

# Drug Education Policy

## Broomfield Primary School



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Signed \_\_\_\_\_ Headteacher

\_\_\_\_\_ Governor

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## Section 1: The Context of Our Drug Policy

### Our Shared View of Drug Education

This policy covers our approach to Drug Education; a statutory component of the PSHE curriculum. It aims to set out the purpose of Drug Education and the intended outcomes for pupils, what is covered in our curriculum and how it is delivered.

We believe that 'Drug Education' should help children and young people develop their knowledge about drugs, their skills in taking decisions, and to develop a positive attitude towards their own health.

At our school we believe that good drug education is supported by a consistent, whole school approach, and promoted by the provision of excellent PSHE (Personal, Social and Health Education). It is part of the entitlement for all our children and is planned and taught in the context of our PSHE programme.

We see drug education as an important component in the wider area of risk education. We recognise that giving information about drugs alone will have minimal impact on children's abilities to keep themselves safe with drugs. We will therefore address issues of peer and media influence and will explore with children their different responses to risk and challenge, develop assertiveness, improve communication with peers and adults and enable them to reflect on the factors that influence their decisions.

Drug Education is part of the wider agenda of promoting positive relationships and healthy lifestyles for children to which many individuals and organisations in our community contribute. Our work in drug education contributes to meeting local and national priorities as described in strategies such as: [Safeguarding and Child Protection](#), [Every Child Matters](#) and [National Drug Strategy](#).

As a school we recognise our shared responsibilities regarding children's health and well-being. We also recognise that this policy has a bearing on children's whole lives, not just their time in school. Therefore, this policy describes our strategies for keeping children safe in relation to drugs, both on and off the school premises.

### Our School Ethos

*We have a duty to promote children's well-being and their spiritual, moral, social and cultural development* (Education and Inspection Act 2006).

In full-filling this duty, we enable children to learn a range of life skills through our PSHE curriculum. However, this is only part of the way we endeavour to protect children from later harm associated with drug use. In our school, we aim to ensure that all children feel engaged with school and that they feel supported. Positive engagement with school is a major protective factor against later drug misuse. We hope to set this positive engagement firmly in place.

### Role of Governors

The governors will take an overview of this policy and the effectiveness of the programme of drug education. A Local Advisory Board member will be encouraged to take a special interest in drug education and its place within our broader PSHE curriculum.

### Implementation and Review

The monitoring and evaluation of the policy is the responsibility of the Head Teacher and PSHE Subject Leader. Information will be gathered from the Headteacher, the PSHE Subject Lead, staff, parents/carers and where

appropriate children to inform judgements about effectiveness. Records of drug related incidents will be reviewed to assist with the development of robust procedures.

This policy will be reviewed every two years. The next review will take place in 2025.

## **Definition of 'drug'**

Throughout this policy we use the following definition:

*A drug is a substance which affects how a person thinks, feels or behaves (World Health Organisation). The term includes medicinal, non-medicinal, legal and illegal drugs. Therefore 'drug' refers to alcohol, nicotine, volatile substances (solvents, aerosols etc.), medicines, illegal drugs and new psychoactive substances (legal highs.)*

## **Section 2: Policy for Drug Education in Our School**

Our work in drug education is set in the wider context of our school values and ethos. Key school values include:

- Respect for self and others
- Feeling safe and valued
- Self-awareness and self esteem
- Emotional, social and physical aspects of growing up
- Exploration of rights, duties and responsibilities

Other school policies relevant to our provision of drug education: Anti-bullying Policy, Safeguarding and Child Protection, Behaviour, Emotional Health and Well-being, Relationships and Health Education.

This policy is consistent with current national legislation (Education and Inspection Act 2006 and Learning and Skills Act 2000). It is also consistent with current national guidance (DFE and ACPO drug advice for schools 2012) Our policy also reflects recommendations from OFSTED (PSHE in Schools 2012) and the Drug Education Forum (Principles of Good Drug Education 2011)

Our drug education policy has been developed by the PSHE Subject Lead with the support of the Headteacher and reviewed by staff. It was discussed and ratified by the school governors on May 24<sup>th</sup> 2023

## **Our Aims for Drug Education**

All adults will work towards achieving these aims for drug education in our school. We seek to enable our children to:

- Understand that drugs are any substance which affects how a person thinks, feels or behaves
- Distinguish between different drugs and consider their use, misuse, benefit and harm
- Access accuracy of information about drugs
- Consider how friends and the media might influence decision making
- Develop positive values and a moral framework that will guide their decisions and behaviour
- Value and care for their own bodies

## Delivering the Drug Education Curriculum in our School

We understand the importance of ensuring that all children in school gain similar information and experiences through drug education. We will therefore follow the progressive, spiral curriculum for drug education. (Appendix 1)

The objectives of the curriculum for drug education will mainly be delivered in designated PSHE lessons. Some aspects of drug education will be delivered in other subjects such as Science and R.E.

Some objectives of drug education will also be met in enrichment activities. For example, residential trips, curriculum enrichment days, topical assemblies and through our work as a healthy school.

## Responsibilities for Curriculum Delivery

We regard it as a shared responsibility of all adults working within the school to model responsible drug-related attitudes and behaviour and to respond appropriately to a pupil's request for information or guidance.

The PSHE Subject Lead is responsible for reviewing and evaluating drug education and will report to the Headteacher.

Governors have the responsibility to update their own knowledge and awareness, so that they can contribute to the monitoring and evaluation of policy and practice. The Headteacher will support this.

## Teaching Methodologies

**Ground Rules:** Adults and children together will ensure there are ground rules in place which ensure that every child feels safe and is able to learn in a supportive, caring, respectful and non-judgmental environment. These will cover, in particular, the asking and answering of personal questions and strategies for checking and accessing information.

**Answering Questions:** We acknowledge that sensitive and potentially difficult issues will arise in drug education, as children will naturally share information and ask questions. When spontaneous discussion arises, it will be guided in a way which reflects the stated school aims and curriculum content for drug education. As a first principle, we will answer questions relating to the taught, planned curriculum for that age group, in a sensitive and age appropriate way to the child or children who have asked the question. If a member of staff is uncertain about the answer to a question, or indeed whether they wish to answer it, they will seek guidance from the PSHE Subject Lead. Questions may be referred to parents/carers. We may use a 'Question Box' where questions may be asked anonymously.

When answering questions, we shall ensure that sharing personal information by adults, pupils or their families is discouraged. Where a question or comment from a pupil in the classroom indicates the possibility of abuse, teachers will pass this information to a Designated Safeguarding Lead (DSL) in line with school policy.

Staff may refer to external sources of information such as [www.talktofrank.com](http://www.talktofrank.com) to check information about drugs.

**Distancing techniques:** In order to protect children's privacy, we will employ teaching and learning strategies which enable them to discuss issues without disclosing personal experience. For example, we will use fiction puppets, case studies and role-play to enable young people to share ideas and opinions and to practice their decision-making skills in a safe learning environment.

## **Inclusion**

We understand the importance of ensuring that all children in our school receive their entitlement to drug education. We will carefully consider gender, culture, learning needs and background when planning and delivering it.

In relation to ethnicity, religion and cultural diversity, we value the different backgrounds of our children and, in acknowledging and exploring different values and beliefs, seek to promote respect and understanding.

In order to ensure the drug education curriculum meets the needs of all:

- We will encourage respect and discourage abuse and exploitation
- We will not ask young people to represent the views of a particular religious or cultural group to their peers, unless they choose to do so

In relation to those with special educational needs, we will review our drug education programme to ensure that provision is made for those with additional needs. We will consider:

- Their level of vulnerability
- Their use of medication
- Their need to develop self-esteem and positive body image
- The need to involve all staff and carers in policy development, planning and training
- Sources of support for pupils

## **Drug Misuse in Our Community**

Many pupils will have parents, carers or family members who use, misuse or abuse drugs, including medicine, alcohol and nicotine. Some will experience pragmatic alcohol use or 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 children or heighten their anxieties about their family members' welfare. It will be a high priority to determine and address the additional needs of children who experience the effects of drug misuse and abuse in their homes.

## **Resources**

We will refer to national guidance when planning our drug education activities. For example, *DfE & OfSTED guidance, Drug Education Forum*

All staff will primarily use the Cambridgeshire Primary Personal Development Programme when planning and delivering drug education. Resources to support our drug education programme can be found in their Drug Toolkit.

## **Visitors and Community Agencies Supporting Drug Education in Our School**

We may also use the expertise of visitors from the community and experts from outside agencies (e.g. DAart Officers, school nurse) but this will be seen as an enrichment of our programme and not a substitute for our core provision which is based upon the strong relationships between teachers and pupils. Such visitors will

be made aware, in advance, of our policy and will be expected to work within it. They will work in collaboration with appropriate staff to ensure continuity and that the needs of the children are met.

## **Staff Training**

We understand that, in order to feel confident in teaching drug education, staff need opportunities to develop knowledge, skills and attitudes and to share good practice. We recognise that all adults have different personal beliefs and attitudes to drugs and drug education. We will discuss relevant issues and, where appropriate, arrange training to enable staff members to feel confident in delivering the drug education curriculum. The PSHE Subject Lead will be supported in developing the necessary skills and knowledge to lead the development of our drug education curriculum.

## **Children's Participation**

As well as recognising that an interactive approach to drug education will better develop the skills of our children, we will involve young people in the evaluation and development of their drug education in ways appropriate to their age.

- We will encourage children to ask questions as they arise by providing anonymous question/worry boxes
- We will ask children to reflect on their learning using appropriate success criteria and set goals for future learning
- We will consult children, through the School Council about their perception of the strengths of our drug education programme and areas for further development

## **Working with Parents/Carers in our School Community**

Parents/carers are the key figures in supporting their children through the emotional and physical aspects of growing up. Therefore, we seek to work in partnership with parents/carers when planning and delivering drug education. We encourage this partnership by:

- Inviting parents to learn more about the resources and activities used in drug education
- Gathering parent's views on the drug policy and taking these into account when it is being reviewed
- Providing supportive information about the parents' role in drug education and how they can develop protective factors with their children
- Inviting parents to discuss their views and concerns about drug education on an informal basis

Parents and carers will be given access to the policy on request. It will also be available on the school website and in the policy folder in the school office.

Useful links and organisations:

## **Monitoring and Evaluating Drug Education**

We are committed to the development of Drug Education on our school. When carrying out a review will refer to the Cambridgeshire Primary Development Programme's Policy Audit. We will use the following indicators to monitor and evaluate our progress.

- A coordinated and consistent approach to curriculum delivery has been adopted

- A flexible approach to delivering drug education that responds to the children'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 are regularly revised and involves staff, governors and where appropriate young people

### Section 3: Preventing, Reducing and Responding to Drug-Related Situations in our School

In the following section we will use these terms:

**Drug use:** The consumption of any drug.

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

**Authorised drug use:** Where a drug is accepted by the school.

**Unauthorised drug use:** Where use is restricted or prohibited e.g. alcohol, tobacco, medicines or new psychoactive substances

#### Drug-related Situations

A drug-related situation is one involving the use of any unauthorised drug by a child or adult in school. A situation might be on-going, but will have been discussed and planned for.

Drug-related situations might include:

- The storage of alcohol on the premises by staff, parents or other users of our premises
- The sale or award of alcohol e.g. *raffle prizes*
- The storage or use of medicines on the premises by staff, parents or children
- The use of tobacco or alcohol by staff, away from the premises, while taking part in events or residential trips

#### Drug-related Incidents

A drug related incident is one where there is evidence or suspicion of specific events involving unauthorized or illegal drug possession, 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 child of their own unauthorized or illegal drug use or alleged use by another person
- Unauthorized or illegal drugs being possessed or used on the school premises
- Physical evidence of unauthorised or illegal drug use being found on or around school premises
- Supply or intended supply of unauthorized or illegal drugs on the school premises
- Community concerns about unauthorized or illegal drug use by an adult working with children
- Community concerns about unauthorized or illegal drug use by children
- Children disclose they are adversely affected by the drug use or misuse of others
- The intimidation of a child 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 school site, neither will the unauthorized use of legal drugs, such as alcohol, tobacco and new psychoactive substances.

All staff will be aware of the basic procedures for dealing with a drug-related incident. The Headteacher will take responsibility for any required action.

Responses to situations or incidents involving any drug will seek to balance the interests and safety of the individual and others involved. The likelihood of any child being the instigator of a drug-related incident in school is extremely low. However, where an incident involves a child at our school. We will seek to involve parents/carers, if appropriate, and gain advice and support from specialist services and Children's Services. Exclusion may be a final option, if other sanctions have not been successful.

In the very unlikely event that a child's person or property must be searched for a prohibited item, such as an illegal or unauthorized drug, we will refer to 'Screening, Searching and Confiscation' DfE 2022

Following every drug-related incident, procedures will be reviewed and evaluated. The Headteacher will lead this review.

## Responsibility for Preventing and Responding to Drug-related Incidents

- Solvents and hazardous chemicals will be stored in accordance with our BEP Trust Health and Safety Policy, which refers to Control of Substances Hazardous to Health (COSHH) Guidelines. The person responsible for overseeing this policy is the Headteacher.
- If a substance is found on our premises it will initially be reported to the Headteacher who will record the nature of the incident and ensure it is removed safely.
- In a situation where a child is involved in unauthorized drug use on school premises, the Headteacher will normally inform the child's parents. If a decision is made not to inform parents, this will be documented.
- If the Headteacher believes an offence has been committed by staff or pupils they will consider informing the police. If the decision is made not to inform the police this will be documented. On most occasions the Police Community Support Officer (PCSO) will be the first contact.

## Confidentiality

Confidentiality guidance is not altered by the fact that a case involves drugs. Where there is a genuine risk to the safety of the child, information must be passed on to individuals and/or organisations responsible for protecting the child. It is likely that such responses will fall within the remit of other policies such as the Safeguarding and Child Protection Policy.

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

Any information disclosed to a staff member or other responsible adult, which is deemed to be a serious nature, will be communicated to the designated person immediately.

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

- There is no cause to believe that confidentiality will endanger or put the child or others at risk
- Disclosure itself may place the child at risk

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

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

## **School Boundaries and School Visits**

We will make clear to staff and parents/carers 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.

## **Section 4: Monitoring, Review and Evaluation**

This policy is regularly monitored and evaluated to ensure its' effectiveness. The policy review is coordinated by the Headteacher and/or PSHE Subject Lead and includes collecting data and gathering the perceptions of the whole school community. The results of the review are used to inform areas for school development. The Policy is reviewed every two years.