

WEST COKER C OF E PRIMARY SCHOOL **DRUGS EDUCATION POLICY**

This policy should be taken and used as part of West Coker Church of England Primary School's overall strategy and implemented within the context of our vision, instrument of government aims and values as a Church of England school.

1. INTRODUCTION

- 1.1 This Drugs Education Policy outlines the purpose, nature and management of the Drugs Education taught and learned in our school.
- 1.2 The implementation of this Policy is the responsibility of all the teaching staff.

2. THE NATURE OF DRUGS EDUCATION

- 2.1 Drugs Education is concerned with developing individual pupil's capability to make informed moral and social decisions in relation to drugs in society. Drugs Education is taught through Science and the Personal, Social and Health Education (PSHE) scheme of work and is concerned with knowledge, skills and understanding they need to become informed, active, responsible citizens. Pupils are encouraged to take part in a wide variety of activities and experiences across and beyond the curriculum, contributing fully to the life of their school and communities.

3. AIMS

- 3.1 We aim to equip children with the knowledge, understanding and skills that enable them to make the sort of choices that lead to a healthy lifestyle. Our drugs education programme has the primary objective of helping children to become more confident and responsible young people. We teach children about the dangers to health posed by drug-taking, and we aim to equip them with the social skills that enable them to make informed moral and social decisions in relation to drugs in society.
- 3.2 The objectives of our drugs education programme are:
 - to provide children with knowledge and information about legal drugs and their effects (caffeine, alcohol, tobacco and medicines) and illegal drugs and the harmful effects they can have on people's lives;
 - to enable children to discuss moral questions related to drug taking, and so provide a safe environment for young people to share their thoughts and ideas;
 - to help children become more self-confident so that they are able to make sensible and informed decisions about their lives;
 - to let children know what they should do if they come across drugs, or are aware of other people misusing drugs;
 - to help children respect their own bodies and, in so doing, reduce the likelihood that they will be persuaded to become involved in drug abuse;
 - to show that taking illegal drugs is a moral issue, and that choices about drugs are moral choices;
 - to ensure that all children are taught about drugs in a consistent manner, following guidelines that have been agreed by parents, governors and staff.

4. **ENTITLEMENT**

4.1 The National Curriculum provides a non-statutory framework for the teaching of Drugs Education through Personal, Social and Health Education (PSHE). It covers:

- Developing confidence and responsibility and making the most of their abilities;
- Preparing to play an active role as citizens;
- Developing a healthy, safer lifestyle;
- Developing good relationships and respecting the differences between people

The handbook for the National Curriculum says that:

“During Key Stage 1 pupils learn about themselves as developing individuals and as members of their communities, building on their own experiences and on the early learning goals for personal, social and emotional development. They learn the basic rules for keeping safe and for behaving well. They have opportunities to show that they can take some responsibility for themselves and for their environment. They begin to learn about their own and other’s feelings and become aware of the views, needs and rights of other children and older people. As members of a class and school community, they learn social skills such as how to share, take turns, play help others, resolve simple arguments and resist bullying. They begin to take an active part in the life of their school and its neighbourhood.”

“During Key Stage 2 pupils learn about themselves as growing and changing individuals with their own experiences and ideas, and as members of their communities. They become more mature, independent and self-confident. They learn about the wider world and the interdependence of communities within it. They develop their sense of social justice and moral responsibility and begin to understand that their own choices and behaviour can affect local, national or global issues and political and social institutions. They learn how to take part more fully in school and community activities. As they begin to develop into young adults, they face the changes of puberty and transfer to secondary school with support and encouragement from their school. They learn how to make more confident and informed choices about their health and environment; to take more responsibility, individually and as a group, for their own learning; and to resist bullying.”

4.2 Throughout each Key Stage the children should have the opportunity to work on a range of activities using the “Draw and Write” technique”, discussion, “paired talk”, role play, “hot-seating”, drama workshops, and any other appropriate method of communicating ideas related to drug education.

5. **ORGANISATION**

5.1 Drugs education is an important part of our school’s personal, social and health education (PSHE) curriculum. The main teaching about drugs takes place in Years 5 and 6, where the children are taught about illegal drugs, and the dangers involved to those who take them. In teaching this course we

follow the guidelines provided by the LA, and we receive advice and support from the Local Health Authority. The resources and materials that we use in these lessons are recommended either by the Health Authority or the LA. Lessons that focus on drug education form part of a sequence of lessons that are designed to promote in children a healthy lifestyle.

- 5.2 We regard drugs education as a whole-school issue, and we believe that opportunities to teach about the importance of living a healthy lifestyle occur throughout the curriculum. Each class teacher answers questions about drugs sensitively and appropriately, as they occur. In the routine circle-time sessions, we encourage children to discuss issues that are important to them, and we help children to be aware of the dangers of the misuse of drugs. For example, if a child raises the issue of smoking, the teacher takes time to discuss its harmful effects with the whole class. In science lessons we teach children what a drug is, and how drugs are used in medicine. We also teach them the difference between legal and illegal drugs.
- 5.3 In the main, children will be taught by their Class Teacher unless specialist advice is required from the subject leader, school nurse, and another health professional, or Advisory teacher. The teaching style that we use encourages children to ask questions and reflect on the dangers to health of drug misuse. Children explore issues, such as why people take drugs, and how they can avoid putting themselves in danger in the future. We give children the opportunity to talk in groups or to the whole class. We encourage them to listen to the views of others, and we ask them to explore why drugs are such a problem for society.
- 5.4 The Class Teacher will be responsible for planning, co-ordinating the role of Teaching Assistants (TAs), any relevant Health and Safety issues and assessment.
- 5.5 It is the responsibility of the head teacher to ensure that staff and parents are informed about this drugs education policy, and that the policy is implemented effectively. It is also the head teacher's role to ensure that staff are given sufficient training, so that they can teach effectively and handle any difficult issues with sensitivity.
- 5.6 The head teacher will liaise with external agencies regarding the school drugs education programme and ensure that all adults who work with children on these issues are aware of the school policy and work within this framework.
- 5.7 The head teacher will monitor the policy on a day-to-day basis and report to governors, when requested, on the effectiveness of the policy.
- 5.8 The school is well aware that the primary role in children's drugs education lies with parents. We wish to build a positive and supporting relationship with the parents of children at our school through mutual understanding, trust and co-operation. In promoting this objective we will:
 - inform parents about the school drugs education policy and practice;
 - invite parents to view the materials used to teach drugs education in our school;

- answer any questions parents may have about the drugs education their child receives in school;
- take seriously any issues which parents raise with teachers or governors about this policy or the arrangements for drugs education in the school;
- encourage parents to be involved in reviewing the school policy and making modifications to it as necessary;
- inform parents about the best practice known with regard to drugs education so that the parents can support the key messages being given to children at school.

6. CURRICULUM PLANNING

- 6.1 Planning is based on the non-statutory guidelines for PSHE/Drugs Education and the whole school rolling programme.
- 6.2 Time devoted will be approximately 35 hours per year.

7. ASSESSMENT, RECORDING AND REPORTING

- 7.1 Pupils are encouraged to evaluate their own work, and in discussion with the teacher identify ways in which future activities could be developed.
- 7.2 At the end of each academic year summative assessment will be made and recorded in the Pupil Profile File.
- 7.3 At the end of each academic year all teachers will complete a formal written report to parents indicating work covered in Drugs Education and the pupil's level of attainment.

8. EQUAL OPPORTUNITIES

- 8.1 Drugs Education will be provided for all pupils from all heritage groups and they will be able to participate equally during discussion, workshops, drama activities etc.
- 8.2 All Drugs Education activities will ensure an equal interest and participation level for all pupils. The appropriate support and equipment will be provided as necessary.

10. S.E.N.

- 10.1 Children with Special Educational Needs will have equality of access to this subject in the form of suitably differentiated work.

11. SAFETY

- 11.1 Pupils will only have access to certain teaching aids (e.g. syringes, replica drugs) under the direct supervision of an adult.

12. RESOURCES

12.1 Most Drugs Education activities will take place within the classroom, although mobile classrooms (e.g. the Life Education Centre) may be used to cover specific topics where more specialist advice is needed.

(For further information, refer to the Health and Safety Policy).

12.2 All resources, equipment and consumables are stored in the designated storage cupboards/areas.

13. DIFFERENTIATION

13.1 Approaches will be used to ensure all pupils are challenged, that they succeed and make progress within the work set.

MANAGING DRUG-RELATED INCIDENTS IN SCHOOL

Drug related incidents within Primary Schools are comparatively rare; not many primary school aged children experiment with illegal drugs, However, there have been incidents in Primary Schools and they are becoming more frequent.

SIGNS OF DRUG MISUSE

Warning Signs

- Early detection of drugs misuse is extremely important. If a young person's drug misuse is identified at an early stage it is easier for action to be taken to prevent his or her further misuse of drugs. Therefore, teachers need to be vigilant, particularly when they are in charge of activities, which take groups of young people away from the school premises. Research has shown that first experiments with drugs by young people almost always involve a substance provided by a friend.
- The signs listed in tables 1 and 2 may indicate that individuals or groups of young people are misusing drugs. **Their presence alone is not conclusive proof of drug or solvent misuse: many of them are a normal part of adolescence**, but the presence of several signs together may point to a need for greater vigilance. Table 3 lists equipment which, if found in certain circumstances, might also give grounds for concern.

Table 1:

Warning Signs in Individuals	Checklist
Changes in attendance and being unwilling to take part in school activities	
Decline in performance in school work	
Unusual outbreaks of temper, marked swings of mood, restlessness or irritability	
Reports from parents that more time is being spent away from home, possibly with new friends in older age groups	
Excessive spending or borrowing of money	
Stealing money or goods	
Excessive tiredness without obvious cause	
No interest in physical appearance	
Sores or rashes especially on mouth or nose	
Lack of appetite	
Heavy use of scents, colognes etc (to disguise the smell of drugs)	
Wearing sunglasses at inappropriate times (to hide dilated or constricted pupils)	

Table 2:

Warning signs in Groups	Checklist
Regular absence on certain days	
Keeping at a distance from other pupils, away from supervision points (e.g. a group who frequently gather near the school gate of a playground or sports field)	
Being the subject of rumours about drug taking	
Talking to strangers on or near the premises	
Stealing which appears to be the work of several incidents rather than one person (e.g. perhaps to shoplift solvents)	
Use of drug takers' slang	
Exchanging money or other objects in unusual containers	

Associating briefly with one person who is much older and not normally part of the peer group	
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Table 3:

Objects that may indicate drug use	Checklist
Foil containers or cup shapes made from silver foil, perhaps discoloured by heat	
Metal tins	
Spoons discoloured by heat	
Pill boxes	
Plastic, cellophane or metal foil wrappers	
Small plastic or glass phials or bottles	
Twists of paper	
Straws	
Sugar lumps	
Syringes and needles	
Cigarette papers and lighters	
Spent matches	
Plastic bags or butane gas containers	

In all cases, the Head Teacher should be informed immediately

MANAGING ILLEGAL DRUG RELATED INCIDENTS

Confiscating the substance and it's disposal

- The law permits school staff to take temporary possession of a substance suspected of being a controlled drug for the purposes of protecting a pupil from harm and from committing the offence of possession.
- School staff should not attempt to analyse or taste an unidentified substance.
- Where pupils are suspected of concealing illegal drugs on their person, every effort should first be made to secure the voluntary production of any unlawful substances e.g. by asking them to turn out their pockets. Intimate physical searches should never be made by a teacher.
- If a pupil refuses, the Head Teacher may decide to contact the parents and/or the Police Schools Liaison Officer.
- If the substance cannot be identified, then it should be treated as illegal. There are two courses of action that can legally be taken:
 1. Destroy the substance, e.g. flush it down the toilet. It is essential to have a witness present if this course of action is taken. The school can then decide how to proceed. This may involve other agencies.
 2. Hand the substance to the Police as soon as possible. They will then decide how to proceed.
- A written record of the action that has been taken in response to the incident must be made.

Parents

- In the majority of cases, parents should then be informed that their child has been involved with drugs.
- However, there may be legitimate grounds for not informing parents immediately if it is clear that:
- They may seriously over-react and possibly cause physical harm to the child.
- The parents are believed to be directly involved in the situation causing concern – in those situations, other appropriate agencies must be informed.

Discipline

- Head Teachers must retain the responsibility for deciding how to respond to particular incidents with reference to the school's behaviour policy.

MANAGING LEGAL DRUG RELATED INCIDENTS

Some legal drugs can produce dramatic mood or behavioural changes and in most cases a similar course of action to illegal drugs can be followed. These drugs would include:

1. Alcohol
2. Solvent (glue, aerosols, butane gas, some felt-tip pens, some typewriter correction fluid)
3. Nitrates (often called "poppers", and referring to amyl, butyl, or isobutyl nitrate. "Poppers" are sold in joke shops or adult shops under brand names such as Rush, Stud, Locker Room and Liquid Gold.)

Tobacco

It is not illegal to smoke tobacco, although it is illegal for under 16 year olds to purchase it. Tobacco does not produce dramatic mood or behavioural changes and therefore, may be regarded differently from other drugs but should still be recognised as a serious concern.

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