

# Drug Education Policy

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Date: January 2010  
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Staff Responsible: Mrs J Wynd, Headteacher  
Mr N Barlow, Assistant Headteacher – Student Support Services  
Mr A Dobberson Headteacher – Student Support Services  
Mr N O’Connell, Life Skills Coordinator  
Mrs D Turner, Governor

## 1 Process

The process of writing this policy involved consultation between the Headteacher, representatives of teaching and non-teaching staff, school governors, parents/carers, the school council, County Drug Education Consultant, the school nurse, the Pastoral Administrator, Union Representatives, Heads of House and the school’s local Police Youth Crime Reduction Officer (YCRO)/Police Community Support Officer (PCSO).

Further guidance came from the Hertfordshire County Council Drugs Education Guidance document and national guidance, specifically DfES “Drugs: Guidance for Schools” (March 2004).

## 2 Definitions and Terminology

Tring School defines the term ‘drug’ as:

**“A substance people take to change the way they feel think or behave”**

The term “drugs” and “drug education”, unless otherwise stated, is used throughout this document to refer to all drugs:

1. All illegal drugs (those controlled by the misuse of Drugs Act 1971)
2. All legal drugs including, but not exclusively, alcohol, tobacco, volatile substances (those giving off a gas or vapour which can be inhaled), khat, alkyl nitrates (known as poppers), and mephedrone.
3. All over-the counter and prescription medicines

## 3 Aims

We aim:

1. To enable young people to make healthy, informed choices through increasing their knowledge, challenging and exploring attitudes, developing and practising skills, avoiding and managing risk, and resisting pressures
2. To help young people to develop a sense of self-awareness and self esteem
3. To increase understanding about the implications and possible consequences of drug use and misuse for young people and staff on themselves, their families and the community
4. To listen to young people’s thoughts, feelings and concerns and to ensure that drug education responds to their needs and to help them communicate effectively
5. To help young people distinguish between different substances, consider their use, misuse, benefit and harm both in the short and long term
6. To counter any inaccurate messages which young people receive about drugs
7. To encourage an understanding for those experiencing or likely to experience drug use (including those dependent on medicinal drugs)
8. To widen understanding about related health and social issues and rules and laws relating to drugs
9. To enable children to identify where help and support can be found.

We intend to achieve our aims through:

1. A co-ordinated, integrated and consistent approach to the curriculum and to possible drug related incidents
2. An appropriate teaching programme which responds to students' needs
3. Clearly designed learning outcomes for lessons and other inputs
4. Reinforcement of key messages at different ages and stages and in different situations
5. Content and teaching approaches which match the needs and maturities of all pupils, including those with special educational needs and / or English as an additional language
6. Involvement of the whole community, including staff, governors, parents/carers, students and visitors
7. Training and support for staff in the planning and implementation of drug education
8. Policy and practice will be reviewed annually by the Students & Families Committee
9. Recognising that adults are role models for students and committing ourselves to a smoke-free environment. (Since the changes to legislation in 2007 it is now illegal to smoke on the school premises).

#### **4 Practice**

The above aims are implemented through a wide range of activities

1. The National Curriculum demands that the effects of substance abuse are part of the taught curriculum in all Key Stages 1-4. Schemes of work in Science cover these requirements at Tring School
2. Personal, Social, Health and Economic Education (PSHEE) and Citizenship programmes include a significant input of Drugs Awareness and related sessions through Years 7-13. The Life Skills department is supported in the delivery by specialists from outside agencies.
3. It is important to ensure that the PSHEE programme is responsive to the needs of the students in the school and reflects the trends in drugs use nationally and locally. These trends are established by monitoring sources of information provided by organisations such as the LA, the Police and the Department of Health's annual survey on smoking and drinking and drug use among young people in England (11 – 15 year olds). The drugs education programme has to be flexible enough to respond to any changes reported by these sources as well as drugs related incidents within the school or wider community.
4. Counselling and support is available to all young people at Tring School through the services of school counsellors as well as the Pastoral system which operates for the benefit of all members of the school.
5. Outside agencies co-operate actively with the school on a range of social and educational issues, including the use or misuse of substances. Tring School has regular contact with the Police, the Connexions service, Social Services, Education Welfare, the LA and Health and Drug Agencies, many of whom contribute to the PSHEE programme. The Dacorum Education Support Centre also supports a number of students who are "at risk".
6. Parental involvement is essential if schools are to receive support and encouragement in their efforts on drug education. The Tring School website will contain details of the policy, the programme and any events linked with drugs education.

## 5 The Drugs Education Programme

This information together with a summary of the Drugs Policy will be issued to the parents of Year 7 students on an annual basis.

Yr	Time	Subject	Topic	Presenter	Format
<b>7</b>	1 Hour	PSHE	<b>Drugs education</b>	Bud Winderler ( Drugslink) Life Skills Teacher	Discussion, written work
	1 Hour	PSHE	<b>Smoking</b>	Life Skills Teacher, Outside speaker	Discussion, presentation
	1 Hour	Citizenship	Resolving Conflict	Life Skills Teacher	Discussion, activities, written work
	1 Hour	Citizenship	Assertiveness	Life Skills Teacher	Discussion, questionnaire, booklets
	1 Hour	Citizenship	Bullying	Life Skills Teacher	Discussion, role play, written work
<b>8</b>	1 Hour	PSHE	<b>Alcohol - introduction and Effects</b>	Life Skills Teacher	Written work, discussion, quiz
	1 Hour	PSHE	<b>Volatile Substance Abuse</b>	Life Skills Teacher	Written work, discussion, video
	1 Hour	PSHE	<b>Drugs Awareness Lifeskills day</b>	Life Skills Teacher	Written work, discussion, activities, quiz, role play and drama
	1 Hour	PSHE	Self Esteem	Life Skills Teacher	Discussion, activities
<b>9</b>	1 Hour	PSHE	Changes	Life Skills Teacher	Video, discussion, role play
	1 Hour	PSHE	Self Esteem	Outside speaker	Discussion, activities
	1 Hour	PSHE	Relationships	Life Skills Teacher	Discussion, activities
	1 Hour	PSHE	Personal Safety	PC Steve May	Discussion, presentation
	1 Hour	PSHE	Bullying	Life Skills Teacher	Written work, video, discussion
	1 Hour	PSHE	Decision Making	Life Skills Teacher	Discussion, written work
	2 Hours	Science	<b>Effects of Drugs on Health</b>	Science Teacher	Written work, discussion, group presentation using Powerpoint (Hodder Science textbook)
<b>10</b>	1 Hour	Citizenship	<b>Drugs and Prison</b>	Life Skills Teacher	Video, discussion
	1 Hour	PSHE	<b>Drunk in Charge of a Body</b>	Life Skills Teacher	Discussion, activities and role play
	1 Hour	PSHE	Mental health issues	Lifeskills Teacher	Video Discussion
<b>10/ 11</b>	1 Hour	Science	<b>How Drugs Work</b>	Science Teacher	Booklet, written work, discussion and video
<b>10</b>	2 Hours	Science	<b>How Drugs affect behaviour and damage body organs</b>	Science Teacher	Pamphlets, presentation using Powerpoint
<b>10/ 11</b>	1 Hour	Science	<b>Fertility Drugs and Contraception</b>	Science Teacher	Worksheets, textbook work (AQA Modular Science - biology)
<b>11</b>	1 Hour	PSHE	<b>Drug Awareness/Introduction</b>	Life Skills Teacher	Video, discussion
	1 Hour	PSHE	<b>Drug Truths</b>	DPEAP (Drugs prevention and education awareness project) Aylesbury	Discussion
	1 Hour	PSHE	<b>Alcohol Awareness</b>	Life Skills Teacher	Video, discussion
<b>12</b>	1 Hour	PSHE	<b>Drug Driving</b>	Bud Winderler ( Drugslink) Life Skills Teacher	Interactive computer programme and discussion
	1 Hour	PSHE	Samaritans	Life Skills Teacher	Video, discussion
<b>13</b>	1 Hour	PSHE	<b>Alcoholics Anonymous</b>	Outside Speaker	Lecture, discussion
	1 Hour	PSHE	Living with HIV	Outside speaker	Discussion/video
	1 Hour	PSHE	Personal Safety	PC Steve May	Presentation & questions

Sessions written in bold are directly related to Drugs Education  
Science is a compulsory part of the curriculum for all students

## 6 Special Educational Needs

In planning drug education for students with SEN our teachers consider a range of responses. For example:

1. A member of the LSC is a member of the Life Skills Specialist Team
2. The programme of study is differentiated or adapted to suit the needs of identified students
3. Identified students can be withdrawn for small group work
4. The member of LSC can support work in the classroom alongside the Life Skills teacher

## **7 Confidentiality**

Some students may choose to mention instances of drug use in class or to individual members of the school community. While staff will want to be supportive, they need to follow our Child Protection guidelines and clearly state that they may not be able to guarantee confidentiality.

## **8 Working with visitors**

We subscribe to the code of practice recommended by the Department for Children, Schools and Families and by the Hertfordshire Drug Education Forum (DEF).

Visitors can make a valuable contribution to drug education provision but do not constitute a comprehensive programme. The rationale for bringing in a visitor must be clear. It must enhance the overall educational experience and must educate rather than sensationalise. It must fit with the stated aims and objectives of our PSHEE, Science and drug education policy. School staff must always be present and the educational outcomes evaluated. Outside visitors will have been provided with a copy of the school's drug policy. Further details of visitor involvement can be obtained from [www.hertsdef.org](http://www.hertsdef.org).

## **9 Liaison between schools, with parents and the wider community**

We will work with other schools in the area to develop consistent practices to support young people. This includes paying attention to the needs of young people as they transfer from primary to secondary school. We recognise that this and other aspects of community liaison is an important area to which we can contribute with the support of colleagues throughout CSF, the Police, the local authority and other agencies. The school ensures that the views of all parents are considered in the planning and delivery of drug education.

## **10 Roles and responsibilities**

This policy relates to all members of the school community. All staff have a responsibility for drug education and must be fully aware of this policy and its implications for themselves and for others in the community. Whenever adults interact with children, they recognise that they may be influencing attitudes and behaviour.

**a) Teaching and support staff** have a responsibility to contribute to the taught curriculum for drug education. They listen to the students and determine their specific needs. These needs are met in specific drug education inputs as well as through a wider programme of personal and social skills development. All staff should consider themselves as role models whose behaviour the children are likely to notice and often follow. Staff also have a responsibility to know how they should respond to any possible drug related incidents. Training will be provided on an annual basis for new teachers and every three years for the whole staff. There will be a linked Health Awareness Evening covering a range of issues of which drug awareness is just a part.

**b) The Headteacher and Leadership Team (LT)** have the ultimate responsibility for ensuring that policy and practice in his area are fulfilled, including appropriate curriculum content and response to drug related incidents.

**c) The Life Skills Co-ordinator** is responsible for overseeing both curriculum implementation and other elements of school life contributing to drug education. This will include monitoring and evaluating drug education policy and practice throughout the school. The Life Skills Co-ordinator will work with other Co-ordinators to identify where other learning experiences contribute to drug education.

**d) The Governor** with responsibility for drug education and drug related issues has received training in drug issues and understands the issues involved and how they relate to wider issues

of behaviour and school ethos. S/he contributes to developing and reviewing drug education policy and practice.

### **e) Monitoring**

The Headteacher takes overall responsibility for the policy and its implementation and for liaison with the Governing Body, parents and outside agencies, although the general responsibility for handling the daily implementation of the policy lies with Heads of House and the Leadership Team who in turn report to the Governors' Students and Family Committee. The Life Skills Co-ordinator is responsible for the content and its communication to students, of the taught curriculum and the Life Skills programme.

The Life Skills element of the drugs education programme should be annually reviewed by the School Council to ensure students feel they are being catered for. Students are also asked to complete a self assessment questionnaire after key parts of the drugs education programme which focus on students' attitude to drugs and the gains in knowledge and skills. These questionnaires can also be used to help ensure the effectiveness of outside agencies.

Teachers in the Life Skills team review the content of schemes of work in department meetings to ensure they are relevant to the lives of our students. A dialogue about the effectiveness of lessons is also encouraged within the team. The lesson plans give the opportunity for teachers to assess the prior knowledge of students and give students the opportunity to reflect on what they have learnt. It is expected that drugs education lessons share the features of well taught lessons in any subject. The Life Skills Co-ordinator evaluates annually the effectiveness of the programme.

The Life Skills Co-ordinator undertakes lesson observations inline with the school's policy, selecting lessons which are covering the statutory requirements of the PSHEE programme or Citizenship.

### **11 Response to possible drug related incidents**

We will consider each situation individually and recognise that a variety of actions, in response, may be necessary to drugs related incidents as recommended by CSF and national guidance. (Ref: "Drugs; Guidance for Schools" DCSF, February 2004, Appendix 1). If the situation leads to a medical emergency the school emergency aid procedures will be followed immediately.

In the absence of a medical emergency, the Headteacher must be informed, The Assistant Head – Student Support Services will be informed and an appropriate response considered. In the case of involvement with students from our collaboration school, Ashlyns, we would contact them to deal with any issues. We will then refer to the "Drugs; Guidance for Schools" DCSF guidelines on responding to drug related incidents to determine the necessary response. The implications of any action will be carefully considered. The focus of any response will be the student and we will seek to balance the interests of the individual, other members of the school community and the wider community.

Responses will be cross-referenced with related school policies such as:

- Behaviour
- Health and Safety
- Child Protection
- School Visits
- Inclusion/Exclusion

Unless there are exceptional circumstances, we will inform parents/carers or guardians at the earliest opportunity so that we can work together to support the student and resolve any difficulties. We have a range of professional colleagues who can give/obtain advice, support and information in drug or alcohol related situations. These include:

1. The school's Attendance Improvement Officer
2. The CSF Drug Education Consultant
3. The Hertfordshire Healthy Schools Co-ordinator
4. The school nurse
5. A Connexions Personal Adviser (Key Stage 3 & 4 only)
6. The local police Youth Crime Reduction Officer (YCRO)/Police Community Support Officer (PCSO)
7. Representatives of the local Youth Offending Team (YOT) whose role include supporting young people at risk of offending
8. Local Drug and Alcohol agencies and counselling services
9. The FRANK campaign (to register, go to [www.drugs.gov.uk/campaign](http://www.drugs.gov.uk/campaign))
10. The Chairperson of the Herts Drug Education Forum (DEF)

These colleagues can provide guidance and information, and may be able to help with a needs assessment to support us in developing an appropriate response. Contact details can be found on the DEF website [www.hertsdef.org](http://www.hertsdef.org).

Our aim is to enable all students to fulfil their potential. We will work with the student, their parents/carers and colleagues from other agencies to remove barriers to achievement and resolve any difficulties that exist. Drug related situations will be considered alongside other circumstances in the young person's life and not in isolation. Permanent exclusion, whilst it remains an option, will be used as the very last resort.

## **12 Exclusion:**

*"Exclusion should only be considered for serious breaches of the school's behaviour policy, and should not be imposed without a thorough investigation unless there is an immediate threat to the safety of others in the school or the students concerned. It should not be used if alternative solutions have the potential to achieve a change in the student's behaviour and are not detrimental to the whole school community", eg a child who has abused their prescription drug. "In some cases fixed-period exclusion will be more appropriate than permanent exclusion."*

(Drugs: Guidance for Schools, Section 5.4.6 Feb 2004)

## **13 Permanent Exclusion:**

*A decision to exclude a child permanently is a serious one. Permanent exclusion should usually be the final step in the process for dealing with disciplinary offences after a wide range of other strategies have been tried without success. Supplying an illegal drug is a serious breach of school rules and it may be one of the exceptional circumstances where the Headteacher judges that it is appropriate to permanently exclude a student, even for a one-off or first-time offence." Where students are permanently excluded for supplying an illegal drug, repeated possession and/or use of an illegal drug on school premises, the Secretary of State would not normally expect the governing body or an independent appeal panel to reinstate the student."*

(Drugs: Guidance for Schools; Section 5.4.9 Feb 2004)

Should a substance suspected of being illicit be found on the school premises it will be handed to the Headteacher and, in the presence of another member of staff, placed in a sealed container and both signed and dated. It should then be safely stored until it can be collected by a police officer. S/he will also be involved in advising the school on the most appropriate response to the situation. All such incidents will be recorded. See DCSF pro forma in appendices. (Drugs: Guidance for Schools; Police Involvement: Section 4.6 Feb 2004)

Staff are also aware of the protocols surrounding the safe disposal of drug paraphernalia which may be found on the premises.

(Drugs: Guidance for Schools; Disposal of Paraphernalia: Section 4.9 Feb 2004)

All staff will be made aware of the legal constraints on gathering evidence (including personal searches), and questioning those involved. They will not take action without involving the Headteacher and/or Assistant Headteacher – Student Support Services.

(Drugs: Guidance for Schools; Management of drugs at school: Sections 4.5, 4.7 – 4.10, 5.3 – 5.5 Feb 2004)

This policy will apply to parents/carers and other visitors to the school.

(Drugs: Guidance for Schools; Parents/carers under the influence of drugs on school premises: Section 5.5.2 Feb 2004)

## **Appendices**

- DCSF incident response flow chart (see below)
- DCSF pro forma for recording incidents (found at the back of the guidance document)

Tring School Governing Body

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## Appendix 1: Responding to incidents involving drugs

