

# Cavendish Close Infant and Nursery School

## Drug Education Policy

### **Statutory obligations;**

**This policy takes full account of the school's legal obligations and the latest DFE guidance on Drug Education and responding to Drug related incidents.**

**Every school has a statutory responsibility to have:**

- **an up to date Drug education policy**
- **to deliver drug education through the Cambridgeshire Drug education scheme**
- **to prepare all pupils for the responsibilities of adult life**
- **parents do not have a right to withdraw their children from Drug education lessons**

**In accordance with the DFE and ACPO Drug Advice for Schools;**

**We have a duty to ensure that this school is free from the misuse of illegal drugs such as cannabis, ecstasy, heroin, cocaine, LSD and free from the misuse of legal drugs such as alcohol, tobacco,**

solvents, over the counter drugs and prescribed drugs.

We will only allow legal drugs for use in school when they are medicines prescribed by a pupil's GP. Please see the policy Administration of Medicines.

We will not allow the misuse of drugs on school premises by pupils, school personnel, by invited or uninvited visitors to school and we will take the appropriate action if needed.

We believe we have a responsibility to inform the pupils about the effects of drugs misuse by having in place a drugs education programme that will increase their knowledge, allow them to make their own lifestyle choices but encouraging them to lead a healthy lifestyle.

We as a school community have a commitment to promote equality. We believe this policy is in line with the Equality Act 2010.

### **Cavendish Close Infant and Nursery School**

recognises that it also has its part to play in meeting national and local Drug education targets as

identified in the **Derby Drug and Alcohol strategy team Young Peoples' substance misuse plan 2009-2010**, Medicines act (1968), Misuse of drugs act (1971), Children and young person (protection from tobacco) Act 1991, Education and Inspections Act (2006), Children and Young Persons (sale of Tobacco etc) Order 2007. These legislations include:

- Having an up to date Drug education and Drug-related incidents policy consistent with DFE guidelines.
- Having an effective implementation process for the Drug education and Drug-related incidents policy with subsequent monitoring and evaluation strategies.
- Having an effective and developmental drug education programme in each key stage.
- For all young people identified as being vulnerable to receive the appropriate education, advice, information and support on substance misuse both in and out of schools.

We see drug education as a core component of an effective PSHE programme and a key activity within our Health Promoting School strategy.

**Statement of Policy on Drug Education,  
Substance use and misuse**

## **Cavendish Close Infant and Nursery School**

believes it has a duty to inform and educate young people on the consequences of drug use and misuse. The school takes a pro-active stance on this matter, believing that health education is a vital part of the Personal, Social and Health Education of every pupil.

Fundamental to our school's values and practice is the principle of sharing the responsibility for education of young people with parents, by keeping them informed and involved at all times. Effective communication and co-operation is essential to the successful implementation of this policy.

Whilst we acknowledge that the numbers of young people who use and misuse substances is rising, it is seen as important to recognise that the larger numbers of young people are choosing not to use or misuse substances. We will continue to support their differing needs.

- **The school condones neither the misuse of drugs and alcohol by members of the school, nor the illegal supply of these substances.**
- **The school is committed to the health and safety of its members and will take action to safeguard their well-being.**
- **The school acknowledges the importance of its pastoral role in the welfare of young people and, encouraged by the general ethos of the**

**school, will seek to support the particular needs of individual or groups of pupils.**

## **Definitions of drugs terms**

When we think of the words 'drugs' we often have images of illegal substances such as heroin, cocaine, ecstasy and cannabis. At **Cavendish Close Infant and Nursery School** we take a broader view of drugs - be they legal or illegal - including alcohol, tobacco and medicines or drugs such as 'poppers', which it is not illegal to be in possession of.

The definition below might be used:

The word 'drug' is used to include all mood-altering substances including alcohol, tobacco and medicines, illegal drugs and other substances such as solvents and 'poppers'.

'Drug taking' involves the consumption of any drug.

'Drug use' is drug taking through which harm may or may not occur.

'Drug misuse' is drug taking, which harms health or functioning. It may include physical or psychological dependence or be part of a wider spectrum of problematic or harmful behaviour.

## **Aims, organisation and content of the drug education programme.**

The DFE guidance 'Protecting Young People' (1999) states that:

'We do not wish to raise unrealistic expectations of what drug education can achieve. A pragmatic and realistic approach is needed by all - acknowledging that no conceivable approach will stamp out drug-taking altogether. However, there is a growing body of knowledge about the subject and we are beginning to understand the complexities and know more about what works. Although it is a complex area and there are many reasons involved in the decision to take drugs, it is becoming clearer that drug education, based on lessons from research, delivered in the proper context and in the appropriate way has the potential to reduce drug misuse or at least to delay the onset of experimentation'.

- Good quality drug education can impact on changes in specific drug using patterns and reduce the misuse of drugs and associated problems for young people. In other words drug education can

contribute towards decreased harm and increased safety for young people, their families and communities.

- Accurate and up to date information about drugs is an important component of drug education.
- Programmes need to go beyond information provision to include exploration of attitudes and values and the development of personal and social skills. Life skills approaches are likely to be most effective.
- Drug education is best addressed through a comprehensive and well-planned programme of personal, social and health education (PSHE).
- Teachers and other adults need to be well prepared for questions which may arise, linked to children's own experience of drugs.

## **Drug Education and educational aims**

At **Cavendish Close Infant and Nursery School** our practical definition of drug education is 'the acquisition of knowledge, understanding and skills and exploration of attitudes and values which will enable young people to make informed decisions about their own, and other people's, use of drugs'.

Our educational approach focuses on provision of accurate and balanced information. It accepts that there are different views about drug use and encourages young people to explore a range of views, to develop their own opinions and also to challenge stereotypes. In terms of skill development an educational approach helps young people develop a range of relevant personal and social skills so they can make their own, informed decisions about their own, and other people's, drug use.

We believe and support the following educational aims in respect of substance use and misuse:

- To enable pupils to make healthy, informed choices by increasing knowledge, challenging attitudes and developing and practising skills.
- To provide accurate information about substances.
- To outline the procedures to deal with drug related incidents.
- To have in place an informative drugs education programme and to increase understanding about the implications and possible consequences of use and misuse.

At **Cavendish Close Infant and Nursery School** these aims are fulfilled through:



- aspects of the pupils' experiences in the taught curriculum
- the informal curriculum and through opportunities for extra-curricular activities
- the taught curriculum mainly through PSHE, Science and English, but other opportunities to reinforce learning will occur in other parts of the teaching programme

The school actively co-operates with other agencies such as Community Police, Social Services, LEA (Pcas) and Health and Drug Agencies to deliver its commitment to Drug education and to deal with incidents of substance use and misuse. Visitors who support the school will be informed of the values held within this policy.

## **A Whole School Approach**

A whole school approach will be adopted to drug education that actively involves the whole school community. All groups who make up the school community have rights and responsibilities regarding drugs. In particular:

**The senior leadership team (SLT)** will endeavour to support the provision and development of drug education in line with this policy by providing leadership and adequate resourcing.

**The designated drug education co-ordinator** will maintain an overview of drug education provision and have overall responsibility for its development. This will include keeping up to date with developments and good practice, developing the provision to meet pupils' needs, providing support and resources for staff, arranging staff training, liaising with outside agencies and monitoring and evaluation.

### **Teaching staff**

Drug education is best led by teachers rather than outside experts. Teachers have an understanding of their pupils, develop a dialogue with them and are accessible on an ongoing basis. Teacher led drug education also avoids the situation whereby drugs are sensationalised and seen by pupils as something teachers cannot talk about.

Teachers may not have detailed knowledge of drugs. Whilst it is helpful if they have some knowledge about drugs, they do not need to be 'walking encyclopaedias' to successfully teach drug education. Drug education is not just about factual information and many teaching packages include activities which contain relevant drug information for use with pupils. Pupils may sometimes know more about certain drugs than their teachers but this can be put to good use in lessons. If teachers

need to know a specific piece of information, they can always find out later, possibly by involving pupils in research. More important than detailed factual information, is feeling confident, developing trust with pupils and having the teaching skills to allow pupils to explore and discuss the many complex issues involved.

All teachers are involved in the school's drug education provision. They teach drug education through the PSHE programme, through science and other curriculum areas. All teachers play an important pastoral role by offering support to pupils. Any teacher can be approached by a pupil who experiences a difficulty regarding drug education issues. Teachers will be consulted about the school's approach to drug education and aided in their work by provision of resources, background information, support and advice from experienced members of staff and access to appropriate training.

**Non-teaching staff** may be involved in a supportive role in some drug education lessons and also play an important, informal pastoral support role with pupils. They will have access to information about the drug education programme and be supported in their pastoral role.

**Governors** have responsibilities for school policies. They will be consulted about the drug education

provision and policy and have regular reports at Governor's meetings.

**Parents/carers** have a legal right to view this policy and to have information about the school's drug education provision. The school will seek and take account of parent/carer views and endeavour to adopt a partnership approach with parents/carers. This will periodically include information/education workshops for parents/carers and support for parents/carers to provide drug education for their own children. The school's approach to drug education will encourage dialogue between parents/carers and their children.

**The school nurse** may play a role in drug education both in terms of input into lessons and provision of pastoral support for pupils. The school will work in ongoing consultation and partnership with the school nurse.

**Pupils** have an entitlement to age and circumstance appropriate drug education and to pastoral support. They will be actively consulted about their drug education needs and their views will be central to developing the provision.

**Answering pupils' questions**

The school believes that pupils should have opportunities to have their genuine questions answered in a sensible and matter-of-fact manner. However, occasionally a pupil may ask a particularly explicit, difficult or embarrassing question in class. Teachers will use their skill and discretion to decide about whether to answer questions in class and, if so, how. They will establish clear parameters of what is appropriate and inappropriate in class by discussing ground rules with pupils and by taking an approach that encourages pupils to be mature and sensible.

If a teacher does not know the answer to a question they will acknowledge this and suggest that they and pupils research the answer to the question later. If a question is too explicit or inappropriate to answer in class at that moment, teachers will acknowledge it and attend to it later with the pupil who asked it. If a question is too personal teachers will remind pupils about the ground rules and if necessary point out appropriate sources of support. If a teacher is concerned that a pupil is at risk they will follow the school's child protection procedures.

## **Pastoral Support for Pupils who Experience Difficulties**

### **The nature of support available to pupils**

The school takes its role in the promotion of pupil welfare seriously. Staff endeavour to make themselves approachable and to provide caring and sensitive pastoral support for pupils in a number of ways. Staff may be approached for help on an individual basis. They offer a listening ear and, where appropriate, information and advice. The school nurse offers a health and support service to pupils. Where appropriate, pupils are referred to the school nurse and/or outside helping agencies. The school will keep up to date about the development of local services and national help lines for young people, promote their existence to pupils and endeavour to form working relationships with local agencies that are relevant to pupil needs.

### **Confidentiality and informing parents/carers**

School staff cannot promise absolute confidentiality if approached by a pupil for help. Staff must make this clear to pupils. Child protection procedures must be followed when any disclosures are made.

It is very rare for a pupil to request absolute confidentiality. If they do, in situations other than those involving child protection issues, staff must make a careful judgement about whether or not a third party needs to be informed. This judgement will be based upon:

- The seriousness of the situation and the degree of harm that the pupil may be experiencing.

- The pupil's age, maturity and competence to make their own decisions.

Where it is clear that a pupil would benefit from the involvement of a third party, staff should seek the consent of the pupil to do so. If appropriate, staff might inform the third party together with the pupil. Unless clearly inappropriate, pupils will always be encouraged to talk to their parent/carer.

### **Policy Change History Sheet**

Policy title: Drug Education Policy		
Review Date	Section	Summary of change
20/10/11		No change
2/10/12		No change
10/10/13		No change
8/1/15		Aims/up to date government legislation
7/10/15		No change
5/10/16		No change

