



Drugs Policy

Reviewed/Updated	Date
Updated	September 2025
Review	September 2028

<u>Signed:</u>	<u>Signed:</u>
Chair of Board of Governors	Principal

1.0 INTRODUCTION

1.1 The school Drugs Policy is a statutory document, in accordance with Drugs: Guidance for Schools in Northern Ireland (Revised Edition 2015). The policy follows the guidance given in the EA Drug Policy Document.

1.2 Our school believes that the misuse of drugs endangers not only our pupils but also affects the wider community in which we live. While in our care, we have a responsibility for every child's health and safety along with their social, emotional and physical wellbeing. Drug misuse undermines this and hinders the development of the young person.

1.3 The policy provides a focus for school to consider how drug education should be implemented and developed within the curriculum, and outlines the roles, responsibilities and legal duties of key staff. From a wider perspective, it gives parents and local community an opportunity for involvement in drug issues. The policy should form an integral part of the PDMU strand in the Primary Curriculum.

2.0 RATIONALE

2.1 Crawfordsburn Primary School recognises that young people in today's society are exposed to the risks associated with the drug culture which exists.

2.2 Young children are exposed to messages about drugs from an early age. The messages they receive from television and the media tend to glamourize the use of drugs. They are likely to have seen parents or older siblings smoking, drinking or taking pills and medicines. Some children may have already tried alcohol or cigarettes and taken prescribed medicines or other drugs. Inevitably older children want to pass on their knowledge and experiences in an effort to try and influence younger children; these experiences are likely to include their experimentation with drugs.

2.3 The school wishes to promote the development of the 'whole person' which encompasses physical, mental, emotional, social and environmental health; by equipping pupils with the knowledge, skills, attitudes and values to handle their lives effectively in the present and prepare them for adulthood. As cited in our school motto, we want our children to *Care* for themselves and be *Confident* enough to make positive choices.

2.4 Research cites personal inadequacy, a lack of self esteem and peer pressure as the main reasons for drug misuse among young people. This places a responsibility on the school to 'better prepare young people for adult life'. (Education Reform (NI) Order 1989)

2.5 Drugs education should therefore form an integral part of the school curriculum.

3.0 DRUGS EDUCATION IN CONTEXT

3.1 'A drugs education programme is just one part of a whole school response to drug misuse. It should provide opportunities for pupils to acquire the knowledge, understanding and skills to enable them to consider the effects of drugs on themselves and others, and to make informed and responsible choices within the context of a healthy lifestyle.' (Drugs: Guidance for Schools in NI 2004)

3.2 The programme of education is integrated within the PDMU strand of the curriculum. A life skills approach to drug prevention is essential and within the programme, pupils are taught about raising self esteem, self confidence and assertiveness to prepare them for making informed decisions about drug use, the main focus being on knowledge, social skills, attitudes and values.

3.3 In the Northern Ireland Curriculum, Personal Development will form part of the Statutory Core Curriculum. Drugs education is specifically included within Health, Growth and Change in the Primary Curriculum.

4.0 THE RANGE OF SUBSTANCES

4.1 The school's policy on drugs education covers any substance under the DENI definition: (CCEA 2015)

Definitions

For the purpose of this document, 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.

As well as everyday products such as tea and coffee, 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 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.

*We no longer use the term legal high because it is misleading. The public perceived that 'legal' meant safe. This is not the case, as these substances are not regulated and there is no way of knowing what chemicals they contain. You can find further information on NPS at www.drugscope.org.uk

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 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.

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.

4.2 Procedures for handling alcohol and tobacco misuse and for handling prescribed medicines and volatile substances are outlined in Appendix I.

4.3 This policy compliments the school's Health and Safety and Child Protection policies. It does not exist in isolation.

5.0 PROCEDURES

5.1 PROCEDURES FOR HANDLING AND REPORTING INCIDENTS

5.1.1 A suspected drugs related incident is described as:

- Suspect drugs or paraphernalia found on the school premises
- A pupil suspected of being in possession of drugs
- A pupil found being in possession of drugs
- A pupil suspected of being under the influence of drugs

5.1.2 When an incident occurs the member of staff involved should:

- Make the situation safe
- Send for support
- Administer first aid if necessary
- If a drug is found, gloves should be used and it should be secured in a safe place until dealt with by the PSNI
- Report the incident

5.1.3 The incident will be in the first incidence reported to the Designated Teacher (Mrs Vance), who will inform the Principal and contact the PSNI. If the Designated Teacher is absent the incidence should be reported to the Principal (Dr Walker). The parents will also be contacted and made aware of the situation. The incident will be recorded by the teacher involved and by the Designated Teacher. A 'Record of Action' form will be filled out. One copy will be sent to the EA Designated Officer for Drugs Education, and a copy will be retained for the school's confidential file. The Board of Governors will also be informed.

5.1.4 All staff are made aware of the procedures, which follow the guidelines issued by CCEA Drugs: Guidance for Schools Northern Ireland 2015. This is outlined in Appendix 4.

5.1.5 School staff are not permitted to search pupils' clothing or possessions. Staff may search school property such as lockers or desks. However, personal belongings within a desk or locker cannot be searched without consent. Search of pupils' personal belongings including school bag, coat or other items should only be made with the pupil's consent. Such a search should be made in the presence of the pupil and another adult witness. It is acceptable to ask the pupil to empty pockets and school bags.

5.2 PROCEDURES RELATING TO DISCIPLINE AND COUNSELLING

5.2.1 The Principal will be responsible for deciding how to respond to particular incidents as they occur. They will take into account all the factors associated with each separate incident, such as the age of the pupil concerned, whether the incident involved one pupil or a group of pupils, whether there has been evidence of particular peer group pressure or whether it's a first offence.

Crawfordsburn Primary School is committed to tackling drug misuse and any instances of possession,

use or supply of illegal drugs on school premises will be regarded with the utmost seriousness. Whilst it is not appropriate to prescribe specific sanctions, the decision rests with the Principal who will respond appropriately incorporating sanctions which may include suspension or, in extreme cases expulsion. Counselling will be offered if appropriate.

5.3. EMERGENCY PROCEDURES

5.3.1 For the purposes of this policy, an emergency is considered to be either:

- A sequence of events which require urgent attention (Appendix 4)
- Emergency first aid and procedures (Appendix 5)
- Signs of Substance Use (Appendix 7).

5.4 CONFIDENTIALITY

The spirit of confidentiality is of primary importance to those who work professionally with young people in a trusting and secure environment. However, the legal requirements of drug legislation will mean that in certain circumstance there will be a change in the convention of confidentiality. The Children (NI) Order (1995) makes it clear that the welfare of the young person is paramount and therefore confidentiality must be included.

Where a pupil discloses to a teacher that they are taking drugs, the teacher should make it clear that they can offer no guarantee of confidentiality. However, the teacher can advise the pupil of other sources of confidential information or advice. Pupils should be encouraged to talk to their parents.

5.5 DEALING WITH THE MEDIA

5.5.1 If the school receives an enquiry from the media, the caller will be referred only to the Principal or in their absence a member of the Senior Leadership Team.

5.5.2 When responding to the media, the privacy of the pupil will be respected and advice sought from the EA.

6.0 DRUGS EDUCATION WITHIN THE CURRICULUM

6.1 Drugs education is not taught in isolation. It is a continuous process which involves the development of skills and attitudes enabling pupils to make informed choices. Effective drugs education should take account of not only the individual, but also the family, their peer groups, and the wider community. Where possible, the school promotes the partnership between the parent and child, when addressing drug issues.

6.2 In Northern Ireland, at all Key Stages, the statutory curriculum for pupils includes the Personal Development strand. There will be opportunities for pupils to develop their knowledge and understanding of the use, misuse, risks and effects of drugs and other potentially harmful substances; their effects on health and lifestyle.

6.3 Drugs education is specifically included within the area of PDMU, The World Around Us and within other subjects, such as Religious Education. Literacy and Physical Education there are opportunities for considering drug related issues from a variety of perspectives.

6.1 AIMS

The school's drugs education programme is grounded in the Personal Development and the enhancement of protective factors. The aims are:

- To promote positive attitudes towards personal health
- To develop self discipline and self respect to build pupils' self esteem
- To develop decision making skills which may delay or prevent the onset of experimentation
- To inform pupils of the effects of drug abuse and the risks involved
- To help pupils understand how they can influence their peers
- To develop knowledge and understanding of themselves and others as individuals

6.2 OBJECTIVES

Drug education should enable pupils to develop a knowledge and understanding about drugs and drug issues, as well as the skills needed to cope with challenges they will encounter.

Pupils should be able to:

- Understand their own personality, needs, abilities and interests
- Understand the process of reasoning required to make informed choices
- Explore their own attitudes towards drugs and drug issues
- Develop coping strategies to deal with peer pressure
- Develop a competence in challenging attitudes and patterns of behaviour associated with drug misuse
- Develop self discipline
- Understand what is meant by a 'drug' and the definition of 'addiction'
- Understand how some drugs affect the body
- Be aware of the benefits of a healthy lifestyle
- Recognise potential drug exploitation and how to take avoiding action
- Be aware of the current drug culture and the effect of advertising campaigns.

6.3 DELIVERY AND ORGANISATION

6.3.1 Drugs education is a whole staff issue. Crawfordsburn Primary School ensures that staff are regularly updated with changes in the curriculum and changes to policy, which have an effect on their delivery of the curriculum.

6.3.2 The Designated Teacher and PDMU Co-ordinator will ensure that the appropriate themes are covered under Personal Development for each year group. It is the responsibility of the classroom teacher to include drugs education in other subject areas if it forms part of the NI Curriculum, and to spend an adequate amount of time delivering drugs education.

6.4 OUTSIDE AGENCIES

6.4.1 Crawfordsburn Primary School may use outside agencies to help deliver the drug education programme providing the following criteria are met:

- The content and delivery of the programme has been jointly agreed
- The programme and methods of delivery are consistent with the aims and objectives outlined in this policy

- The Principal has given their approval for the use of the outside agency
- The staff from the agency have been vetted in relation to Child Protection
- The agency is familiar with the school's drug policy and is prepared to adhere to it
- The resources used are appropriate to the age range and maturity of the pupils
- The visitors to the school are clear that confidentiality cannot be maintained and any disclosure which might suggest that a pupil is at risk must be passed on to the Designated Teacher
- The teacher will always be present when a visitor to the school is taking a class
- Outside agencies will be asked to complete the External Agencies form (Appendix 3)

6.4.2 When appropriate, the school will work with Parents / Caregivers to facilitate onward referral or signposting to external agencies (Appendix 6).

7.0 LINKS WITH PARENTS, THE COMMUNITY AND THE PSNI

7.1 Parents will be informed when external agencies are being used to address drugs related issues and are encouraged to play an active role in homework tasks and discuss drug related issues with their child whenever possible. Parents are also aware of the school's procedures for dealing with drug related incidents.

7.2 The school endeavours to work closely with the local community to help reduce the number of drug related incidents.

7.3 Crawfordsburn Primary School has developed good working relationships with the local police. This helps to ensure that if a drug related incident is reported, it will be dealt with within a professional and discrete manner, and in keeping with the best interests of the child involved.

7.4 The PSNI offer advice and support when it is needed.

8.0 ROLES

8.1 THE DESIGNATED TEACHER

8.1.1 Mrs P Vance is responsible for the co-ordination of the arrangements to deal with individual cases of suspected or actual drug misuse. This role includes:

- Oversight of co-ordination of planning of curricular provision (with PDMU Co-ordinator, Miss J Twamley)
- Implementing procedures as outlined in this policy for dealing with an incident
- Receiving any substance and associated paraphernalia found in school
- Regularly updating staff on the policy and the procedures for dealing with a drug related incident
- Liaison with the Principal on any drug related incident
- Liaison with other members of the Safeguarding Team
- Liaison with outside agencies in relation to drug related incidents
- The induction of new staff and training of existing staff as appropriate
- Reviewing and updating the school policy when required
- Completing an incident report form.

8.2 THE PRINCIPAL

It is the role of the Principal to ensure that correct procedure is followed if a drug incident occurs. Their role includes:

- Determining the circumstances surrounding incidents
- Liaison with the PSNI
- Ensuring pupils' welfare
- Handling, storage and safe disposal of any drugs/drugs related paraphernalia
- Liaison with the Board of Governors and EA
- Ensuring the completion of a written report and forwarding it to the BOG and EA
- Contacting parent/guardian of the pupil involved
- A locked cupboard in the Principal's office will be used to store confiscated substances.

8.3 THE BOARD OF GOVERNORS

School governors have the responsibility for their school to foster and support the development and on-going review of the policy and education programme. Their role includes:

- Facilitation of the consultative process whereby the school community can respond and contribute to the effectiveness and quality of the policy and programme which they examine and approve prior to implementation in the school;
- Ensuring the policy is published on the school website
- Ensuring that the policy is reviewed regularly.

9.0 MONITORING AND EVALUATING

The school Drugs Education Policy is periodically reviewed to reflect changing circumstances and trends on drug use. The programmes of study for drugs education are continually reviewed and any changes deemed necessary are implemented.

The policy is available to parents upon request and is accessible on the school website.

APPENDIX I

PROCEDURES FOR HANDLING ALCOHOL MISUSE

The school premises are an alcohol free zone. The school does not allow any alcohol to be consumed on school premises. This applies to visitors, staff, parents and pupils. Adults breaking this rule will be referred to the Principal directly. Pupils will be dealt with under the school's discipline policy.

PROCEDURES FOR HANDLING TOBACCO MISUSE

The school is a no smoking environment with no one being permitted to smoke on the school premises. This also includes e-cigarettes. Adults breaking this rule will be advised by other members of staff. Pupils breaking this rule will be dealt with under the school's discipline policy.

THE MANAGEMENT OF PRESCRIBED MEDICINES

This is very clearly defined in the Administration of Medicines Policy.

THE MANAGEMENT OF SOLVENTS

Pupils are not permitted to bring solvents or aerosols into school. This includes tippex fluid and pens, tippex thinners, glue, marker pens and spray deodorants. Pupils *are* permitted to bring felt tip pens to school. All members of staff are responsible for the safe storage and usage of solvents in their classrooms. The cleaners and Building Supervisor should also ensure that their stores are locked when not in use and that solvents are held in a secure place.

APPENDIX 2 - THE LAW IN NORTHERN IRELAND

MISUSE OF DRUGS ACT 1971

It is an offence under the Misuse of Drugs Act 1971:

- i. to supply or offer to supply a controlled drug to another in contravention of the Act;
- ii. to be in possession of, or to possess with intent to supply to another, a controlled drug in contravention of the Act; it is a defence to the offence of possession that, knowing or suspecting it to be a controlled drug, the accused took possession of it for the purpose of preventing another from committing or continuing to commit an offence and that as soon as possible after taking possession of it he took all such steps as were reasonably open to him to destroy the drug or to deliver it into the custody of a person lawfully entitled to take custody of it;
- iii. for the occupier or someone concerned in the management of any premises knowingly to permit or suffer on those premises the smoking of cannabis: or the production, attempted production, supply, attempted supply, or offering to supply of any controlled drug.

The school will contact the PSNI when it has reason to suspect that an offence has been committed.

Appendix 3 - Exemplar Form when using External Agencies Drugs Education Programme – External Agency

School:

Agency:

Principal:

Agency contact:

Contact Teacher:

Tel No:

Tel No:

Fax No:

Fax No:

E-mail:

E-mail:

Agreed Aims

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Sessions to be Delivered

- Date(s):

- Times(s):

Audience

Number of participants:

Type of group (age, ability, etc)

Methodology

(Brief description of programme content and methods)

Intended Learning Outcomes

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Evaluation

(Brief description of how this will be conducted and reported)

Signed (Contact Teacher/Principal)

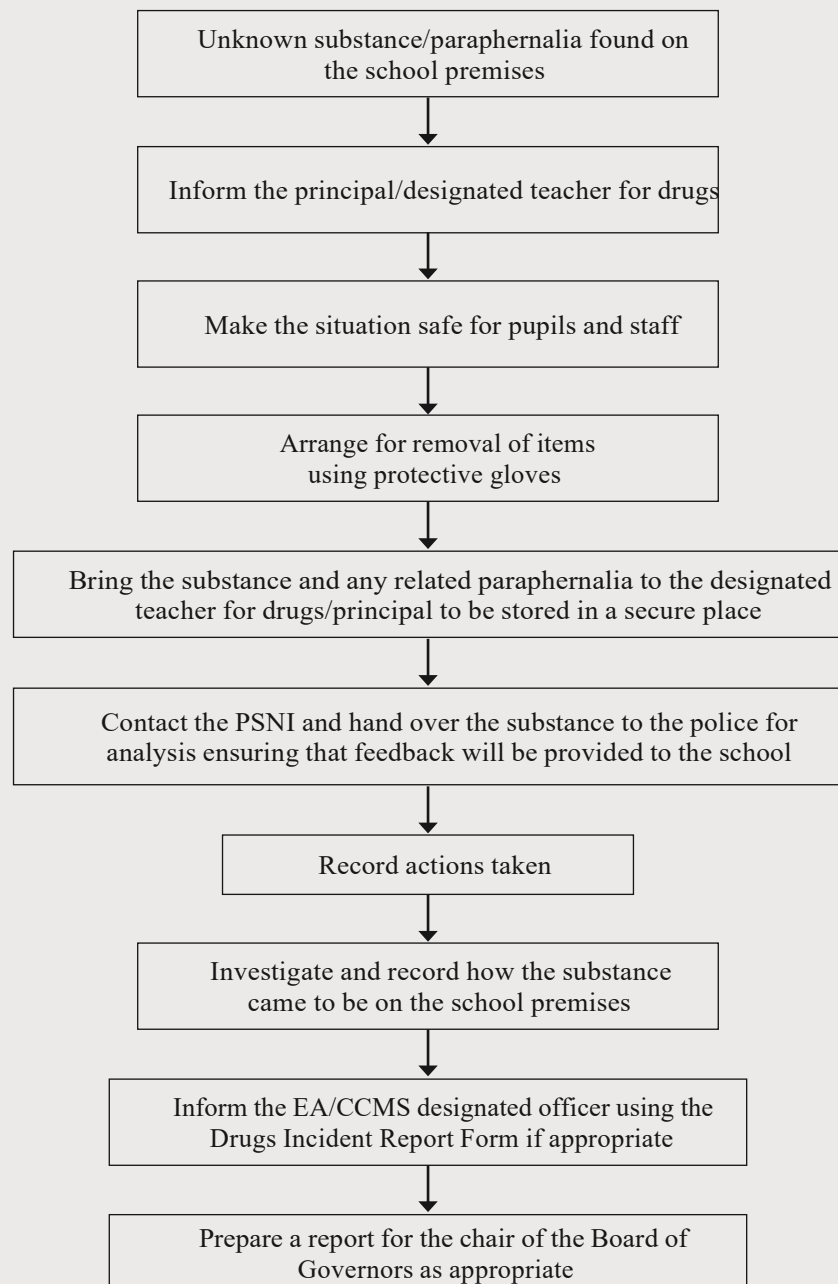
Signed: (Agency contact)

Date:

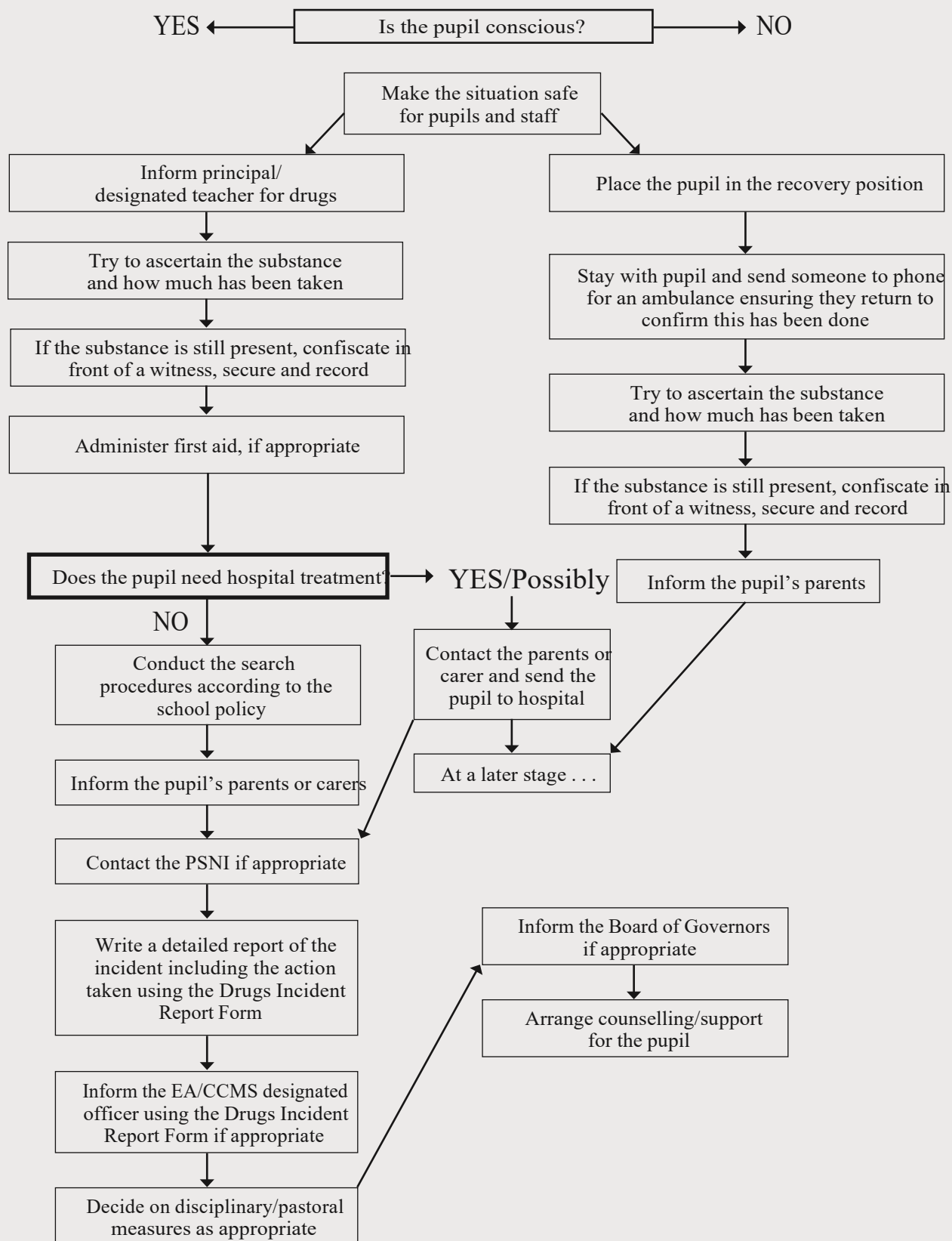
Appendix 4

Handling Drug-Related Incidents

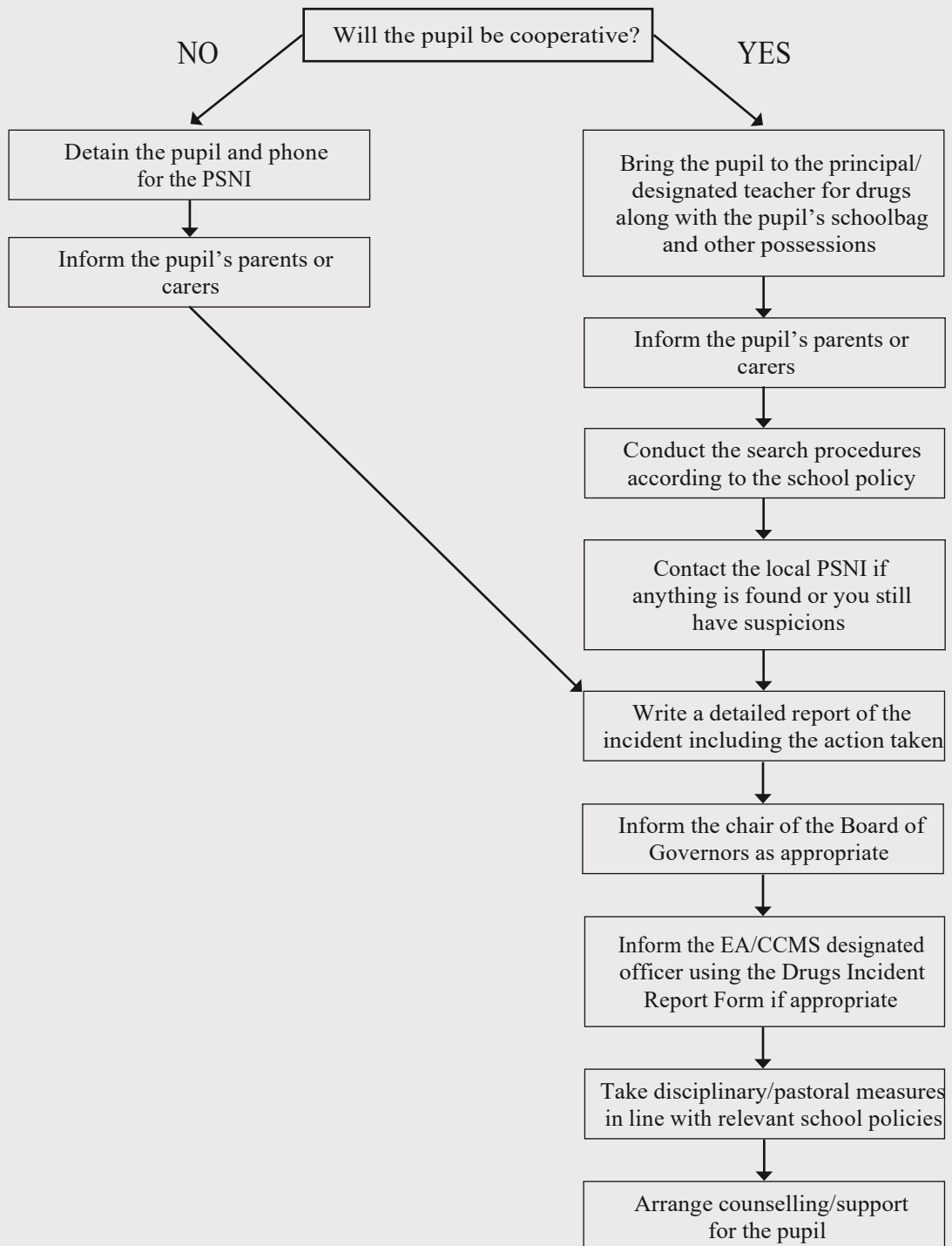
4.1 Finding a suspected substance or drug-related paraphernalia on or close to the school premises



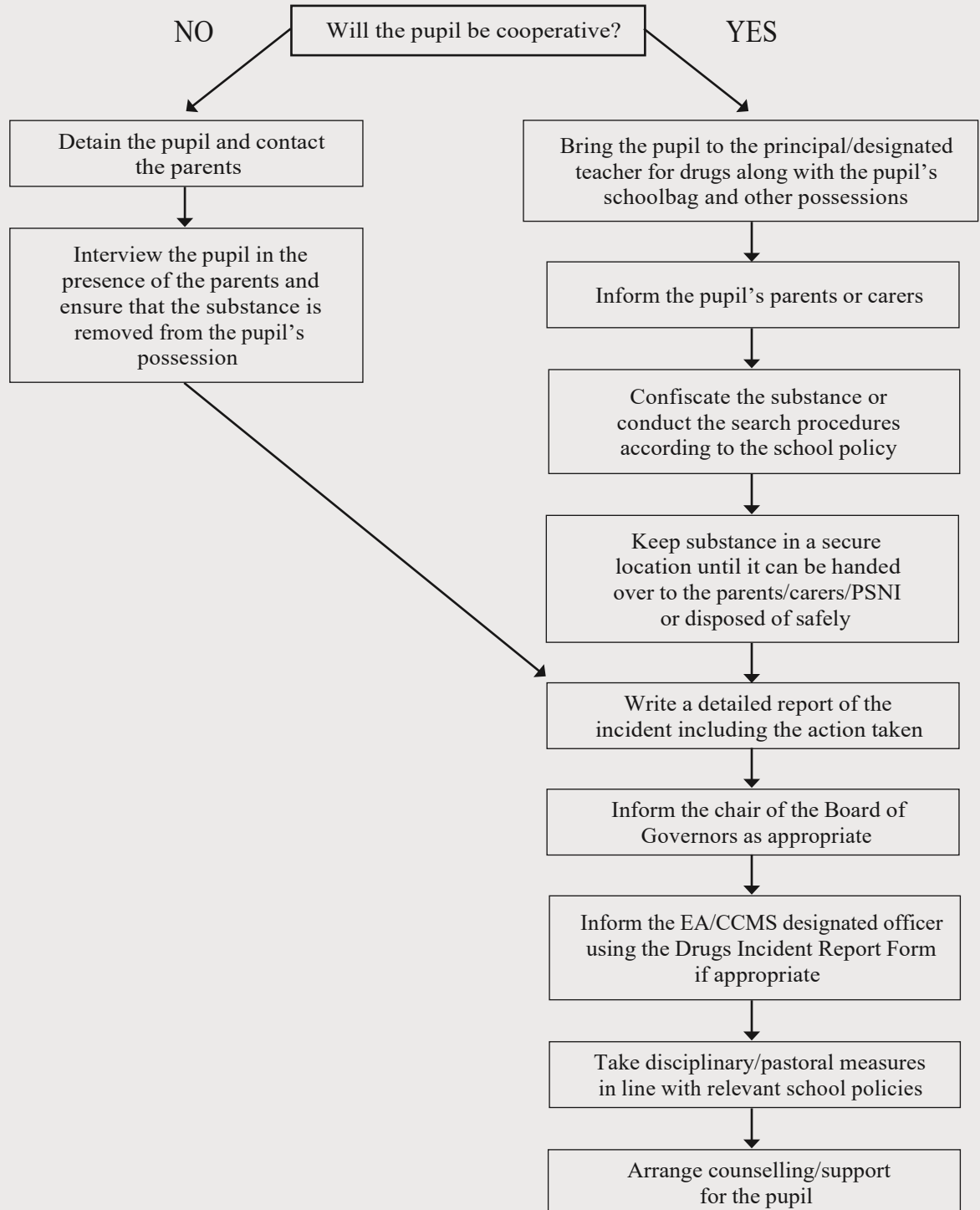
4.2 Pupil suspected of having taken drugs/alcohol on school premises



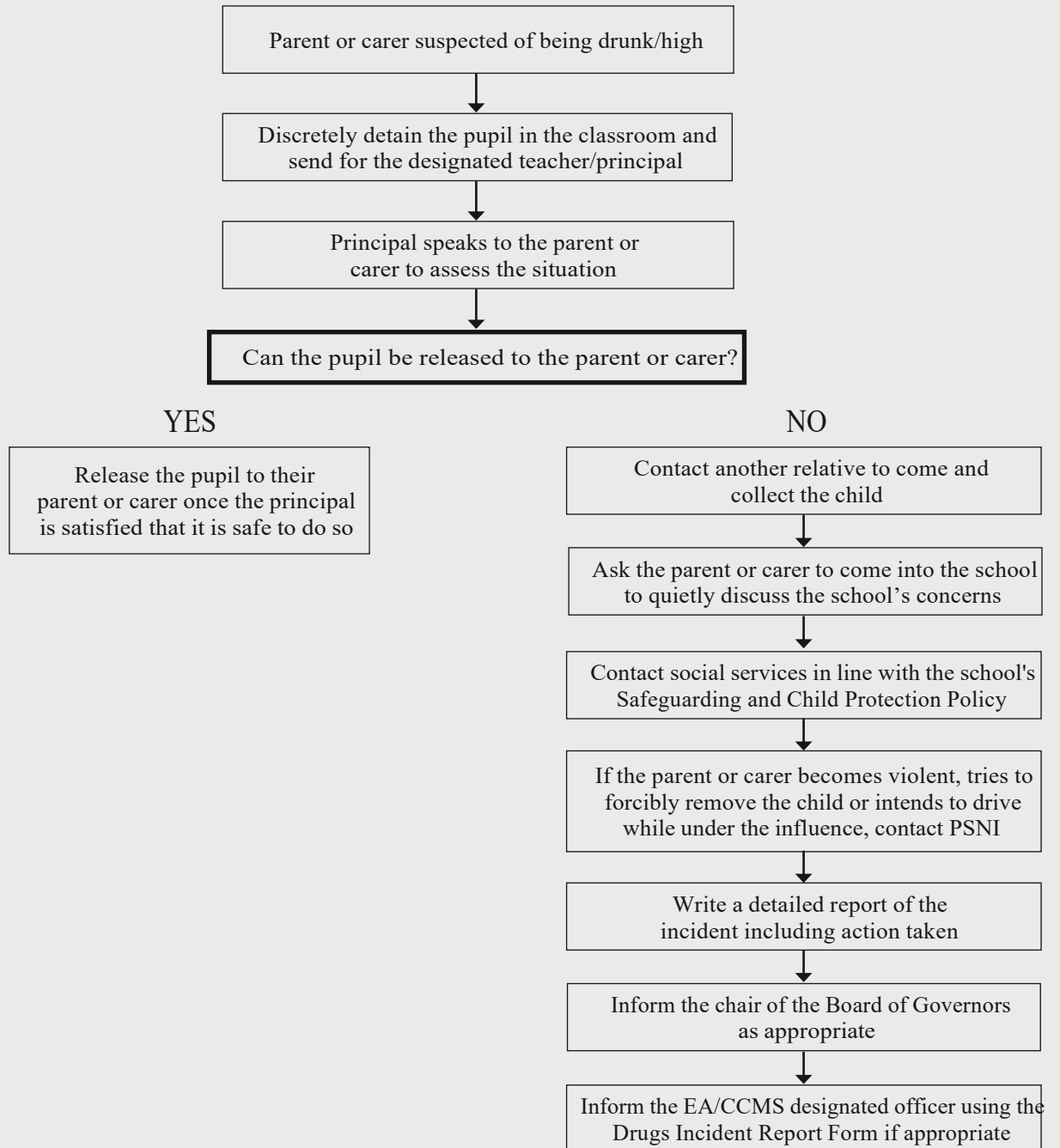
4.3 Pupil suspected of possessing/distributing an illegal substance



4.4 Pupil in possession of alcohol or unauthorised prescribed medication on the school premises



4.5 A parent or carer arrives at school to collect a child and appears to be under the influence of alcohol or another substance



Managing an Incident – Summary

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

1 Individual Staff Member

- Assess situation and decide action;
- Secure First Aid and send for additional staff support if necessary;
- Make situation safe for all pupils and other members of staff;
- Carefully gather up any drugs and/or associated paraphernalia/evidence. Pass all information/evidence to the designated teacher for drugs;
- Write a brief factual report of the incident and forward it to the designated teacher for drugs.

2 Designated Teacher

- Respond to first aiders advice/recommendations regarding the incident;
- In the case of an emergency inform parents/guardians immediately;
- Take possession of any substance(s) and associated paraphernalia found;
- Inform principal;
- Take initial responsibility for pupil(s) involved in suspected incident; and
- Complete an incident report form (see Appendix 7) and forward it to the principal.

3 Principal

- Determine the circumstances surrounding the incident;
- Ensure that the following people are informed where relevant:
 - Parents/guardians;
 - Community and Schools Involvement Officer (CSIO);
 - Board of Governors;
 - Designated Officer in EA/CCMS.
- Agree pastoral and disciplinary responses including counselling services/support;
- Forward a copy of the incident report form to the chairperson of the Board of Governors and the designated officer within the Education Authority and CCMS if appropriate; and
- Review procedures and amend, if necessary.

EMERGENCY FIRST AID

The school's trained first aiders are:

Mrs Alison Montgomery (Designated First-Aider)

Mrs Megan Warke

Miss Kerry Sweeney

Ms Alex Copley

Appendix 5 - **RECORD OF DRUG RELATED INCIDENT**

RECORD OF DRUG RELATED INCIDENT

LIMITED ACCESS ONLY

DESCRIPTION OF THE INCIDENT AND ACTION TAKEN

1. Name of Pupil / Young person _____ DOB _____

Address _____

School _____

2. Date of Incident _____ Reported by _____

Time of Incident _____ Location of Incident _____

3. First Aid given YES / NO Administered by _____

Ambulance/Doctor Called YES / NO Time of Call _____

Drug Involved (if known) _____ Sample Found YES / NO

4. Parent Informed YES / NO Date _____ Time _____

By whom _____

5. Where sample retained _____ or

Date Sample Destroyed _____ Time _____

Witnessed by _____

6. Police Informed YES / NO Date _____ Time _____

By _____ Name of Station / Officer _____

7. EA Drug Education Officer Informed YES / NO Date _____

Time _____ By whom _____

Form Completed by _____

Position _____

Date _____

Please retain one copy for your confidential file and return the original to:

Designated Officer – Drug Education

Education Authority

Grahamsbridge Road

BELFAST

BT16 2HS

Tel No: 028 9056 6407

Public Health Agency for Northern Ireland		
The Public Health Agency (PHA) is a regional organisation that aims to protect and promote the health and well-being of the population. It was established in April 2009 as part of the reforms to Health and Social Care (HSC) in Northern Ireland. The PHA addresses the causes and associated inequalities of preventable ill health and lack of well-being. It is a multidisciplinary, multiprofessional body with a strong regional and local presence. The PHA is responsible for commissioning services to address alcohol, tobacco and drug issues across Northern Ireland.		www.publichealth.hscni.net
Local Drug and Alcohol Co-ordination Teams		
Contact details for local services in the Local Service Directories prepared by the DACTs		www.publichealth.hscni.net
Police Service for Northern Ireland (PSNI)		
Drugs Squad	Tel: 028 9065 0222	
Community Involvement	Tel: 028 9070 0964	
Crimestoppers	Tel: 080 0555 111	
Treatment, Counselling and Support Agencies		
Health and Social Care Organisations		www.publichealth.hscni.net
Family Support NI		www.familysupportni.gov.uk
Children and Adolescent Mental Health Services, Belfast		www.belfasttrust.hscni.net
Local Organisations		
A list of local organisations that provide information and advice and/or resources about drugs.		www.mindingyourhead.info
		www.fasaonline.org
		www.talktofrank.com
		www.thesite.org/drinkanddrugs
		www.nhs.uk/Livewell/Pages/Topics.aspx

Appendix 7

Recognising Signs of Substance Use

What to look out for

If someone is having a bad time on 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 **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;
- 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 **unconscious** 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.