MISUSE OF NON-PRESCRIBED DRUGS POLICY

INCLUDING ALCOHOL & NICOTINE SMOKING/VAPING

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INTRODUCTION

CATS Cambridge actively seeks to provide an environment where all members of the community are safe from harm. As such, the school ensures that the community is protected, supported, and educated regarding drug related issues, which includes alcohol and nicotine. Students are encouraged to respect their bodies and exercise control over what goes into them, in an informed and health promoting manner.

The School plays an important role in supporting and promoting attitudes, practices and understanding which encourage students to make informed decisions enabling them to choose a healthy lifestyle. We therefore strive to create an atmosphere in which students feel safe and able to discuss their problems and concerns, whilst developing an understanding of drugs and their use and misuse.

The School reserves the right to adopt a zero-tolerance policy in respect to the misuse and supply of drugs. The possession, use or supply of illegal and other unauthorised drugs (such as those which are legal in other countries but are controlled substances in the UK) within the School's boundaries is unacceptable. Illegal drugs have no place in the School.

In every case of an incident involving drugs or alcohol, the School's priority is the health and safety of the students and staff. If necessary, it should be dealt with as a medical emergency, administering any first aid and summoning appropriate support. Depending on the circumstances, parents or the police may need to be contacted. The Safeguarding Policy must be followed where relevant.

This policy has been developed with regard to Department for Education advice and guidance: DfE and ACPO drug advice for schools (2012), which is non-statutory and was produced to help answer some of the most common questions raised by school staff in this area.

PURPOSE

This policy applies to staff, students, parents/carers, and partner agencies working with the School on campus, it also applies to:

- Journeys in School time
- Work experience
- Residential trips
- During the School day
- Outside of the School day and in all residential accommodation

The head of the School has overall responsibility for addressing any and all incidents involving the misuse of drugs, and for taking appropriate actions to mitigate against the occurrence of such incidents. Their responsibility includes overseeing the planning and co-ordination of drug education and the management of the misuse of drugs incidents in accordance with the procedure laid out in this policy.

All staff should be fully aware of the procedures for managing incidents, including whom they should inform and who has authority regarding issues such as searching School property and involving the police.

DEFINITIONS

A drug is a substance people take to change the way they feel, think, or behave. The term 'drugs' and 'drug education', unless otherwise stated, is used throughout this document to refer to all 'drugs':

- All illegal drugs (Misuse of Drugs Act 1971)
- All legal drugs, including alcohol, tobacco, vape liquids, substances giving off a gas or vapour which can be inhaled (such as Nitrous Oxide and Alkyl nitrites), or any other substances used recreationally for their psychoactive effects.
- All over the counter and prescription medicines
- Illegal body building and sports supplements (such as anabolic and androgenic steroids, stimulants, HGH, or any other illegal substances that do not meet the required safety standards in the UK)
- CBD products[1]

DRUG EDUCATION IN THE CURRICULUM

Drug education is a major component of drug abuse prevention. Drug abuse prevention aims to: minimise the number of young people engaging in drug use; delay the age of onset of first use: reduce the harm caused by drugs: and enable those who have concerns about drugs to seek help.

The aim of drug education is to provide opportunities for students to develop their knowledge, skills, attitudes and understanding about drugs and appreciate the benefits of a healthy lifestyle, relating this to their own and others' actions. Therefore, drug education in the School allows an opportunity for children/young people to:

- Increase their knowledge, understanding and clarify misconceptions about the short-and long-term effects and risks of drugs use
- Rules and laws relating to drugs
- Impact of drugs on individuals, families and communities
- Prevalence and acceptability of drug use among peers
- Complex moral, social and political issues surrounding drugs
- Develop their personal and social skills to make informed decisions and keep themselves safe and healthy, including:
- Assessing, avoiding and managing risk
- Communicating effectively

[1] CBD oil is a fairly new supplement to the UK. This oil is an extract from the cannabis derivative, hemp, so it contains very small traces of THC (in the UK there is a threshold of permitted THC in CBD oil of 0.2%). If a student is taking CBD oil, they won't experience any psychoactive effect and if they were to be drug tested they will not give a positive result, so long as the recommended dose is adhered to. The tests used at CATS/CSVPA test for a minimum of 50ng/ml of THC, so any CBD oil bought legally in the UK would not show up in a test as the legal limit of THC allowed in CBD oil is 0.2%.

- Resisting pressures
- Finding information, help and advice
- Devising problem solving and coping strategies
- Developing self-awareness and self esteem
- Enable them to explore their own and other people's attitudes towards drugs, drug use and drug users, including challenging stereotypes, and exploring media and social influences.

Drug education is an entitlement for every student as specified by Section 351, of the Education Act 1996 which requires every School to provide a balanced curriculum which:

- Promotes the spiritual, moral, cultural, mental, and physical development of students at the School and of society.
- Prepares students at the School for the opportunities, responsibilities, and experiences of adult life.

APPROACH

Drug education will be taught in a safe, secure and supportive learning environment. Ground rules will be agreed, established, and reviewed periodically through discussion with students. Teachers may use a selection of active learning approaches, e.g., action research, mind-mapping, case studies, creative writing, literature, discussion, external contributors, drama visits, formal debate, group work, interactive ICT, local surveys, media analysis, peer education, questionnaires, role-play, simulations, structured games, theatre-in- education, video supported by follow-up discussion etc. External contributors are always interviewed. A teacher on the staff will always share in teaching the lesson and always be in the classroom. A copy of the Misuse of Drugs policy will be made available to all outside speakers.

All students should be able to:

- Seek help if they have a problem. Within the School and accommodation help is available from the welfare team (including the School Nurse), teachers and House Parents.
- Encourage other students to seek help if they have a problem.
- Access information about the effects of drugs misuse on other people and on the quality of their own study/work/life
- Alert appropriate members of staff to any problems they see developing within the School, particularly where legal, safeguarding, or health and safety concerns are present.
- Co-operate with any investigation of suspected drugs misuse.
- Seek help or advice if they have been asked to, or if they seek help voluntarily, to co-operate fully with the support and advice offered.

Staff should:

- Offer information and advice concerning the services available to students who are experiencing drugs misuse problems.

- Support and offer educational events, awareness campaigns and activities that promote health and wellbeing in conjunction with other departments.
- Encourage a positive approach to health and wellbeing through sport, recreation and other activities
- Ensure there is no misuse of or pressure to misuse, drugs at any time but particularly at social functions or presentations:
    - Publicity for social events must not focus on alcohol or encourage its misuse

THE ROLE OF THE POLICE

Legal Drugs:
The police will not expect to be routinely involved in incidents involving legal drugs, but the School will inform the police about the inappropriate sale or supply to students in the local area of the following, tobacco, vape liquids and devices, alcohol, or other volatile substances.

Illegal Drugs:
Schools have no legal obligation to report an incident involving drugs to the police. Nevertheless, not informing the police may prove to be counter-productive for the school and wider community so the School may choose to do so. The police will, however, be involved in the disposal of suspected illegal drugs.

Police Interviews:
In the event of a student being arrested, the School will ensure a responsible adult will be present with the student.

SEARCHES

All searches will be conducted following the guidance contained in the School's Search and Confiscation Policy.

RESPONDING TO DRUGS INCIDENTS

Drugs incidents may include:

- A student, parent/carer or staff member (including volunteers and governors) is thought to be under the influence of drugs.
- A student is found in possession of drugs or associated paraphernalia
- A student is found to be supplying drugs on School premises (friends sharing drugs, student being coerced to supply drugs, a group of friends taking it in turn to bring drugs in for their own use)
- A student discloses that they or a family member/friend are misusing drugs.
- Drugs or associated paraphernalia found on School premises.
- A student demonstrates, perhaps through actions or play, an inappropriate level of knowledge for their age.

- A staff member has information that the sale/supply of drugs is taking place in the local area.

These incidents will initially be treated as a safeguarding concern and must be reported as such. All actions taken should align with safeguarding considerations.

IMMEDIATE ACTION TO TAKE WHEN THERE IS A SUSPICION THAT A STUDENT MAY HAVE CONSUMED DRUGS

During Boarding hours, the senior boarding staff member on shift, must make an assessment of whether the student or staff are at risk. If the student is at risk, then they must immediately remove the student from the area of risk, wherever this is possible. If this is not possible, the senior boarding staff member should immediately call the Emergency Duty Senior Leader.

In cases of suspected alcohol consumption, the student should be breathalysed to better assess the level of consumption and actions then taken in accordance with the table shown in Appendix 2. Should a student refuse to be breathalysed the senior boarding staff member should consider whether to take actions in line with the highest levels of consumption. At all times, any concerns should be reported, as with any student welfare concern, by informing the DSL or Deputy DSL.

FOLLOW ON ACTIONS

A careful investigation will take place to judge the nature and seriousness of each incident, the needs of those involved and the most appropriate response. For example:

- What does the student have to say?
- What do any witnesses have to say?
- Is this a one-off incident or longer-term situation?
- Is the drug legal or illegal?
- What quantity of the drug was involved?
- What was the student's motivation?
- Is the student knowledgeable and careful or reckless as to their own and others' safety and how was the drug being used?
- What are the student's home circumstances?
- Does the student know and understand the School policy and School rules?
- Where does the incident appear on a scale from 'possession of a small quantity' to 'persistent supply for profit'?
- If supply of illegal drugs is suspected, how much was supplied, and was the student coerced into the supply role, were they 'the one whose turn it was' to buy for others, or is there evidence of organised or habitual supply?

If during the course of the investigation the School decides that the police should be involved, they should cease immediately in order to enable the police to conduct a full detailed enquiry.

Any response will balance the needs of the individual with those of the wider School community and aim to provide students with the opportunity to learn from their mistakes and develop as individuals.

If because of a drugs misuse problem (or for any other reason) a student acts in such a way as to endanger themselves and/or others, the School will take corrective action to prevent injury/damage or other serious risk. In this situation a dependency issue may be taken into account, but it will not automatically exempt the student concerned from the normal consequences of his/her serious misconduct.

Possible responses include:

- Early intervention and targeted prevention
- Referral
- Counselling
- Behaviour support plans
- Inter-agency programmes
- Fixed-period exclusion
- Pastoral support programmes
- A managed move
- Permanent exclusion

Some responses may serve to enforce and reinforce Schools' rules. Any sanctions will always be justifiable in terms of:

- The seriousness of the incident
- The identified need of the student and the wider School community
- Consistency with published School rules, codes and expectations
- Consistency with disciplinary action for breaches of other of the School's rules (such as theft, violence, bullying)

All students are to be made aware each year that the School imposes a zero-tolerance policy towards illegal drugs use and/or possession. Any student who has been found in possession of or using illegal drugs will be permanently excluded.

Parents/Carers under the influence of drugs on the School's premises

When a member of staff suspects that they are dealing with parents/carers under the influence of drugs on the School's premises, staff should attempt to maintain a calm atmosphere. In such instances, a member of the welfare team or a member of the senior management team must be called to discuss with the parent/carer if alternative arrangements could be made. The focus for staff will always be the maintenance of the children's welfare, as opposed to the moderation of parent's/carer's behaviour. Any

incident involving concern for the safety of a child must be treated as a safeguarding concern and staff must follow the School's Safeguarding & Child Protection policy.

STAFF CONDUCT AND DRUGS:

Refer to the staff code of conduct for further details.

Tobacco and vape liquids – The School's buildings are a 'no smoking' area.
Alcohol –There should be no consumption of alcohol by any staff during the working day, or while they have care of children/young people, for example in boarding houses or on School trips.
Staff possession of illegal drugs, misuse/abuse of drugs – if this is known or suspected the appropriate staff policy and procedures will be followed.

THE NEEDS OF STUDENTS

The School will ensure that students have access to up-to-date information on resources for support. Local and national help lines, youth and community support services and drugs/health services will be prominently displayed so that those in need of help and who are reluctant to approach School staff can easily access it. Drug education programmes will also include details of services and help lines, explain how they work and develop student confidence in using them. Smoking and vaping will be covered in the Schools' PSHE Programmes.

CONFIDENTIALITY

Please refer to the Confidentiality Policy.

APPENDIX 1: EXTERNAL AGENCIES (NATIONAL)

DRUGS	SMOKING	ALCOHOL
National drugs helpline 1-844-289-0879 (24 hour)	Smoking-Help 0800 0 599 881	Alcohol Change 020 3907 8480 www.alcoholchange.org.uk

DRUGWISE https://www.drugwise.org.uk/	NHS helpline 111	Drinkline 0300 123 1110 (weekdays 9am–8pm, weekends 11am–4pm) https://www.drinkaware.co.uk
Re-solv 01785-817885 Information service on all aspects of solvent abuse		Al –Anon 0800 008 6811 offers support to families and friends affected by someone else's drinking.

APPENDIX 2: GUIDE TO AND ACTIONS IN LIGHT OF BREATH ALCOHOL CONTENT (BRAC)

mg/l = .10= Drinkers begin to feel moderate effects.

mg/l = .20 = Most people begin to feel relaxed, mildly euphoric, sociable, and talkative.

mg/l = .25 = Judgment, attention, and control are somewhat impaired. Ability to drive safely begins to be limited. Sensory-motor and finer performance are impaired. People are less able to make rational decisions about their capabilities (for example, about driving.)

mg/l = .35 = This is legal level for intoxication in the UK. There is a definite impairment of muscle coordination and driving skills.

Students should be informed of college rules/ procedure and sent to room for the rest of the evening. Monitored and checked again in 1 hour time.

mg/l = .45 = This is legally drunk. There is a clear deterioration of reaction time and control.

mg/l = .50 - .70 = Vomiting usually occurs, unless this level is reached slowly or a person has developed a tolerance to alcohol. Drinkers are drowsy.

Drinkers display emotional instability, loss of critical judgment, impairment of perception, memory, and comprehension. Lack of sensor-motor coordination and impaired balance are typical. Decreased sensory responses and increased reaction times develop. The vision is significantly impaired, including limited ability to see detail, peripheral vision, and slower glare recovery.

Student should be escorted to their room and asked to remain there for the rest of the evening. Monitored and checked again in 1 hour time.

mg/l = .70 = This level means the equivalent of 1/2 pint of whiskey is circulating in the blood stream.

mg/l = .80 – 1.20 = Drinkers are disoriented, confused, dizzy, and have exaggerated emotional states. Vision is disturbed, as is perception of colour, form, motion, and dimensions.

Drinkers have increased pain threshold and lack of muscular coordination. Drinkers stagger or lose the ability to walk and have slurred speech. Apathy and lethargy are typical.

Student should be escorted to their room and asked to remain for the rest of the evening.
Monitored and checked hourly throughout the night.
If condition worsens – Emergency services need to be called.

mg/l = 1.20 – 1.40 = Drinkers display general inertia, near total loss of motor functions, little response to stimuli, inability to stand or walk, vomiting, and incontinence. Drinkers may lose consciousness or fall into a stupor.

mg/l = 1.40 and over = Symptoms are complete unconsciousness, depressed or absent reflexes, subnormal body temperature, incontinence, and impairment of circulation and respiration.

Death may occur at 1.60 or higher.

Emergency services need to be called and advice from them documented and followed.