

BISHOP WORDSWORTH'S SCHOOL  
**SUBSTANCE USE AND MISUSE – POLICY**

**Definitions:**

1. *'Parent(s)' includes guardian(s) or any person who has parental responsibility for the pupil or who has care of the pupil.*
2. *Is to', 'are to' and 'must' are obligatory. 'Should' is not obligatory but is best practice and is to be adhered to unless non-compliance can be justified.*

1. **General.** This Policy should be read in conjunction with the Bishop Wordsworth's School's (the School's) Personal, Social, Health and Sex Education Policy. In this Policy, the word 'substance' is used to represent alcohol, drugs or solvents which may be used for their physiological or psychological effect. The word 'drugs' does not refer to pharmaceutical products which may be legitimately obtained from doctors or pharmacists by prescription or by purchase. However, the inappropriate use of prescription or proprietary drugs, and the use of so-called 'legal highs' (new psychoactive substances (NPS)) or the use of another individual's prescription drugs would constitute a concern under the terms of this Policy. Also, for the purposes of this Policy, the terms 'drug misuse' and 'drug-related problem' include any substance misuse and any substance-related problem including alcohol.

**POLICY**

2. The Governors and Staff of the School are opposed to the misuse of substances and to the illegal use and supply of such substances by members of the School inside or outside the School environment.
3. Governors and Staff are committed to the health and safety of all members of the School community and are to take appropriate action to secure their well-being.
4. The School is committed to the prevention of substance misuse through education and support.

**PROCEDURE**

5. The School's Personal, Social, Health and Sex Education Programme (see Annexes D and E) is to be used to inform and educate pupils about the consequences of substance use and misuse.
6. It is necessary for all staff to be vigilant concerning substance misuse.
7. Effective communication and co-operation with parents are essential to the successful implementation of this policy.

**MONITORING AND EVALUATION**

8. Heads of School, Heads of Year and the School's PSHE Co-ordinator are to monitor the effectiveness of the Personal, Social, Health and Sex Education Programme, the recorded behaviour of pupils, and such other information about pupils that is relevant, and report their findings to the Headmaster.
9. Governors will review this Policy annually.

10. This Policy was agreed by Governors on 23 May 1995, and reviewed and readopted on: (dates in parentheses indicate no change) 21.5.96, 18.2.97, 12.5.98, 6.7.99, 9.5.00, 8.5.01, 7.5.02, 1.7.03, 3.5.05, 27.06.06, 10.07.07, (16.10.08), 2.12.09, 24.11.10, 17.11.11, 6.12.12, (21.11.13), 18.11.14, 10.11.15, 17.11.16, 02.11.17, 08.11.18, 26.11.19

**Annexes:**

- A. The School's Responsibility for Drug Education – Guidelines.
- B. Common Drugs and Other Substances of Use and Misuse.
- C. Procedure following a drugs-related incident.
- D. Issues covered in drugs element of PSHE and PE schemes of work at Key Stage 3.
- E. Issues covered in drugs element of PSHE and PE schemes of work at Key Stage 4.

## **THE SCHOOL'S RESPONSIBILITY FOR DRUG EDUCATION - GUIDELINES**

1. The School recognises its responsibility to offer balanced education to all its pupils in relation to all forms of drug use in order to influence pupils in making personal decisions about drugs. Bringing or using drugs on school premises is unacceptable and is a disciplinary matter.

### **PUPILS**

2. Are to have access to drug information and education at all key stages and be aware of government sponsored web-sites such as <http://www.talktofrank.com> and local drugs and alcohol services for young people provided by Wiltshire Council such as Motiv8 (see Wiltshire Council website [www.wiltshire.gov.uk](http://www.wiltshire.gov.uk)).

3. Should feel able to talk in confidence to a member of staff about a drug related problem without fear of reprimand. They should also understand the limits of confidentiality that operate within the institution. Be able to support and know who to turn to if a friend is experiencing a problem.

4. Should understand that substances (drugs, alcohol, cigarettes, e-cigarettes etc.) are not to be brought to, sold, passed on or obtained on school premises or on holidays, field trips and visits organised by the School.

5. Should understand that deliberately breaking school rules is likely to result in punishment.

6. Should understand the difference between voluntarily confiding a drug related problem and being found deliberately breaking school rules on drugs.

7. Must report immediately to the School office in any case of feeling unwell in connection with drug usage.

8. Should understand the consequences of having a criminal record as a result of drug related activity.

### **STAFF**

9. Are to have access to information, training and expertise concerning drugs and drug use including awareness of government sponsored web sites such as <http://www.talktofrank.com/> Should be equipped to organise and deliver drug education within PSHE and other areas of the curriculum.

10. Are to be aware of the need for early detection of drugs misuse. If a young person's drug misuse is identified at an early stage, it is easier for action to be taken to prevent his or her further misuse of drugs. Therefore, teachers need to be vigilant, particularly when they are in charge of activities which take groups of young people away from the school premises. Research has shown that first experiments with drugs by young people almost always involve a substance provided by a friend.

11. Are to counsel in privacy any pupil who confides a drug related problem and regard this information as confidential except where it is considered that the young person is at particular risk,

eg an issue of child protection. The limits of confidentiality are to be made known at the beginning of any counselling. Are not to reprimand or punish a pupil in such a situation.

12. Are to understand that the rules for pupils apply to teachers with the exception of alcohol which may be consumed in certain restricted areas or situations in the absence of pupils.

13. As employees, expect disciplinary action to be taken if they contravene the code of conduct concerning drugs.

14. Should know when to adopt a counselling or disciplinary approach towards pupils.

15. Should know the procedures concerning illness linked to known or suspected drug usage.

## **PARENTS**

16. Should be aware of what information is given to pupils and have access to it (including the issues outlined in Annexes D and E as well as useful websites such as <http://www.talktofrank.com/> and local drugs and alcohol services for young people provided by Wiltshire Council such as Motiv8 (see Wiltshire Council website [www.wiltshire.gov.uk](http://www.wiltshire.gov.uk)))

17. Should endeavour to maintain an atmosphere within which a child would feel able to confide a drug related problem. Should feel able to contact school about a home problem.

18. Should be aware of the school's rules concerning drugs. Should give their own guidance concerning drugs.

19. Should expect to be contacted if their child is caught breaking school rules on drugs.

20. Should understand that punishment is likely to be a school matter.

21. Should expect further action to take place after consultation with appropriate agencies.

## **GOVERNORS**

22. Are to have access to drug information and training as required.

23. Are to encourage a supportive atmosphere within the institution where young people feel able to confide a drug related problem.

24. Should be aware of their legal responsibilities over drugs on the premises. In consultation with the school community, contribute to the development of an 'in house' policy.

**COMMON DRUGS AND OTHER SUBSTANCES OF USE AND MISUSE**

Drugs may be of a wide variety and can be taken in many different ways (not only swallowed as tablets and drunk as liquids, but smoked, sniffed, snorted, inhaled, vaped, chewed, injected and absorbed through the skin via patches).

A full and up-to-date list of drugs can be found at <http://www.talktofrank.com/>

**PROCEDURE FOLLOWING A DRUGS-RELATED INCIDENT**

1. A member of staff who discovers evidence of substance misuse, or who suspects it may be taking place, must report his/her findings to the appropriate Head of School/ Year.
2. The Headmaster must be informed of any actual substance misuse as soon as possible.
3. When any substance misuse is discovered, the pupil(s) concerned must be taken immediately to the appropriate Head of School/ Year together with any drugs, alcohol or other illegal substances that have been recovered.
4. If a search is to be conducted, it is recommended that the police should be invited into School to conduct it. Any substance(s) recovered should be sealed in a suitable labelled container and placed in the custody of the police. In the event of the discovery of any equipment associated with substance use, especially needles and syringes, pupils must be prevented from handling it. Such materials must be packed in a secure and rigid container and taken to the Headmaster for disposal.
5. The names of any witnesses must be recorded and written statements taken from all teachers and pupils involved, as appropriate. At this stage, a decision should be taken whether or not formally to involve the police in the investigation.
6. The Head of School/ Year should write a report detailing date, time and pupils involved, together with his findings, and give it to the Headmaster.
7. Following such an incident, the Head of School/ Year or the Headmaster is to inform the police, (if not already involved) and parents of pupils involved at the earliest opportunity.
8. Any disciplinary action which follows a substance related incident is to be in accordance with the School's discipline procedure.
9. The Headmaster is to inform the Chairman of Governors and the Chairman of the Governors' Discipline Committee, as appropriate.
10. The Headmaster is to liaise with the media should this be necessary.

**ISSUES COVERED IN DRUGS ELEMENT OF PSHE SCHEMES OF WORK AT KEY STAGE 3**

**KNOWLEDGE:**

1. School rules relating to medicines, alcohol, tobacco, e-cigarettes, solvents and illegal drugs and responses to drug related incidents.
2. Information about legal drugs (including prescribed and over-the-counter medicines) and illegal drugs and so-called 'legal highs', their effects and associated health risks.
3. Scientific terminology including the following words; use, misuse, abuse, addiction, tolerance, dependence, overdose, withdrawal and adulteration.
4. Different categories of drugs - including stimulants, depressants, analgesics and hallucinogens.
5. The law relating to drugs.
6. The misuse of drugs in sport.
7. The effects of different levels of intake of alcohol.

**SKILLS**

8. Identifying risks to health.
9. Communicating with peers, parents and professionals.
10. Decision-making and assertiveness in situations relating to drug misuse.
11. Giving and securing help if needed (for example, placing someone in the 'recovery position').

**ATTITUDES**

12. Attitudes and beliefs about drugs and drug users among different groups in society.
13. Impact of the Media and advertising on young people's thinking.
14. Attitudes towards drugs and laws relating to drugs.
15. Recognition of oneself as a role model and acceptance of responsibility for one's actions.
16. Taking responsibility for one's own, and other people's safety.

## **ISSUES COVERED IN DRUGS ELEMENT OF PSHE SCHEMES OF WORK AT KEY STAGE 4**

### **KNOWLEDGE**

1. School rules relating to medicines, alcohol, tobacco, e-cigarettes, so-called 'legal highs' and illegal drugs and responses to drug related incidents.
2. Information about drugs including their legal status, effects and appearance.
3. Personal, social, financial, biological and psychological effects of drug misuse.
4. Patterns of drug misuse locally and nationally and the impact on the community and wider society.
5. Dangers associated with particular drugs, mixing of drugs, and specific environments and moods.
6. Drug policy in this country, including education, prevention, policing and legal aspects, penalties, treatment and rehabilitation.
7. Legal responsibilities and rights.
8. The service provided by local national advice and support agencies.

### **SKILLS**

9. Identifying and assessing risks.
10. Communicating with peers, parents and professionals.
11. Decision-making and assertiveness in situations relating to drug use.
12. Managing conflict and aggressive behaviour.
13. Communicating drug advice to other young people

### **ATTITUDES**

14. Social and cultural influences on young people.
15. Attitudes towards drugs, drug users and misusers and laws relating to drug , including licensing and retailing laws.
16. Individuals' responsibility for their own actions.