and group discussion.

These strategies will enable children to begin to:

- Place new learning in the context of previous experience;
- Explore currently held personal and cultural beliefs and values in the context of new learning;
- Apply new learning to other situations;
- Relate new knowledge to current behaviour, so as to be able to make and act on informed choices;
- Actively consider the implications of the learning for themselves, society and the environment.

### **Parental involvement**

The school believes that it is important to have the support of parents and the wider community for the drug education programme.

### **Assessment and Record Keeping**

- Long term, medium term and short term planning documents show coverage of the schemes of work based on school guidelines.
- Termly evaluations of planning and delivery of drug and alcohol education will show whether the agreed objectives and learning outcomes have been achieved.

## **Equal Opportunities**

In line with the equal opportunities provision in the PHSE policy we will:-

- Actively promote non-sexist language.
- Discuss issues of equal opportunities
- Develop a positive attitude to variety and difference.

## **Special Educational Needs**

Extra care will be taken to ensure sensitivity is shown towards children whose maturity, experience of family life and moral framework is a cause of concern.

**Child protection Procedure** - In all cases where a pupil alleges that he/she is being abused, 'Child Protection Procedures' will be followed. It will be made clear to the pupil that the member of staff is obliged to pass on this information.

## **Monitoring the Drug and Alcohol Education Policy**

Drug and Alcohol education will be monitored in line with the school monitoring policy.

P.S.H.E. and Science subject leaders will have responsibility to monitor the effectiveness of the planning and organisational procedures of drug and alcohol education that form part of their curriculum responsibility.

## **Review of the Policy**

This policy will be updated whenever appropriate and will be reviewed as part of the school's cycle of review.

## **What is the school's position to legally available substances on site?**

### **1. Tobacco**

The school operates a no smoking policy at all times throughout the building and grounds.

### **2. Alcohol**

The Headteacher must be consulted and permission obtained before arranging any functions at which alcohol may be consumed.

### **3. Solvents**

The school recognises that many ordinary substances (including whiteboard markers) lend themselves to misuse and therefore need to be carefully stored and managed.

### **4. Sun Screen**

Parents are encouraged to provide a sun screen product for their child they may send it with him to school, labelled with his name. We ask parents to teach their children to administer the lotion themselves so that vulnerable areas are protected. The sun screen is stored in the classroom and the children use it under the supervision of an adult

### **5. Medication: over the counter and prescribed drugs**

Asthma reliever inhalers and epipens are kept in school in a labelled container for easy and immediate access. Each container will contain a list of contents, pupils' names, expiry dates of the medication and a file for recording administration. The school assistant will update the boxes half termly or as necessary. The boxes will be taken outside in the event of a fire drill.

As of September 2017 there are seven staff members who hold current Paediatric First Aid Certificates. A further thirty seven members of staff hold the current Emergency First Aid for Schools certificate. All staff receive regular training in the administration of inhalers and epipens/anapens. (See school policy on medicines in schools for further information).

Parents must complete the appropriate consent and information sheet (Appendix 1) before any medicines will be administered. Any prescribed medicines that need to be taken by children during the school day must be in the original container clearly labelled with the child's name and instructions for use and brought to the school office personally by the parent.

Special arrangements may be made for children suffering from serious medical conditions who may require urgent or specialised care. Such conditions could be Asthma, Anaphylaxis, Diabetes and Epilepsy. In such cases parents need to agree an individual treatment plan in accordance with Pupils' Health and the

Administration of Medicines Guidance for schools and the school Doctor. A copy of this guidance is kept in the school office.

### **School Trips**

The school's policy on drugs applies to all school trips.

### **Responding to drug related incidents**

- The school acknowledges pastoral responsibility in this area and seeks to work closely with families and support agencies.
- The school will consider each drug incident individually and recognises that a variety of responses will be necessary to deal with incidents. It will consider very carefully the implications of any action it may take. The school seeks to balance the interests of the pupils involved, the other school members and the local community.
- The management of drug related incidents is co-ordinate by the Headteacher and will be in line with the school's Child Protection policy and procedures.
- Incidents involving drugs may take the form of emergencies, intoxication, discovery/observation, disclosure, suspicion/hearsay.

### **Emergency situations**

If a pupil is deemed to be in danger as a result of drug misuse e.g. collapsed, unconscious, the following course of action should be taken:

- Notify the office staff by the fastest possible means, to call an ambulance and briefly outline the cause of the emergency,
- Summon help immediately from another member of staff.
- Provide emergency aid to pupil as appropriate.
- Notify the Headteacher
- Notify the pupil's parents.
- Remove, in the presence of an adult witness, any suspicious substances/equipment and retain in case they are required by ambulance staff.
- Record the incident in the school's accident book.

### **b) Intoxication**

- The pupil will be removed to the Admin Officer/Medical room and be accompanied by a member of staff at all times.

- The first aider in charge will be called and further medical help summoned if necessary.
- Parents will be informed and called to the school to collect the child and advised to visit their GP.
- The incident will be recorded in the school's accident book.

#### **c) Discovery / observation**

- If a pupil is discovered possessing, using or dealing any substance not permitted in school (s)he will be taken to the Headteacher.
- The Headteacher will seek to remove any suspicious substances from the child (in the presence of an adult witness) or to secure the voluntary production of any substances believed to be concealed on the child, (intimate physical searches should not be made by any teacher). Any substance taken possession of will be sealed in a labelled plastic bag, signed by the witness present with the date and time added.
- The situation will be investigated promptly and thoroughly and a written record made.
- The child will be informed that the situation is a serious one (particularly if the substance in question is believed to be an illegal one) and the parents will be informed and asked to attend the school.
- If the substance is / or is suspected of being illegal, the Headteacher will call the local police to help with identification of the substance and give appropriate police involvement.
- The governing body of the school will subsequently be informed.

#### **d) Disclosure**

- A child may disclose to a member of staff that (s)he has been using drugs or is concerned about someone else's drug use, out of school hours.  
Concern for the child's welfare will be paramount but teachers will not be able to promise complete confidentiality and should make this known to a child seeking such an assurance. Information about a child in relation to drugs will follow the same procedure as for other sensitive information, the child protection officer/Headteacher will be informed and further help sought as appropriate.

#### **e) Suspicion/hearsay**

Any hearsay/rumour about pupil drug use will be carefully evaluated in the light of the school's own knowledge about the pupil and sensitively investigated before any possible action is taken.

If staff believe the rumour to be unfounded steps will be taken to challenge the rumour and its effects, e.g.

- challenging the behaviour that might have led to the rumour
- challenging those responsible for circulating ill-formed information
- challenging the environment in which rumours breed

If the rumour is found to be true, the same procedures will be taken as outlined in the previous section for disclosure of drug use.

If there is suspicion of a child misusing drugs the child will be observed and monitored over a period of time before deciding on appropriate action to be taken.

Recordings of child observations will be carried out by the staff member(s) making the observations and will adhere to the principles of recording for child protection notes.

### **Pupil Concern - Checklist**

#### **a) Social behaviour**

Significant changes in the availability and use of money

Increased activity i.e. hyperactive behaviour

Increased lethargy

Rapid changes in energy levels

Increased withdrawal

Changing friendship patterns

Rapid changes in disposition from elation to depression

Unco-operative behaviour

Truancy

Use of substance related language

Concealment and denial

Aggressiveness

Increased involvement in conflict situations

#### **b) Appearance/dress**

Stains on clothing

Smells on clothing

### **c) Physical condition**

Paleness

Tiredness

Weight loss

Lack of co-ordination

Poor hygiene

Spots around mouth/nose

Redness around mouth/nose

Blisters in the region of the mouth

Inflamed eyes

Injection marks

### **d) Learning performance**

Reduced concentration

Lack of interest

## **Drug /substance abusing parents**

The school recognises that some of its pupils may have a parent whose drug use (legal and/or illegal) is problematic. The child's welfare in this case is paramount and the school will act, within the legal limits that it can, to support the child in a variety of ways, practically and emotionally. Key staff involved in such support have received guidance and training in this area.

If a member of staff suspects that a parent collecting their child from school and intending to drive is intoxicated the police advice is that efforts should be calmly made to help the parent think of alternative, safer ways of getting home. This might include walking home, getting somebody else to collect them or calling a taxi. If the parent becomes aggressive and insists on driving on no account should staff put their own safety or security at risk. If possible staff should note down details of the car and phone the police with this information as soon as possible.

## **Training and support for staff**

Support for teaching and understanding drugs related issues is incorporated in our staff INSET programme using a range of agencies.



The Headteacher, SLT and PSHE co-ordinator have responsibility for ensuring that drugs issues are handled in the spirit embodied in this document.