

DRUGS POLICY

St Joseph's High School

NAME:	ROLE:
M Millar	Principal
S Murray	Designated Teacher
Policy reviewed	OCTOBER 2024

1. Introduction and Rationale

St. Joseph's High School is committed to providing a safe, caring environment which promotes the protection and safeguarding of each individual child. To maintain an environment where students flourish, we must ensure that we provide a safe, nurturing space where students are protected from harmful substances. With that in mind one of the key aims of the School's Drugs Policy is to keep all our students safe.

It is increasingly important that we equip our students, through drugs education, to make informed and responsible decisions to help them cope with living in a society where drug availability, use and variety has increased significantly. We accept our school has a key role to play in ensuring our young people understand the risks involved and have the confidence, knowledge, and skills to avoid drugs. It is our duty to make a major contribution to discourage drug misuse, encourage positive attitudes, increase pupil self-esteem, and promote healthy lifestyles.

According to Drugs: Guidance for Schools in Northern Ireland (CCEA, Revised Edition 2015), *"In today's society, most people will be exposed to and/or use some sort of drug at some time in their lives. Substance misuse affects all communities in Northern Ireland, crossing gender, cultural and social boundaries. No school, parent or carer can afford to be complacent or think that children and young people are not at risk. Research continues to show that by post-primary school age a significant number of young people are engaging with substances such as alcohol, cigarettes, including electronic cigarettes or solvents and/or have misused prescribed medicines or other substances."* This policy reflects the guidance and procedures set out in Drugs: Guidance for Schools in Northern Ireland (CCEA, Revised Edition 2015) and the DE Guidance and Circulars listed. It should be considered with other school policies.

2 School Ethos

"Every Child, Every Chance, Every Class, Every Day".

St. Joseph's cares for young people in a way that encourages them to develop to their full potential within a supportive Christian community. We seek to prepare our students to play an active and responsible role in society, and to use their talents for the service of others.

In St Joseph's High School, we provide a high-quality education where pupils are encouraged to develop a personal ethos of self-improvement in a safe, secure, and supportive environment. Pastoral Care permeates all aspects of school life and is complementary to the academic work of the school. Pastoral Care is the ethos created so that an atmosphere of care exists in the school community.

As a Catholic fully inclusive school, we work together to engender in our pupils' positive attitudes and behaviours based on respect, integrity, compassion, inclusion, and excellence.

Our school aims are expanded with a pastoral emphasis and the following expansions are reflected in this policy:

- To encourage pupils to adopt a healthy and safe lifestyle;
- To encourage a sense of personal responsibility for their own learning and actions;
- To assist pupils to develop the skills to make healthy lifestyle choices, appreciate life and respect the world in which they live in;
- To help prepare pupils to meet the demands and challenges of adult and working life.

3. Designated Teacher for Drugs

The Designated Teacher has responsibility for overseeing and monitoring this policy and for coordinating the school's procedures for handling suspected drug-related incidents. The Health Education Co-ordinator assists with the monitoring and reviewing of this policy.

4. Definitions

Saint Joseph's defines;

Drug and Substance: as any product that, when taken, has the effect of altering the way the body works or how a person behaves, feels, sees, or thinks.

Drug Use: refers to taking a drug; there is no value judgement, although all drug use has an element of risk.

Drug misuse: refers to legal, illegal, or illicit and/or non-medical use of a drug or alcohol, which leads a person to experience social, psychological, physical, or legal problems related to intoxication or regular excessive consumption and/or dependence. Drug misuse is therefore taking drugs, including prescribed drugs and NPS, that cause harm to the individual, their significant others, or the wider community.

As well as everyday products such as tea and coffee, substances include;

- over-the-counter medicines such as paracetamol and cough medicine;
- prescribed drugs, such as antibiotics, painkillers, antidepressants, antipsychotics, inhalers, and stimulants such as Ritalin;
- volatile substances such as correcting fluids or thinners, gas lighter fuel, aerosols, glues and petrol;
- controlled drugs such as cannabis, LSD, ecstasy, amphetamine sulphate (speed), magic mushrooms, heroin and cocaine;
- new psychoactive substances (NPS), formerly known as legal highs*, which contain one or more chemical substances that produce similar effects to illegal drugs;

• other substances such as amyl or butyl nitrite (known as poppers) and unprocessed magic mushrooms.

• alcohol, tobacco, and tobacco-related products, including nicotine replacement therapy (NRT), and electronic cigarettes.

Electronic cigarettes on school premises

Electronic cigarettes are battery-powered vapour inhaler devices that generally contain nicotine, along with propylene glycol and glycerine. They were developed as an alternative to tobacco products and have become increasingly popular. Although we perceive electronic cigarettes to be less harmful than tobacco, there are concerns about their safe use, particularly when children and young people use them, because the electronic cigarette market is unregulated. The Chief Medical Officer (CMO) for Northern Ireland has advised that schools prohibit electronic cigarettes on their premises, in line with tobacco products, because:

• nicotine is very addictive and there is a risk that using electronic cigarettes could act as a gateway into smoking for many young people;

• evidence suggests that adolescent exposure to nicotine may also have long term consequences for brain development;

• the availability and promotion of electronic cigarettes is reversing progress made by smoke-free legislation to de-normalise smoking; and

• there is insufficient evidence to determine whether the vapour produced by electronic cigarettes causes damage to users' health in the long term. The same applies to the impact of second-hand vapour the user exhales.

There is also a potential risk that users might fill the refillable cartridges used in some electronic cigarettes with substances other than nicotine. This has the potential to serve as a new and potentially dangerous way to deliver other drugs.

The CMO recommended that the Department of Education extend its current guidance to schools, which encourages them to implement a complete smoking ban on both internal and external premises, to include electronic cigarettes.

Smoking/ E- Cigarettes and the possession of smoking materials are forbidden. All Smoking incidents should be reported to the designated teacher at the earliest opportunity who will employ our dugs and behaviour policy to deal with the incident accordingly.

Members of staff (teaching and Non-Teaching) are reminded that smoking is banned across the campus both inside and outside buildings. It is also expected that staff should refrain from smoking in the presence of pupils at any time.

Controlled Substances

Controlled Substances are legally classified according to their benefit when used in medical treatment or harm if misused.

The Misuse of Drugs Act (1971) sets out a range of substances that are controlled under the Act. It is an offence to possess, possess with intent to supply, supply, or allow premises you occupy or manage to be used unlawfully for the purpose of producing or supplying controlled drugs. The Act has four separate categories; Class A, Class B, Class C, and temporary class drugs. Substances may be reclassified.

Main Types Of Controlled Substances by Class

The Misuse of Drugs Act (1971)

Class	Substance	Possession	Supply and production
A	Crack cocaine, cocaine, ecstasy (MDMA), heroin, LSD, magic mushrooms, methadone, methamphetamine (crystal meth)	Up to 7 years in prison, an unlimited fine or both	Up to life in prison, an unlimited fine or both
B	Amphetamines, barbiturates, cannabis, codeine, methylphenidate (Ritalin), synthetic cannabinoids, synthetic cathinones (for example mephedrone or methoxetamine)	Up to 5 years in prison, an unlimited fine or both	Up to 14 years in prison, an unlimited fine or both
C	Anabolic steroids, benzodiazepines (diazepam), gamma hydroxybutyrate (GHB), gamma-butyrolactone (GBL), ketamine, piperazines (BZP)	Up to 2 years in prison, an unlimited fine or both	Up to 14 years in prison, an unlimited fine or both
Temporary class substance*	NBOMe and Benzofuran compounds	None, but police can take away a suspected temporary class substance	Up to 14 years in prison, an unlimited fine or both

www.gov.uk/penalties-drug-possession-dealing

Please note the above table refers to some commonly available drugs. It is not a complete list of controlled drugs.

5. Aims and Objectives

1 To protect our students from the harm associated with the use and misuse of drugs and substances.

2. To develop a consistent approach to drug-related issues in line with the School's pastoral care provision.

3. To ensure that students, parents, and staff are clear about the School's Misuse of Drugs Policy and how it applies to them.

4. To establish procedures for managing specific incidents of suspected drug/substance misuse.

5. To provide a Drugs Education Programme to help students develop appropriate skills, attitudes, and behaviours to resist societal pressures to drink alcohol and/or misuse drugs.

6. To enable students to make informed and responsible decisions and help them cope with living in an increasingly substance-tolerant society.

7. To help to build the factors that protect young people from becoming involved in drug/substance misuse.

8. To provide additional pastoral support for those students identified as potentially vulnerable.

9. To direct students to appropriate services and support, where misuse has been identified.

10. To monitor, evaluate and review this policy and the Drugs Education Programme within agreed timeframes.

*The term 'legal high' is no longer used as it is misleading. These substances are not regulated and there is no way of knowing what chemicals they contain.

6. Roles, Responsibilities and Legal Duties

6.1 Roles and Responsibilities

In accordance with Drugs: Guidance for Schools in Northern Ireland (CCEA, Revised Edition 2015), All Staff (Teaching and Non-Teaching) should be familiar through INSET training with the content of the School's Policy. They should also be aware of their legal responsibilities and School procedures, should a suspected drug-related incident occur. They should know who to contact and what to do when a student is suspected either of being in possession of drugs or being under the influence of drugs, including alcohol. It is not the member of staff's responsibility to determine the circumstances surrounding the incident but he/she should:

• Assess the situation and decide on the appropriate actions to take;

• Notify the Principal/Designated Teacher at the earliest opportunity;

• Deal with any emergency procedures to ensure the safety of students and staff (Appendix 9);

• Forward any information, substance or paraphernalia received to the Designated Teacher;

• Write a brief factual report on the suspected incident and forward this to the Designated Teacher;

- Consider the needs and safety of a student when discharging him or her into the care of a parent who appears to be under the influence of alcohol or another substance (staff, who are in loco parentis, should maintain a calm atmosphere when dealing with the parent);
- Invoke safeguarding procedures if a parent's behaviour may place a student at risk.

Staff must be aware of the legal implications of:

- receiving information about a controlled drug;
- discovering a student in possession of a controlled drug; or
- discovering a student is involved in supplying a controlled drug.

A summary of relevant legislation is available at www.ccea.org.uk.

The Designated Teacher for is responsible for:

• coordinating the School's procedures for handling suspected drug-related incidents;

• responding to advice from first-aiders, in the event of an incident;

• informing the Principal, who should contact the student's parent(s) immediately;

• training and inducting new and existing staff in these procedures;

• liaising with other staff responsible for Pastoral Care;

• being the contact point for outside agencies that may have to work with the School or with the student(s) concerned;

• taking possession of any substance(s) and associated paraphernalia found in a suspected incident;

• the student/students involved in a suspected incident;

• completing the School's Drugs Incident Report Form (Appendix 10), which she forwards to the Principal; and

• reviewing and, if required, updating this policy at least annually and after a drug-related incident, where learning from the experience could improve practice.

* The Deputy Designated Teacher will assume these responsibilities in the absence of the Designated Teacher.

The Principal is responsible for:

- determining the circumstances of all incidents;
- contacting the parent(s) of those students involved in any suspected drug-related incident;
- liaising with the PSNI with regards to any incident involving a controlled substance. Failure to inform the PSNI of a suspected incident involving controlled drugs is a criminal offence.

It is the role of the PSNI to investigate any criminal or suspected criminal offence. After contacting the PSNI, the Principal should confine his responsibility to:

- the welfare of the student(s) involved in the incident and the other students in the School;
- health and safety during the handling, storage and safe disposal of any drug or drug-related paraphernalia, using protective gloves at all times;
- informing the Board of Governors;
- deciding any pastoral or disciplinary response;
- reporting the incident to the Education Authority, if appropriate;
- completing a written report and forwarding a copy to the Chair of the Board of Governors and the Designated Officer in the Education Authority.

The Board of Governors should:

- collaborate with appropriate staff, students, and parents to support the development and review of the School's Drugs Policy;
- facilitate the consultative process where the School community can respond and contribute to the effectiveness and quality of the School's Drugs Policy;
- ensure that details of this policy are published;
- ensure this policy is reviewed at least annually and after a drug-related incident;
- be fully aware of and adequately trained to deal with suspected drug-related incidents, including alcohol and tobacco, tobacco-related products, electronic cigarettes, and their appropriate disciplinary response.

Parents have the right to expect that the School is a safe and caring environment for their children. They also have a vital role to play in the prevention of drug misuse. Parents should:

- ensure that their child acts in accordance with the School's Drugs Policy, the School's Administration of Medication in School Policy, the School Rules for Students, and the School's Behaviour for Learning Policy;

- report any alleged drug-related incident of which they are aware to the Designated Teacher;
- inform the Designated Teacher if they suspect their child is involved in drug misuse;
- liaise with external agencies, as appropriate, to access additional support.

Students have specific responsibilities to ensure the School environment is safe and free from drugs and alcohol. Students must always:

- behave in a safe and appropriate manner to ensure their safety and the safety of all members of the School community;
- report immediately to a member of staff when a student is suspected either of being in possession of drugs or being under the influence of drugs, including alcohol;
- act in accordance with the School's Drugs Policy, the School's Administration of Medication in School Policy, the School Rules for Students, and the School's Behaviour for Learning Policy;
- adhere to the School's agreed Code of Conduct for Students on an Educational Visit;
- make informed and responsible decisions in an increasingly substance-tolerant society;
- engage positively in the curricular opportunities provided to develop appropriate skills, attitudes, and behaviours to resist societal pressures to drink alcohol and/or misuse drugs.

6.2 ***The School's Legal Duties***

It is a statutory requirement for all schools in Northern Ireland to:

- have a Drugs Policy and publish details in relation to the policy in their prospectus (Education (School Information and Prospectuses) Regulations (Northern Ireland) 2003);
- deliver drugs education to include legal and illegal substances (The Education (Curriculum Minimum Content) Order (Northern Ireland) 2007);
- inform the PSNI if they believe or suspect a student to be in possession of a controlled substance (Criminal Law Act (Northern Ireland) 1967).

7. Drugs Education in the Curriculum

In accordance with the statutory requirement of the Northern Ireland Curriculum, drugs education is delivered through the Personal Development strand of Learning for Life and Work, to shape attitudes, values and aspirations that bring about resilience in young people. Drugs education is also actively promoted through:

- Personal Development lessons;
- Learning for Life and Work (GCSE);
- Relationship and Sexuality Education lessons;

- Assembly;
- Talks by external agencies (approved by SLT);
- English/Drama/Home Economics/Science/PE/SSEP

8. Procedures for Managing Suspected Drug-Related Incidents

8.1 Managing Suspected Drug-Related Incidents

Dealing with suspected drug-related incidents requires extreme sensitivity and the following procedures will help those charged with handling difficult and complex issues to be fair and consistent in their dealings with students. For the purposes of this policy, a drug-related incident may include:

- a student displaying unusual or uncharacteristic behaviour;
- an allegation;
- suspicion of possession, possession with intent to supply and/or supply of any substance as defined earlier;
- finding substance-related paraphernalia.

8.2 Taking Possession of a Suspected Controlled Substance and/or Associated Paraphernalia

The law permits school staff to take temporary possession of a substance suspected of being a controlled drug to protect a student from harm and prevent the student committing the offence of possession. The member of staff should, using appropriate safety precautions, take the suspected substance and any associated equipment and/or paraphernalia to the Designated Teacher as soon as possible. She should arrange for its safe storage until the school can hand it over to a PSNI officer to identify whether it is a controlled substance. School staff should not attempt to analyse or taste an unidentified substance. An adult witness should be present when staff confiscates the substance and the school should keep a record of the details, using the School's Drugs Incident Report Form.

8.3 An Allegation of a Suspected Controlled Drug-Related Incident:

Carrying Out a Search If the Principal/Designated Teacher receives an allegation of possession, he/she may need to search a student's locker, if he/she has cause to believe it contains unlawful items, including controlled drugs. However, staff should only search the student's personal belongings, including schoolbag, coat, or other items with the student's consent. The Principal/Designated Teacher should carry out this search in the presence of the student and another adult witness.

If the School suspects a student of concealing controlled drugs on his/her person or in his/her personal belongings, staff should make every effort to encourage the student to produce these substances voluntarily. The Principal/Designated Teacher should ask the student to turn out his/her pockets or schoolbag(s). If the student refuses, the Principal should contact a

parent and the PSNI to deal with the situation. A member of staff should never carry out a physical search of a student, unless there is compelling evidence that the student has committed an offence. If staff recovers a substance or an object that they suspect has a connection with drugs, they should take possession of it and make a full record using the School's Drug Incident Report Form.

8.4 Detaining a Student

When managing a suspected drug-related incident the School should invite the student(s) concerned to remain in school under the supervision of appropriate members of staff until their parent(s) and the PSNI arrive. If a student refuses to remain, the School cannot detain him/her against his/her will. However, if a member of staff has reasonable grounds to suspect that the student has in his/her possession or has taken controlled substance, he/she can make a citizen's arrest under Article 26A of the Police and Criminal Evidence (Northern Ireland) Order (PACE) 1989. The member of staff should make the student fully aware of the implications before making the arrest, confirming:

- that the student is not free to leave once he/she has been informed by the arresting person why he/she is being arrested;
- that he/she will be detained until he/she is handed over to a PSNI officer who will then deal with the investigation.

Staff must be able to recognise the point where a young person becomes a danger to either him/herself or others. They should also be aware of their duty of protection because they are in loco parentis.

9. Confidentiality

Staff should not give a student any undertaking of confidentiality when dealing with a drug-related incident. They should make the boundaries of confidentiality clear to students and reassure the student that only those who need to know will be informed. If a student discloses information concerning controlled substances, the member of staff must notify the Principal/Designated Teacher who will then coordinate the School's procedures for handling suspected drug-related incidents.

When an allegation is made against a student or a member of staff, the School will make every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered.

10. Disciplinary or Pastoral Care Responses

10.1 Disciplinary Responses

In accordance with Drugs: Guidance for Schools in Northern Ireland (CCEA, Revised Edition 2015), the School has developed a repertoire of responses to reflect different kinds of

substance/drug related offences and to ensure the safety and well-being of other students. In all cases, the Principal, having taken account of various factors, reserves the right to apply what he considers to be the most appropriate sanctions in relation to any incident/behaviour which is deemed unacceptable. The School will follow procedures as outlined in the Positive Behaviour Policy.

10.2 Pastoral Care Responses

During and after any incident, the School will consider the individual needs of any student involved. Where appropriate, this may involve discussion with the student, his/her parent(s), a PSNI officer, the Designated Teacher and appropriate pastoral care staff. A referral to counselling or a referral pathway to specific support agencies may be part of a pastoral care response.

11. Provision of Counselling Services in the School

The School has two trained counsellors (Mr David Small and Mrs Moira Aitken) The School counsellors are happy to support students with any issue which may cause worry or concern. The Counselling Services provided in the School are monitored and evaluated by the Vice Principal (Pastoral) and Heads of School. Annual counselling reports are submitted to the Principal. A list of useful contacts for parents is provided in Appendix 11. Where appropriate, a parent may be advised to consult with a GP and/or secure a referral to an external agency.

12. Guidelines for Administering Prescribed Medication

The School is committed to working in partnership with parents/guardians, health professionals and other agencies to provide a supportive environment for students with medication needs. The School will endeavour to support students engaged in a smoking cessation programme on receipt of written advice from his/her GP. Further information is available for students and parents on 'Stopping Smoking Made Easier' - www.publichealth.hscni.net.

13. Emergency First-Aid Procedures

As per the School's Administration of Medication in School Policy, "In all emergency situations a teacher or other member of school staff will be expected to act as a responsible adult or parent in the best interests of the child in recognition of their duty of care". In the event of a medical emergency, staff should follow the procedures outlined in Appendix 9. The emergency services should be contacted, if appropriate.

14. Staff Use of Alcohol and Smoking on School Premises, on Educational Visits and Other Social Events

In accordance with DE Circulars 2004/01 (21/01/04) and 2014/25 (15/12/14), the School is a smoke free and e-cigarette-free environment. The consumption of alcohol is also prohibited on School premises during the school day. Alcohol may be served to adults at specified events with the permission of the Principal. Staff/volunteers are at all times bound to follow the Code of Conduct for Staff/Volunteers from the School's Child Protection/Safeguarding Policy. Moreover, considering the special circumstances of an educational visit, accompanying staff/volunteers must adhere to the Code of Conduct for Leaders on an Educational Visit (Categories 3, 4 and 5).

Leaders:

- must not use illegal drugs/new psychoactive substances (NPS) during the educational visit;
- must not drink alcohol during the educational visit;
- must not smoke or use nicotine containing products (e-cigarettes) in the presence of students during the educational visit.

When dealing with drug and/or alcohol use/misuse by staff, the Principal and the Board of Governors may consider:

- the School Work Place Policy on Smoking, Drugs and Alcohol (www.nibusinessinfo.co.uk);
- Don't' Mix It: A Guide for Employers on Alcohol at Work (www.hse.gov.uk);
- Drugs Misuse at Work: A Guide for Employers (www.hse.gov.uk).

15. Procedures for Communicating to Staff, Parents or Other Relevant Agencies

15.1 Policy:

This policy is available for students, parents and staff on the School Website and Private Folders (staff only).

15.2 Communication Following a Suspected or Confirmed Drug-Related Incident:

The School should carefully consider how it communicates information about a suspected or confirmed drug-related incident to staff, students, and parents. It should only disclose information to members of staff concerned with the pastoral needs of the individual student(s). It should inform only the parents of the student(s) directly involved of the incident and the subsequent outcomes. Staff should not discuss individual cases with other students. The School may, however, need to make a general statement informing the school community after an incident where rumours may create a negative atmosphere.

15:3 Dealing with the Media:

The Principal will deal with enquiries from the media. He will respect the privacy of students and their families and may liaise with the PSNI before issuing a statement.

16. Procedures for Monitoring, Evaluating and Reviewing this Policy

The Designated Teacher, Heads of School and Health Education Coordinator will monitor and evaluate the success of this policy and its implementation by means of:

- the number of drug-related incidents relating to students of the School;
- feedback from Student Councils;
- student and parental questionnaires;
- discussion at Pastoral Care Meetings;
- post-incident reviews to monitor how effectively drug-related incidents have been dealt with.

The Designated Teacher, Heads of School and Health Education Coordinator will review and, if required, update this policy at least annually and after a drug-related incident, where learning from the experience could improve practice. This review should reflect changing circumstances and trends in substance use in the local community. Any recommendations for change are made to the Principal and the Senior Leadership Team (SLT) prior to consultation with students and parents.

Students and parents are encouraged to contact the Vice Principal (Pastoral) at any time to express their views on the policy.

17. Procedures for Monitoring, Evaluating and Reviewing the Drugs Education Programme
The Vice Principal (Pastoral), Heads of School and Health Education Coordinator will monitor and evaluate the Drugs Education Programme as part of the annual review of the Personal Development Programmes by means of:

- student and parental questionnaires;
- student focus group meetings with Heads of Year;
- discussion at Pastoral Care Meetings.

The Heads of School will review and, if required, update the Drugs Education Programme to reflect the needs of students and the local community.

18. Training

Training to support staff and governors in the implementation of the School's Drugs Policy will be provided as deemed necessary by the Principal.

19. **Links with other policies**

- Pastoral Care Policy
- Behaviour for Learning Policy
- Staff Code of Conduct Policy
- RSE Policy
- Health & Safety Policy
- First Aid and Administration of Medications Policy
- Managing Critical Incidents Policy
- Educational Visits Policy

Annex 1

ADDITION TO ST JOSEPH'S DRUGS POLICY AND BEHAVIOUR FOR LEARNING POLICY

Considering DE Circular 2014/25 (15 December 2014) Encouraging a Smoke-Free and E-Cigarette Free Environment in Schools and Youth Organisations

The recent legislative changes since 2007; guidance from DHSSPS in relation to the 'Tobacco Control Strategy' and the conclusive advice contained within the DE Circular 2014/25 issued on 15 December 2014 has produced the rationale to further clarify St Joseph's position on electronic nicotine devices (hereafter referred to as e-cigarettes). St Joseph's has always considered e-cigarettes to contravene the Drugs Policy in agreement with the Chief Medical Officer NI due to the following reasons:

1. Nicotine is very addictive and, through e-cigarettes, has the potential to act as a gateway into tobacco smoking;

2. There is evidence to suggest that adolescent exposure to nicotine may also have long-term consequences for brain development;

3. The availability and promotion of e-cigarettes is reversing the progress made by smoke-free legislation to de-normalise smoking;

4. There is insufficient evidence to determine whether the vapour produced by e-cigarettes causes damage to user's health in the long term. The same applies to the impact of second hand vapour exhaled by the user.

5. E-cigarettes are not currently regulated and there have been recent reports of young people being poisoned by ingesting refill liquids.

6. There is the potential risk that refillable cartridges used by some e-cigarettes could be filled with substances other than nicotine, thus serving as a possibly new and dangerous vector to deliver other drugs.

The CMO recommended that the Department of Education extend its current guidance to schools, which encourages them to implement a complete smoking ban on both internal and external premises, to include electronic cigarettes. Reflecting this advice, the Department issued Circular 2014/25 to all schools on 15 December 2014.

All staff were notified of this by e mail.

This school is a no smoking site - indoors and outdoors. Students are not permitted to bring to school smoking materials, including matches, lighters, and e-cigarettes.

In the interests of health and safety, should a student be found in possession of any of these on school premises, Saint Joseph's considers this to contravene our drugs policy and those found do so will be sanctioned in line with our drugs and behaviour policy.

Appendix 1

DE Guidance and Circulars

DE: Pastoral Care in Schools: Child Protection (1999)

DE: Pastoral Care in Schools: Promoting Positive Behaviour (2001)

DE: Supporting Pupils with Medication Needs (2008)

New Strategic Direction for Alcohol and Drugs, Phase 2, 2011-2016 (DHSSPS)

Young Persons' Behaviour and Attitudes Survey (YPBAS) (2013)

Drugs: Guidance for Schools in Northern Ireland (CCEA, Revised Edition 2015)

New Psychoactive Substances (NPS) Factsheet: Public Health Agency (May 2016)

DE Circular 2003/15 (05/09/03) - Education (School Information and Prospectuses) Regulations (Northern Ireland) 2003

DE Circular 2004/01 (21/01/04) - Encouraging a Smoke-Free Environment in Schools

DE Circular 2012/19 (10/09/12) - Disclosure and Barring Arrangements: Changes for Preemployment Vetting Checks for Volunteers Working in Schools from 10 September 2012
DE Circular 2013/01 (January 2013) - Disclosure and Barring Arrangements: Vetting Requirements for Paid Staff Working In or Providing a Service for Schools

DE Circular 2014/25 (15/12/14) - Encouraging a Smoke-free and E-cigarette-free Environment in Schools and Youth Organisations

DE Circular 2015/23 (26/08/15) - Drugs Guidance

Appendix 2

Checklist of Roles and Responsibilities When Managing an Incident Individual staff members should:

- assess the situation and decide on the appropriate actions to take;
- notify the Principal/Designated Teacher for Drugs at the earliest opportunity;
- deal with any emergency procedures to ensure the safety of students and staff);
- forward any information, substance or paraphernalia received to the Designated Teacher for Drugs;
- write a brief factual report on the suspected incident and forward this to the Designated Teacher for Drugs.

The Designated Teacher for Drugs should:

- coordinate the School's procedures for handling suspected drug-related incidents;
- respond to advice from first-aiders, in the event of an incident;
- inform the Principal, who should contact the student's parent(s) immediately;
- take possession of any substance(s) and associated paraphernalia found;
- take initial responsibility for student(s) involved in the suspected incident; and
- complete the School's Drugs Incident Report Form (Appendix 10) and forward it to the Principal.

The Principal should:

- determine the circumstances surrounding the incident;
- contact the parent(s) of those students involved in any suspected drug-related incident;
- liaise with the PSNI with regards to any incident involving a controlled substance;
- consider the welfare of the student(s) involved in the incident and the other students in the School;
- oversee health and safety during the handling, storage and safe disposal of any drug or drug related paraphernalia, using protective gloves at all times;
- inform the Board of Governors;
- decide any pastoral or disciplinary response;
- complete a written report and forward a copy to the Chair of the Board of Governors and the Designated Officer in the Education Authority;
- ensure procedures are reviewed and amended, if necessary.

Appendix 3

Finding a Suspected Substance or Drug-Related Paraphernalia On or Close to School Premises
Paraphernalia on School premises in an indication of drug use or misuse.

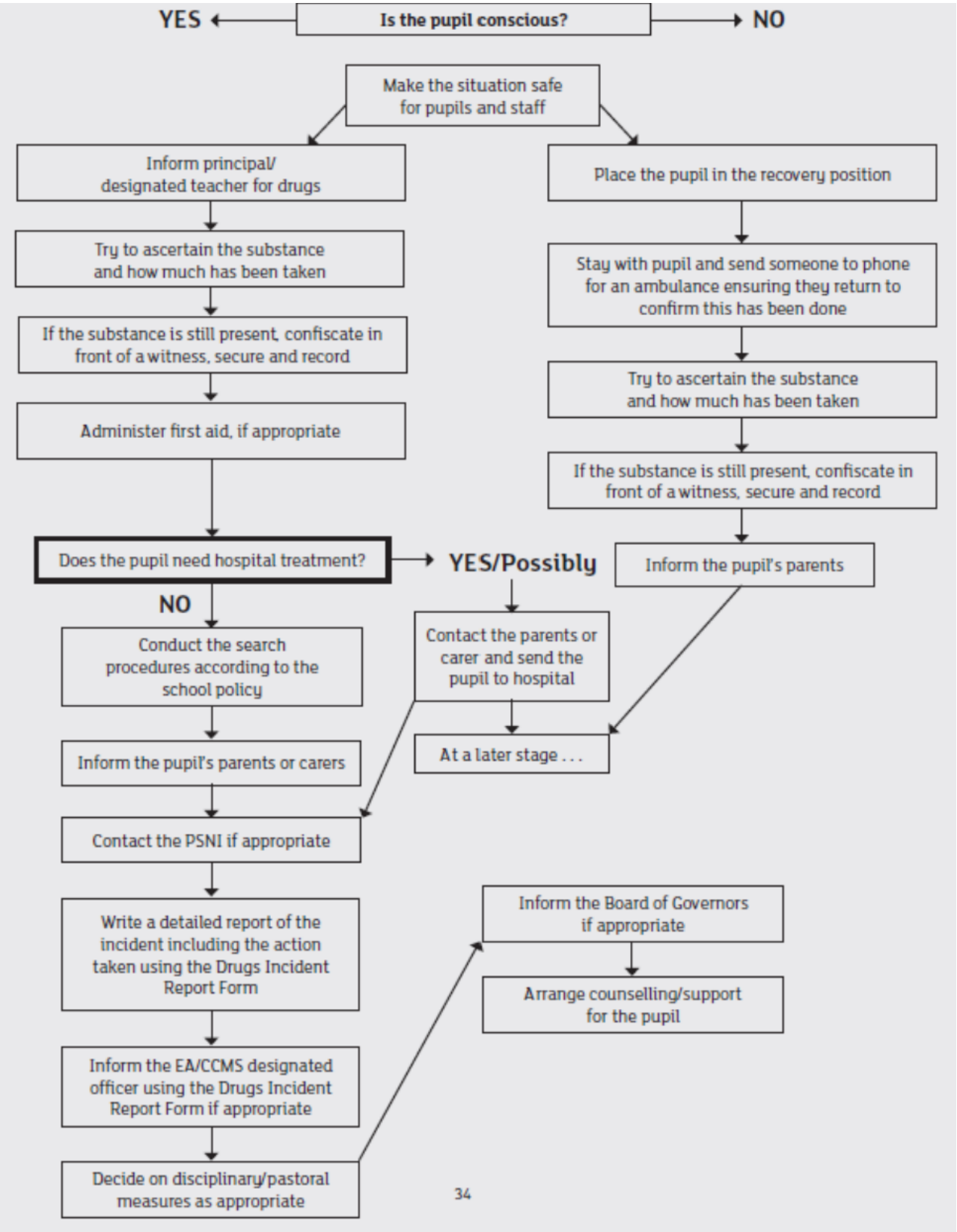
Any member of the School community who encounters any paraphernalia should exercise extreme care, as these items may be hazardous.

Anyone who finds a suspected substance or paraphernalia associated with drug use or misuse should report it to the Principal/Designated Teacher for Drugs, who will assess the situation and respond accordingly. This response may include contacting the PSNI.

The following list is not exhaustive. It gives staff an idea of what may indicate the presence of controlled substances: small bottles or pill boxes; hypodermic needles; twists of paper; cigarette papers, lighters and spent matches; electronic cigarette liquid refill bottles (there is a potential risk that refillable cartridges used in some electronic cigarettes could be filled with substances other than nicotine, serving as a new and potentially dangerous way to deliver drugs); roaches (ends of rolled-up cigarettes); punctured cans, plastic bottles or containers; aerosols or butane gas refills; and drugs themselves.

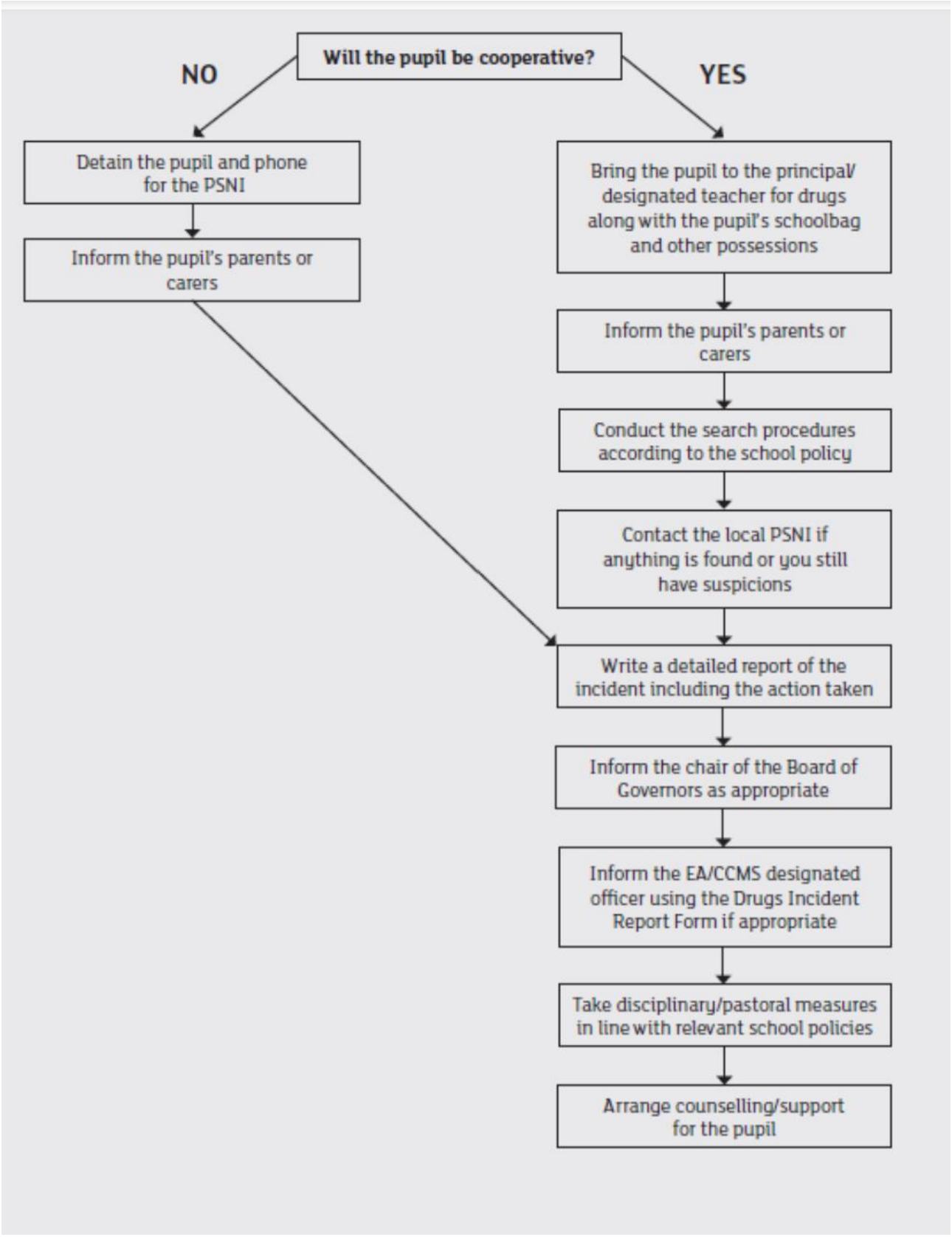
Appendix 4.

Pupil suspected of having taken drugs/alcohol on school premises.



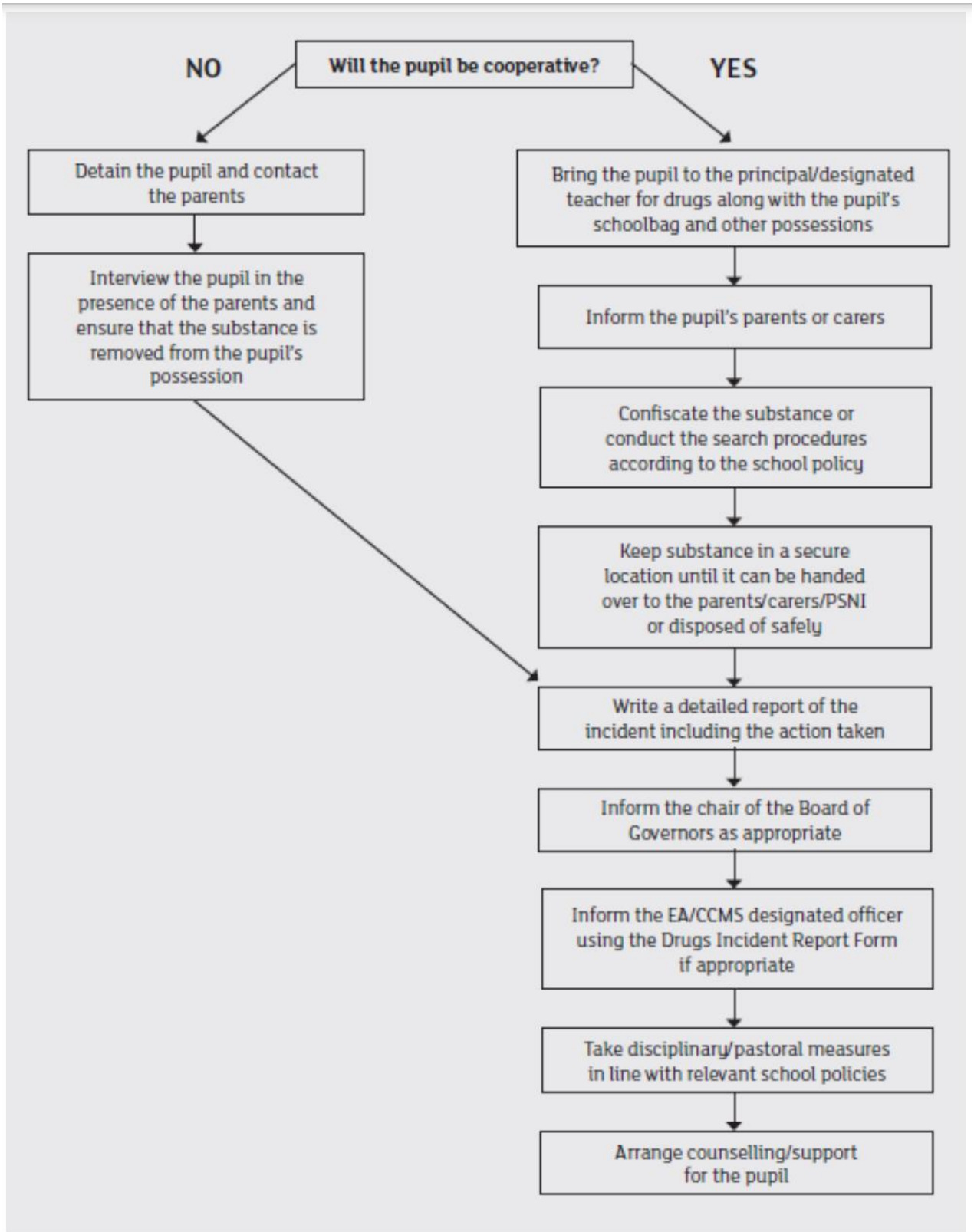
Appendix 5

Pupil suspected of possessing/distributing an illegal substance.



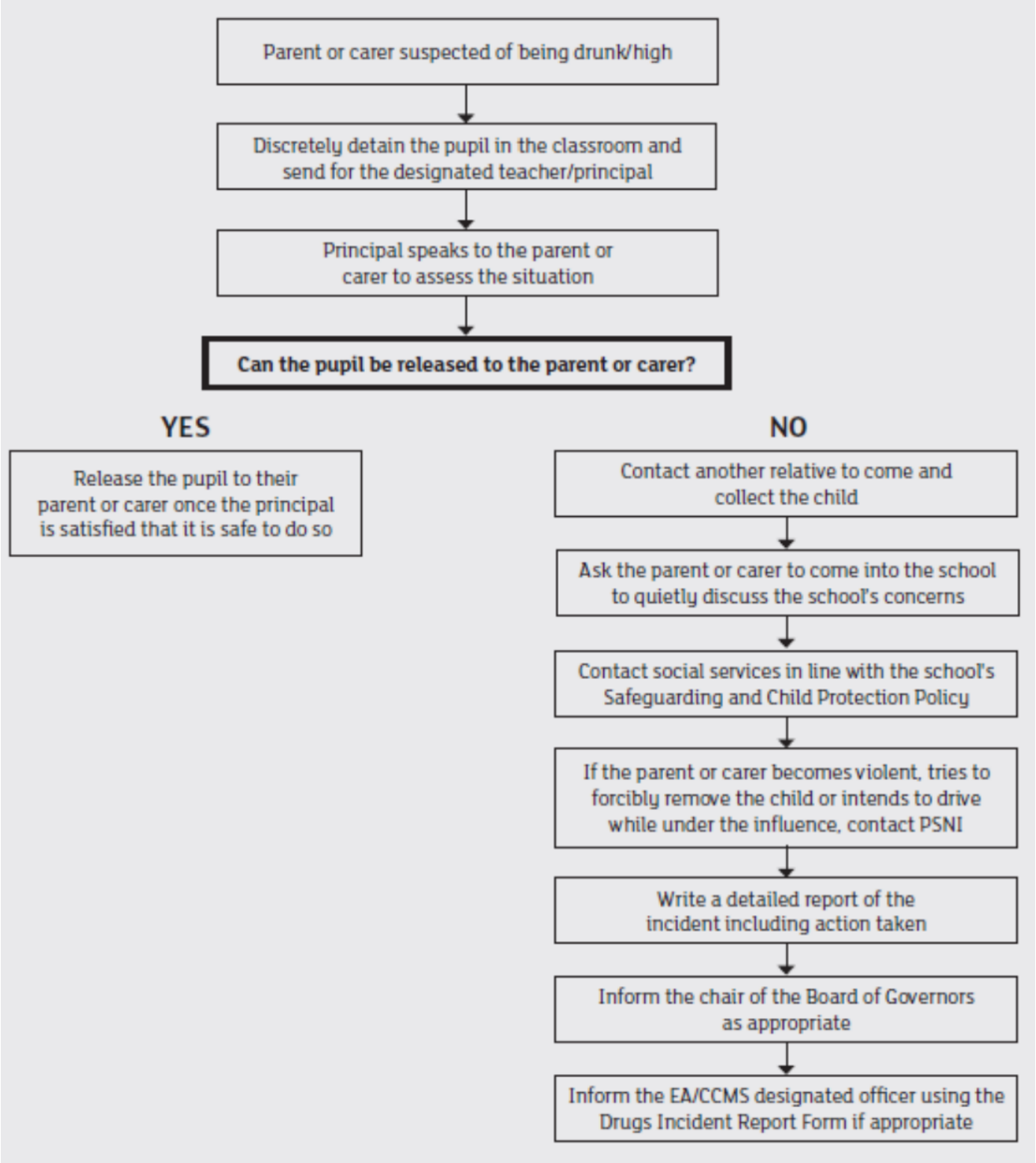
Appendix 6

Pupil in possession of alcohol or unauthorised prescribed medication on the school premises



Appendix 7

A parent or carer arrives at school to collect a child and appears to be under the influence of alcohol or another substance.



Appendix 8.

Recognising Signs of Substance Use What to look out for.

If someone is having a bad time on drugs, he/she 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 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;
- not scare them, shout at them, or shock them;
- not give them coffee to wake them up; and
- not put them in a cold shower to 'wake them up'.

If they are unconscious or having difficulty breathing, you should:

- call an ambulance immediately;
- 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 9

Emergency First-Aid Procedures

According to Drugs: Guidance for Schools in Northern Ireland (CCEA, Revised Edition 2015), this is the current best advice available 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 mouth-to 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 and 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 10

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 _____ or 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 YES/NO Date _____ Time _____
8.	Form completed by _____ Date _____ Position _____

Description of the Incident

Actions taken

Incident form completed by

Date

Appendix 11

Useful Contacts Local/national organisations that provide information and advice and/or resources about cigarettes, alcohol, and drugs:

www.alcoholconcern.org.uk

www.ash.org.uk (Action on Smoking and Health)

www.camh.org.uk (Child and Adolescent Mental Health)

www.ccea.org.uk (Dealing with Young People's Alcohol and Other Drug Misuse - a guide for parents and carers)

www.ccea.org.uk (The Power of Teachers in a Young Person's World)

www.deni.gov.uk (iMatter programme)

www.drugsandalcoholni.info www.drugscope.org.uk

www.fasaonline.org (The Forum for Action on Substance Abuse)

www.gov.uk/penalties-drug-possession-dealing

www.lifeline.org.uk

www.mindingyourhead.info

www.nhs.uk/Livewell/Pages/Topics.aspx

www.publichealth.hscni.net (Stopping Smoking Made Easier)

www.talktofrank.com (Call FRANK: Tel: 0300 123 6600)

www.thesite.org/drinkanddrugs

www.want2stop.info (Tobacco and NRT)

Appendix 11 .

Useful Contacts in Northern Ireland

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.		www.deni.gov.uk

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

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

Public Health Agency for Northern Ireland		
The Public Health Agency (PHA) is a regional organisation that aims to protect and promote the health and well-being of the population. It was established in April 2009 as part of the reforms to Health and Social Care (HSC) in Northern Ireland. The PHA addresses the causes and associated inequalities of preventable ill health and lack of well-being. It is a multidisciplinary, multi-professional body with a strong regional and local presence. The PHA is responsible for commissioning services to address alcohol, tobacco and drug issues across Northern Ireland.		www.publichealth.hscni.net

Local Drug and Alcohol Co-ordination Teams		
Contact details for local services in the Local Service Directories prepared by the DACTs		www.publichealth.hscni.net

Police Service for Northern Ireland (PSNI)		
Drugs Squad	Tel: 028 9065 0222	
Community Involvement	Tel: 028 9070 0964	
Crimestoppers	Tel: 080 0555 111	

Treatment, Counselling and Support Agencies		
Health and Social Care Organisations		www.publichealth.hscni.net
Family Support NI		www.familysupportni.gov.uk
Children and Adolescent Mental Health Services, Belfast		www.belfasttrust.hscni.net

Local Organisations		
A list of local organisations that provide information and advice and/or resources about drugs.		www.mindingyourhead.info
		www.fasaonline.org
		www.talktofrank.com
		www.thesite.org/drinkanddrugs
		www.nhs.uk/Livewell/Pages/Topics.aspx

National Organisations

A list of national organisations that provide information and advice and/or resources about drugs:		
Adfam, London		www.adfam.org.uk
Action on Smoking and Health (ASH), London		www.ash.org.uk
Alcohol Concern, London		www.alcoholconcern.org.uk
CAMH, UK		www.camh.org.uk
FRANK, UK		www.talktofrank.com
Drugscope, London		www.drugscope.org.uk
HIT, Liverpool		www.hit.org.uk
Lifeline, Manchester		www.lifeline.org.uk
Release, London		www.release.org.uk
Lions Lifeskills		www.lionslifeskills.co.uk
Want 2 Stop, Public Health Agency		www.want2stop.info
National Drugs Helpline	0800 776600 text 82111	
AA National Helpline	0845 769 7555	