DRUGS AND SUBSTANCE MISUSE POLICY

- Set Sail for Success -

Our Mission Statement

Our learning adventure will see each and every one of us thrive in God's love as we set sail for success.

1. Introduction

We recognise the increasing drug use in society. The acquisition of knowledge, understanding and skills which enable young people to consider the effects of drugs on themselves and others is therefore of vital importance.

The term 'drug', throughout this document, includes medicines as well as tobacco, alcohol, illegal drugs, solvents and glues. We recognise the importance of exploring the beneficial use of drugs as medicines as well as the harmful effects of drug misuse.

Whilst PSHE education remains a non-statutory subject, section 2.5 of the National Curriculum framework document states that: 'All schools should make provision for personal, social, health and economic education (PSHE), drawing on good practice.'

It goes on to note that:

'Schools should seek to use PSHE education to build, where appropriate, on the statutory content already outlined in the national curriculum, the basic school curriculum and in statutory guidance on: drug education, financial education, sex and relationship education (SRE) and the importance of physical activity and diet for a healthy lifestyle.

In spite of this flexibility, all schools have statutory duties to meet. As section 2.1 of the National Curriculum framework states:

'Every state-funded school must offer a curriculum which is balanced and broadly based and which:

- promotes the spiritual, moral, cultural, mental and physical development of pupils at the school and of society.
- prepares pupils at the school for the opportunities, responsibilities and experiences of later life'.

These duties are set out in the 2002 Education Act and the 2010 Academies Act. Schools also have statutory responsibilities in relation to promoting pupil wellbeing and pupil safeguarding (Children Act 2004) and community cohesion (Education Act 2006). PSHE education plays an important part in fulfilling all of the responsibilities.

This policy applies to School premises, day trips, and residential visits. This policy should be read in conjunction with the Safeguarding and Child Protection Policy.

2. Aims and Objectives

This school believes that the essential aim of drug education should be to give pupils the facts (appropriate to their age and level of understanding), to emphasise the benefits of a healthy lifestyle and to give children and young people the knowledge and skills to make informed and responsible choices now and in later life.

We have prioritised the following objectives:

- To promote pupils' self-esteem and confidence.
- To give accurate information about drugs.
- To consider and/or challenge attitudes pupils may have regarding drug use and misuse.
- To provide opportunities for pupils to be equipped with, and practise the skills they need to avoid the misuse of drugs.
- To help pupils to distinguish different drugs, consider their use misuse, benefits and harm.
- To minimize the harm from drugs to pupils.

3. Staffing and Staff Development

All staff, including support staff, should have access to professional development and support that relates to the drug education curriculum and its style of delivery.

4. Curriculum organisation and planning

Drug education will be delivered in this school through a combination of planned curriculum opportunities and whole school approaches. This will take the form of:

Discrete curriculum time

- by identifying drug education within the planned curriculum for all pupils – especially PSHE.

Through and in other curriculum areas

- by identifying and planning for opportunities within other curriculum areas especially within Science and PSHE

Teaching about safety and relationships as part of PSHE education contributes to how schools approach the safeguarding of pupils. It helps them to recognise when they and others are at risk and equips them with the skills, strategies and language they need to take appropriate action.

At Key Stage 1, children learn about being safe with medicines and household substances, making healthy, informed choices and following safety rules.

At Key Stage 2, children learn about the effects of alcohol and tobacco, volatile substances and illegal drugs.

5. Curriculum Delivery

Teaching about drugs is generally best provided as part of an integrated programme of Personal, Social and Health Education across the key stages. This programme is relevant to the needs and experiences of

all pupils, is flexible, and develops, as pupils grow older. The programme is developed within a positive climate in which pupils and adults feel able to talk openly and honestly. In both key Stages we follow the PSHE Association Scheme of work incorporating the GR8 AS UR scheme of work and Ten Ten Resources from our RSE programme of study.

In order to effectively cover all aspects of drug education, a wide range of teaching and learning styles will need to be employed. The school aims to deliver this area of the curriculum through a variety of approaches including Circle Time, working in pairs and groups as well as whole class, brainstorming, use of drama and role play, use of puppets, use of stories, involvement of other organisations and visitors.

6. Resources

Resources that support this area of the curriculum will be up-to date, relevant to pupils and presented in ways that are consistent with the fundamental aims of PSHE.

In addition to existing resources, the school aims to review and update drug education resources regularly in accordance with budget allocation.

7. Partnerships

The school values its work in partnership with parents and carers and with the wider school community and sees this as an essential element of developing this policy and the school's drug education programme. We also aim to support parents in their efforts to inform their children. We do this through newsletters and the school website.

8. Equality of Opportunity

The school has a commitment to Equal Opportunities and this will be built into all aspects of drug education. We recognise that some pupils with learning difficulties may need more help than others in understanding what sorts of behaviour are/are not acceptable. Where pupils are taking prescribed medication they will be helped to distinguish between appropriate and inappropriate drugs.

9. Monitoring, Evaluation and Review

Provision for drug education, including the personal development of pupils, will be monitored, evaluated and reviewed by Senior Management, the PSHE and Citizenship co-ordinator and the class teachers. This will be done by checking that whole school drug education objectives are met, standards of teaching and learning expected are achieved, there are adequate resources and schemes of work are being taught appropriately.

10. Managing Drug Related Incidents

We recognise that drug related incidents in primary schools are rare but recognise the need for clear procedures should an incident occur. In all cases the Headteacher should be informed immediately. If there is any question of a medical emergency the school will immediately call for medical assistance.

11. Pupil Discipline and Support

The Headteacher will be responsible for deciding how to discipline a pupil following any drug-related incidents and all factors influencing the incident will be taken into account. Our Behaviour Policy has clear sanctions for breaking school rules and a variety of consequences/sanctions are possible. Exclusion may be appropriate in rare and serious cases.

All incidents will be recorded by SLT.

12. Confiscating an illegal drug and its disposal

School staff will not attempt to analyse or taste an unidentified drug, but will take temporary possession of any drug suspected of being a controlled drug for the purpose of protecting our pupils from harm or committing the offence of possession.

If we suspect that a pupil is concealing illegal drugs, we will encourage the pupil to voluntarily surrender the drug. Under no circumstances will any teacher undertake an intimate physical search. If the pupil refuses, the Headteacher may decide to contact parents and/or the Police. We will always inform parents if the police are called to an incident. As our primary concern is the welfare of all our pupils, alternative action may be taken. For example, if we feel that parents are directly involved in the situation causing concern or that they may seriously over-react and cause harm to the child, we may have to inform other appropriate agencies.

If the drug cannot be identified it will be treated as illegal and will be removed and either secured until it can be taken to a pharmacist for disposal or handed to the police as soon as possible. We will always ensure that a witness is present when disposing of any drug. We will then decide how to proceed with due regard to Child Protection policy issues. We will keep a written record of the action taken when responding to incidents of this nature, irrespective of the seriousness of the case.

13. County Lines

We understand that criminal exploitation of children is a geographically widespread form of harm that is a typical feature of county lines criminal activity. Drug networks or gangs groom and exploit children and young people to carry drugs and money from urban areas to suburban and rural areas, market and seaside towns. Key to identifying potential involvement in county lines are missing episodes, when the victim may have been trafficked for the purpose of transporting drugs. If a child is suspected to be at risk of or involved in county lines, a referral to the Children's Advice and Duty Service (CADS) will be made alongside consideration of availability of local services/third sector providers who offer support to victims of county lines exploitation.

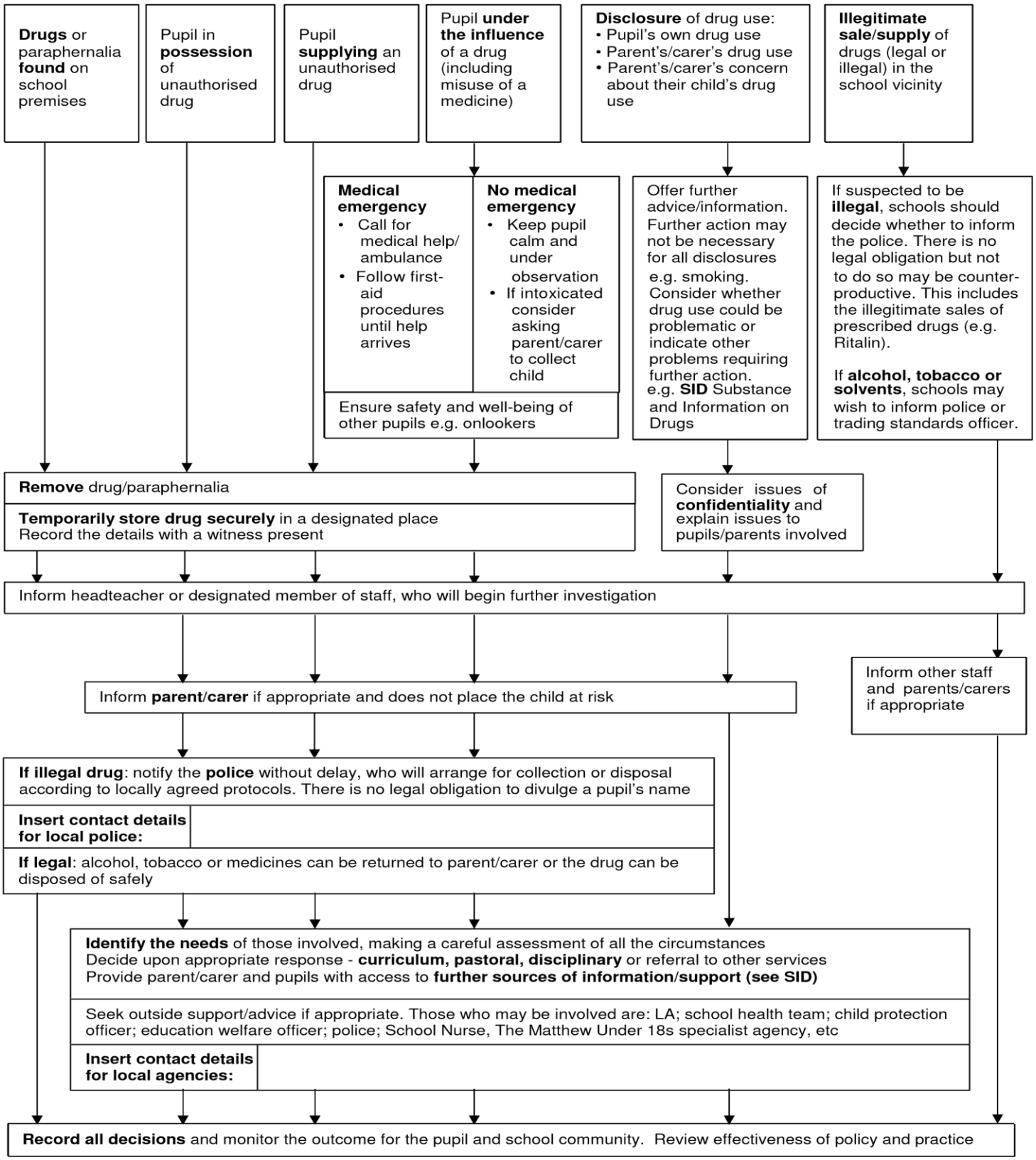
14. Smoking

This school is bound by the St John the Baptist CMAT No Smoking Policy and smoking is not permitted anywhere on the school site, including the grounds. Any disregard for school restrictions on smoking will be treated as any other breach of school discipline.

15. Monitoring and review

This Policy was ratified in: **November 2026** It will be reviewed in: **November 2029**
This document will be reviewed every 3 years but may be reviewed and updated more frequently if necessary.

Appendix A: Responding to incidents involving drugs.



Appendix B: Record of drug/substance related incident

Complete this and store securely. It may be needed in cases such as exclusions, appeals police involvement etc.

Tick to indicate the category that best describes the nature of the incident:

Drug or paraphernalia found ON school premises		**Pupil disclosure of drug use**	
Emergency/Intoxication		**Disclosure of parent/carer drug misuse**	
Pupil in possession of unauthorized drug		**Parent/carer expresses concern**	
Pupil supplying unauthorised drug on school premises		**Incident occurring OFF school premises**	

Name of pupil:		**If more than one pupil involved, use one sheet per pupil**	
Pupil's form:		**Date of incident:**	
Names of all staff involved:			
Age of pupil:	**MALE/FEMALE**	**Time of incident:**	
Tick box if second or subsequent incident involving same pupil		**Name of senior member of staff involved:**	

First Aid given? YES NO
Delete as necessary
First aid given by: …….

Ambulance/Doctor called? YES NO
Delete as necessary
Ambulance called by:…….

Drug involved (state if known or suspected):	**Drug found/removed? YES NO Where found/seized:** ……..
Description of incident (including any physical symptoms):	**Name(s) and signature(s) of witness(es) to the incident:** ……. ……. **Details of agreed arrangements with police for disposal:** ……. ……. **At time:** **If police contacted, give incident/reference number:**
There should be enough detail recorded so as to be useful in any further action (e.g. exclusions, appeals, police action, referral to external agencies etc.) **CONTINUE ONSEPARATE SHEET IF NECESSARY**	

Name of parent/carer informed:		
Informed by:	**Date:**	**Time:**

Other action taken: pupils/staff/parents/carer informed, sanction imposed, referral to another agency (e.g. Matthew Project Under18), case conference called, police involvement etc.
This form completed by (name and signature): **Time/Date:** **Witnessed by (name and signature):** **Time/Date:**

Appendix C: USEFUL CONTACTS AND REFERENCES

Norfolk Alcohol and Drug Behaviour Change Service: contact on 01603 514096 or email on norfolk.info@cgl.org.uk.

https://www.changegrowlive.org/alcohol-drug-behaviour-change-norfolk/online-support

Advice for professionals to support parents and carers: **https://www.matthewproject.org/education**
National advice and support organisations:

Drinkline: a free and confidential helpline for anyone who is concerned about their own or someone else's drinking: **0300 123 1110** **(weekdays 9am–8pm, weekends 11am–4pm)**
https://www.drinkaware.co.uk/advice/support-services/alcohol-support-services

Family Lives: a charity offering support and information to anyone parenting a child or teenager. It runs a free-phone helpline and courses for parents: **telephone 0300 1236600**

FRANK: national drugs awareness campaign to raise awareness amongst young people, their parents/carers **www.talktofrank.com.** Schools can receive free resources, updates, newsletters etc.