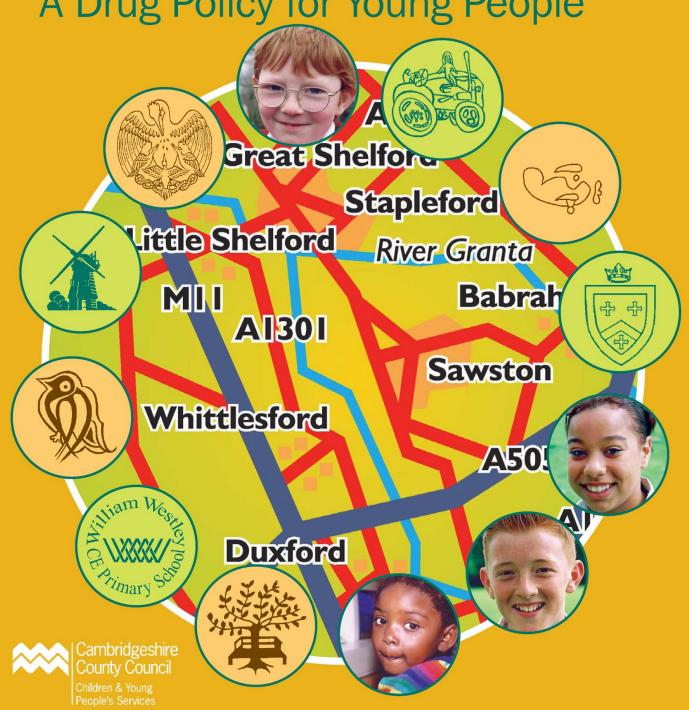


Sawston Community Drug Policy The Bellbird Primary School

A Drug Policy for Young People



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Participating Schools

Babraham CE Primary school

Duxford CE Community Primary School

Gt and Lt Shelford CE Primary School

Icknield Primary School

Sawston Village College

Stapleford Community Primary School

The Bellbird Primary School

William Westley CE Primary School

Policy Development and Review

This policy was originally devised by representatives from the participating schools and several community organisations:

Cambridgeshire and Peterborough Police

Cambridgeshire Primary Care Trust

Cambridgeshire Youth Service

PSHE Service

Sawston Free Church

Sawston Health Centre

South Cambridgeshire District Council

St Mary's Church

The policy has been reviewed by representatives of the schools.

Section 1 - Context

Introduction

Working together as partner organisations, we aim to provide a framework of information, support, education, guidance and advice for young people, their families and members of the local community, which will help us to create a safer community within which each individual is valued.

We aim to provide our young people with the skills, knowledge and attitudes to support them to make healthy and positive choices in their lives when confronted by opportunities which pose genuine risk.

We recognise that a significant number of young people may be offered the opportunity to experiment with illegal drugs and other risky substances and will be able to obtain alcohol below the legal age for purchase. It is, therefore, essential that we work in partnership with families and with our local community to support them to make the right choices.

This policy is one initiative included in the Drug and Alcohol Action Team's (DAAT) Action Plan for Young People which comprises a range of actions across Cambridgeshire that aim to reduce drug misuse. Community Drug Policies are in place across the whole of Cambridgeshire.

In whatever capacity we work with children and young people we have shared responsibilities regarding their health and wellbeing. These are clearly set out in the Every Child Matters outcomes, many of which are directly linked with the provision of high quality Drug Education and positive, supportive responses to drug-related situations and incidents. In particular, this policy describes our contribution to the 'Be Healthy' outcome, which refers to the physical, mental and emotional health of young people and their right to choose not to take illegal drugs.

Glossary

Throughout this policy we use the following definitions:

A drug: Any substance which affects how a person thinks, feels or behaves (World Health Organisation). The term embraces medicinal, non-medicinal, legal and illegal drugs. Therefore, "drug" includes alcohol, tobacco, volatile substances (solvents, aerosols etc.), medicines and illegal drugs.

Young people: Children and adolescents under 19 years.

Community: All people, who live, work or in some other way impact on the lives of young people in Cambridge City. See the front cover for a map.

Drug use: The consumption of any drug.

Drug misuse: Drug taking which harms physical, mental or social wellbeing. This could, for example, include physical or psychological dependence, improper use of medicines, intoxication, breach of school rules or the law.

Authorised drug use: Where drug use is accepted by the organisation. Reference might be made to these in other of the organisation's policies e.g. Smoke Free Policy, Medicines Policy.

Unauthorised drug use: Where use is restricted or prohibited e.g. illegal drugs and alcohol

Commitments by Partner Organisations

- We are committed to creating an environment within our organisations, which promotes health and encourages informed decision-making in relation to drugs, including reduction of misuse. This will involve:
 - the application of a Smoke Free policy in our buildings;
 - ii. careful and clear procedures for the storage, administration and use of medicines;
 - iii. the storage of solvents and hazardous chemicals in accordance with COSSH guidelines;
 - iv. a policy of restricting the availability of alcohol for consumption, sale or as rewards or prizes when and where young people are present. This acknowledges that there will be occasions when alcohol is available in sensible and controlled conditions:
 - v. being active in promoting and modelling alternatives to drug use; for example, the provision of a quiet space or water to aid recovery from headaches or the organisation of play areas that allow young people to find environments to match their health needs;
 - vi. ensuring that any materials that may directly or indirectly promote irresponsible use of tobacco, alcohol and other legal drugs are not used, displayed or distributed by our organisations.
- 2. We are committed to the provision of clear guidelines for staff working with young people.
- When responding to a situation involving drugs, we will seek to balance the interests and safety of the

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- individual, other members of the organisation and the community.
- We are committed to the sharing of good practice and to the sharing of information which will keep young people safe, within the parameters of the Freedom of Information Act.
- We regard it as the shared responsibility of all adults working with young people to provide positive role models, to be accessible and to be aware of the procedures for dealing with drug-related incidents.
- 6. We are committed to the 'entitlements' outlined below.

Entitlements

Partner organisations are committed to working towards the implementation and development of the entitlements relevant to their organisation. Each organisation will identify the entitlements to which they can make a contribution depending on their role. We will work together in partnership to ensure we are providing all the entitlements.

All members of the community are entitled:

- to a safe environment in schools and in the wider community within which all can flourish;
- to have access to information about drugs which is accurate and up-to-date, appropriate to their age and level of understanding and sensitive to cultural, ethnic, religious and gender differences;
- to have a full understanding of the relevant confidentiality policies and to be supported within these:
- contribute to the formulation and/or evaluation of the drugs policies.

Children and young people are further entitled:

- to a comprehensive drug education programme following Cambridgeshire County Council's Entitlement Curriculum for Drug Education for 3 – 18year-olds;
- to easy access to advice in relation to drugs issues;
- to be treated with respect in the resolution of any issues related to drugs;
- to be supported to learn from their mistakes and/or towards rehabilitation.

Adults working with young people are further entitled:

- on-going relevant training to support them either in the delivery of drugs education or in resolving situations relating to misuse/abuse of drugs;
- access to professional support to allow them to discuss or share issues of concern.

Parents, carers and other adults in the community are further entitled:

- information about drug education which is offered in schools and other settings;
- access to information which affects the health and safety of children and young people as far as the relevant confidentiality policy allows;
- access to independent advice and support with regard to issues relating to drugs;
- information about schools' exclusion policy and available support.

Implementation and Review

All partners are committed to the implementation of this policy within their organisations. This requires that we consider the implications for our individual organisations and seek, wherever possible, to include other individuals and organisations in its implementation, both through their active participation and by ensuring the effective dissemination of information.

The policy will be reviewed every three years (Second review 2011).

Section 2- Implementing Policy for Young People in Our School

As partner schools we share a common approach to the education and support of our pupils. In this context, therefore, we have evolved this policy and are committed to its implementation in our schools.

We aim to provide children and young people with the skills, knowledge and attitudes, appropriate to their age, to support them to make positive and healthy choices.

As part of our work in meeting this aim, we consider the implementation of this policy as key. Our provision of Drug Education is assisted by our practice in other areas. Therefore, the following policies are relevant to our work in Drug Education:

 PSHE and Citizenship, Child Protection, Science, Behaviour, Staff Health and Wellbeing, Medicines, Health and Safety, School Visits, Smoke Free Policy

Copies of this policy will be made available to staff Copies will be made available to parents and community members at The Bellbird Primary School. All policies are available on the school web site or from the school office.

Delivering the Entitlement Curriculum for Drug Education in Our School

We understand the importance of ensuring that all children in our school and across the community gain similar information and experiences through Drug Education. We will therefore follow the Entitlement Curriculum included in this document. We will ensure that the curriculum is accessible to all, according to their need and ability.

The objectives of the Entitlement Curriculum for Drug Education will mainly be delivered in *designated PSHE lessons, Circle Time, focused health topics.*

Some aspects of Drug Education will be delivered in other subjects, such as **Science and RE**.

Some objectives of Drug Education will also be met in enrichment activities. For example *Visits from the Life Education Centre, our work towards becoming a Health Promoting School*

We will refer to national guidance when planning our Drug Education activities. For example, 'Drugs: Guidance for Schools' DfES Feb 2004, QCA guidance and materials from National Healthy Schools.

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All staff will primarily use the *Cambridgeshire PSHE Scheme of Work* in planning and delivering the Entitlement Curriculum. We will refer to 'Supporting the Cambridgeshire Community Drug Policy' Document B3, when selecting new resources.

Responsibilities and Accountabilities in Our School

This section describes the roles of members of staff in relation to drugs and Drug Education.

- We regard it as the shared responsibility of all adults working within the school to model responsible drugrelated behaviour and to respond appropriately to a young person's request for guidance, information and advice. All staff will be aware of the procedures for dealing with a drug-related incident.
- Teaching and support staff will have the same responsibility for contribution to the delivery of the taught Drug Education curriculum as they have for other components of the curriculum.
- The PSHE Subject Leader is responsible for reviewing and evaluating Drug Education at The Bellbird primary School. The PSHE Subject Leader is accountable to the Head Teacher in this task.
- Staff will be assisted in their planning and delivery of the Entitlement Curriculum by the PSHE Subject Leader who will, with support, provide lesson plans and activities for colleagues, collate assessments, liaise with the PSHE Service and plan INSET to meet staff needs.
- Governors have the responsibility to update their own knowledge and awareness so that they can contribute to monitoring and evaluation of policy and practice.

Responsibilities when Responding to Incidents

- Solvents and hazardous chemicals will be stored in accordance with our Health and Safety policy, which refers to COSHH Guidelines. The person responsible for overseeing this policy is the *Head Teacher*.
- If a substance is found at *The Bellbird Primary School* it will initially be reported to the *Head Teacher* who will record the nature of the substance and the time and place it was found. The *Head Teacher* will deal with it appropriately, seeking advice if necessary. We will refer to 'Supporting the Cambridgeshire Community Drug Policy' Document B6 or B7.
- In a situation where a child is involved in unauthorised drug use on school premises, the *Head Teacher* will normally inform the child's parents. If a decision is made not to inform parents this will be documented.

- Should the press contact the school regarding a drug-related incident or situation, a press release will be issued in collaboration with the County Press Office. The *Chair of Governors* will be the main contact for the press. We will refer to 'Responding to Critical Incidents' Cambridgeshire CC Jan 2007.

School Journeys and Trips

We will make clear to all the rules which apply to individual visits or group trips, including other areas where direct responsibility lies with the parent/carer (primarily, school/home transport and the close environment of the school). In these situations we will work in partnership with parents/carers and, where appropriate, the wider community. Clear guidance will be given to staff regarding their supervision responsibilities and their own drug use (e.g. of alcohol, tobacco and medicine). We will refer to 'Supporting the Cambridgeshire Drug Policy' Documents A9 and B9 when planning educational visits or considering home/school transport.

Confidentiality

The essential nature of confidentiality guidance is not altered by the fact that a case involves drugs. Where there is a genuine risk to the safety of the young person or other people, information must be passed on to individuals and/or organisations which are responsible for protecting the young person. It is likely that such responses will fall within the remit of other policies such as Child Protection, Behaviour and Health and Safety.

Staff may have to pass on information to fulfil their professional and moral duties in relation to:

- child protection
- co-operating with a police investigation
- referral to external services, such as drug agencies.

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Any information disclosed to a staff member or other responsible adult, which is deemed to be of a serious nature, will be communicated to the designated person as soon as possible and always within 24 hours.

The designated person may choose to respect a young person's wish for confidentiality only in cases where:

- there is no cause to believe that confidentiality will endanger or put the young person or others at risk
- disclosure itself may place the young person at risk.

It is our policy to inform parents and carers as soon as possible, when a young person has been involved in a drug-related incident or situation, except in situations where such information could prejudice the safety of the young person. The person responsible for Child Protection will be asked for guidance in this instance.

Young people will be told clearly what information is to be passed on and to whom and their agreement will be sought. We will support the young person in dealing with possible consequences.

Use of Visitors and Outside Expertise

We will also make use of the expertise of visitors and experts from outside agencies, but this will be seen as an enrichment of our provision and not a substitute for the effectiveness of education based upon the relationship between teacher and pupils. Such visitors will be made aware in advance of our policy and will be expected to work within it. They should work in collaboration with appropriate staff to ensure continuity.

We will use 'B22 Working with Visitors –Planning Checklist' when planning and reviewing such enrichment activities in Drug Education.

Family Drug Use

Many pupils will have parents, carers or family members who use drugs, including medicine, alcohol and tobacco. Some will experience illegal drug misuse by family members. We will take care to ensure that our Drug Education programme takes into account possible misuse of drugs by family members. We will work to ensure that the content of our programme does not stigmatise young people or heighten their anxieties about their family members' welfare. It will be a high priority to determine and address the additional needs of young people who experience drug misuse in the home. Any work with children of drug misusing families will be within the context of our Child Protection procedures. We will refer to 'Supporting the Cambridgeshire Community Drug Policy'

Documents A7 and A8, when considering issues of child protection and family drug use.

Monitoring and Evaluation

We are committed to the development of Drug Education in our school. When carrying out a review we will refer to 'Drugs: Guidance for Schools' Appendix 7. We will use the following indicators to monitor and evaluate our progress:

- a co-ordinated and consistent approach to curriculum delivery has been adopted;
- clear and consistent procedures for dealing with drug-related situations and incidents are in place;
- a flexible approach to delivering the 'Entitlement Curriculum' that responds to young people's needs (identified through consultation, research or observation) is in place;
- there are clearly identified learning outcomes for all Drug Education activities;
- opportunities for cross-curricular approaches are being used where appropriate;
- the impact of training for staff and governors on practice is evaluated;
- policy and practice is regularly revised and involves staff, governors and where appropriate young people;
- opportunities for parents, carers and members of our community to consider the purpose and nature of our Drug Education, for example, through drug awareness parents evenings;
- a variety of methods are employed to communicate the key points of the policy and curriculum to the community.

Section 3 – Drug-related Situations and Incidents

Recognising Drug-related Situations

A drug-related situation is one involving the use of any authorised drug by a young person or adult within a specific setting. A situation might be ongoing, but will have been discussed and planned for.

Drug-related situations might include:

- the storage or use of alcohol on the premises by staff or parents;
- the sale or award of alcohol (See 'Supporting the Cambridgeshire Community Drug Policy' B11);
- the storage or use of medicines on the premises by staff, parents or young people (See 'Supporting the Cambridgeshire Community Drug Policy' B13);
- the use of alcohol by staff or young people, away from the premises, while taking part in events or residential trips (See 'Supporting the Cambridgeshire Community Drug Policy' A9);
- the storage or use of other authorised drugs.

Recognising Drug-related Incidents

A drug-related incident is one where there is evidence or suspicion of specific events involving unauthorised drug use or supply. We will need to react to this event, in order to prevent or reduce harm.

Drug-related incidents include:

- Disclosure by a young person of their own unauthorised drug use or alleged use by another person;
- Unauthorised drugs being possessed on the premises;
- Unauthorised drugs being used on the premises;
- Supply or intended supply of unauthorised drugs on the premises;
- Concerns about unauthorised drug use by an adult working with young people expressed by someone from the community;
- Concerns about unauthorised drug use by young people expressed by someone from the community;

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- Young people adversely affected by the drug use or misuse of others;
- Physical evidence of unauthorised drug use being found on or around the premises;
- Misuse of an authorised drug by any members of the organisation;
- The intimidation of a young person by peers or others in relation to drug use.

Responding to Drug-related Situations and Incidents

The use, possession or supply of illegal drugs will not be tolerated on our site, neither will the unauthorised use of legal drugs, such as alcohol.

Responses to situations or incidents involving any drug should seek to balance the interests and safety of the individual and others for whom it has an impact.

We will refer to 'Supporting the Cambridgeshire Community Drug Policy', in particular Document B6 and B7, when considering our response to a drug-related incident. We will record each drug-related incident using Document B5 from 'Supporting the Cambridgeshire Community Drug Policy'. If we are considering the involvement of the Police in an incident, we will refer to Document B8.

Where there is an incident that involves a young person in possession of, using or supplying an unauthorised drug the young person's behaviour will be sanctioned and the young person supported. We will work with the young person/people involved in the incident to assess need and refer them to support agencies where appropriate. We will use 'Supporting the Cambridgeshire Community Drug Policy Documents A12, A13 and A14, when assessing need and referring to other agencies.

Once harm is reduced and safety assessed, a range of responses will be considered, based on individual circumstances. The purpose of these responses will be to reduce the likelihood of repeated behaviour before the point of permanent exclusion. These may include:

- early involvement of parents/carers;
- informing the police if it is believed an offence has been committed;
- informal discussions with groups or individuals;

developing realistic and achievable behaviour contracts with young people;

- redefining and reviewing of roles and responsibilities;
- participation in a short-term intensive in-house or community based inter-agency programme;
- · referral to advice or counselling services;
- referral to appropriate treatment or support agencies;
- · specialist consultation groups;
- fixed-term or permanent exclusion.

Following a drug-related incident or situation, procedures and provision will be reviewed and evaluated.

Severity of Incidents

Each incident should be treated individually and responses will vary depending on the severity of the incident. An indication of escalating severity is given below:

- Allegation or suspicion of possession or use off the premises;
- · Possession or use off the premises;
- Possession on the premises;
- Under the influence on the premises;
- Use on the premises;
- Intent to supply on the premises;
- Supply on the premises;
- Persistent supply on the premises.

We will endeavour to make a fair judgement about the motivation and intent of a young person involved in a drug-related incident or situation. For example, we would make a distinction between the behaviour of a young person acting as a result of personal anxiety, stress, or the application of peer pressure and a young person who acts in order to provoke or challenge authority. Similarly, we would make a distinction between possession of drugs for personal use, involving or coercing others and profiting from the supply of drugs.

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Exclusions and Searches

When considering exclusions or searches, we will refer to 'Supporting the Cambridgeshire Community Drug Policy' Document B10 and 'Drugs; Guidance for the Schools' Appendix 10.

Exclusion will be considered where the young person represents a significant risk to the health and safety of others, is disrupting others' learning or has come to the end of a long line of sanctions and the situation has not been resolved. In the case of permanent exclusion, we will undertake to:

- suggest access, with the co-operation and agreement of the individual, to appropriate counselling and support services;
- provide information about the process which enables the individual to continue his/her education with minimum disruption.

References

Drugs: Guidance for Schools Feb 2004 DfES

Available to download from: www.dfes.gov.uk/drugsguidance

Supporting the Cambridgeshire Community Drug Policy

All guidance documents referred to in this policy are available from PSHE Service 01480 375171

They are available to download from www.pshe.ccceducation.net

The Entitlement Curriculum for Drug Education

Age	Knowledge	Skills	Attitudes
Age 3-5	Learning what goes onto and into a young child's body - including pills medicines and injections.	Identifying a range of substances that might harm a young child - at home or elsewhere.	Developing understanding of when adults take responsibility for young children.
	Learning basic safety rules for medicines.	Identifying feelings, expressing them and beginning to understand the effects they have.	Building an appropriate sense of self- responsibility.
	Learning why some people need medicines	Asking for help, identifying who to ask and telling in different contexts.	Beginning to value the body, physical achievements and capabilities.
	Learning how to keep healthy	Identifying when and how to say "No" and "Stop".	
	Learning that all medicines are drugs, but not all drugs are medicines.	Identifying physical and emotional needs which contribute to a happy healthy life.	Developing attitudes towards the use of alcohol and cigarettes.
Age	Learning that all drugs and many household substances can be harmful if they are not used properly.	Identifying situations where risky sub- stances are available, being able to ask for advice and check or say "No, I won't."	Developing attitudes towards medicines, health professionals and hospitals
	Learning about the role of medicines in promoting, improving and sustaining health.	Communicating feelings, how to deal with them and developing a range of people to share them with.	Beginning to value individuality and to recognise and celebrate emotions, gifts and talents.
e 5-7	Learning basic safety rules for medicines, including rules for storage at home and at school and being able to follow these rules.		Valuing one's body and recognising it capabilities and uniqueness.
7	Learning basic information about how the body works, ways of looking after the body and what happens when things enter the body.		Recognising that there are ways to feel good and ways to feel better without taking medicines.
	Considering alcohol and tobacco and their general effects on the body and on behaviour.		
	Learning about the dangers of handling discarded syringes and needles.	Understanding and practising how to act if dangerous items or unknown substances are found or offered.	Beginning to recognise influences from friends, the media and other sources and how to deal with these.
Age	Learning about different types of medicines (both prescribed and overthe-counter) and legal drugs including alcohol and tobacco, their form, effects and associated risks.	Identifying different risks, thinking ahead and having strategies to stay safe.	Developing attitudes and beliefs about legal recreational drugs and people who might use or misuse them and why.
7-9	Learning more about the body, how it works and how to take care of it.	Communicating emotions, both positive and negative, with a growing vocabulary and identifying a greater range of supportive people.	Developing attitudes towards media and advertising of alcohol, tobacco and other legal drugs.
		Recognising an emergency and taking suitable action.	Having a sense of responsibility for personal safety and behaviour.
Age	Beginning to learn about the law relating to the use and misuse of legal and illegal drugs.	Recognising a range of different risky situations, exploring personal reactions to risk and being assertive in decision making around these risky situations	Beginning to value personality and character over appearance or possessions.
Age 9-11	Learning more about different types of medicines (both prescribed and over-the-counter), legal and illegal drugs including their form their effects and associated risks and consequences for society.	Effectively communicating a greater range of positive and negative emotions with a widening network of supportive people. Beginning to be supportive to others who need help.	Developing attitudes and beliefs about illegal recreational drugs and people who might use or misuse them and why.

Age	Knowledge	Skills	Attitudes
Age 9-11 cont.	Learning about solvents, their form effects and associated risks.	Beginning to distinguish between fact and opinion in relation to drugs and to know where to check information and advice.	Developing attitudes towards growing up, self image, changing emotions and new responsibilities and freedoms.
	Learning that all drugs and solvents affect the brain and the importance of the brain in controlling the body and personality	Recognising influences and persuasion, their different sources and effects. Acting and negotiating to deal with these to maintain personal safety.	Developing attitudes towards role models.
	Learning that all drugs, including medicines and some substances can be misused and reinforcing rules for safe use and storage of drugs and substances.	Beginning to be supportive to others who need help.	
	Learning further information about legal drugs (including prescribed and over- the-counter drugs) and illegal drugs, their effects and associated health risks.	Having the capacity to access advice and support, with in personal networks, in the locality, national helplines and organisations.	Expressing and developing attitudes and beliefs about legal and illegal drugs and drug users, amongst different groups in society.
	Learning about different categories of drugs - including stimulants, depressants, analgesics and hallucinogens	Being able to distinguish between fact and opinion in relation to drugs and being able to check information and advice.	Recognising one's self as a role model and acceptance of responsibility for one's own actions.
Age 11-14	Understand scientific terminology including the words use, misuse, abuse, addiction, tolerance, dependence, overdose, withdrawal and adulteration.	Demonstrating the capacity to be assertive and make decisions to reduce risk in situations relating to drug use.	Acknowledging that many adults are concerned about drug use and misuse and exploring the consequences for young people.
1-14	Learning about misuse of drugs in sport.	Being able to recognise and deal with the pressure with in friendships caused by some behaviours and decisions.	Developing personal attitudes towards cultural and peer group views on the use of legal recreational drugs.
	Learning about school rules relating to medicines, alcohol, tobacco, solvents and illegal drugs and responses to drug related incidents.	Giving and securing help for those who need it, whether basic first aid or advice and support.	
	Learning about the effects and risks of taking increasing amounts of alcohol	Being able to recognise and act on factors which will complicate effects of drug taking including mood, mixing substances, using medication concurrently	
	Learning further information about drugs, their legal status, effects (including perceived benefits of illegal drug use) and appearance .	Developing the ability to manage conflict, one's own aggressive behaviour and that of others.	Expressing and developing attitudes towards drugs, drug users and misusers and laws relating to drugs, including licensing and retailing laws.
	Learning about the patterns of drug use locally and nationally and the impact on the community and the wider society.	Demonstrating awareness of and the ability to use a range of decision making and assertiveness skills related to drug use.	Developing attitudes towards being a role model and exploring the impact this has on behaviour.
Age	Learning about drug policy in this country, including education, prevention, policing, penalties, treatment and rehabilitation.	Giving and securing help for those who need it, whether basic first aid or advice and support in a wide range of situations.	Exploring personal attitudes towards cultural, social and peer group views on the use of legal and illegal drugs.
ge 14-18	Learning about the services provided by local and national advice and support agencies.	Showing an awareness of a wide variety of risky situations and be able to suggest courses of action which will reduce risk.	Exploring personal attitudes towards pressure, stress and suggested coping strategies.
œ	Learning about and understanding school rules relating to medicines, alcohol, tobacco, solvents and illegal drugs and responses to drug related situations.	Communicating advice to other young people and ensuring accuracy of information.	Exploring individual attitudes towards personal, financial, social, biological and psychological effects of drug use and misuse.
	CAMBRIDGESHIRE PSHE SERVICE	Cambridgeshire County Council Education Libraries & Heritage	Exploring attitudes towards alternatives, long and short term consequences when making decisions about personal health.