

# St Dominic's Grammar School



## Drugs Policy

### Procedure Details

| Legal Status | Adopted | Version Date | Last Review  | Next Review  | Responsible                |
|--------------|---------|--------------|--------------|--------------|----------------------------|
|              |         | May 2025     | January 2025 | January 2027 | Pastoral vice<br>Principal |

### Related Documents and Location

1. Child Protection/Safeguarding Policy
2. Managing Critical Incidents Policy
3. Administration of Medication in School Policy
4. Positive Behaviour and Discipline Policy
5. Educational Visits Policy
6. Health and Safety Policy
7. Positive Behaviour and Anti-Bullying Policy
8. DE Guidance and Circulars (Appendix 1)

All policies are available on the School Website

Reviewed January 2025.

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## 1. Introduction and Rationale

It is a statutory requirement for all schools in Northern Ireland to have a Drugs Policy and to provide drugs education as part of the school's curricular provision. St Dominic's Belfast is committed to providing a safe, caring environment which promotes the protection and safeguarding of each individual child.

One of the key aims of the school's Drugs Policy is to keep all our students safe. It is increasingly important that we equip our students, through our ethos, the Preventative Curriculum and in particular drugs education, to make informed and responsible decisions to help them cope with living in an increasingly substance-tolerant society. According to Drugs: Guidance for Schools in Northern Ireland (CCEA, Revised Edition 2015), "In today's society, most people will be exposed to and/or use some sort of drug at some time in their lives. Substance misuse affects all communities in Northern Ireland, crossing gender, cultural and social boundaries. No school, parent or carer can afford to be complacent or think that children and young people are not at risk. Research continues to show that by post-primary school age a significant number of young people are engaging with substances such as alcohol, cigarettes, including electronic cigarettes, or solvents and/or have misused prescribed medicines or other substances."

This policy reflects the guidance and procedures set out in Drugs: Guidance for Schools in Northern Ireland (CCEA, Revised Edition 2015) and the DE Guidance and Circulars listed on Page 13. It should be considered with the Related Documents listed on Page 1, in particular the school's Managing Critical Incidents Policy and Child Protection/Safeguarding Policy.

*There is a public perception that drug misuse is mainly an issue in disadvantaged inner-city areas. Drug misuse is just as much an issue in rural areas and affluent communities: it extends across socio-economic, geographical and cultural boundaries. Educationally successful young people are just as likely to put themselves at risk as low attainers."*(DENI 1996/16)

All staff (teaching and non-teaching), should familiarize themselves with the information included in this policy and further copies may be obtained from the **Designated Teacher for Drugs, Ms P McNulty, the Principal, Mrs O O'Neill or the Deputy Designated Teachers for Drugs A Braniff and J Fizzimons .**

Students, parents, staff and governors were consulted in the drafting of this policy.

## 2. School Ethos

**Motto:** Veritas

**Vision Statement:** St. Dominic's is a community committed to mutual respect where every individual is valued, respected encouraged and empowered to reach her/his potential in an atmosphere of love, forgiveness, honesty, openness and optimism. We are committed to celebrating difference, to promoting equality, self-belief and a culture of confidence where success is celebrated. We strive to unlock our individual and collective potential and to be prepared to meet the challenges and opportunities of the twenty-first century, reflecting our strong Dominican ethos

**Mission Statement:** Each one of us is unique created by a unique God for a unique purpose

The school is committed to ensuring that all of our pupils and indeed wider school community reach their potential and are able to play a meaningful role in the world. We recognise each individual's giftedness and aim always at building our pupils' self-esteem and confidence so that they can live fulfilled and happy lives.

**3. Designated Teacher for Drugs, Ms P McNulty, the Principal, Mrs O. O'Neill or the Deputy Designated Teachers for Drugs A Braniff and J Fizzimons.**

#### 4. Definitions

The terms **Drug** and **Substance** include any product that, when taken, has the effect of altering the way the body works or how a person behaves, feels, sees or thinks.

**Substances** include:

- alcohol, tobacco and tobacco-related products, including nicotine replacement therapy (NRT), and electronic cigarettes;
- over-the-counter medicines such as paracetamol and cough medicine;
- prescribed drugs, such as antibiotics, painkillers, antidepressants, antipsychotics, inhalers and stimulants such as Ritalin;
- volatile substances such as correcting fluids or thinners, gas lighter fuel, aerosols, glues and petrol;
- controlled drugs such as cannabis, LSD, ecstasy, amphetamine sulphate (speed), magic mushrooms, heroin and cocaine;
- new psychoactive substances (NPS), formerly known as legal highs\*, which contain one or more chemical substances that produce similar effects to illegal drugs;
- other substances such as amyl or butyl nitrite (known as poppers) and unprocessed magic mushrooms.

**Drug Use** refers to taking a drug; there is no value judgement, although all drug use has an element of risk.

**Drug Misuse** refers to legal, illegal or illicit drug taking or alcohol consumption, which leads a person to experience social, psychological, physical or legal problems related to intoxication or regular excessive consumption and/or dependence. Drug misuse is therefore taking drugs, including prescribed drugs and NPS, that cause harm to the individual, their significant others or the wider community.

**3.1 Controlled substances** are legally classified according to their benefit when used in medical treatment or harm if misused. The Misuse of Drugs Act sets out a range of substances that are controlled under the act. It is an offence to possess, possess with intent to supply, supply, or allow premises you occupy or management to be used unlawfully for the purpose of producing or supplying controlled drugs. The Act has four separate categories: Class A, Class B, Class C and temporary class drugs. Substances may be reclassified. The Misuse of Drugs regulations, created under the Misuse of Drugs Act, license production, possession and supply of substances classified under the act. These include five schedules that classify all controlled medicines and drugs.

- Schedule 1 has the highest level of control, but drugs in this group are very rarely used in medicines.
- Schedule 5 has a much lower level of control.

Main Types of Controlled Substances by Class/The Misuse of Drugs Act (1971)

| Class                     | Substance  | Possession   | Supply and production                               |
|---------------------------|--|--|---|
| A                         | Crack cocaine, cocaine, ecstasy (MDMA), heroin, LSD, magic mushrooms, methadone, methamphetamine (crystal meth)  | Up to 7 years in prison, an unlimited fine or both                   | Up to life in prison an unlimited fine or both      |
| B                         | Amphetamines, barbiturates, cannabis, codeine, methylphenidate (Ritalin), synthetic cannabinoids, synthetic cathinones (for example mephedrone or methoxetamine) | Up to 5 years in prison, an unlimited fine or both                   | Up to 14 years in prison, an unlimited fine or both |
| C                         | Anabolic steroids, benzodiazepines (diazepam), gamma hydroxybutyrate (GBH), gamma-butyrolactone (GBL), Ketamine, piperazines (BZP)                               | Up to 2 years in prison, an unlimited fine or both                   | Up to 14 years in prison, an unlimited fine or both |
| Temporary class substance | NBOMe and Benzofuran compounds   | None, but police can take away a suspected temporary class substance | Up to 14 years in prison, an unlimited fine or both |

[www.gov.uk/penalties-drugs-possession-dealing](http://www.gov.uk/penalties-drugs-possession-dealing)

Please note the above table refers to some commonly available drugs. It is not a complete list of controlled drugs.

\* The term 'legal high' is no longer used as it is misleading. These substances are not regulated and there is no way of knowing what chemicals they contain.

## 5. Aims and Objectives

1. To protect our students from the harm associated with the use and misuse of drugs and substances.
2. To have a clear and agreed understanding among everyone in the school community about the implications and possible consequences of drug use/misuse.
3. To develop a consistent approach to drug-related issues in line with the School's **health & well-being** provision.
4. To ensure that students, parents and staff are clear about the school's Drugs Policy and how it applies to them.
5. To establish clear procedures for managing specific incidents of suspected drug/substance misuse.
6. To provide a Drugs Education Programme to help students develop appropriate skills, attitudes and behaviours to resist societal pressures to drink alcohol and/or misuse drugs.
7. To enable students to make informed and responsible decisions and help them cope with living in an increasingly substance-tolerant society.
8. To help to build the factors that protect young people from becoming involved in drug/substance misuse.
9. To provide additional pastoral support for those students identified as potentially vulnerable.
10. To direct students to appropriate services and support, where misuse has been identified.

## 6. Roles and Responsibilities in St. Dominic's

### **The role of the individual staff member (teaching and non-teaching)**

All staff should be familiar with the content of the school's Drug Policy. They should also be fully aware of their responsibilities, should a suspected drug-related incident occur. It is not the staff's responsibility to determine the circumstances surrounding the incident, but they should: -

- Assess the situation and decide on the appropriate actions to take;
- Notify the Principal and the designated teacher for drugs at the earliest opportunity;
- Deal with any emergency procedures to ensure the safety of pupils and staff, if necessary forward any information, substance or paraphernalia received to the designated teacher for drugs, who will respond accordingly;
- Use the school's Drugs Incident Report Form to complete a brief factual report on the suspected incident and forward this to the designated teacher for drugs (see Appendix 10);
- Consider the needs and safety of a pupil when discharging him or her into the care of a parent or carer who appears to be under the influence of alcohol or another substance (staff, who are in loco parentis, should maintain a calm atmosphere when dealing with the parent and, if concerned, should discuss with the parent alternative arrangements for caring for the pupil); and invoke safeguarding procedures, if a parent or carer's behaviour may place a pupil at risk

A summary of relevant legislation is available at [www.ccea.org.uk](http://www.ccea.org.uk).

### **6.1 The Designated Teacher for Drugs is responsible for:**

- Coordinating the school's procedures for handling suspected drug-related incidents and training and inducting new and existing staff in these procedures;
- Ensuring that the school's disciplinary policy has an appropriate statement about any disciplinary response resulting from suspected drug-related incidents;
- Liaising with other staff responsible for pastoral care;
- Being the contact point for outside agencies that may have work with the school or with a pupil or pupils concerned;

- Responding to advice from first aiders, in the event of an incident, and informing the principal, who should contact the pupil's parents or carers immediately taking possession of any substance(s) and associated paraphernalia found in a suspected incident;
- Dealing with pupil(s) involved in a suspected incident;
- Completing a factual report using the schools Drug-Related Incident Form, which they forward to the Principal, and
- Reviewing and if required updating the policy at least annually and after a drug-related incident, where learning from the experience could improve practice.

\* The Deputy Designated Teacher for Drugs will assume these responsibilities in the absence of the Designated Teacher for Drugs.

## 6.2 The **Principal** is responsible for:

- determining the circumstances of all incidents;
- contacting the parent(s) of those students involved in any suspected drug-related incident;
- liaising with the PSNI with regards to any incident involving a controlled substance. **Failure to inform the PSNI of a suspected incident involving controlled drugs is a criminal offence.**

It is the role of the **PSNI** to investigate any criminal or suspected criminal offence. After contacting the PSNI, the **Principal** should confine her responsibility to:

- the welfare of the student(s) involved in the incident and the other students in the School;
- health and safety during the handling, storage and safe disposal of any drug or drug-related paraphernalia, using protective gloves at all times;
- informing the Board of Governors;
- deciding any pastoral or disciplinary response;
- reporting the incident to the Education Authority, if appropriate;
- completing a written report and forwarding a copy to the Chair of the Board of Governors and the Designated Officer in the Education Authority.

## 6.3 The **Board of Governors** should:

- collaborate with appropriate staff, students and parents to support the development and review of the School's Drugs Policy;
- facilitate the consultative process where the School community can respond and contribute to the effectiveness and quality of the school's Drugs Policy;
- ensure that details of this policy are published in the information booklet with the School prospectus;
- ensure this policy is reviewed at least annually and after a drug-related incident;
- be fully aware of and adequately trained to deal with suspected drug-related incidents, including alcohol and tobacco, tobacco-related products, electronic cigarettes, and their appropriate disciplinary response.

As a matter of good practice, the BOG should have a designated governor for drugs who has received specific training in drug-related issues

**Parents/carers** have the right to expect that the School is a safe and caring environment for their children. They also have a vital role to play in the prevention of drug misuse. Parents/carers should:

- ensure that their child acts in accordance with the School's Drugs Policy, the School's Administration of Medication in School Policy, the School's Rules for Students and the School's Positive Behaviour Policy **and the Student Code of Conduct**;
- report any alleged drug-related incident of which they are aware to the Designated Teacher for Drugs;
- inform the Designated Teacher for Drugs if they suspect their child is involved in drug misuse;
- liaise with external agencies, as appropriate, to access additional support.

**Students** have specific responsibilities to ensure the School environment is safe and free from drugs and alcohol. Students must at all times:

- behave in a safe and appropriate manner to ensure their safety and the safety of all members of the School community;
- report immediately to a member of staff when a student is suspected either of being in possession of drugs or being under the influence of drugs, including alcohol;
- act in accordance with the School's Drugs Policy, the School's Administration of Medication in School Policy, **the Student Code of Conduct** and the School's Positive Behaviour Policy;
- adhere to the School's agreed Code of Conduct for Students on an Educational Visit;
- make informed and responsible decisions in an increasingly substance-tolerant society;
- engage positively in the curricular opportunities provided to develop appropriate skills, attitudes and behaviours to resist societal pressures to drink alcohol and/or misuse drugs.

#### **6.4 The School's Legal Duties**

It is a statutory requirement for all schools in Northern Ireland to:

- have a Drugs Policy and publish details in relation to the policy in their prospectus (Education (School Information and Prospectuses) Regulations (Northern Ireland) 2003);
- deliver drugs education to include legal and illegal substances (The Education (Curriculum Minimum Content) Order (Northern Ireland) 2007); and
- inform the PSNI if they believe or suspect a student to be in possession of a controlled substance (Criminal Law Act (Northern Ireland) 1967).

#### **7. Drugs Education in the Curriculum**

In accordance with the statutory requirement of the Northern Ireland Curriculum, drugs education is delivered through the Personal Development strand of Learning for Life and Work, to shape attitudes, values and aspirations that bring about resilience in young people.

Drugs education is also actively promoted through:

- **Health & Wellbeing** lessons;
- Learning for Life and Work;
- Relationship and Sexuality Education/EFL lessons;
- Mentor lessons;
- Assembly;
- Talks by external agencies (approved by SLT);
- Focus of the Week;
- English/Drama/Home Economics/Science/PE.

#### **8. Procedures for Managing Suspected Drug-Related Incidents**

##### **8.1 Managing Suspected Drug-Related Incidents**

Dealing with suspected drug-related incidents requires extreme sensitivity and the following procedures will help those charged with handling difficult and complex issues to be fair and consistent in their dealings with students.

For the purposes of this policy, a drug-related incident may include:

- a student displaying unusual or uncharacteristic behaviour;
- an allegation;

- suspicion of possession, possession with intent to supply and/or supply of any substance as defined on Page 4;
- finding substance-related paraphernalia.

A Checklist of Roles and Responsibilities When Managing an Incident is provided in Appendix 2. Appendices 3-7 outline how the school will manage suspected drug-related incidents on School premises, when travelling to and/or from the school and/or when engaged in authorised school-related activities.

|            |   |
|------------|---|
| Appendix 3 | Finding a suspected substance or drug-related paraphernalia on or close to school premises.   |
| Appendix 4 | Student suspected of having taken drugs/alcohol on school premises, when travelling to and/or from the school and/or when engaged in authorised school-related activities.                        |
| Appendix 5 | Student suspected of possessing/distributing an illegal substance on school premises, when travelling to and/or from the school and/or when engaged in authorised school-related activities.      |
| Appendix 6 | Student in possession of alcohol or unauthorised prescribed medication on school premises, when travelling to and/or from the school and/or when engaged in authorised school-related activities. |
| Appendix 7 | A parent or carer arrives at school to collect a child and appears to be under the influence of alcohol or another substance.   |

## 8.2 Taking Possession of a Suspected Controlled Substance and/or Associated Paraphernalia

The law permits school staff to take temporary possession of a substance suspected of being a controlled drug to protect a student from harm and prevent the student committing the offence of possession. The member of staff should, using appropriate safety precautions, take the suspected substance and any associated equipment and/or paraphernalia to the Designated Teacher for Drugs as soon as possible. She should arrange for its safe storage until the school can hand it over to a PSNI officer to identify whether it is a controlled substance. School staff should not attempt to analyse or taste an unidentified substance. An adult witness should be present when staff confiscate the substance and the school should keep a record of the details, using the School's Drugs Incident Report Form (Appendix 10).

## 8.3 An Allegation of a Suspected Controlled Drug-Related Incident: Carrying Out a Search

If the Principal/Designated Teacher for Drugs receives an allegation of possession, **they** may need to search a student's locker (if the pupil has a locker), if **they have** cause to believe it contains unlawful items, including controlled drugs. However, staff should only search the student's personal belongings, including schoolbag, coat or other items with the student's consent. The Principal/Designated Teacher for Drugs should carry out this search in the presence of the student and another adult witness.

If the school suspects a student of concealing controlled drugs on his/her person or in his/her personal belongings, staff should make every effort to encourage the student to produce these substances voluntarily. The Principal/Designated Teacher for Drugs should ask the student to turn out her pockets or schoolbag(s). If the student refuses, the Principal should contact a parent and the PSNI to deal with the situation. **A member of staff should never carry out a physical search of a student, unless there is compelling evidence that the student has committed an offence.** If staff recover a substance or an object that they suspect has a connection with drugs, they should take possession of it and make a full record using the School's Drug Incident Report Form.

## 8.4 Detaining a Student

When managing a suspected drug-related incident, the School should invite the student(s) concerned to remain in school under the supervision of appropriate members of staff until their parent(s) and the PSNI



arrive. If a student refuses to remain, the school cannot detain him/her against his/her will. However, if a member of staff has reasonable grounds to suspect that the student has in his/her possession or has taken a controlled substance, he/she can make a citizen's arrest under Article 26A of the Police and Criminal Evidence (Northern Ireland) Order (PACE) 1989.

The member of staff should make the student fully aware of the implications before making the arrest, confirming:

- that the student is not free to leave once he/she has been informed by the arresting person why he/she is being arrested; and
- that he/she will be detained until he/she is handed over to a PSNI officer who will then deal with the investigation.

Staff must be able to recognise the point where a young person becomes a danger to either him/herself or others. They should also be aware of their duty of protection because they are in loco parentis.

## **9. Confidentiality**

Staff should not give a student any undertaking of confidentiality when dealing with a drug-related incident. They should make the boundaries of confidentiality clear to students and reassure the student that only those who need to know will be informed. If a student discloses information concerning controlled substances, the member of staff must notify the Principal/Designated Teacher for Drugs who will then coordinate the School's procedures for handling suspected drug-related incidents.

When an allegation is made against a student or a member of staff, the School will make every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered.

## **10. Disciplinary or Pastoral Care Responses**

### **10.1 Disciplinary Responses**

In accordance with Drugs: Guidance for Schools in Northern Ireland (CCEA, Revised Edition 2015), the School has developed a repertoire of responses to reflect different kinds of substance/drug-related offences and to ensure the safety and well-being of other students. In all cases, the Principal, having taken account of various factors, reserves the right to apply what she considers to be the most appropriate sanctions in relation to any incident/behaviour which is deemed unacceptable. The sanctions outlined below apply to a student who is on School premises, travelling to and/or from the school and/or engaged in authorised school-related activities.

- Any student found to be in possession of and/or possession with the intent to supply a controlled drug/new psychoactive substance will be suspended. The PSNI will be notified and he/she will be recommended for immediate expulsion.
- Any student found to be under the influence of a controlled drug/new psychoactive substances will be suspended. The PSNI will be notified and he/she will be recommended for immediate expulsion.
- Any student who supplies (either gives or sells) a controlled drug/new psychoactive substance to others will be suspended. The PSNI will be notified and he/she will be recommended for immediate expulsion.
- Any student found to be in possession of alcohol will be suspended. He/she may be recommended for expulsion.
- Any student found to be under the influence of alcohol will be suspended. He/she may be recommended for expulsion.
- Any student who sells or shares alcohol with other students will be suspended. He/she may be recommended for expulsion.

## **10.2 Pastoral Care Responses**

During and after any incident, the School will consider the individual needs of any student involved. Where appropriate, this may involve discussion with the student, his/her parent(s), a PSNI officer, the Designated Teacher for Drugs and appropriate pastoral care staff. A referral to counselling or a referral pathway to specific support agencies may be part of a pastoral care response.

## **11. Provision of Counselling Services in the School**

The school has a team of caring pastoral staff , as well as an external counsellor from Familyworks who attends **once** a week. The Familyworks provision is part of the DE funded Independent Counselling Service for Schools (ICSS) - an independent, confidential, school-based professional counselling service which uses a process of talking, listening and empowerment to help students make their own decisions. Students are encouraged to self-refer to the Counselling Services or ask a teacher to arrange an initial meeting. The Familyworks counsellor is also available to students for 'drop-in' sessions during lunch or break. The school counsellors are happy to support students with any issue which may cause worry or concern. The Counselling Services provided in the school are monitored and evaluated by the Vice Principal (Pastoral). Annual counselling reports are submitted to the Principal. A list of useful contacts for parents is provided in Appendix 11. Where appropriate, a parent may be advised to consult with a GP and/or secure a referral to an external agency.

## **12. Guidelines for Administering Prescribed Medication**

St. Dominic's is committed to working in partnership with parents/guardians, health professionals and other agencies to provide a supportive environment for students with medication needs. Prescription and non-prescription medication, as outlined in Section 7.6 of the School's Administration of Medication in School Policy, will be administered in the Medical Inspection suite under the supervision of the School First-Aider. The First-Aider will keep a record (Form AM4) of the date, time and dosage of the administration of medication.

The School will endeavour to support students engaged in a smoking cessation programme on receipt of written advice from his/her GP. Further information is available for students and parents on 'Stopping Smoking Made Easier' - [www.publichealth.hscni.net](http://www.publichealth.hscni.net).

## **13. Emergency First-Aid Procedures**

In the event of a medical emergency, staff should contact the School First-Aider (Mrs Holland ) and follow the procedures outlined in Appendix 9. In the event of Mrs Holland not being present, the Office should be contacted and office staff will contact a First Aider  
The emergency services should be contacted, if appropriate.

## **14. Staff Use of Alcohol and Smoking on School Premises, on Educational Visits and Other Social Events**

In accordance with DE Circulars 2004/01 (21/01/04) and 2014/25 (15/12/14), St. Dominic's is a smoke-free and e-cigarette-free environment. The consumption of alcohol is also prohibited on school premises during the school day. Alcohol may be served to adults at specified events with the permission of the Principal.

Staff/volunteers are at all times bound to follow St. Dominic's agreed Professional Standards and Expectations for Staff/Volunteers and the school's Child Protection/Safeguarding Policy.

*" Whilst St. Dominic's fully respects the right of staff to a private social life in the community it is important that staff bear in mind the following:*

- *Their own professional standing in the community and therefore avoid any behaviour in public which could undermine their professional reputation.*
- *Do not socialise with pupils out of school hours other than at organised school events – mindful that this could lead to very serious personal and professional consequences.”*

Leaders:

- must not use illegal drugs/new psychoactive substances (NPS) during the educational visit;
- must not drink alcohol during the educational visit;
- must not smoke or use nicotine containing products (e-cigarettes) in the presence of students during the educational visit.

When dealing with drug and/or alcohol use/misuse by staff, the Principal and the Board of Governors may consider:

- the Work Place Policy on Smoking, Drugs and Alcohol ([www.nibusinessinfo.co.uk](http://www.nibusinessinfo.co.uk));
- Don't Mix It: A Guide for Employers on Alcohol at Work ([www.hse.gov.uk](http://www.hse.gov.uk));
- Drugs Misuse at Work: A Guide for Employers ([www.hse.gov.uk](http://www.hse.gov.uk)).

## **15. Procedures for Communicating to Staff, Parents or Other Relevant Agencies**

**15.1 Policy:** This policy is available for students, parents and staff on the School Website. A hard copy of the School's Drugs Policy is also available on request from the school office. A summary of this policy is included in the in the Student Planner (2020-21).

**15.2 Communication Following a Suspected or Confirmed Drug-Related Incident:** The School should carefully consider how it communicates information about a suspected or confirmed drug-related incident to staff, students and parents. It should only disclose information to members of staff concerned with the pastoral needs of the individual student(s). It should inform only the parents of the student(s) directly involved of the incident and the subsequent outcomes. Staff should not discuss individual cases with other students. The school may, however, need to make a general statement informing the school community after an incident where rumours may create a negative atmosphere.

**15:3 Dealing with the Media:** The Principal will deal with enquiries from the media. She will respect the privacy of students and their families and may liaise with the PSNI before issuing a statement.

## **16. Procedures for Monitoring, Evaluating and Reviewing this Policy**

The Designated Teacher for Drugs and Heads of School will monitor and evaluate the success of this policy and its implementation by means of:

- the number of drug-related incidents relating to students of the School;
- feedback from Student Councils;
- student and parental questionnaires;
- discussion at Pastoral Care Meetings;
- post-incident reviews to monitor how effectively drug-related incidents have been dealt with.

The Designated Teacher for Drugs and Heads of School will review and, if required, update this policy at least annually and after a drug-related incident, where learning from the experience could improve practice. This review should reflect changing circumstances and trends in substance use in the local community. Any recommendations for change are made to the Principal and the Senior Leadership Team (SLT) prior to consultation with students and parents.

Students and parents are encouraged to contact the Vice Principal (Pastoral Care) at any time to express their views on the policy.

### Procedures for Monitoring, Evaluating and Reviewing the Drugs Education Programme

The Vice Principal (Pastoral) and Heads of School will monitor and evaluate the Drugs Education Programme as part of the annual review of the Personal Development Programmes by means of:

- student and parental questionnaires;
- student focus group meetings with Heads of Year;
- discussion at Pastoral Care Meetings;
- Feedback from parents

The Heads of School will review and, if required, update the Drugs Education Programme to reflect the needs of students and the local community.

### **18. Training**

Training to support staff and governors in the implementation of the School's Drugs Policy will be provided as deemed necessary by the Principal of the School.

A list of useful contacts for parents is provided in Appendix 11.

### **19. How to Raise a Concern or Make a Complaint about the Administration of this Policy**

If you have a concern or complaint about the administration of this policy please contact Mrs McCann Principal, in the first instance. If necessary, you may then access and follow the School's Parental Complaints Procedure which is available on the School website. Should you remain dissatisfied with the School's response after completing the internal complaints procedure, you can bring your complaint to the Northern Ireland Public Services Ombudsman within six months.

Signed: \_\_\_\_\_  
(Chairperson of the Board of Governors)

Date:

Signed: \_\_\_\_\_  
(Principal)

Date:

## **DE Guidance and Circulars**

DE: Pastoral Care in Schools: Child Protection (1999)

DE: Pastoral Care in Schools: Promoting Positive Behaviour (2001)

DE: Supporting Pupils with Medication Needs (2008)

New Strategic Direction for Alcohol and Drugs, Phase 2, 2011-2016 (DHSSPS)

Young Persons' Behaviour and Attitudes Survey (YPBAS) (2013)

Drugs: Guidance for Schools in Northern Ireland (CCEA, Revised Edition 2015)

New Psychoactive Substances (NPS) Factsheet: Public Health Agency (May 2016)

DE Circular 2003/15 (05/09/03) - Education (School Information and Prospectuses) Regulations (Northern Ireland) 2003

DE Circular 2004/01 (21/01/04) - Encouraging a Smoke-Free Environment in Schools

DE Circular 2012/19 (10/09/12) - Disclosure and Barring Arrangements: Changes for Pre-employment Vetting Checks for Volunteers Working in Schools from 10 September 2012

DE Circular 2013/01 (January 2013) - Disclosure and Barring Arrangements: Vetting Requirements for Paid Staff Working In or Providing a Service for Schools

DE Circular 2014/25 (15/12/14) - Encouraging a Smoke-free and E-cigarette-free Environment in Schools and Youth Organisations

DE Circular 2015/23 (26/08/15) - Drugs Guidance

## **Checklist of Roles and Responsibilities** **When Managing an Incident**

Individual **staff members** should:

- assess the situation and decide on the appropriate actions to take;
- notify the Principal/Designated Teacher for Drugs at the earliest opportunity;
- deal with any emergency procedures to ensure the safety of students and staff (Appendix 9);
- forward any information, substance or paraphernalia received to the Designated Teacher for Drugs;
- write a brief factual report on the suspected incident and forward this to the Designated Teacher for Drugs.

The **Designated Teacher for Drugs** should:

- coordinate the School's procedures for handling suspected drug-related incidents;
- respond to advice from first-aiders, in the event of an incident;
- inform the Principal, who should contact the student's parent(s)/**carer(s)** immediately;
- take possession of any substance(s) and associated paraphernalia found;
- take initial responsibility for student(s) involved in the suspected incident; and
- complete the School's Drugs Incident Report Form (Appendix 10) and forward it to the Principal.

The **Principal** should:

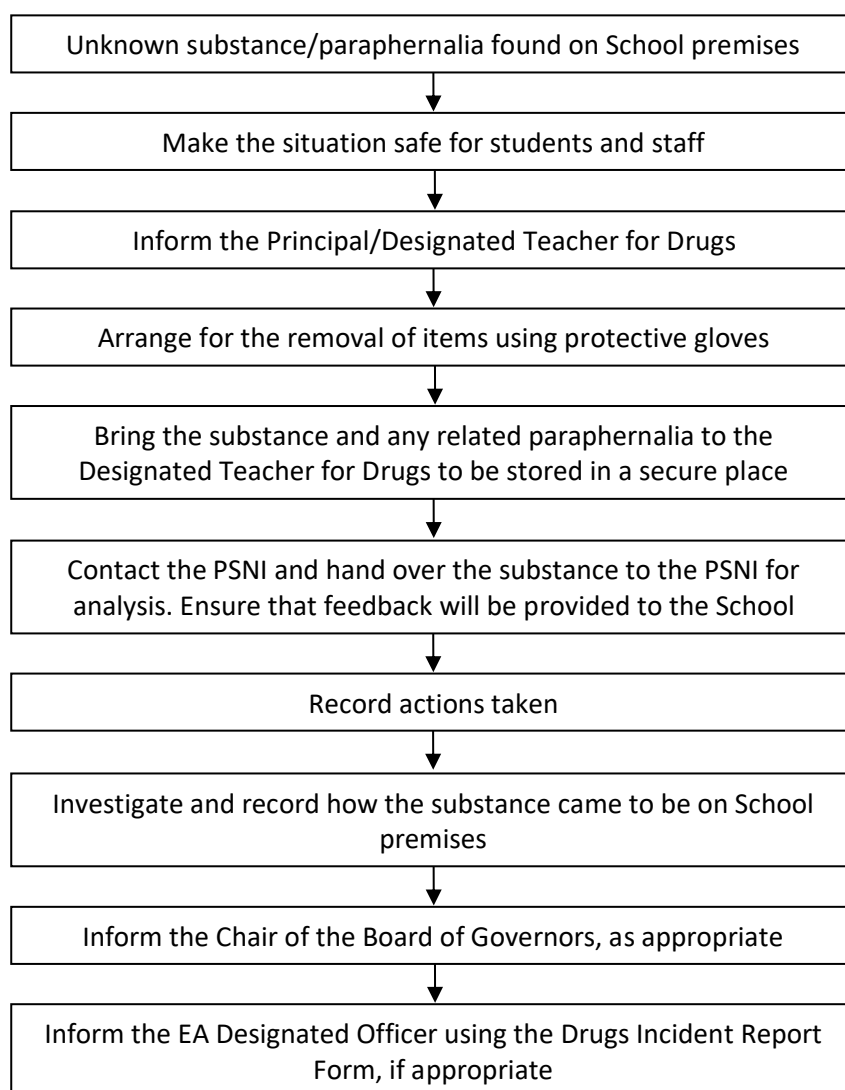
- determine the circumstances surrounding the incident;
- contact the parent(s) of those students involved in any suspected drug-related incident;
- liaise with the PSNI with regards to any incident involving a controlled substance;
- consider the welfare of the student(s) involved in the incident and the other students in the School;
- oversee health and safety during the handling, storage and safe disposal of any drug or drug-related paraphernalia, using protective gloves at all times;
- inform the Board of Governors;
- decide any pastoral or disciplinary response;
- complete a written report and forward a copy to the Chair of the Board of Governors and the Designated Officer in the Education Authority;
- ensure procedures are reviewed and amended, if necessary.

## **Finding a Suspected Substance or Drug-Related Paraphernalia**

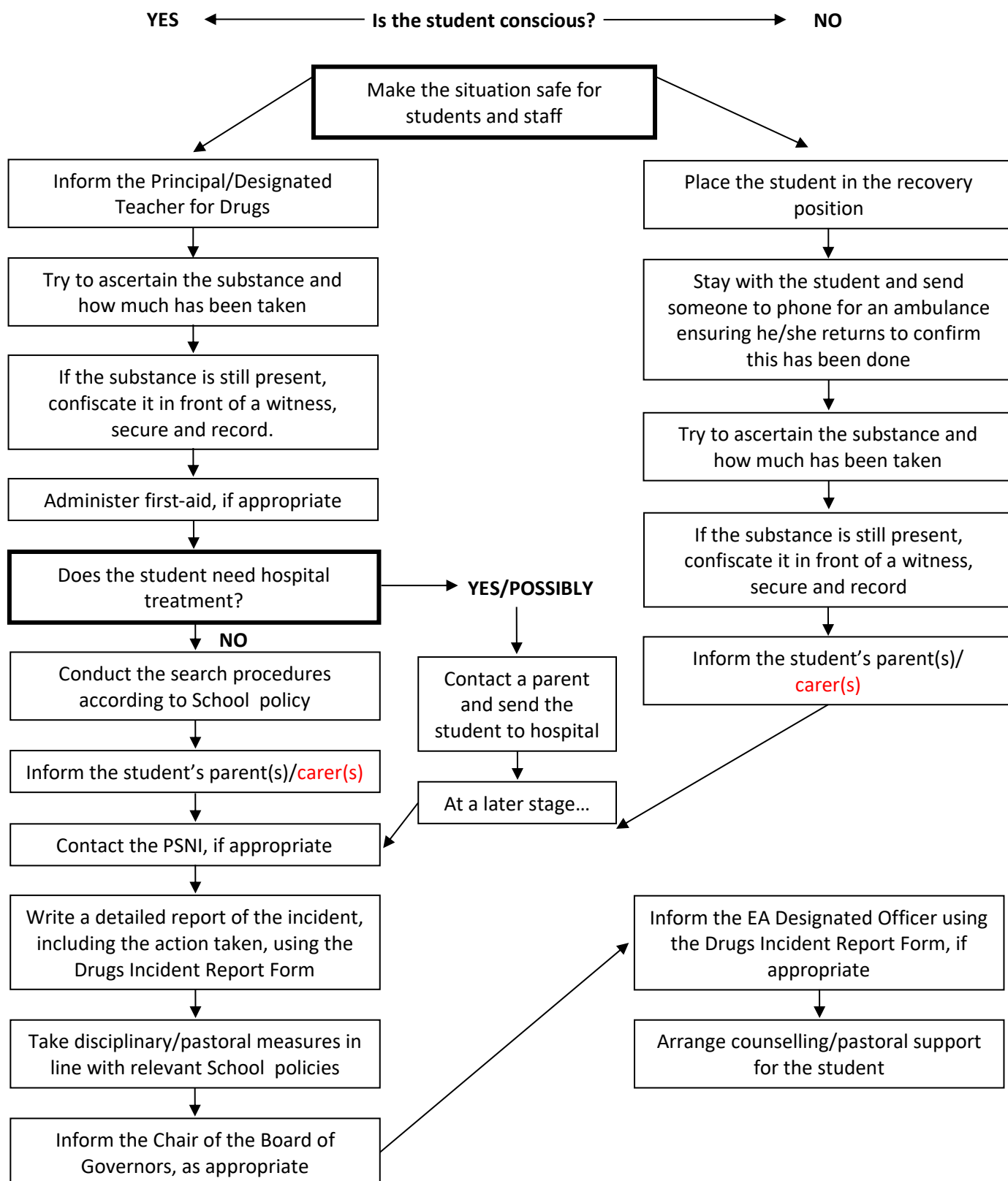
### **On or Close to School Premises**

Paraphernalia on School premises is an indication of drug use or misuse. Any member of the school community who encounters any paraphernalia should exercise extreme care, as these items may be hazardous. Anyone who finds a suspected substance or paraphernalia associated with drug use or misuse should report it to the Principal/Designated Teacher for Drugs, who will assess the situation and respond accordingly. This response may include contacting the PSNI.

The following list is not exhaustive. It gives staff an idea of what may indicate the presence of controlled substances: small bottles or pill boxes; hypodermic needles; twists of paper; cigarette papers, lighters and spent matches; electronic cigarette liquid refill bottles (there is a potential risk that refillable cartridges used in some electronic cigarettes could be filled with substances other than nicotine, serving as a new and potentially dangerous way to deliver drugs); roaches (ends of rolled-up cigarettes); punctured cans, plastic bottles or containers; aerosols or butane gas refills; and drugs themselves.

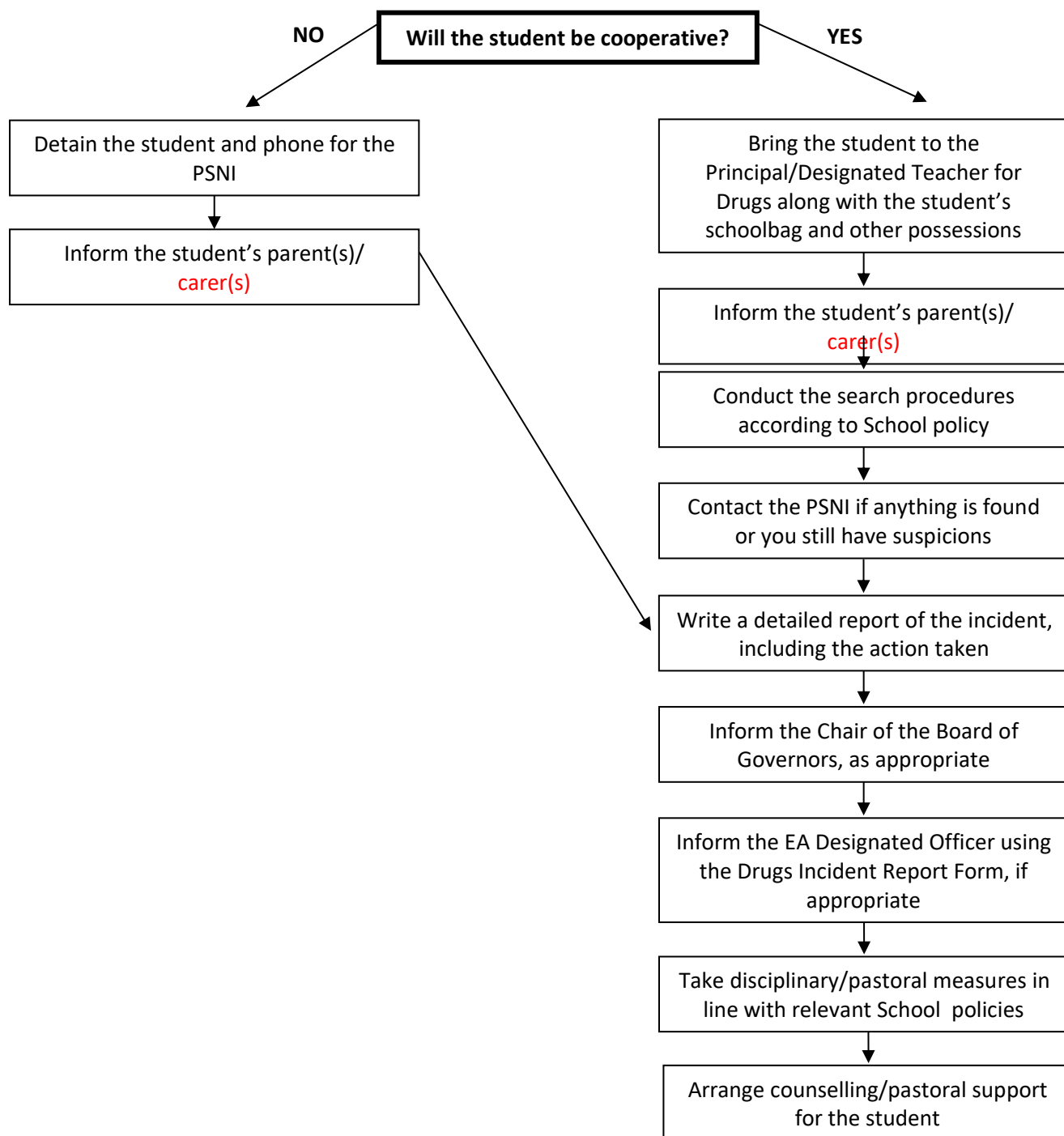


**Student Suspected of Having Taken Drugs/Alcohol on School Premises,**  
**When Travelling To and/or From the School and/or**  
**When Engaged in Authorised School-Related Activities**

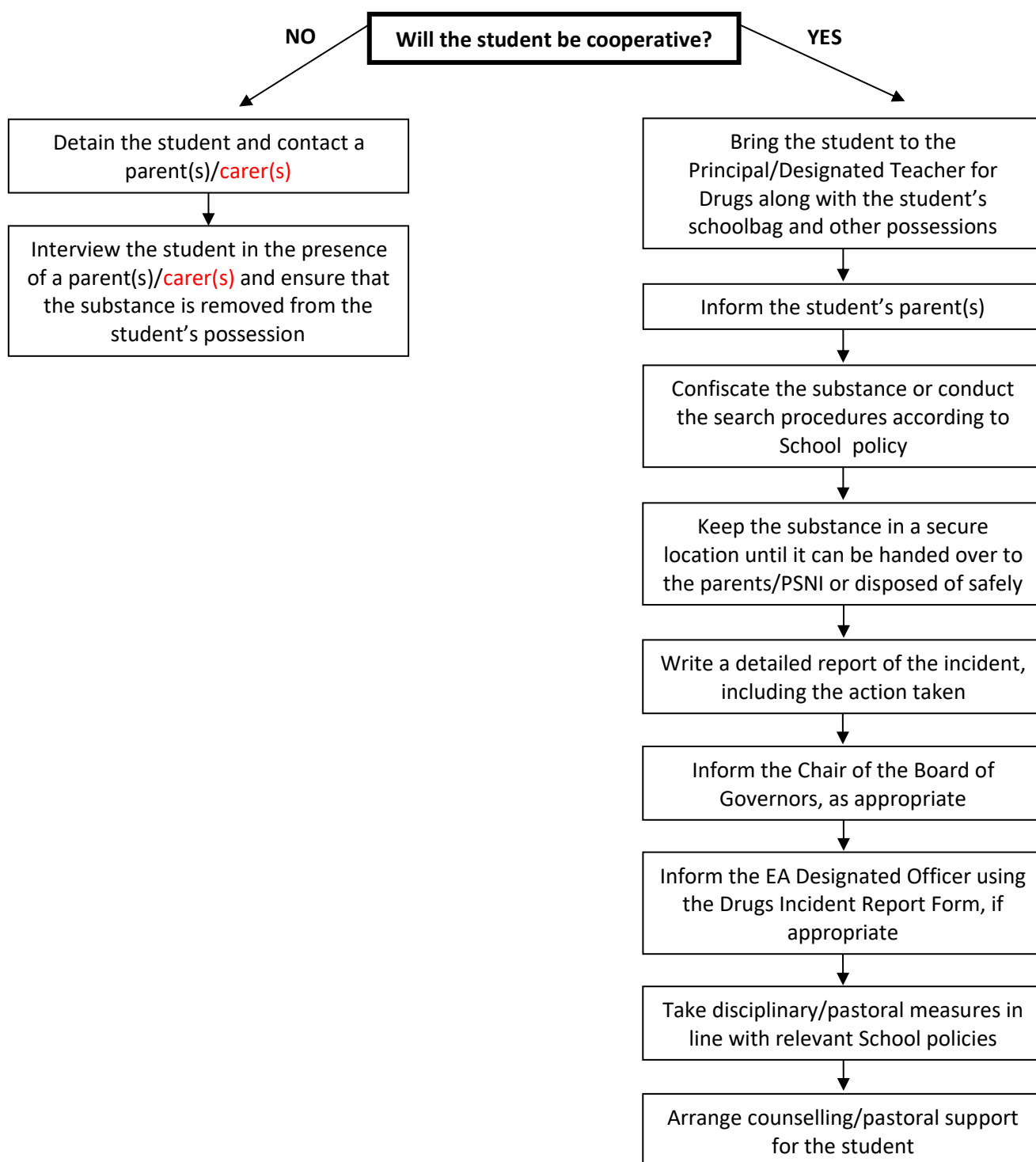




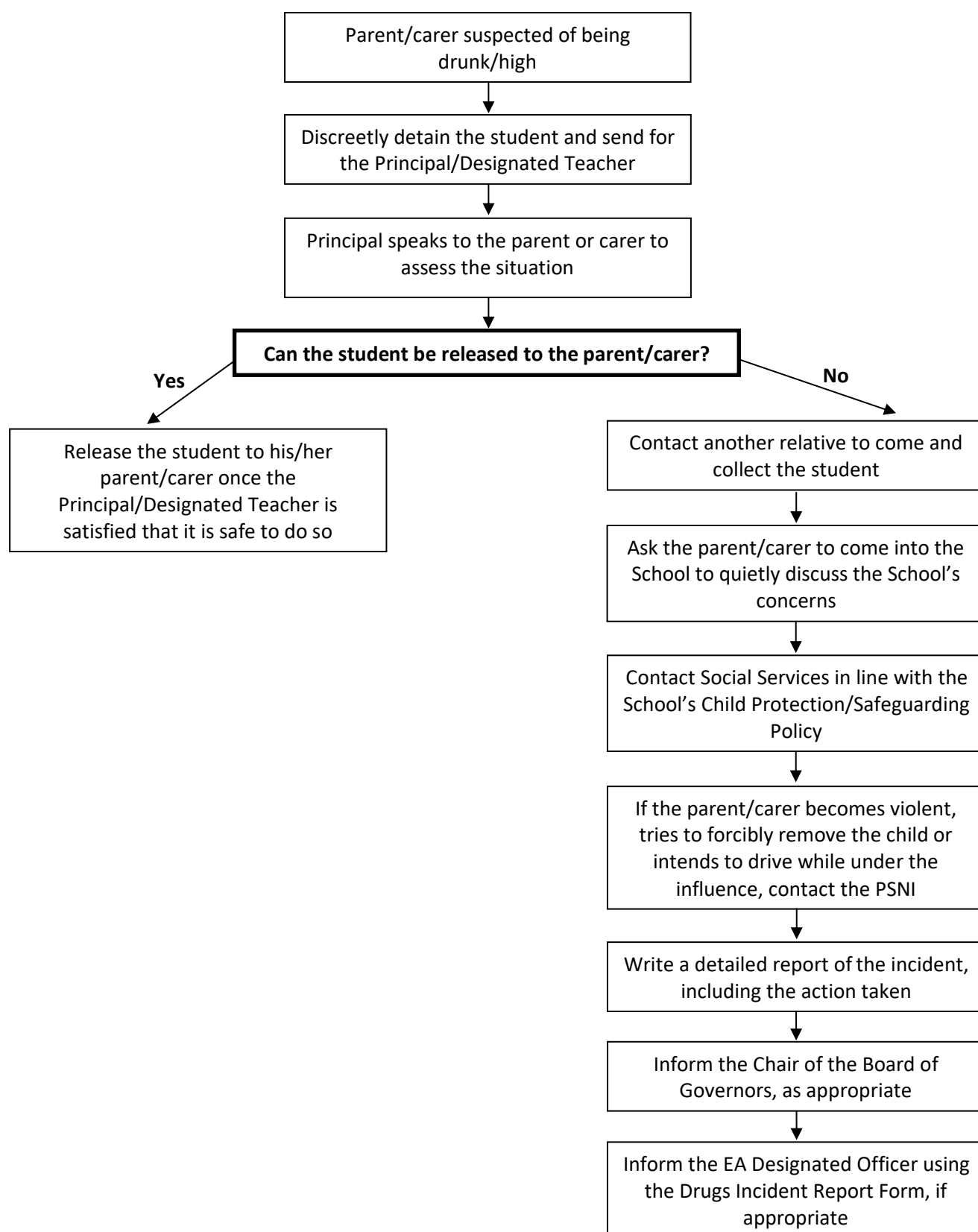
**Student Suspected of Possessing/Distributing an Illegal Substance on School Premises, When Travelling To and/or From the School and/or When Engaged in Authorised School-Related Activities**



**Student in Possession of Alcohol or Unauthorised Prescribed Medication  
on School Premises, When Travelling To and/or From the school and/or  
When Engaged in Authorised School-Related Activities**



**A Parent or Carer Arrives at School to Collect a Child and  
Appears to Be Under the Influence of Alcohol or Another Substance**



## **Recognising Signs of Substance Use**

### **What to look out for**

If someone is having a bad time on drugs, he/she may be:

- anxious;
- tense;
- panicky;
- overheated and dehydrated;
- drowsy; or
- having difficulty with breathing.

### **What to do**

The first things you should do are:

- stay calm;
- calm them and be reassuring, don't scare them or chase after them;
- try to find out what they've taken; and
- stay with them.

If they are anxious, tense or panicky, you should:

- sit them in a quiet and calm room;
- keep them away from crowds, bright lights and loud noises;
- tell them to take slow deep breaths; and
- stay with them.

If they are **really drowsy**, you should:

- sit them in a quiet place and keep them awake;
- if they become unconscious or don't respond, call an ambulance immediately and place them in the recovery position;
- **not** scare them, shout at them or shock them;
- **not** give them coffee to wake them up; and
- **not** put them in a cold shower to 'wake them up'.

If they are **unconscious** or having difficulty breathing, you should:

- call an ambulance immediately;
- place them into the recovery position;
- stay with them until the ambulance arrives; and
- if you know what drug they've taken, tell the ambulance crew; this can help make sure that they get the right treatment straight away.

## **Emergency First-Aid Procedures**

According to Drugs: Guidance for Schools in Northern Ireland (CCEA, Revised Edition 2015), this is the current best advice available on what to do if someone is in difficulty because of misusing drugs.

- It is important to find out what they have taken as this could affect emergency aid, for example, it will help the ambulance crew. Loosen clothing and call for an ambulance immediately.
- If the person has taken a depressant substance, for example, solvents, alcohol, sleeping pills or painkillers, it is likely that they will be drowsy or unconscious. If the person is drowsy, it is important to try to keep them awake by talking to them or applying a cool damp cloth or towel to the back of their neck. You should not give them anything to eat or drink as this could lead to vomiting or choking.
- If they are or become unconscious, put them into the recovery position, clear their airway if blocked and keep checking on any changes to pulse and breathing rates.
- If they stop breathing, begin mouth-to-mouth resuscitation, starting with chest compressions. (If you have not been trained in CPR or are worried about giving mouth-to-mouth resuscitation to a stranger, you can do chest compression-only (or hands-only) CPR). Stay with the person until the ambulance crew arrive and then tell them all the facts, including what the person has taken. This is very important as it could save his or her life.
- If the person has taken a stimulant, such as amphetamines (speed) or ecstasy, they may show various signs of distress. If the person is panicking, try to reassure them. It is important that they calm down and relax. Get them to breathe in and out, deeply and slowly. Help them by counting aloud slowly. If they start to hyperventilate and can't control their breathing, ask them to breathe in and out of a paper (not a plastic) bag, if there is one available.
- If the person has taken a hallucinogen, such as LSD, magic mushrooms or cannabis in combination with ecstasy, they may become very anxious, distressed and fearful. They may act in an unusual way. It is very important to reassure the person – tell them that you will look after them, that they are in no danger, that it is the effects of the substance and that these will soon wear off. You may want to take them to a quiet place, keep other people away and continue to reassure them. Just stay with them and talk calmly to them until the ambulance arrives.

**Drugs Incident Report Form**

| Student Details |  |             |  |
|-----------------|--|-------------|--|
| Student Name    |  | Tutor Group |  |
| Date of Birth   |  | Address     |  |

| Incident Details |  |                      |  |
|------------------|--|----------------------|--|
| Date of Incident |  | Reported by:         |  |
| Time of Incident |  | Location of Incident |  |

|                  |          |                  |  |
|------------------|----------|------------------|--|
| First Aid Given  | YES / NO | Administered by: |  |
| Ambulance Called | YES / NO | Time of Call     |  |

|                      |          |                           |  |
|----------------------|----------|---------------------------|--|
| Parent Informed      | YES / NO | By whom:<br>Date and Time |  |
| PSNI Informed        | YES / NO | By whom:<br>Date and Time |  |
| Name of PSNI Officer |          | Referral Number           |  |
| EA Informed          | YES / NO | By whom:<br>Date and Time |  |

|                                |                                     |               |  |
|--------------------------------|-------------------------------------|---------------|--|
| Where Substance is Retained OR |                                     | Witnessed by: |  |
| Destroyed/<br>Passed to PSNI   | SUBSTANCE DESTROYED /PASSED to PSNI | Date and Time |  |

|                       |  |          |  |
|-----------------------|--|----------|--|
| Form Completed by:    |  | Position |  |
| Signature             |  | Date     |  |
| Principal's Signature |  | Date     |  |

| Description of the Incident |
|-----------------------------|
| <div></div>                 |

| Actions Taken |
|---------------|
| <div></div>   |

|                       |  |          |  |
|-----------------------|--|----------|--|
| Form Completed by:    |  | Position |  |
| Signature             |  | Date     |  |
| Principal's Signature |  | Date     |  |

## **Useful Contacts**

Local/national organisations that provide information and advice and/or resources about cigarettes, alcohol and drugs:

[www.alcoholconcern.org.uk](http://www.alcoholconcern.org.uk)

[www.ash.org.uk](http://www.ash.org.uk) (Action on Smoking and Health)

[www.camh.org.uk](http://www.camh.org.uk) (Child and Adolescent Mental Health)

[www.ccea.org.uk](http://www.ccea.org.uk) (Dealing with Young People's Alcohol and Other Drug Misuse - a guide for parents and carers)

[www.ccea.org.uk](http://www.ccea.org.uk) (The Power of Teachers in a Young Person's World)

[www.deni.gov.uk](http://www.deni.gov.uk) (iMatter programme)

[www.drugsandalcoholni.info](http://www.drugsandalcoholni.info)

[www.drugscope.org.uk](http://www.drugscope.org.uk)

[www.fasaonline.org](http://www.fasaonline.org) (The Forum for Action on Substance Abuse)

[www.gov.uk/penalties-drug-possession-dealing](http://www.gov.uk/penalties-drug-possession-dealing)

[www.lifeline.org.uk](http://www.lifeline.org.uk)

[www.mindingyourhead.info](http://www.mindingyourhead.info)

[www.nhs.uk/Livewell/Pages/Topics.aspx](http://www.nhs.uk/Livewell/Pages/Topics.aspx)

[www.publichealth.hscni.net](http://www.publichealth.hscni.net) (Stopping Smoking Made Easier)

[www.talktofrank.com](http://www.talktofrank.com) (Call FRANK: Tel: 0300 123 6600)

[www.thesite.org/drinkanddrugs](http://www.thesite.org/drinkanddrugs)

[www.want2stop.info](http://www.want2stop.info) (Tobacco and NRT)