#### ST MARY'S CATHOLIC PRIMARY SCHOOL



# Substance Misuse Policy and Procedures Dealing with Pupil Incidents

#### **Reviewed September 2023**

## Mission Statement

St Mary's school community followed the teachings of Jesus Christ, working together to develop the whole child, in a spiritual, moral, academic, physical, social and emotional way, within a caring and supportive environment.

# **Description of School**

St Mary's Catholic Primary School is a 2 form parish school at the heart of the community serving the Parish of Mary Mother of God in the Borough of Enfield; the majority of families are worshipping members.

Our Mission Statement emphasises that besides aiming to provide a high standard of education, we aim to create and maintain a Catholic Ethos which is characterized by the priority given to teaching the Catholic Faith through RE lessons. We are an educating community based on the call to witness to Jesus Christ and share His mission.

## **Ethos**

We recognise that there is a challenge in creating an enriching environment for all those involved at every level of school life. We take our lead and inspiration from Christ with regard to the Gospel values: the belief that all human beings are uniquely created and loved by God and worthy of respect. This challenge manifests itself in the way that we treat and value:

- Our relationships with each other and the wider community;
- Our respect for one another;
- Our welcome to and interest in all those who visit our school;
- Discipline inspired by forgiveness, healing and reconciliation;
- Our school environment.

Through rising to this challenge we aim to create an awareness of a sense of belonging to and being part of the life at St Mary's.

## Aims and Objectives of Substance Misuse Policy and Procedures

- To build on the individual child's existing knowledge, skills and understanding.
- To inform pupils of the dangers of substance misuse through heightened awareness.
- To support teachers in their delivery of a programme dealing with substance misuse
- To have strategies in place to respond to any situations arising from substance misuse for the health, safety and protection of pupils and staff.

## **Educational Aims**

We believe and support the following:

- That pupils' health and safety is paramount and the benefits of healthy lifestyles and the role of drug education is explored within this context.
- That all pupils have the right to be helped to make choices which are informed and law-abiding.
- That pupils receive information relating to substance misuse and understand the difference between legal and illegal drugs and the implications of their use.

These aims are fulfilled through aspects of the substance misuse programme in the taught curriculum and in the informal curriculum. We deliver the taught curriculum mainly through PSHE, Science and English subject areas, but other opportunities to reinforce learning will occur in other parts of the teaching programme. The school actively co-operates with other agencies such as the Youth and Community Police (YAC) and the LEA to deliver its commitment to Drugs Education and to deal with incidents of substance use and misuse. Visitors who support the school will be informed of the values held in this policy.

## Content headings for a Drug Education Programme

Developing a healthy, safer lifestyle:

- know about medicines, their uses and risks, safety, school rules regarding them:
- know about how their body works and how to care for it;
- know that all household products, including medicines and solvents, can be harmful if not used properly (KS1);
- consider alcohol and tobacco, their general effects on the body and on behaviour:
- know which commonly available substances and drugs are legal and illegal, their effects and risks (KS2) look as a separate topic outside SEAL;

A wide variety of teaching approaches will be used to deliver this programme in line with our Teaching and Learning Policy. These approaches will be consistent with the aims of the PSHE and Citizenship Policy and will ensure a balanced programme which enhances knowledge, skills and attitudes. Most teachers cover Drugs education through science or look at the issues in stand alone lessons.

## Storage and Handling of Medicine

Medicines are stored in the Medical Room under the supervision of the Welfare Officer.

In most circumstances, staff are not permitted to administer medication in school even where it has been medically prescribed. If children are fit enough to attend school but still require medication in the course of the school day, parents should give written permission and instructions to the Welfare Officer. Where children have been prescribed medicines for allergic disorders – eg asthma – they may bring these to school and either administer the doses themselves or have the Welfare Officer administer them, provided written permission is given...

<u>See Appendix 1</u> for more information on storage and handling of medication.

## **Dealing with Substance Related Incidents**

The word 'drug' covers a wide range of substances including medicines (prescriptions and over the counter medicines), solvents, alcohol, tobacco and illegal drugs. Incidents are likely to involve suspicions, observations, disclosures or discoveries of situations involving any substance or where possession or use of a substance may be the underlying cause of the incident.

In order to support our aims and objectives, members of staff may need to take action with regard to a drug-related incident.

### Confidentiality

It is not realistic to guarantee complete confidentiality to a pupil who may have problems with drugs.

The pupils should always be told what information is going to be passed on, and to whom.

If there is a risk of harm to the pupil or other people, teachers are obliged to inform the Headteacher.

If the law is being broken, the Headteacher is to be informed.

If a pupil becomes ill, medical or nursing staff need to know about all factors that may be relevant, including any suspicions of drug-taking.

There is rarely any need to disclose the details of pupil's personal problems to other people, and this should never happen without the pupil's permission.

# For Pupil Pastoral care and Support at Risk

Where a pupil has been identified by the staff as having experimented with drugs or as being at risk of doing so, he or she should be offered appropriate counselling and support within the school's general arrangements for the pastoral care of its students, and his or her parents informed.

Schools should be aware of the range of specialised agencies, support and counselling services available in their area which may be in a position to support an at risk pupil. The Education Welfare Service, Local Health and Social Services, and the local police through the Police Youth and Community Section all have a role to play in support schools' efforts. Other agencies include: Release and the local Health Promotion Agency.

# **Recording of Incidents**

It is recommended that a record be kept of all substance misuse related incidents. Such a record, which should be anonymous, should be kept centrally by each school and is the responsibility of the Headteacher. This ensures close monitoring of the number of incidents occurring. It is for internal school use but may be forwarded to the LEA and police for statistical purposes only.

No entry of an incident should be made on the child's record until the suspected substance is confirmed by the police as illegal, and there is sufficient evidence to warrant police action.

Where it has been so confirmed it is the responsibility of the designated teacher to notify the parents (or guardians) concerned that it will be recorded on the child's record.

## **Collecting Evidence**

The law permits school staff to take possession of a substance suspected of being a controlled drug for the purposes of protecting a pupil from harm and committing the offence of possession. The substance should be handed to the police who will be able to identify if it is an illegal drug; school staff should not attempt to analyse or taste an unidentified substance. It is open to a member of staff to search a student's desk or locker where he or she has reasonable cause to believe it contains unlawful items. Where pupils are suspected of concealing illegal drugs on their person, every effort should be made to secure the voluntary production of any unlawful substances by, for example, asking them to turn out their pockets. Given the seriousness of this matter and the potential risk to health and safety of pupils, it is probably reasonable for the designated teacher, when interviewing a pupil, to ask that pupil to make his/her bags available for inspection. The teacher must be careful to ensure that there is no opportunity for allegations of assault or improper conduct to arise, and therefore, a witness should be in attendance at any interview. If the student refuses, the student

should be detained under supervision while the police are called in to deal with the situation. Intimate physical searches should never be made by a teacher. The powers to search by the police are clearly defined in law.

## Dealing with the media

When faced with media interest, it is important that the school seeks advice from the LEA press officer and in this school the diocesan press officer. When the police are involved their press office will also be informed and will liaise with the LEA press office and school. The point should be made that procedures outlined in the school policy and adopted by the governing body are being followed. The headteacher should not go into any details before contacting the chair of governors and parents of pupils involved.

# Working with Parents

- Parents will be informed if there is evidence or concern about a substance related incident.
- Parents will be informed about the drug education curriculum in the School Prospectus.

# Working with Outside Agencies

Outside agencies will, at various times be involved with regard to substance misuse.

The following guidelines should be followed:

- Visits by outside agencies will be co-ordinated by the Headteacher, or where part of the PSHE and Citizenship curriculum by the co-ordinator responsible, who will liaise with the Headteacher.
- Outside agencies working in schools should be aware of the school policy and expected to follow school procedures.
- Outside agencies will be invited to have input in the school curriculum provided that the input is educationally sound and supports the educational aims as described in the policy.

## **APPENDIX 1**

# **Storage and Handling of Medication**

Taken form "Supporting Pupils with Medical Needs" – London Borough of Enfield Education Group Policy & Guidelines – January 1998

Particular attention must be paid to the safe storage, handling and disposal of medicine and health and safety training for staff should include guidance in appropriate procedures. Some medicines may be harmful to anyone for whom they are not prescribed. In these cases there is a duty to ensure that the risks to the health of others are properly controlled. This duty derives from the Control of Substances Hazardous to Health Regulations 1994 (COSHH).

The school will not store large volumes of medication. Wherever possible and appropriate parents or guardians or the pupil should be asked to bring in the required dose each day. Medicine stored must be clearly labelled with the pupil's name, the name and dose of the drug and the frequency of administration. If a pupil needs two or more prescribed medicines each should be in a separate container and labelled as above. Medicine should never be transferred from their original containers.

Pupils with medical needs should know where their medicines are stored and who holds the key. Staff should also know this. However, some medication must be readily available in an emergency eg Asthma inhalers, and should not be locked away. The School nurse will be aware of the "Asthma Protocol" devised by school nurses working within the local Health Authority and will be able to support and assist in any relevant development within school. The school Welfare Officer may need to make special access arrangements for emergency medication. However, it is important to try to ensure that medicines are only accessible to those for whom they are prescribed. If a pupil is allowed to carry and administer their own medication consideration needs to be taken about the safety of other pupils. A clear agreement must be made with the pupil and a parental consent form completed.

Administration of Epipens: People who suffer from anaphylactic reactions may need emergency adrenaline treatment. Staff who volunteer to administer this treatment will be given training. It is important to note that this treatment is unlikely to be harmful if given too soon or in multiple doses.

Storage and disposal: Some medication may need to be refrigerated. They can be kept in a refrigerator containing food but should be kept in an airtight container, clearly labelled. Access to the refrigerator should be restricted where possible. School staff should not dispose of medicines but it should be established practice that parents or guardians collect any unused medication regularly, eg at the end of each term and re also responsible for disposal of date expired medicines.

Hygiene and infection precautions would be included in training given to staff volunteering to administer medication. Staff should have access to protective disposable gloves and receive guidance on care when dealing with spillage of blood and other body fluids and disposing of dressings or equipment.

Non-Prescription Medication: School staff should generally not given non prescribed medication, eg analgesics including aspirin and paracetamol, to pupils outside normal procedures and agreements which would include the written consent of parents or guardians and records of medication given. They may not know whether the pupil has taken a previous dose or whether the medication may react with other medication being taken. A pupil under 12 should never be given aspirin, unless prescribed by a doctor. If a pupil suffers regularly from acute pain, such as migraine or menstrual pain, subject to school agreement, parents or guardians should authorise and supply appropriate pain-killers for their child's use, with written instructions about when the pupil should take the medication. A member of staff should supervise the pupil taking the medication and notify the parents or guardians, in writing, on the day the painkillers are taken.

## **APPENDIX 3**

### **Summary of Relevant Laws**

The Misuse of Drugs Act 1971 (amended in January 2004)			
	Class A	Class B	Class C
Principal drugs	Opium	Amphetamines	Cannabis resin
Included	Heroin/methadone	Barbiturates	Cannabis herb
	Cocaine/Crack		Anabolic steroids
	cocaine		Benzodiazepines
	LSD	Codeine	(minor
	Ecstasy	Ritalin	tranquillisers eg
	Magic mushrooms		temazepam)
	(processed)**		GHB (gamma-
	Class B drugs		hydroxy butyrate)
	prepared for		Some stimulant,
	injection		anti-depressant and
			anti-obesity
			Medicines
Maximum penalty	7 years and/or a	5 years and/or a	2 years and/or a
for possession	fine	fine	fine
Maximum penalty	Life imprisonment	14 years and/or a	14 years and/or a
for trafficking,	and a fine	fine	fine
supply or			
production			

#### Offences under the Misuse of Drugs Act

Possession, possession with intent to supply another person a controlled drug, supplying another person a controlled drug. The law does not differentiate between supplying/giving drugs to friends and supplying for profit. Supplying drug paraphernalia, production, cultivation or manufacture of controlled drugs, allowing premises you occupy or manage to be used for the supply, production or cultivation of a controlled drug, also, to allow premises to be used for the smoking of cannabis or opium and the preparation of opium.

#### Changes to the law on cannabis

Cannabis (resin and herb) has been reclassified from a Class B to a Class C drug (with effect from 29 January 2004). Cannabis remains an illegal drug with penalties for supply and possession. A consequence of this reclassification for adults will be that the use of the retained power of arrest may not be used in all circumstances of cannabis possession. Each case will be judged on its own merit. However, youth offenders will continue to be dealt with through the Crime and Disorder Act, which requires offenders to be dealt with at the police station. In practice, this means that persons aged 17 years or under who are in possession of cannabis for personal use will be arrested. They will then be dealt with through the Youth Justice System with options of a reprimand, final warning and then a charge.

## The Medicines Act 1968

The Medicines Act divides medicines into three categories:

Restricted medicines or prescription-only medicines, pharmacy medicines, which can be sold without a prescription but only by a pharmacist (also called over-the-counter medicines) general sales medicines, which can be sold without a prescription by any shop.

## Tobacco laws

Under Section 7 of the Children and Young Persons Act 1933 (as amended by the Children and Young Persons (Protection from Tobacco) Act 1991 it is an offence for a vendor to sell tobacco products to anyone under the age of 16. Children under age 16 who purchase tobacco products are not themselves committing an offence. However, 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 Person Act 1933 to give alcohol to any child under the age of 5. Children over 5 can legally consume alcohol in a private environment, although police have powers to confiscate alcohol from under 18s who are drinking in a public place. Children aged over 14 or over may enter the bar area of licensed premises. It is illegal for the staff of licensed premises to knowingly sell alcohol to anyone under the age of 18 or allow them to consume alcohol in the bar area of their premises. It is also an offence for a child to buy or attempt to buy alcohol on licensed premises. It is illegal for an adult to purchase alcohol on behalf of a person under 18. However, an exception allows young people aged 16 and 17 accompanied by an adult to consume beer, porter, and cider with a meal on licensed premises. At present it is lawful for children over the age of 14 to purchase or be supplied with alcohol in registered members clubs (such as ex-services, working men's and sports clubs). Changes to the law on alcohol as set out in the Licensing Act 2003 are unlikely to be brought into force before May 2005.

## Laws relating to volatile substances

In England and Wales it is an offence to sell solvent products to any person under 18 if the retailer has reason to suspect that the substances will be misused.

## The Road Traffic Act 1988

It is an offence to be in charge of a motor vehicle while 'unfit to drive through drink or drugs'. This includes alcohol, illegal drugs, prescribed medicines and solvents. The legal limit for alcohol levels in the blood while driving is 80 mg of alcohol per 100 ml of blood.

# Responsibility for children

School staff have a legal duty of care towards pupils in their care. This is interpreted in case law as the duty to act as a careful parent would. This duty of care is interpreted as a duty to exercise adequate supervision, which will depend on the maturity and age of the pupils involved, whether they are affected by a disability, and the precise circumstances. Supervision could mean giving adequate advice and instructions rather than constantly watching a pupil, although some activities, for example, while on school trips, may require greater supervision.