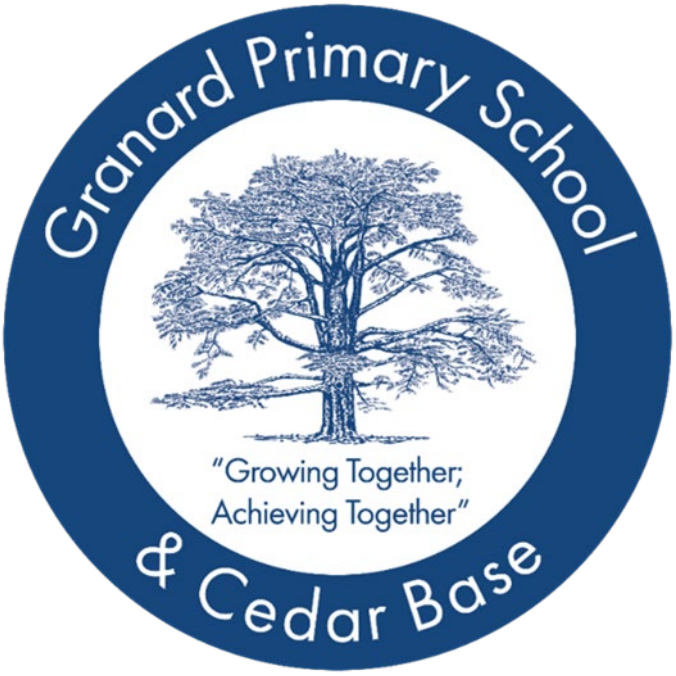
Granard Primary School



Drugs Education Policy

March 2025

Review Due: March 2028

Introduction

The purpose of this Policy is to show how it reflects the whole school ethos and the whole school approach to health.

Research has shown that by the age of 11 many primary school children have extensive knowledge of the world of drugs. For some, this knowledge may be inaccurate and incomplete, for others it will develop through personal experience.

Research also shows that up to 50% of children have tried an illegal drug by the age of 16. The figures also suggest that the first age of experimentation is decreasing and that children of primary age are exposed to opportunities to try both legal and illegal drugs. Schools had an important role both in reducing the misuse of drugs and minimising their health risks.

In the Government document 'Tackling Drugs to Build a Better Britain' one of the aims is: *To Help Young People Resist Drug Misuse in Order to Achieve Their Full Potential in Society.*

Young people, and those responsible for them, need to be prepared both to resist drugs and, as necessary, to handle drug related problems. Information, skills and support need to be provided in ways which are sensitive to age and circumstances, and particular efforts need to be made to reach and help those groups at high risk of developing very serious problems. Prevention should start early, with broad life-skills approaches at primary school, and built on over time with appropriate programmes for young people as they grow older via youth work, peer approaches, training and wider community support. The aim is for approaches to be better integrated nationally and locally.

Aims

Granard believes that the essential aim of drugs education should be to give children the facts (appropriate to their age and level of understanding), to emphasise the benefits of a healthy lifestyle and to give children and young people the knowledge and skills to make informed and responsible choices now and in later life.

Drugs education should contribute to:

- increasing the safety of communities from drug related crime
- reducing the acceptability and availability of drugs to young people
- reducing the health risks and other damage related to drug misuse

At Granard we believe that drugs education should provide:

- accurate information presented simply and clearly
- informative and accessible reading materials
- access to other adults besides teachers, providing they are expert and credible
- stimulating and enjoyable classroom tasks
- opportunities to develop their knowledge and understanding in a challenging and safe atmosphere where they feel secure enough to play a full and active part

We aim to provide a consistency of approach throughout the school and to encourage children to develop knowledge and skills to make informed and responsible choices now and in later life and to stress the benefits of a healthy lifestyle. We encourage children to develop positive attitudes and values and to ensure that Health and Safety procedures are followed when dealing with incidents/equipment related to drugs and drug use.

Welfare of children is paramount and procedures and policies are designed to reflect this commitment.

Objectives

We have prioritised the following objectives:

- To promote children's self-esteem and confidence.
- To give accurate information about drugs.
- To consider and/or challenge attitudes children may have regarding drug use and misuse.
- To provide opportunities for children to be equipped with and practise the skills they need to avoid the misuse of drugs.
- To help children to distinguish between different drugs, consider their use/misuse, benefits and harm.
- To minimise the harm from drugs to children.

Definition

The definition of drugs given by the United Nations Office on Drugs and Crime states:
"A substance people take to change the way they feel, think or behave".

This refers to all drugs whether:

- Illegal drugs (those controlled by the Misuse of Drugs Act 1971) such as ecstasy, cannabis, crack/ cocaine, heroin and LSD, ketamine, GHB, anabolic steroids.
- Drugs that are legal to use but are covered by some legislation such as selling to under 18-year-olds including alcohol, tobacco, shisha and volatile substances (solvents, aerosols, petrol & butane).
- Drugs that are legal to use and buy, such as poppers.
- Over the counter and prescription medicines e.g. paracetamol.
- Prescribed medicines.
- Electronic cigarettes.
- Other drugs such as legal highs/Novel Psychoactive Substances that are illegal to sell for human consumption and e-cigarettes that currently have no restrictions (although laws about selling to under 18s and use in public places are to be put in place).

Definitions of other key words

The term 'drug', throughout this document, includes medicines as well as tobacco, alcohol, illegal drugs, solvents and glues. We recognise the importance of exploring the beneficial use of drugs as medicines as well as the harmful effects of drug misuse.

Drug use describes any drug taking. Any drug use can potentially lead to harm, including through intoxication, breach of the law or school rules, or future health problems.

Drug misuse is drug taking which leads to social, psychological, physical or legal problems through intoxication, regular excessive consumption and/or dependence.

The Role of the Headteacher

It is the responsibility of the Headteacher to ensure that staff and parents are informed about this Drugs Education Policy, and that the policy is implemented effectively. It is also the Headteacher's role to ensure that staff are given sufficient training, so that they can teach effectively and handle any difficult issues with sensitivity.

The Headteacher will liaise with external agencies regarding the school's drugs education programme and ensure that all adults who work with children on these issues are aware of the school policy and work within this framework.

The Headteacher will monitor the policy and report to governors, when requested, on the effectiveness of the policy.

The Role of Governors
The governors will support the Headteacher in following these guidelines.

The Role of Parents
The school is well aware that the primary role in children's drugs education lies with parents. We wish to build a positive and supporting relationship with the parents of children at our school through mutual understanding, trust and cooperation.

In promoting this objective, we will:
- inform parents about the school Drugs Education Policy and practice
- invite parents to view any materials used to teach drugs education in our school
- answer any questions parents may have about the drugs education their child receives in school
- take seriously any issues which parents raise with teachers or governors about this policy or the arrangements for drugs education in the school
- inform parents about the best practice known with regard to drugs education so that the parents can support the key messages being given to children at school

Resources
Drugs education is part of the planned Personal, Social and Health Education (PSHE) Curriculum and is also delivered through the teaching of Science. The PSHE framework outlines the areas to be covered each year. The NC guidelines for science require that children are taught:
- At KS1 about the role or drugs and medicines
- At KS2 that tobacco, alcohol and other drugs can have harmful effects

Cross-curricular Links
Drugs education has many cross-curricular links, with science making a particular contribution. However, the development of life skills is a theme throughout the curriculum, within the programme for PSHE, and enshrined in the values, which are embodied in the schools' ethos. There are links to other subjects, such as physical education, and aspects of school life, notably the spiritual, moral, social and cultural aspects of the curriculum.

Teaching
Each child will have access to drugs education, regardless of their gender, ability or race. Access will be matched to the particular needs or concerns of the class.

Our approach to drugs education is one which children are given information in the belief that increased knowledge about drugs and the risks will empower children to make informed and safe decisions. We approach this in a sensitive manner appropriate to the age and experiences of the children concerned.

Teaching is:
- well resourced
- reflects the needs and experiences of children
- uses a range of teaching methods including group work, discussions, videos and outside speakers
- reinforces messages about healthy lifestyles
- flexible and relevant
- in the context of a wider PSHE programme
- interesting and stimulating
- informed



Outside Visitors

If outside speakers are used in any aspect of the Drugs Education programme, their contribution will be properly planned and they will be asked to adhere to our school Drugs Education Policy. Teachers will be present and involved in all sessions and will evaluate the work afterwards. The teacher has overall responsibility for the session and the work planned.

Training, Monitoring and Evaluation

Teaching and learning is monitored in relation to this agreed policy and the school's Teaching and Learning Policy. The PSHE Leader has responsibility for monitoring drug education teaching and learning in conjunction with the Headteacher.

Managing Drug Related Incidents

Incidents are managed in the context of the school's commitment to the:

- safety and welfare of all children and staff
- welfare of individuals deemed to be at risk
- law concerning drugs

The Headteacher retains the responsibility for deciding how to respond to particular incidents in conjunction with the Drugs Education Leader. This will take account of the individual concerned and whether they are a child, parent or member of staff.

The school's policy is that no individuals should be under the influence of drugs while on the school premises unless a doctor's note indicates that this does not affect the individual's capacity to perform their duties, take care of children in their charge, or in the case of children, take part in lessons.

A drug related incident may include any of the following:

- finding drugs, or related items on school premises
- possession of drugs by an individual on school premises
- use of drugs by an individual on school premises
- supply of drugs on school premises
- individuals disclosing information about their drug use
- rumours or reports of drug possession supply or drug use

Staff should not search a child's property or person but should try to persuade the child to voluntarily produce the substance by asking them to turn out pockets or bags. If it is absolutely necessary to search a child, a police officer will be required and the parents informed as soon as possible.

Young children who are deemed to be at risk will be treated in relation to the school's policy on Child Protection.

All incidents are recorded on CPOMS. Each incident will be dealt with on an individual basis.

All members of the school community are aware of these procedures and the implications for individuals.

Appendices 1, 2, 3 and 4 outline the procedures to be followed in individual circumstances.

Monitoring, Evaluating and Reviewing:

- The SLT are involved in monitoring and evaluation.
- There is ongoing monitoring and evaluation of the programme, teaching methodologies and learning outcomes to ensure that needs are met.
- Drugs education is reviewed in line with current Government guidelines.

Reviewed: March 2025

Review Due: March 2028

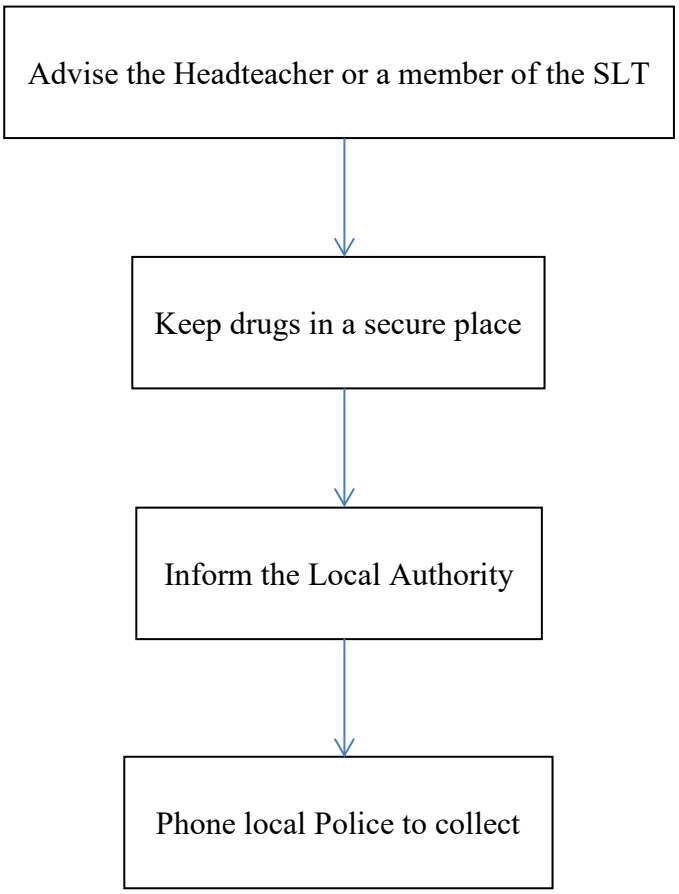
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APPENDIX 1

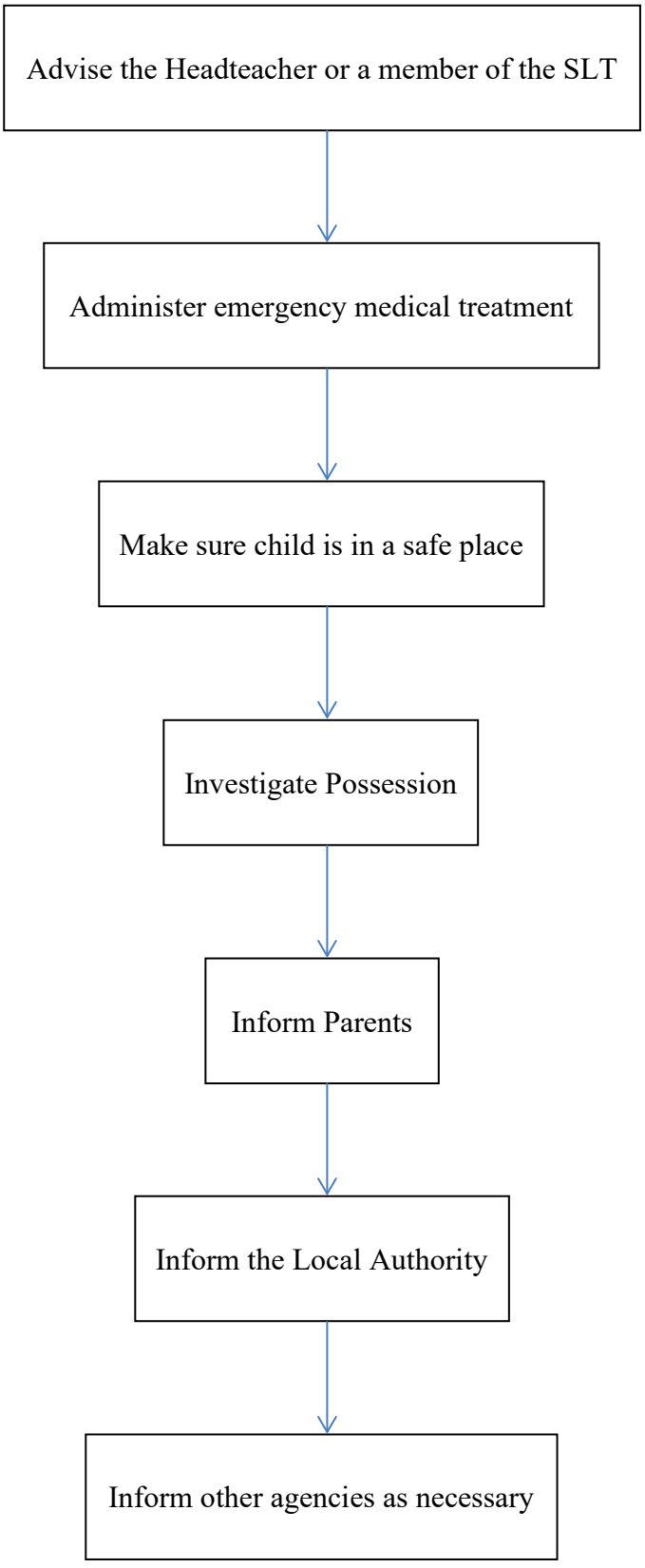
Illegal Drugs Found on School Premises

Drugs Awareness: Do not touch, sniff or handle



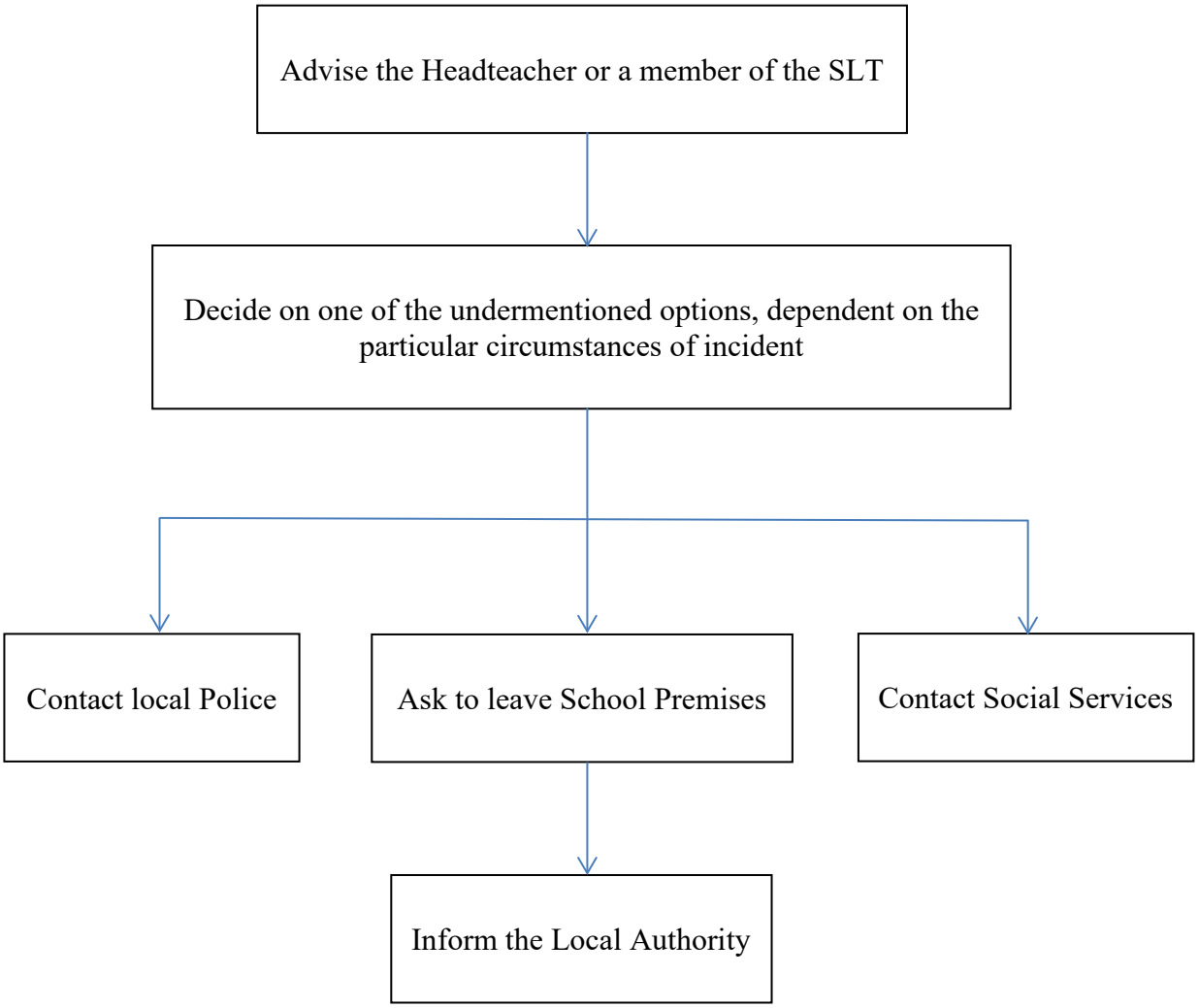
APPENDIX 2

Children under the Influence of Drugs/Alcohol



APPENDIX 3

Parents/Carers under the Influence of Drugs/Alcohol on School Premises



APPENDIX 4

Staff/Governors/Volunteers under the Influence of Drugs/Alcohol on School Premises

