1. Rationale for Grosvenor Grammar School Policy

- 1.1 Grosvenor Grammar School is committed to the Health and Safety of both its staff and pupils and will take action to safeguard their wellbeing.
- 1.2 The School acknowledges the statutory requirement to have a Drugs Policy and to provide drugs education as part of the curricular provision. This policy has been drawn up in the light of advice from the Department of Education for Northern Ireland (DENI), the Education Authority (EA) and other statutory agencies.
- 1.3 Grosvenor Grammar School acknowledges the importance of its pastoral role in the welfare of young people, and through the School's Pastoral System and a drugs education programme, will seek to promote the development of:
 - skills to enable pupils to cope with adolescent concerns and make informed and responsible choices;
 - pupil autonomy through the encouragement of self-discipline, self-awareness and the acquisition of appropriate personal and social skills; and of
 - a school ethos that inspires confidence in the quality of teacher/pupil relationships and which values the full range of guidance and pastoral care provision relevant to pupil needs.
- 1.4 The School encourages parental involvement and seeks to educate parents of the School's policy with regard to drugs and substance abuse.
- 1.5 The Board of Governors supports a policy that forbids all pupils (no matter what the legal position states) from smoking, vaping, drinking alcohol or partaking of drugs within the school premises, whilst travelling to or from school, whilst in school uniform, whilst taking part in any school organised activity or travelling to or from such school activity, or participating on educational trips (as defined in the school's *Educational Visits Policy*). Possession of cigarettes, electronic cigarettes, alcohol or drugs will be taken as an indication of a breach of these rules.
- 1.6 In any case of suspected drug misuse among pupils, the Chair of the Board of Governors and PSNI must be informed. Furthermore, the incident must be reported to the Designated Officer/Deputy Designated Officer for Child Protection within the EA.

2. Drugs – a definition

As stated in the CCEA guidance, "**a drug is any substance which, when taken, has the effect of altering the way the body works or the way the person behaves, feels, sees or thinks**". Within this policy the terms 'use', 'misuse' and 'abuse' refer to the use of a drug for purposes for which it was not intended, or using a drug in excessive quantities.

As well as everyday substances such as tea and coffee, drugs include:

- alcohol and tobacco;
- over-the-counter medicines such as paracetamol, aspirin;
- prescribed drugs, such as antibiotics, inhalers, Ritalin;
- volatile substances, such as aerosols, correcting fluids, gas lighter fuel, glues and petrol;
- **controlled drugs**, such as cannabis, LSD, ecstasy, amphetamine sulphate, magic mushrooms (processed), heroin, cocaine;
- psychoactive substances; and
- other substances, such as amyl/butyl nitrites.

3. Policy Aims

The Drug and Substance Abuse Policy aims to:

- define the roles, responsibilities and legal duties of the Governors, the Principal, the Designated Teacher for Drugs, staff and pupils;
- promote a Drugs Education Programme within the curriculum;
- develop procedures for dealing with drug-related issues;
- establish procedures for managing specific incidents of suspected drug misuse; and to
- establish guidelines for the administration of prescribed medication.

4. Roles, Responsibilities and Legal Duties

- 4.1 The Board of Governors has overall responsibility for the policy and its implementation, but delegates the responsibility for the daily operation of it to the Principal and the Senior Leadership Team. Furthermore, the Board of Governors will ensure that a statement of the School's policy on Drugs and Substance Abuse is published in the school prospectus and that the policy is reviewed at regular intervals. The Designated Governor for Child Protection is also the Designated Governor for Drugs.
- 4.2 The Principal has the responsibility to determine the circumstance of any drugs-related incident and should make every effort to contact the parents/guardians of those pupils involved. The Principal should ensure that in any incident involving a controlled drug or psychoactive substance, there is close liaison with the PSNI. After informing the PSNI, the Principal should only be concerned with the welfare of the pupil(s) involved in the incident, the other pupils in the school and the safe handling, storage and disposal of any drugs / drugs-related paraphernalia. The Principal and the Chair of the Board of Governors will agree the pastoral / disciplinary response and report the incident to the Designated Teacher/Deputy Designated Teacher within the EA. All governors will be made aware of suspected drugs-related incidents and the corresponding disciplinary response.
- 4.3 The Head of Pastoral Care in consultation with the Designated Teacher for Drugs (Designated Teacher/Deputy Designated Teacher for Child Protection) is responsible for ensuring that the curricular provision is in compliance with the statutory requirements. The Designated Teacher will act as the contact person for external agencies that may have to work with the school or with pupil(s) concerned. It is the responsibility of the Designated Teacher to take possession of any substance(s) and associated paraphernalia found in the event of a suspected incident and to complete / forward a factual report to the Principal.
- 4.4 It is not **the responsibility of individual staff members to determine the circumstances** surrounding a suspected drugs-related incident; however, they should deal with any emergency procedures if necessary. Any information, substance or paraphernalia received should be forwarded to the Designated Teacher immediately. A brief factual report of the suspected incident should be completed and forwarded to the Designated Teacher. Where a pupil discloses to a member of staff that they are taking drugs, the staff member should make it clear to the pupil that they can offer no guarantee of confidentiality.
- 4.5 The School will inform parents / carers of school procedures in the event of suspected drug-related incidents.

5. Provision of a Drugs Education Programme

- 5.1 The School believes in and supports the following educational aims of the Drugs Education Programme:
 - to promote the concept of preventative health education as part of a whole-school process which provides for the wellbeing of all our pupils;
 - to provide accurate information about substances;
 - to increase understanding about the implications and possible consequences of use and misuse;
 - to widen understanding about related health and social issues, e.g. alcoholism, crime, long-term illness, sex and sexuality, HIV and AIDS;
 - to enable young people to identify sources of appropriate personal support; and
 - to safeguard all our pupils from those wishing to involve them in drugs and substance abuse.
- 5.2 The Head of Learning for Life and Work, in consultation with the Head of Pastoral Care and the Designated Teacher, will ensure that a co-ordinated programme for all Key Stages is implemented, regularly reviewed and updated. This will include:
 - the curricular provision at Key Stage 3 & 4;
 - the use of pastoral time (informal curriculum) across all year groups; and
 - the use of external agencies as appropriate.
- 5.3 Extra-curricular activities will provide many opportunities for staff to reinforce the learning of the more formal curriculum.

6. Procedures for handling suspected incidents of drug misuse

6.1 It will depend on the nature of the incident and the type of substance(s) involved; for example,

cigarettes, electronic cigarettes, alcohol, solvents, controlled drugs and psychoactive substances may each require a different kind of response. Detailed guidance for dealing with drug and substance misuse are outlined in DENI Circular 2015/23 *Drugs Guidance* and the CCEA guidance *Guidance on Managing Suspected Drugs-related Incidents* (see Appendix 4).

- 6.2 In general, the following sequence will be followed by the staff involved:
 - 6.2.1 Disclosures of drugs and substance abuse must be reported immediately to the Designated Teacher.
 - 6.2.2 Individual members of staff who suspect a drugs-related incident must ensure the safety for all pupils and other members of staff affected and provide the immediate necessary medical care that is most appropriate.
 - 6.2.3 The staff member should identify, remove and secure any drugs / substance and/or associated paraphernalia / evidence, and pass all information / evidence to the Designated Teacher. Additionally, the staff member must write a brief factual report of the incident and forward it to the Designated Teacher.
 - 6.2.4 The Designated Teacher for Drugs should respond to the member of staff / First Aider; in the event of an emergency, the parents/guardians of the pupil(s) concerned should be informed immediately.
 - 6.2.5 The Designated Teacher will take possession of any substance(s) and associated paraphernalia found and will inform the Principal. The Designated Teacher will take initial responsibility for the pupils(s) involved in the suspected incident and will complete / forward a factual report to the Principal.
 - 6.2.6 The Principal will determine the circumstances surrounding the incident.
 - 6.2.7 The Principal will inform the parents/guardians, Chair of the Board of Governors and the following external agencies as appropriate, viz. PSNI, Designated Officer with the EA.
 - 6.2.8 The Principal, in consultation with the Chair of the Board of Governors, will determine the appropriate safeguarding / disciplinary responses including counselling services and support.
 - 6.2.9 A copy of the incident report (see Appendix 5) will be forwarded by the Principal to the chairperson of the Board of Governors and the Designated Officer with the EA (if appropriate).
 - 6.2.10 The School will ensure that appropriate pastoral support will be provided for both the pupil(s) involved with the suspected drugs-related incident and those pupils affected by the incident through, for example, the school Counselling Service, Heads of School, Heads of Year or other trained staff.
- 6.3 If the school receives an enquiry from the media, the caller should be referred only to the Principal (or a designated nominee).

7. Sanctions

With respect to the drugs-related incidents as outlined in Section 1.5 of this policy, the following sanctions will be applied to offenders.

- 7.1 In the case of the person bringing ('dealing' or 'supplying') a "controlled drug" or psychoactive substance to any of the situations, the Board of Governors will initiate expulsion procedures.
- 7.2 Any person possessing or using a "controlled drug" or psychoactive substance will be suspended pending investigations which may lead to expulsion.
- 7.3 Any person possessing or using a "non-controlled drug" or substance will be placed in a Friday Detention for a number of weeks (or a Saturday detention) dependent on previous record.
- 7.4 Repeated incidents of those detailed in Points 7.2 or 7.3 will lead to suspension and may ultimately result in expulsion.
- 7.5 On return to the school, all persons involved in drug or substance related abuse will be strongly encouraged to receive counselling through the schools independent counselling service or other external agencies such as DAISY (Drugs and Alcohol Intervention Service for Youth).

8. Links with outside agencies

- 8.1 The school actively co-operates with and utilizes the expertise of external agencies such as the EA, the Educational Welfare Department, Health & Social Services Department, the School's independent counselling service and the PSNI.
- 8.2 Use is also made of a number of voluntary organisations to deliver the School's educational programme, as well as to provide help to pupils and/or their parents should incidents of abuse be discovered (see Appendix 6).

9. Administration of prescribed or proprietary medicines

- 9.1 The School will operate procedures in respect of pupils taking prescribed or proprietary medicines in school as described in the School's *Supporting Pupils with Medical Needs Policy*.
- 9.2 Any pupil found in possession of, or taking drugs or medicines, outside the terms of the arrangements as described in the *Supporting Pupils with Medical Needs Policy*, will be subject to the sanctions detailed in Section 7.
- 9.3 School staff will be made aware of first aid procedures in the event of a medical emergency. These procedures are outlined in Appendix 3.

10. Review and Evaluation

This policy will be reviewed and evaluated annually by the Board of Governors in consultation with the Head of Pastoral Care, the Designated Teacher/Deputy Designated Teacher for Drugs and the Senior Leadership Team.

Appendix 1: Contacts

Education Authority (formerly Education and Library Boards)			
Belfast Region	Tel: 028 9056 4000	www.belb.org.uk	
North-Eastern Region	Tel: 028 9448 2200	www.neelb.org.uk	
South-Eastern Region	Tel: 028 9056 6200	www.seelb.org.uk	
Southern Region	Tel: 028 3751 2200	www.selb.org	
Western Region	Tel: 028 8241 1411	www.welbni.org	

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)	Tel: 028 9042 6972	www.onlineccms.com	

Department of Education	
The Department of Education has produced information and sources of help on a range of topics, including smoking and drugs, as part of the iMatter programme.	<u>www.deni.gov.uk</u>

Independent Counselling Service for Schools		
The Department of Education funds the	Tel: 028 9127 9729	
Independent Counselling Service for Schools	for further	
(ICSS). It is available to all post-primary aged	information from	
pupils, including those in special schools,	the ICSS Regional	
during school hours and on school premises.	Co-ordinator	
Contact is through the school.		

[Health and Safety		
	The Health and Safety Executive	Tel: 028 9024 3249 for Northern Ireland (HSENI)	<u>www.hseni.gov.uk</u>

Appendix 2: Signs of Substance Abuse

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.

Appendix 3: Emergency Procedures

Emergency Procedures

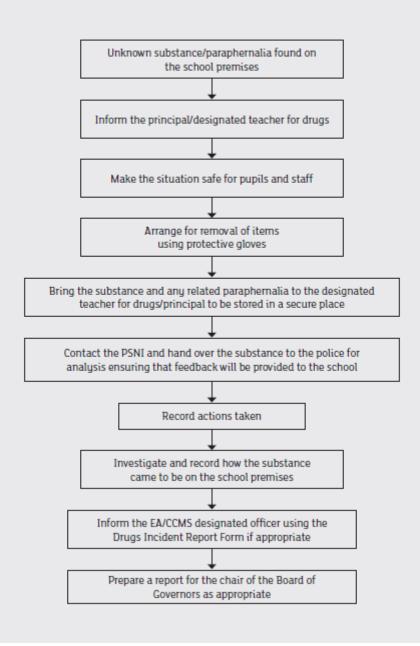
This is the current best advice on what to do if someone is in difficulty because of misusing drugs.

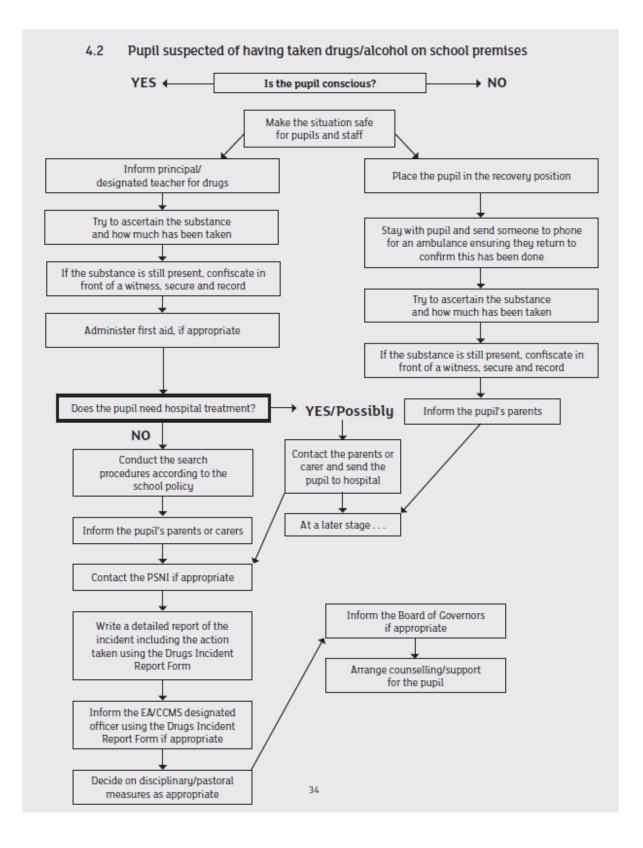
- It is important to find out what they have taken as this could affect emergency aid, for example it will help the ambulance crew. Loosen clothing and call for an ambulance immediately.
- If the person has taken a depressant substance, for example solvents, alcohol, sleeping
 pills or painkillers, it 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 mouthto-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.

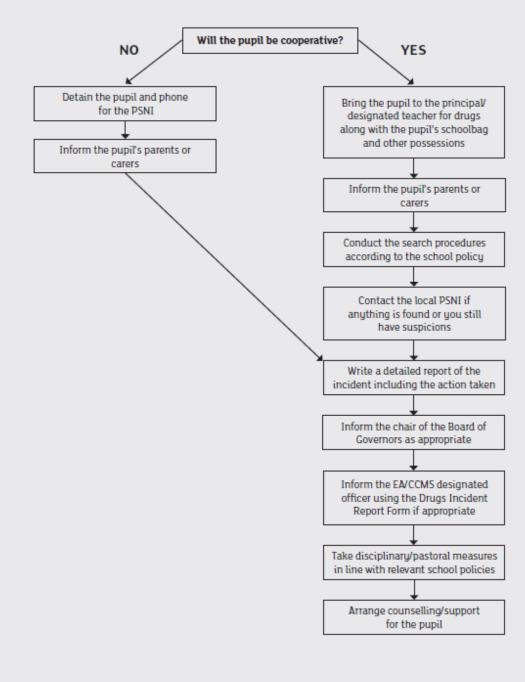
Appendix 4: Handling Drug-Related Incidents

Handling Drug-Related Incidents

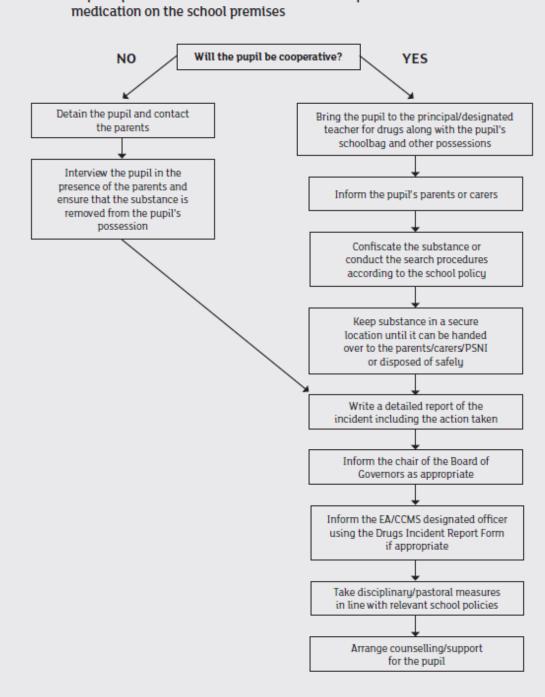
4.1 Finding a suspected substance or drug-related paraphernalia on or close to the school premises



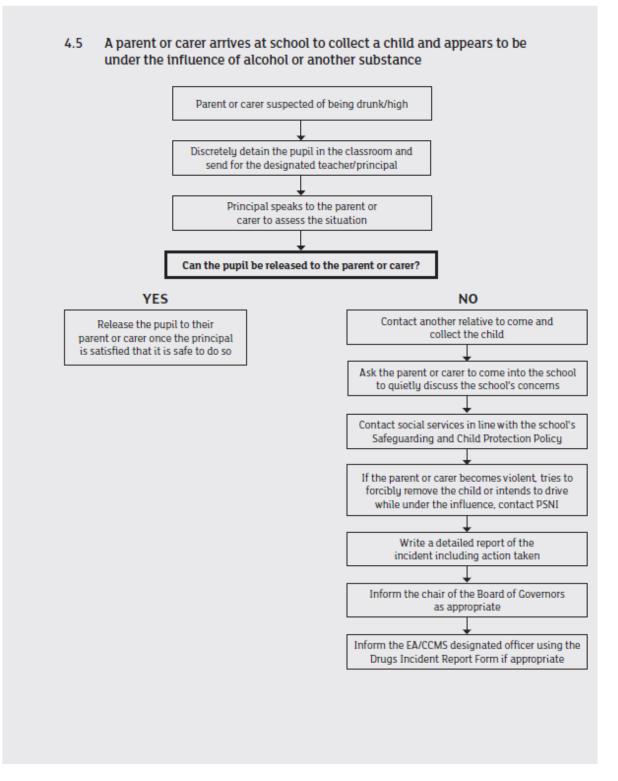




4.3 Pupil suspected of possessing/distributing an illegal substance



Pupil in possession of alcohol or unauthorised prescribed 4.4



Appendix 5: Drugs Incident Report Form

1.	Name of Pupil DOB
	Address
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
4.	Parent or carer informed YES/NO
	Date Time
5.	Where substance is retained
	Date substance destroyed or passed to PSNI Time
6.	PSNI informed YES/NO
	Date Time
7. Education Authority or CCMS Designated Officer informed, as appropriate	
	Date Time
8.	Form completed by Date
	Position

	ent		
Actions taken			
Incident form completed by			
Date			

An electronic version of this form is available on the CCEA website

Appendix 6: Referral Pathway Form

Referral Pathway for Specified School Incidents		
Type of incident:		
Internal Staff referral:		
Refer incident to:		
a		
b		
External agency referral:		
Contact details of relevant agencies or personn	iel.	
Name of Agency	Name of Agency	
Name of contact	Name of contact	
Address	Address	
Relevant Details	Relevant Details	
Contact number	Contact number	
Email address	Email address	
Name of Agency	Name of Agency	
Name of contact	Name of contact	
Address	Address	
Relevant Details	Relevant Details	
Contact number	Contact number	
Email address	Ernail address	

An electronic version of this form is available on the CCEA website