

# THE LATYMER SCHOOL

Founded 1624



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# POLICY ON DRUGS

WITH APPENDICES 1, 2, AND 3 ATTACHED

Approved by Governors June 2012

June 2012

1.0 The school believes that drug misuse is a major threat to individuals, families and the wider community. There is very strong evidence of the harmful effects of certain illegal drugs upon the health and social lives of the individuals who use them.

2.0 The school recognises that there is a debate in society at large about the harmful effects of so-called soft drugs, especially cannabis, and that there are influential voices which recommend the legalisation of certain categories of controlled drug. We recognise that our pupils may well be influenced and persuaded by these voices.

3.0 This drugs policy is informed by the law on drugs. The Misuse of Drugs Act 1971 states that it is "an offence knowingly to permit the production or supply of any controlled drug on the premises or the preparation or smoking of cannabis or opium on the premises" (**See appendix 3**). Therefore it is the school's policy to report all incidents involving controlled substances to the police. The school will also take whatever action is required to ensure the safety of pupils and the well-being of the school community (**See appendix 2**). Individuals in possession of prohibited substances must, however, be subject to the normal processes of law.

4.0 The school regards the use of drugs in school as a child protection issue and treats it with the utmost seriousness. Pupils involved in drugs may have a harmful influence upon some of the more vulnerable pupils. The school is "in loco parentis" and therefore has the duty to take whatever measures it can within its power to protect pupils in its care from the use of drugs, from being offered or sold drugs and from the example of those who use drugs.

**5.0 The school's policy, therefore, is that no controlled drugs are allowed on the school premises at any time and that any pupil who uses, is in possession of, supplies or offers controlled drugs on school premises or in the vicinity of the school or on a school trip will be subject to very serious disciplinary action up to and including permanent exclusion .**

6.0 Drugs education, which shows young people how to resist offers and how to make responsible choices for themselves, is an essential component of the school's curriculum. Education about drugs will take place through the school's PSHE programme in KS3, in Science (Biology) classes in Years 10 and 11 and in non-examination RE classes in KS4.

6.1 Teaching schemes have 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 increase understanding about the implications and possible consequences of use and misuse
- to widen understanding about related health and social issues, e.g. crime, HIV and AIDS
- to seek to minimise the risks that users and potential users face
- to enable young people to identify sources of appropriate personal support.

6.2 The KS3 programme will deal with the following aspects of Drugs Education:

- school rules and procedures about drugs
- information about legal and illegal drugs, their effects and associated health risks. Different categories of drugs
- attitudes and beliefs about drugs and drug users
- identifying and assessing risks to health
- decision making and assertiveness in drug related situations

6.3 The assembly programme in KS4 will deal with the issues in 6.2.  
The pastoral and assembly programme in KS5 will deal with the issues in 6.2.

7.0 The school will also endeavour to help parents to come to a greater understanding of the problems of drug abuse among the young by providing links to sources of information about drugs and young people in the Parents' Room Fronter pages.

8.0 In dealing with drug related incidents, the Headmaster's over-riding concern will be the protection of pupils. Pupils who have offered controlled substances to other pupils on the school premises or in the vicinity of the school's premises whether or not the proposed exchange has been for payment, save in the most exceptional circumstances, will be **permanently excluded from school**. A pupil who has been involved in the use or possession of controlled substances within or in the vicinity of the school premises invariably will not be permitted to remain at school unless the Headmaster believes that the pupil no longer represents a risk to other pupils. Any decision not to allow a pupil to remain at school is subject to appeal firstly to the disciplinary panel of the governors and secondly to an independent panel.

8.1 Pupils are in the care and control of their parents at the times when they are not at school or on a school trip. It is therefore the responsibility of parents to ensure as far as they are able that their children are protected from exposure to drugs at these times. A child's use of controlled drugs while not in the care of the school is not therefore regarded by the school as a disciplinary offence.

8.2 A pupil who supplies or offers controlled drugs to pupils of the school outside school **will** be subject to the disciplinary sanctions of the school. The school has a legitimate interest in the activities of students outside school where their actions may have a deleterious effect upon other students of the school inside school. The school will consider that a student who offers or supplies drugs to other pupils of the school outside the school may represent a real threat to the welfare of other pupils of the school. The sanctions applied by this school in these circumstances may include permanent exclusion.

8.3 Where a student has received a conviction or a formal police caution for being involved in the supply of drugs, the school reserves the right to take whatever actions it considers necessary to protect students of the school.

9.0 Where a student has been identified by the staff as having experimented with drugs or as being at risk of doing so, he or she will be offered appropriate counselling and support within the school's general arrangements for the pastoral care of its students.

9.1 Any pupil may at any time request an appointment with the school counsellor to discuss a problem with drugs (or any other problem). All discussions between a pupil and counsellor are confidential unless child protection concerns are disclosed.

9.2 Where a pupil has been found to be at fault with regard to a drug related incident at school and admits his/her part in it, the school will seek to support him/her by providing access to the counselling services which are available and his or her parents will be informed.

10 The school encourages the co-operation of parents in combating drugs and their illicit use; by working together we can best ensure the welfare of pupils.

11 The school is mindful of its responsibilities in relation to the storage and handling of medication. (see appendix 1).

## APPENDIX ONE

### STORAGE AND HANDLING OF MEDICATION

Taken from "Supporting Pupils with Medical Needs"- London Borough of Enfield Education Group Policy & Guidelines - January 1998)

Particular attention must be paid to the safe storage, handling and disposal of medicine and health and safety training for staff should include guidance in appropriate procedures. Some medicines may be harmful to anyone for whom *they are* not prescribed. In these cases there is a duty to ensure that the risks to the health of others are properly controlled. This duty derives from the Control of Substances Hazardous to Health Regulations 1994 (COSHH).

The school will not store large volumes of medication. Wherever possible and appropriate parents or guardians or the pupil should be asked to bring in the required dose each day. Medicine stored must be clearly labelled with the pupil's name, the name and dose of the drug and the frequency of administration. If a pupil needs two or more prescribed medicines each should be in a separate container and labelled as above. **Medicines should never be transferred from their original containers.**

Pupils with medical needs should know where their medicines are stored and who holds the key. Staff should also know this. However, some medication must be readily available in an emergency, e.g. Asthma inhalers, and should not be locked away. Pupils) will be allowed to carry their own inhalers and this approach, where appropriate, is encouraged by the LEA). The School nurse will be aware of the "Asthma Protocol" devised by school nurses working within the local Health Authority and will be able to support and assist in any relevant development within school. The school Welfare Assistants may need to make special access arrangements for emergency medication. However, it is important to try to ensure that medicines are only accessible to those for whom *they* are prescribed. If a pupil is allowed to carry and administer their own medication consideration needs to be taken about the safety of other pupils. A clear agreement must be made with the pupil and a parental consent form completed.

**Administration of Epi-Pens:** People who suffer from anaphylactic reactions may need emergency adrenaline treatment. Staff who volunteer to administer this treatment will be given training. It is important to note that this treatment is unlikely to be harmful if given too soon or in multiple doses.

**Storage and disposal:** Some medicines may need to be refrigerated. They can be kept in a refrigerator containing food but should be kept in an airtight container, clearly labelled. Access to the refrigerator should be restricted where possible. School staff should not dispose of medicines but it should be established practice that parents or guardians collect any unused medication regularly, e.g. at the end of each term and are also responsible for disposal of date expired medicines.

**Hygiene and infection precautions** would be included in training given to staff volunteering to administer medication. Staff should have access to protective disposable gloves and receive guidance on care when dealing with spillage of blood and other body fluids and disposing of dressings or equipment.

**Non-Prescription Medication:** School staff should generally not give non prescribed medication, e.g. analgesics including aspirin and paracetamol, to pupils outside normal procedures and agreements which would include the written consent of parents or guardians and records of medication given. *They* may not know whether the pupil has taken a previous dose or whether the medication may react with other medication being taken. **A pupil under 12 should never be given aspirin, unless prescribed by a doctor.** If a pupil suffers regularly from acute pain, such as migraine or menstrual pain, subject to school agreement, parents or guardians should authorise and supply appropriate pain-killers for their child's use, with written instructions about when the pupil should take the medication. A member of staff should supervise the pupil taking the medication and notify the parents or guardians, in writing, on the day the painkillers are taken.

## APPENDIX TWO

### SOME KEY PRINCIPLES WHEN PURSUING A SUBSTANCE RELATED INCIDENT

- Follow the school's policy on searching and confiscation (see Behaviour Policy).
- Take care not to infringe privacy any more than is necessary to safeguard the welfare of the child.
- Listen to the concerns of children and their families, and take care to learn about their understanding, fears and wishes before arriving at your explanations and plans.
- Learn about and consider children within their family relationships and communities, including their cultural and religious contexts, and their place within their own families.
- Ensure children, families and other carers know their responsibilities and rights, including any right to services, and their right to refuse services, and any consequences of doing so.
- Use plain, jargon-free language appropriate to the age and culture of each person. Explain unavoidable technical and professional terms. Consider use of an interpreter.
- Allow children and families' time to take in and understand concerns and processes. A balance needs to be found between appropriate speed and the needs of people who may need extra time in which to communicate.
- Take care to distinguish between personal feelings, values, prejudices and beliefs, and professional roles and responsibilities. Do not assume things, or allow stereotypes or prejudices to influence how you deal with a young person involved in a suspected drug incident.

Restricted medicines or prescription-only medicines, pharmacy medicines, which can be sold without a prescription but only by a pharmacist (also called over-the-counter medicines) general sales medicines, which can be sold without a prescription by any shop.

The school will be mindful of the relevant legislation regarding alcohol, tobacco and volatile substances.

### **Responsibility for children**

School staff have a legal duty of care towards pupils in their care. This is interpreted in case law as the duty to act as a careful parent would. This duty of care is interpreted as a duty to exercise adequate supervision, which will depend on the maturity and age of the pupils involved, whether they are affected by a disability, and the precise circumstances. Supervision could mean giving adequate advice and instructions rather than constantly watching a pupil, although some activities, for example, while on school trips, may require greater supervision.

## **APPENDIX THREE**

### **Offences under the Misuse of Drugs Act**

Possession, possession with intent to supply another person a controlled drug, supplying another person a controlled drug. The Act does not differentiate between supplying/giving drugs to friends and supplying for profit. Supplying drug paraphernalia, production, cultivation or manufacture of controlled drugs, allowing premises you occupy or manage to be used for the supply, production or cultivation of a controlled drug, also, to allow premises to be used for the smoking of cannabis or opium and the preparation of opium.

### **Changes to the Law on Cannabis**

Cannabis (resin and herb) was reclassified from a Class C to a Class B drug in 2009. It is illegal to possess, give away or sell. Possession can result in up to five years in jail. Supplying someone else, including friends, can result in up to fourteen years in jail and an unlimited fine.

The police will always take action if they find someone in possession of cannabis.

Dealing is a very serious offence. In the eyes of the law, this includes giving drugs to friends.

People who grow cannabis in their homes or carry large amounts on them also risk being charged with intent to supply.