

# 2.11

# **Drugs Education Policy** Revised November 2024

#### REFERENCE:

DE Circular 2015/23 Drugs Education CCEA Revised Guidance 2015 – Drugs Guidance for Schools in Northern Ireland

#### **Rationale:**

As a health promoting school, St Mary's supports its students in making informed, responsible decisions, helping them to cope with living in a society where increasing numbers of people are exposed to and/or use some sort of drug at some time in their lives. Research from the 'Young Persons' Behaviour and Attitudes Survey' (YPBAS) (2019-2020) shows 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. St Mary's has an important role to play in enabling our students to make informed and responsible decisions and helping them to cope with living in an increasingly substance-tolerant society.

The school takes active steps in providing students with the necessary knowledge and opportunities to develop essential skills, make healthy lifestyle decisions but also to deal with the influence and dangers of taking drugs. Children and young people are exposed to messages about drugs from an early age. Their exposure to the use and misuse of drugs may come through parent/carers, siblings, friends, television, and social media.

St Mary's provides a holistic response to substance misuse. It is the responsibility of the school to:

- have a relevant Drugs Education Policy, available to all parents/carers on the school website and App;
- ensure a consistent approach to Drugs Education through the school's Preventative /Health Education Curriculum. This programme increases students' awareness of drugs and their effects including the legal consequences;
- have clear procedures for managing drugs-related incidents including informing the PSNI where a student is suspected to be in possession of a 'controlled drug';
- provide the necessary knowledge and skills which enhances student's ability to make positive choices and decisions regarding their personal wellbeing, health and safety;
- educate and protect young people from becoming involved in substance misuse;
- through the pastoral structures, support and guide young people to the appropriate services and support, where misuse has been identified.

#### **Ethos:**

As a Rights Respecting, Child Centred School, St Mary's is concerned with the welfare of all its students. Whilst acknowledging that research shows the number of young people who use and misuse drugs is rising, we recognise that the majority of young people choose not to use or abuse substances. It is essential, nevertheless, that students are given the knowledge and skills to help them to make correct, healthy choices and deal with negative influences in an ever changing society.

As a Rights Respecting School, the Drugs Education programme and the principles that underpin it act in accordance with the UNCRC and in particular with articles:

Article 12 - 'provide all children with the right to express their views'

Article 13 - 'right to freedom of expression'

Article 17 - 'right to access of information'

#### **Definitions:**

The term **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. These 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 fluid/thinners, gas lighter fuel, aerosols, glues and petrol;
- controlled drugs, such as cannabis, LSD, Ecstasy, amphetamine sulphate (speed), magic mushrooms, heroin and cocaine; (**Appendix 1**)
- new psychoactive substances (NPS), formerly known as legal highs\*, which contain
  one or more chemical substances that produce similar effects to illegal drugs and are
  sold as incense, salts or plant food and marked 'not for human consumption' to avoid
  prosecution; and
- other substances such as amyl or butyl nitrite (known as poppers) and unprocessed magic mushrooms.
- The term legal high is no longer used as it is misleading. The public perceived that 'legal' means safe. This is not the case, as these substances are not regulated and there is no way of knowing what chemicals they contain.
- 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 offense to possess, possess with intent to supply, supply, or allow premises you occupy or manage 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. (Appendix 1)
- The term **Drug Use** refers to taking a drug; there is no value judgement, although all drug use has an element of risk.
- The term 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.

## Aims and Objectives:

The ultimate aim is to protect students from the harm associated with the use and misuse of drugs. In support of this the school aims to:

- provide opportunities to enhance students' self-respect and self-esteem;
- promote positive attitudes and behaviours towards themselves and others;
- develop skills, behaviours and attitudes which enables students to be assertive, make responsible decisions, and resist pressure which might put them at risk;
- provide a structured Preventative/Health Education Curriculum which ensures progression in the knowledge and skills relating to drug misuse;
- provide accurate, current information on drugs and drug related issues their effects, the legal position and the school's discipline policy in relation to drug misuse;
- develop procedures and protocols that address drug-related issues across all areas of school life
- establish procedures for managing specific incidents of suspected drug misuse;
- monitor and evaluate the effectiveness of the policy in line with whole school selfevaluation procedures.

# Roles and Responsibilities:

#### **Board of Governors**

The Governors are responsible for determining the effectiveness and quality of the policy prior to its implementation in the school. The Designated Governors for Child Protection (including drugs) is Mrs Patricia Maguire and Mr Donal Mc Caul. The Governors should:

- facilitate the consultative process where the school community can respond and contribute to the policy's effectiveness and quality, which the Governors should examine and approve before implementing in the school;
- ensure the Policy is available to the entire school community and that it is reviewed every three years and/or after a drug-related incident; and
- 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.

#### **Principal**

It is the Principal's responsibility to determine the circumstances of all incidents but it is the responsibility of the PSNI to investigate any criminal or suspected criminal offence. In any suspected drug-related incident, the Principal will contact the parents or carers of those students involved. The Principal must ensure that in any incident involving a controlled substance there is close liaison with the PSNI (Community and Schools Involvement Officer CSIO). Failure to inform the PSNI of a suspected incident involving controlled drugs is a criminal offence.

After contacting the PSNI, the Principal will 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;
- agreeing any appropriate pastoral or disciplinary response;
- reporting the incident to the Education Authority or CCMS if appropriate, for example if an incident:
  - **↓** is serious enough to require PSNI involvement;
  - **+** requires that a child protection procedure is invoked; or

- ♣ leads to the suspension or exclusion of a student; and
- completing a written report and forwarding a copy to the Board of Governors and the Designated Officer in the Education Authority and CCMS.

In the case of misuse or suspected misuse of a solvent, alcohol or prescription medication, there is no legal obligation to notify the PSNI however it is recommended that the designated officer is notified where support, advice and assistance can be accessed to prevent reoccurrence and ensure the student is no longer at risk.

#### **Designated Teacher for Drugs**

The Vice Principal – Mr Fitzpatrick is responsible for:

- co-ordinating 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 Behaviour Policy has an appropriate statement about any disciplinary response resulting from suspected drug-related incidents;
- ensuring that the school's Pastoral Care Policy has an appropriate statement about any pastoral 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 to work with the school or with a student or students concerned;
- responding to advice from First Aiders, in the event of an incident, and informing the Principal, who should contact the student's parents or carers immediately;
- taking possession of any substance(s) and associated paraphernalia found in a suspected incident;
- the welfare of the student(s) involved in a suspected incident;
- gather all statements provided by student(s) and staff involved or witnesses to the suspected drugs related incident and complete a factual report using the schools Drug-Related Incident Form, which is forwarded 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.

#### **Senior Leader**

The Senior Leader, Mrs J Hughes is responsible for co-ordinating the delivery of Drugs Education within the Preventative Curriculum, she has specific responsibilities for:

- ensuring a consistent, progressive approach to Drugs Education within the Preventative Curriculum and Personal Development Programme;
- provide training and support to Form Teachers who deliver the PD Programme;
- liaise with specialised agencies including the PSNI to support the PD Drugs Education Programme;
- update Schemes of Work and learning resources to reflect changes to the law and incorporate new learning resources;
- map Drugs Education within the Preventative Curriculum;
- liaise with the Health and Wellbeing Coordinator to ensure a whole school approach to knowledge and skills development regarding Drugs Education.

## **Students**

It is the responsibility of all students:

- to positively engage in all Preventative Curriculum/Health Education workshops and presentations relating to drugs education;
- not be in the possession of drugs at any time;
- not to take drugs at any time;
- not be in the possession of any drugs-related paraphernalia;
- to report to a member of staff if they suspect another student is in possession of drugs or paraphernalia.

#### All Staff

All staff should be familiar with the content of the school's Drugs 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;
- inform the Designated Officer and Principal immediately regarding any suspected drugs-related incident including receiving information about a controlled drug, discovering a student in possession of a controlled drug or discovering a young person supplying a controlled drug;
- where a student discloses to a teacher or any other member of staff that she/he is taking drugs the staff member cannot guarantee confidentiality and must report the disclosure immediately to the Designated Teacher for Drugs or the Principal;
- deal with any emergency procedures to ensure the safety of students and staff, if necessary (Appendix 2);
- 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 (Appendix 5);
- take responsibility for the delivery of Drugs Education within the Preventative Curriculum/Health Education Programme and map provision across subject areas when necessary;
- cooperate with whole school mapping of Drugs Education and the promotion of healthy attitudes towards all health-related issues.

#### School's Legal Responsibilities and Involving the PSNI

Schools must ensure that all staff are aware of their legal responsibilities. Schools must notify the PSNI in all instances where there is an allegation or suspicion that a crime has been committed. **Failure to notify the PSNI is a criminal offence.** 

Staff must be aware of the legal implications of:

- receiving information about a controlled drug;
- discovering a young person in possession of a controlled drug; or
- discovering a young person is involved in supplying a controlled drug.

#### **Supportive and Caring Ethos:**

The Preventative Curriculum and Pastoral Care system in St Mary's High School aim to support all students, preparing them to cope with the demands of school and adult life thus enabling them to live healthy lives and achieve their full potential. These provisions include measures to help meet the physical, emotional and spiritual needs of all learners within an inclusive learning environment. We acknowledge the importance of our pastoral role in the welfare of all young people and through our mission statement and ethos every member of our

school community is treated with respect. The Pastoral Programme and Counselling Service create a supportive environment for students where they feel valued and supported.

The Personal Development Programme allows students to explore key issues within their personal development including Self-Concepts, Esteem, Health and Well-being, Relationships and Personal Safety.

The following structures and procedures are established in St Mary's:

- staff promote and reward positive and respectful behaviour;
- a Rights Respecting learning environment ensuring all students feel accepted and valued;
- staff lead by example in promoting respect for each other, forming positive relationships and developing resilience;
- all staff receive Child Protection Training in line with EA guidelines and are familiar
  with the Child Protection Guidelines and Procedures and are kept informed of new
  pastoral procedures;
- emotional health and well-being is an integral part of the Formal Curriculum and the Preventative/Health Education Curriculum;
- faith development is an integral part of all RE Programmes of Study and the School Chaplain is available for advice and counselling;
- the school uses a range of external agencies for support and guidance;
- lunchtime supervision is provided by Non-Teaching members of staff;
- staff treat all cases of poor behaviour seriously and investigate each incident impartially;
- any sanctions imposed are fair and appropriate;
- a Counselling Service is provided one day per week.

#### **Preventative Curriculum and Health Education Programmes**

The school curriculum and pastoral system provides a holistic response to substance misuse. This includes:

- helping to promote the factors that protect young people from becoming involved in substance misuse;
- providing knowledge and skills to make healthier choices and reduce problematic behaviour and risk; and
- directing young people to appropriate services and support, where misuse has been identified.

Drugs Education is a key theme within the Preventative Curriculum delivered through the Personal Development Programme and within programmes of study in key subjects (in particular Science, Religious Education, Home Economics, Physical Education and English) (Appendix 3)

#### Safety in School

Staff take every reasonable care to ensure the safety of all students in the school and are fully aware of the Health and Safety Policy. The School's Health and Safety Officer – Mr Fitzpatrick ensures that all staff are aware of safety issues in relation to the storage of potentially harmful substances and staff are aware of the health risks of aerosols. The students are supervised on the school premises at all times and students are not allowed to leave the school premises during the school day unless permission has been given by parent/guardian.

#### **Counselling Service**

The Counselling Service offers students the opportunity to talk to a qualified counsellor in confidence. The Counsellor will consult with the Designated Teacher to ascertain if there are any Child Protection concerns. There is one School Counsellor, Mrs N Woods, who attends one day per week and provide support to those students who seek help in finding the best

solutions to their problems. Students may be referred to the Counsellor through a member of staff, a parent or self-referral. Counselling rarely focuses on drug misuse alone but considers more holistic needs that may underlie or indicate drug-related problems, for example the 'toxic three':

- hidden harm, where a young person is affected by their parents' or carers' substance misuse:
- domestic violence; or
- parental mental health.

Counselling is only appropriate when a student wishes to take advantage of what it offers.

# **Use of External Agencies**

We acknowledge the importance of a range of external support agencies in promoting and supporting pastoral care within the school and supporting student health and wellbeing whilst also ensuring that such agencies adhere to the values and ethos of our school.

Current external/support agencies include:

- Social Services and Children Looked After Team (CLA)
- PSNI
- School Counsellor
- Start 360
- GP and CAMHS
- NSPCC
- School Age Mums (SAM)
- Women's Aid
- EWO Service
- Behaviour Support Team
- PIPS/MENSANA Mental Health Team

#### Training and Information for Staff, Governors and Parents/Carers

The school avails of all training opportunities and resources provided by EA Southern, START 360°, PSNI and appropriate external agencies for both students and staff. The Personal Development and Health Education Coordinators attend in-service courses on a regular basis to ensure that information is up-to-date and that skills in dealing with the demands of the programme are enhanced.

#### **Communication to Parents/Carers**

Fundamental to the school's values and practice is the principle of partnership and collective responsibility with parents/carers, the school aims to promote close links, keeping them informed and involved at all times. A copy of the Drugs Education Policy is available to all parents/carers on the school website and App. In any suspected drugs-related incident the Principal or Designated Teacher will contact Parents/Carers of those students involved;

### **Confidentiality and Sensitivity**

Dealing with suspected drugs-related incidents requires extreme sensitivity and confidentiality on the part of all those involved. The Child Protection and Managing Critical Incidences Policies will further support the school in handling drugs related situations. The implementation of this policy should be fair and consistent.

# Responses in the Event of Suspected Drug-Related Incidents:

A suspected drugs-related incident may include:

- A student displaying illness, unusual or uncharacteristic behaviour;
- An allegation of suspected controlled drug-related incident;
- Suspicion of possession, possession with intent to supply and/or supply of any substance as defined on page 2 or in **Appendix 1**;
- Finding substance-related paraphernalia.

#### **Illness/Inappropriate Behaviour**

- Any indications of illness/inappropriate behaviour as a result of suspected drugs misuse by a member of staff will immediately be brought to the attention of the Designated Teacher For Drugs Mr Fitzpatrick;
- No judgement will be made by any member of staff until the circumstances surrounding the incident have been determined;
- If it is considered that the student has taken a substance suspected to be a drug, medical assistance will be sought and the parents/carers and PSNI will be informed.

# An Allegation of a Suspected Controlled Drug-Related Incident

- If any member of staff suspects a drugs related incident, they will report their concerns to the Designated Teacher immediately;
- Where a student is suspected of concealing controlled drugs every effort will be made to secure the voluntary production of these substances in the presence of the Designated Teacher and another adult;
- Personal belongings (such as school bag, coat or other items) of any student can only be searched by the Designated Teacher with the student's consent and in the presence of another adult witness; no student will ever be physically searched by any member of staff;
- If the students refuse, staff should contact their parents or guardian and the PSNI to deal with the situation;
- If the Designated Teacher recovers 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 (Staff Area, Appendix 5).

## Possession of a Suspected Controlled Drug

# It is illegal for students to be in possession of a controlled drug.

- The member of staff will seek another adult witness and then take possession of a substance suspected of being a controlled drug, protecting the student from harm and from committing the offence of possession;
- It may be necessary for the member of staff to take immediate action, this may involve calling an ambulance and /or administering first aid;
- The member of staff will take the suspected drug and any associated equipment and/or paraphernalia immediately to the Designated Teacher where it will be stored until handed over to the PSNI to identify if it is or is not a controlled drug;
- School staff will not attempt to analyse an unidentified substance and not make any judgements until the case has been determined;
- The member of staff will then make a factual record of all events.

## Possession of Drugs-Related Paraphernalia

- Any member of staff who encounters any paraphernalia or equipment on school grounds will use extreme care as items may be hazardous;
- Any cases will be reported immediately to the Designated Teacher for Drugs who will respond accordingly including possible contact with the PSNI.

#### **Detaining a Student**

- When managing a suspected drugs-related incident the student(s) concerned will be encouraged to remain in the school under the supervision of two members of staff until their parents/carers and PSNI arrive;
- If a student refuses to remain, the school will not detain the student against their will.

# **Possession of Non-Controlled Substance**

• Any student in possession of substances such as alcohol, solvents and/or tobacco, ecigarettes will have their parents/carers contacted and be dealt with under the school's disciplinary procedures in line with the school's Child Protection Policy.

# Finding Drug-Related Paraphernalia

Paraphernalia in the school grounds is an indication of drug use or misuse. Any member of the school community who encounters any paraphernalia should use extreme care, as these items may be hazardous. Anyone who finds paraphernalia associated with drug use or misuse should report it to the 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.

## **School Response to Drug-Related Incidents:**

If a student or students have been involved in drugs related incidents the school will assess the student(s) future educational needs and ensure that appropriate support is given, this may involve support from the PSNI Designated Officer and the Education Welfare Officer. Counselling may be provided if a student wishes to take advantage of this service. Counsellors consider the holistic needs of the student concerned and support them.

- The school will implement the Positive Behaviour Policy in relation to drugs related incidents in line with Child Protection arrangements. A range of sanctions which includes suspension and expulsion may be deemed necessary in the case of drug abuse.
- Information will only be disclosed to those members of staff concerned with the pastoral needs of the individual student.
- The Principal/Designated Teacher will always report Drugs Related Incidents to parents/carers/ PSNI, EA Southern, CCMS, EWO and Social Services if necessary.

• In the event of the Press becoming aware of an incident, the Principal will deal with all matters in relation to the media in consultation with CCMS. The privacy of the student and their family will be maintained. Contact with the press in relation to such an incident is outlined in the Critical Incident Policy.

(Appendix 4 – Checklist of Roles and Responsibilities when managing an incident)

#### Dealing with Parent/Carers who is under the Influence of Alcohol and/or other Drugs

If a parent/carer comes into school under the influence of alcohol and/or drugs, staff involved should attempt to maintain a calm atmosphere. The member of staff should contact the Designated Teacher for Drugs or the Principal. If the Designated Teacher or Principal has concerns about discharging a student into the care of a parent/carer under such circumstances, then alternative arrangements should be discussed with the parent/carer. The focus for all staff should be the students' welfare and, if this is at risk, Child Protection procedures may be evoked.

#### **Related School Policies:**

This policy is set within the broader school context of Pastoral Care and as such should be implemented in conjunction with the following school policies:

- **♣** Pastoral Care Policy
- **♣** Child Protection Policy
- ♣ Anti-Bullying Policy
- ♣ Relationships and Sexuality Education Policy
- **4** Behaviour Policy
- **♣** Internet Policy
- Personal Development Policy
- **♣** Critical Incident Policy
- **♣** First Aid Policy
- ♣ Health Education Policy
- ♣ Health and Safety Policy

# **Dissemination of the Policy:**

Pastoral Policies are available to parents/carers on the School's Website and App. A Pastoral Policy overview is available in the student's diary and requires a parent/guardian signature at the start of each academic year. A summary policy will also be available in the School Prospectus.

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

Mr Fitzpatrick (Vice Principal) is responsible for monitoring, evaluating and reviewing the implementation of the Drugs Education Policy. He will:

- ♣ Liaise with the Senior Leadership Team, Leader of Learning (Pastoral) and Health Education Coordinator to ensure an effective Drugs Education Programme within the school;
- Advise on training and professional development;
- Liaise with other staff, external agencies to enhance the programme;
- ♣ Consult with Governors, Staff, Parents and Students during the review of the Drugs Education Policy;
- Review the implementation of the policy and advise the Principal and SLT on a regular basis:
- ♣ Liaise with Form Teachers, Year Heads and other staff to evaluate and change provision as necessary;
- ♣ Ensure Governors are fully informed of the relevant school policies.

Signed by Chair of Governors:
Date:
Signed by Principal:
Date:
Date of Review:November 2027

## **Main Types of Controlled Drugs by Class**

# The Misuse of Drugs Act (1971)

	Class A	Class B	Class C
Substance	Crack cocaine, cocaine, ecstasy (MDMA), heroin, LSD, magic mushrooms, methadone, methamphetamine (crystal meth)	Amphetamines, barbiturates, cannabis, codeine, methylphenidate (Ritalin), synthetic cannabinoids, synthetic cathinones (for example mephedrone or methoxetamine), gamma hydroxybuty rate (GHB), gamma butyrolactone (GBL), ketamine	Anabolic steroids, benzodiazepines (diazepam), khat, nitrous oxide (laughing gas) piperazines (BZP)
Possession	Up to 7 years in prison, an unlimited fine or both	Up to 5 years in prison, an unlimited fine or both	Up to 2 years in prison, an unlimited fine or both
Supply and Production	Up to life in prison, an unlimited fine or both	Up to 14 years in prison, an unlimited fine or both	Up to 14 years in prison, an unlimited fine or both

www.gov.uk/penalties-drug-possession-dealing

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

#### Offences under the Misuse of Drugs Act (1971)

These include:

- possession to knowingly be in possession of a relatively small quantity of a controlled substance for personal use; the police decide what constitutes a small quantity;
- possession with intent to supply another person a controlled substance possessing a larger quantity of a substance or packaging it in a way that indicates it is going to be supplied to others;
- supplying another person a controlled substance giving or selling a substance to someone else, including friends; and
- supplying or offering to supply substance paraphernalia this includes equipment smoking cannabis or crack cocaine, but needles and syringes are exempt.

# **Emergency Procedures**

This is the current best advice 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 that is they 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.

# **Recognising Signs of Substance Use**

#### What to look out for

If someone has been affected by drugs, they 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 <u>really drowsy</u>, 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;
- don't scare them, shout at them or shock them;
- don't give them coffee to wake them up; and
- don't put them in a cold shower to 'wake them up'.

#### If they are <u>unconscious</u> or having difficulty breathing, you should:

- immediately phone for an ambulance;
- 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.

## **Curriculum Mapping**

## **English**:

- In years 9 and 10 students explore relevant issues and formulate persuasive arguments
- In year 10 through literature students explore relevant issues and consider the views of others;
- In year 10 students analyse a range of fiction and non-fiction texts which requires them to express ideas and formulate opinions;
- In years 11 and 12 students discuss controversial issues and present their views, debating and arguing through a range of Speaking and Listening activities;
- In years 10, 11 and 12 students develop communication skills when exploring arguments and controversial topics;
- In years 11 and 12 students consider a range of controversial and relevant topics and develop communication skills by writing extended persuasive essays on topics;
- In years 8-12 students develop inter-personal skills through drama or role play;
- In years 8-12 students make considered use of a range of reference materials.

#### French:

• In Year 12 discuss the problems facing young people including the reasons why some take drugs.

#### **Health & Social Care**:

- In Year 11 explore the definition of health and well-being and analyse the behavioural factors that may affect physical, emotional and social health and well-being including alcohol misuse, illegal drug use and smoking;
- In Year 13 have to discuss how the behavioural factors can affect the physical, social and psychological health and well-being of individuals: exercise and lack of exercise, poor diet and healthy diet, smoking, alcohol misuse and illegal drug use;
- In Year 14 investigate how individual's behaviour can help to maintain the physiological health for example avoiding alcohol, smoking and drugs;

#### **Home Economics:**

- Explore the contribution of family life to the development of its members;
- Recognise the importance of family relationships, interdependence and interaction among individuals, families and society;
- Apply a process of decision-making to issues which can arise within the home in a changing society.

#### Learning For Life and Work;

- In Year 11 and 12 investigate the types of drugs, effects on society, physical consequences and the classification of different types of drugs.
- Year 11 and 12 investigate the causes of drug experimentation and sources of support for dealing with addiction.

#### **Personal Development**

- Year 8 Awareness of drugs in society, different attitudes towards drugs and the effects of drugs. Students also explore strategies to deal with negative influences. Students investigate the effects of Alcohol and Drugs on the Human Body. Chest, Heart and Stroke (NI) Association Vaping seminar.
- Year 9 Students explore the long term and short term effects of smoking, alcohol and drugs on the human body. Risk taking behaviour is explained and its consequences. Chest, Heart and Stroke (NI) Association Vaping seminar.
- Year 10 Awareness of legal and illegal highs types and effects. Drugs and the Law are explored. Students investigate why people experiment with drugs. Counting the cost of alcohol and smoking to include reasons why people drink/smoke; short term and long term effects of both on the human body. Life scenarios/case studies of drug taking and its impact. Chest, Heart and Stroke (NI) Association alcohol awareness and sleep seminars.
- Year 11 Students discuss the dangers of smoking, why people smoke and explore possible strategies that can be used to help people stop. Drugs Think twice Risk taking behaviours and their consequences. START 360 seminar exploring types of drugs alongside the health impacts and legal implications.
- Year 12 Drink driving consequences and long term impact on society. Risk taking behaviours short term and long term effects researched.
- Post 16 Students participate in an Enrichment Day to support Health and Wellbeing lifestyle choices, including healthy relationships.

#### **Physical Education:**

- Students develop positive attitudes towards physical activity and a healthy lifestyle;
- Students explore safety awareness and develop knowledge around risk factors and situations; explore ways in which hazards can be identified and how actions can be put into place to minimise risk to themselves and others;
- Understand the relationship between physical activity and good health;
- Know that opportunities to participate in physical activities exist in the local community;
- In Year 11 and 12 specific reference is made to the reasons why people take drugs, the types/classification of drugs and the implications. Students also explore the role of drugs in the sports world and how drugs are used by athletes and the impact they can have on performance. Pupils have the opportunity to debate whether performance enhancing drugs should be permitted in sport and explore the ethics behind athletes using them to gain a competitive advantage.

## **Religious Education**:

- Understanding of moral issues and decision making through reference to Gospel teaching and Church teaching
- Skills to express and understand their own views clearly, consider the views of others and
  appreciate individual, social, and moral responsibility in relation to the consequences of
  actions.
- In Year 11 OCN RE pupils examine the causes of drug addiction, how it impacts on friends and family and how to access support if suffering from a drug related addiction. Pupils consider how drugs impact on society as a whole and refer to the teaching of Jesus that their bodies are 'Holy Temples'.

#### Science:

- In Year 8 students research how drugs (alcohol and smoking) will impact the growing foetus during pregnancy.
- In Year 10 within the topic of 'Health' students explore the term legal and illegal drugs, the impact on an individual's health and the relationship between smoking and lung cancer.

In both GCSE Single Award and Double Award students study a unit called 'Health, Disease and Defence Mechanism'. Within this Biology Unit students explore the impact of smoking and alcohol.

# Sociology:

- Examine within the crime module in Sociology, the social distribution of crime. Statistics indicate that young people are more likely to commit crime. A lot of these crimes are non-utilitarian (violence, vandalism, joy riding, ant-social behaviour) and can be fuelled by drug and alcohol abuse;
- Students investigate the growing issues surrounding the nocturnal economy, the laws in relation to crime prevention regarding these issues and punishment within the Criminal Justice System.

## **Technology and Design:**

- Develop awareness of safety, hazards and risks (for example, through the safe handling of volatile materials, including solvents and glues); Yr8 Yr12;
- Recognise correct signage for;
  - Prohibited activity
  - Mandatory safety precautions
  - Hazardous substances including irritants and toxins
  - Safety procedures including emergency eyewash and first aid
- Take responsibility for the consequences of their actions for themselves and others.

## Checklist of Roles and Responsibilities when Managing an Incident

Actions by members of staff in the event of a suspected drugs-related incident:

#### **Individual Staff Member**

- assess the situation and decide the action;
- make the situation safe for all students and other members of staff, secure first aid and send for additional staff support, if necessary;
- carefully gather up any drugs and/or associated paraphernalia or evidence and pass all information or evidence to the Designated Teacher for drugs; and
- write a brief factual report of the incident and forward it to the Designated Teacher for drugs.

# **Designated Teacher for Drugs**

- respond to first aider's advice or recommendations;
- inform parents or carers immediately;
- take possession of any substance(s) and associated paraphernalia found;
- inform the Principal;
- take initial responsibility for student(s) involved in the suspected incident;
- complete a Drugs Incident Report Form and forward it to the Principal.

# **Principal**

- determine the circumstances surrounding the incident;
- ensure that the following people are informed:
- parents or carers;
- Designated Officer in the local PSNI area;
- Board of Governors; and
- Designated Officer in Education Authority or CCMS.
- consult and agree pastoral and disciplinary responses, including counselling services or support;
- forward a copy of the Incident Report Form to the chairperson of the Board of Governors and the designated officer in the Education Authority or CCMS, if appropriate; and
- review procedures and amend, if necessary.

# <u>Appendix 5 – Drugs Incident Report Form</u>

1.	Name of Student		DOB
	Address		
2.	Date of Incident		
	Time of Incident	Location of Incident	
3.	First Aid given YES / NO Administered by	1	
	Ambulance / Doctor Called YES / NO Tim	e of Call	
4.	Parent or carer informed YES / NO		
	Date Tim	e	
5.	Where substance is retained		or
	Date substance destroyed or passed to PS	NI	Time
6.	PSNI informed YES / NO		
	Date		
7.	Education Authority or CCMS Designated	Officer informed, as appro	priate YES / NO
	Date	Time	
8.	Form completed by	Date	
	Position		

escription of the Incident			
ctions taken			
		 	-
ncident form completed by			
ate			

# **Useful contacts in Northern Ireland**

Education Authority		
Belfast Region	028 9056 4000	www.eani.org.uk
North-Eastern Region	028 25661111	
South-Eastern Region	028 9056 6200	
Southern Region	028 3751 2200	
Western Region	028 8241 1411	

Diocesan Advisers		
Diocesan Advisers provide support for maintained schools, you can contact them at the Diocesan Offices below: The Council for Catholic Maintained Schools (CCMS)	028 92013014 info@ccmsschools.com	www.ccmsschools.com

Department of Education	
The Department of Education	www.education-ni.gov.uk
has produced information and	
sources of help on a range of	
topics, including smoking and	
drugs, as part of the iMatter	
programme.	

Independent Counselling Service for Schools			
The Department of Education	028 71864785		
funds the Independent	For further information from		
Counselling Service for Schools	the ICSS Regional Co-ordinator		
(ICSS). It is available to all post-			
primary aged students,			
including those in special			
schools, during school hours			
and on school premises.			
Contact is through the school.			

Health and Safety			
The Health and Safety	08000320121	www.hseni.gov.uk	
Executive	mail@hseni.gov.uk		
	For Northern Ireland		
	(HSENI)		

Public Health Agency for Northern Ireland				
The Public Health Agency (PHA)	0300 555 0114	www.publichealth.hscni.net		
is a regional organisation that				
aims to protect and promote				
the health and well-being of				
the population. The PHA is				
responsible for commissioning				
services to address alcohol,				
tobacco and drug issues across				
Northern Ireland.				

Local Drug and Alcohol Co-ordination Teams		
Contact details for local		www.publichealth.hscni.net
services in the Local Service		drugsandalcoholni.info
Directories prepared by the		
DACTs.		

Police Service for Northern Ireland (PSNI)			
Drug Squad	028 9065 0222		
Community Involvement	028 9070 0964		
Crimestoppers	080 0555 111	Crimestoppers-uk.org	

Treatment, Counselling and Support Agencies		
Health and Social Care		www.publichealth.hscni.net
Organisations		
Family Support NI		www.familysupportni.gov.uk
Children and Adolescent		www.belfasttrust.hscni.net
Mental Health Services, Belfast		

Local Organisations		
A list of local organisations	www.mindingyourhead.info	
that provide information and	www.fasaonline.org	
advice and/or resources	www.talktofrank.com	
about drugs.	www.thesite.org/drinkanddrugs	
	www.nhs.uk/livewell/pages/topics.aspx	