



**MANOR JUNIOR SCHOOL**  
*Motivation, Joy, Success!*

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**Headteacher: Mrs C. D'Netto**

# Drugs Education Policy

<b>Ratified and agreed by the School:</b> _____	<b>Spring 2018</b>
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<b>Signed:</b> _____	<b>Mrs C. D'Netto</b>
<b>Date:</b> _____	<b>(Headteacher)</b>
10.01.2018	

<b>Policy to be next reviewed: Spring Term 2021</b> _____
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Manor Junior School  
Drugs Education Policy 2017

(This policy is linked with other school policies behaviour, health and safety, confidentiality, PSHEC, healthy schools, educational visits and child protection.)

This policy has been written in line with our school values:  
**Enthusiasm, Respect, Inclusion and Challenge**

***Manor Junior School is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment***

***MJS is committed to the health and safety of its members and will take action to safeguard their well-being. We will actively discourage the use of illegal substances, alcohol or tobacco and the misuse of glue, solvents, prescribed and over-the-counter medicines. We acknowledge the importance of our pastoral role in the welfare of young people and through the general ethos of the school, will seek to enable pupils needing support to come forward.***

### **Introduction**

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

Together research shows that up to 50% of children have tried an illegal drug by the age of 16. The figures also suggest that the first age of experimentation is decreasing and that children of primary age are exposed to opportunities to try both illegal and illegal drugs. The 1995 white paper 'Tackling Drugs Together' stated that schools had an important role both in reducing the misuse of drugs and minimising their health risks.

Drugs education should contribute to:

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

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

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

## Purpose

The purpose of this policy is to:

- clarify the school's approach to drugs for all staff, students, governors, parents/carers, partner agencies and the wider community
- give guidance on developing, implementing and monitoring the drug education programme
- clarify the legal requirements and responsibilities of the school
- reinforce and safeguard the health and safety of all members of the school community
- enable staff to manage drug related incidents on school premises, and any incidents that occur, with confidence and consistency, and in the best interests of those involved
- ensure that the response to drug related incidents complements the overall approach to drug education and the values and ethos of the school
- provide a basis for evaluating the effectiveness of the school drug education programme and the management of drug related incidents
- to develop a whole school approach to drug education in the context of the school curriculum

## Definition of a drug:

A drug is defined as a substance people take to change the way they feel, think or behave.

*(United Nations Office on Drugs and Crime)*

This includes any substances that affect your body. This includes socially acceptable and unacceptable drugs. These will include:-

- all illegal drugs (those controlled by the Misuse of Drugs Act 1971)
- all legal drugs including alcohol, tobacco, paan, and also volatile substances (those giving off a gas or vapour which can be inhaled eg, e-Cigarettes)
- all medicines, whether over the counter or prescription

## Staff support and training:

- It is essential that all school staff have a general drug awareness and a clear understanding of the school's drug and other related policies.
- Continuing professional development will be provided for all those involved in teaching drug education to develop the necessary skills, knowledge and confidence in addressing drug issues with students.
- All new staff will be made aware of the school drug policy.

*The policy is reviewed every three years.*

## Responsibilities

### The role of the Headteacher

The headteacher will

- ensure that staff and parents are informed about this drugs education policy
- ensure that the policy is implemented effectively
- manage any drug-related incidents

- ensure that staff are given sufficient training, so that they can teach effectively and handle any difficult issues with sensitivity
- liaise with external agencies regarding the school drugs education programme
- monitor the policy on a day to day basis and report to governors, when requested, on the effectiveness of the policy.

### **The role of governors**

The governing body will

- designate a governor with specific responsibility for drugs education;
- establish general guidelines on drugs education;
- support the headteacher in following these guidelines;
- inform and consult with parents about the drugs education policy;
- liaise with the LEA and health organisations, so that the school's policy is in line with the best advice available;
- support the headteacher in any case conferences, or in appeals against exclusions.
- The school governors will review this policy in line with the review policy timetable.
- The lead governor for all drug related matters is S Begum

### **The role of parents**

The school is well aware that the primary role in children's drugs education lies with parents. We wish to build a positive and supporting relationship with the parents of children at our school through our school ethos of enthusiasm, respect, inclusion and challenge.

In promoting this objective we will:

- inform parents about the school drugs education policy and practice;
- invite parents to view any materials used to teach drugs education in our school;
- answer any questions parents may have about the drugs education their child receives in school;
- take seriously any issue which parents raise with teachers or governors about this policy or the arrangements for drugs education in the school;
  - encourage parents to be involved in reviewing the school policy and making modifications to it as necessary;
- inform parents about the best practice known with regard to drugs education so that the parents can support the key messages being given to children at school.

## **Section 2 – Drug Education**

### **Drug education**

#### **Objectives of drugs education**

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.

Drug education should:

Increase students' knowledge and understanding about:

- the risks associated with drugs (short and long term)
- the laws and rules relating to drugs
- the impact of drugs on individuals, relationships, families and communities
- the prevalence of drug use
- the complex moral, social, emotional and political issues surrounding drugs
- explore their own and other people's attitudes towards drugs, drug use and drug users, including challenging stereotypes, and exploring media and social influences

Develop students' personal and social skills to make informed decisions and keep themselves safe and healthy, including:

- assessing, avoiding and managing risk
- communicating effectively
- resisting pressures- refusal and decision making skills
- finding information, help and advice
- devising problem-solving coping strategies
- developing self-awareness and self-esteem
- take increased responsibility for themselves and their actions
- encourage children to value themselves and others
- encourage children to help and support others
- encourage children to work cooperatively in active learning and group work
- clarify what children already know, give information to clarify facts and correct false knowledge and beliefs

*The programme of drug education is informed by 'Drugs: Guidance for Schools' published by the Department for Education and Skills in 2004.*

## **Resources**

Drugs education is part of the planned PSHE curriculum and is also delivered through the teaching of Science and through circle time. The PSHE framework outlines the areas to be covered each year. The NC guidelines for science require that children are taught:-

- At KS1 about the role of drugs and medicines □
- At KS2 that tobacco, alcohol and other drugs can have harmful effects

## **Cross-curricular links**

Drug education has many cross-curricular links, with science making a particular contribution. However, the development of life skills is a theme throughout the curriculum, within the programme for Personal, Social, Health and Citizenship Education (PSHCE), and enshrined in the values, which are embodied in the schools' ethos of ERIC. There are links to other subjects, such as physical education, and aspects of school life, notably the spiritual, moral, social and cultural aspects of the curriculum.

## Teaching

Our approach to drugs education is one which children are given information in the belief that increased knowledge about drugs and the risks will empower children to make informed and safe decisions.

We approach this in a sensitive manner appropriate to the age and experiences of the children concerned.

We recognise that learning is most effective when it addresses the development of knowledge, attitudes and skills together, and when teaching and learning are participative and active. We use a variety of teaching styles that are characterised by active learning. We find out what the children know already, we pose dilemmas, and we get the children to discuss choices. Wherever possible the information we give is visually reinforced. We use drama, role-play or ICT to demonstrate various strategies and scenarios. In short, we seek to engage our pupils. We give them the opportunity to talk to groups or to the whole class. We encourage them to listen to the views of others, and we ask them to explore why drugs are such a problem for society.

Teaching is:-

- Well resourced
- Reflects the needs and experiences of pupils
- Uses a range of teaching methods including group work, discussions, video clips and outside speakers
- Reinforces messages about healthy lifestyles
- Flexible and relevant
- In the context of a wider PSHE programme
- Interesting and stimulating
- Informed
- Delivered within a safe, secure and supportive learning environment
- Ground rules are set out, and teachers and students right to privacy is respected. Boundaries of discussions are made clear.
- Group agreements are made to help to foster mutual respect and an environment in which students feel comfortable and ready to listen to and discuss each other's opinions.
- Distancing techniques can be adopted through role play/anonymous question boxes/ 'problem –page' letters etc.
- Staff are advised to sometimes answer difficult questions on an individual basis

We aim to teach all pupils about drugs, however different their attainment levels, and however diverse their requirements. We recognise that pupils with special educational needs may be more vulnerable, that different communities have different attitudes towards drug abuse, and that some pupils may have drug-abusing parents.

Drugs education takes place during normal lesson time. Sometimes a class teacher will seek support from the school nurse or another health professional. In teaching this course we follow the DfES and LEA guidelines. The resources and materials that we use are recommended either by the Health Authority or by the LEA. Lessons that focus on drugs education form part of a sequence of lessons that are designed to promote a healthy lifestyle.

If outside speakers are used in any aspect of the drugs education programme, their contribution will be properly planned. They will support the work of the teacher who will meet with the speaker beforehand to plan the work and explain the school's

policy on drug education. Teachers will be present and involved in all sessions and will evaluate the work afterwards. The teacher has overall responsibility for the session and the work planned.

### **Training, Monitoring and Evaluation**

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

### **Drugs at School**

Pupils may not bring prescribed medication into school. Parents may visit the school in the lunch break to bring and administer prescribed medication themselves, by prior arrangement.

Where children have medical needs, parents must give the school, details of the child's condition and medication. Parents will bring the medication to school in a secure, labelled container. Records will be kept of all medication received and given. Emergency medication may be stored securely in the classroom (for anaphylaxis or asthma); other drugs will be stored securely in the medical room.

Solvents and other hazardous chemicals must be stored securely, to prevent inappropriate access, or use by pupils. Teachers are cautious with older, solvent-based Tippex, with aerosols, with glues and with board-cleaning fluids.

Legal drugs are legitimately in school only when authorised by the headteacher. Members of staff who smoke must keep their tobacco, e-cigarettes and matches or lighters secure. Smoking / vaping is not permitted anywhere in the school or on school premises.

Alcohol to be consumed at community or parents' events will be stored securely beforehand. To sell alcohol we must be licensed under the Licensing (Occasional Permissions) Act, 1983.

### **Managing Drug-related incidents**

**All instances of known or suspected drug use or misuse, on the school premises must be reported to the head teacher.**

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

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

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

The school's policy is that 'no individuals should be under the influence of drugs (as detailed in this policy) while on the school premises (within the boundary of the external playground wall) unless a doctor's note indicates that this does not affect the

individuals capacity to perform their duties, take care of children in their charge, or in the case of pupils, take part in lessons.

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

Each incident will be dealt with on an individual basis.

*The school follows the Barking and Dagenham LA's policy for the Handling and Disposal of drug related paraphernalia – Appendix 4.*

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

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

All incidents are recorded in the incident monitoring log.

The first priority is safety and first aid, i.e. calling the emergency services and placing unconscious people in the recovery position. An intoxicated pupil does not represent a medical emergency, unless unconscious.

Pupils suspected of being intoxicated from inhaling a volatile substance will be kept calm; chasing can place intolerable strain on the heart, thus precipitating sudden death.

Any drug suspected of being illegal will be confiscated and stored securely, awaiting disposal; these precautions must be witnessed and recorded. Staff should not taste unknown or confiscated substances.

Legal but unauthorised drugs or medicines will also be confiscated, and will be returned to parents; the school may arrange for the safe disposal of volatile substances.

Where a pupil is suspected of concealing an unauthorised drug, staff are not permitted to carry out a personal search, but may search pupils' bags, trays etc.

The headteacher will decide if the police need to be called or whether the school will manage the incident internally.

A full record will be made of any incident.

The headteacher will conduct an investigation into the nature and seriousness of any incident, in order to determine an appropriate response.

### **Confidentiality**

- Teachers cannot and should not promise total confidentiality
- Issues regarding confidentiality are outlined in the school's confidentiality policy
- If a student discloses information which is sensitive, not generally known, and the student asks not to be passed on, the request should be honoured by the teacher involved unless this is unavoidable in order for the teacher to fulfil

their responsibility in relation to child protection, co-operating with police investigations and referral to external sources of support and guidance

- If a student's safety is under threat it will be necessary to invoke child protection procedures

### **The needs of students**

The school is aware that some students are more vulnerable to drug misuse than others. The school is also aware of the impact that parental or family member drug misuse can have on a student and their education. The school will be alert to behaviour which might indicate that a student is facing difficult home circumstances.

### **Referral and external support**

Heads of year, the SENCO, school nurse and senior leadership team are responsible for referral to agencies. A list of local support services and national helplines/websites is published in appendix E of this policy.

### **Involvement of parents/carers**

In any incident involving illegal and other unauthorised drugs the school will normally involve the student's parents/carers and explain how they intend to respond to the incident and to the student's needs. Where the school suspects that to do this might put the student's safety at risk, or if there is any other cause for concern for the student's safety at home, then the school will exercise caution when considering involving parents/carers. In any situation where a student may need protection from the possibility of abuse, the school's child protection co-ordinator will be consulted and local child protection procedures followed.

Parents/carers are encouraged to approach the school if they are concerned about any issue related to drugs and their child and the school will refer parents/carers to other sources of help, for example, specialist drug agencies or family support groups, as required.

If parents/carers are suspected of being under the influence of drugs or alcohol on school premises, staff should attempt to maintain a calm atmosphere and call for a second adult, if necessary. On occasion, a teacher may have concerns about discharging a student into the care of a parent/carer. In such instances, the school will implement its child protection policy.

## Appendix B

### Content of and progression within drug education

#### Appendix 2: Content of and progression within drug education – Knowledge and Understanding

Key Stage 1	Key Stage 2	Key Stage 3	Key Stage 4
<p>Pupils should be taught:</p> <ul style="list-style-type: none"> <li>(PSHE and Ct 2d) to agree and follow rules for their group and classroom, and understand how rules help them (e.g. simple safety rules)*</li> <li>(Sc2 2d) about the role of drugs as medicines</li> <li>(PSHE and Ct 3f) that all household products, including medicines, can be harmful if not used properly</li> <li>(PSHE and Ct 3g) rules for, and ways of, keeping safe, including basic road safety (e.g. rules for medicines)*, and about people who can help them to stay safe (e.g. the police, health professionals)*</li> </ul>	<p>Pupils should be taught:</p> <ul style="list-style-type: none"> <li>(PSHE and Ct 2b) why and how rules and laws are made and enforced, why different rules are needed in different situations and how to take part in making and changing rules</li> <li>(Sc2 2g) about the effects on the human body of tobacco, alcohol and other drugs, and how these relate to their personal health</li> <li>(PSHE and Ct 3a) what makes a healthy lifestyle, including the benefits of exercise and healthy eating, what affects mental health and how to make informed choices</li> <li>(PSHE and Ct 3b) that bacteria and viruses can affect health and that following simple, safe routines can reduce their spread</li> <li>(PSHE and Ct 3d) which commonly available substances and drugs are legal and illegal, their effects and risks</li> <li>(PSHE and Ct 3f) that pressure to behave in an unacceptable or risky way can come from a variety of sources, including people they know, and how to ask for</li> </ul>	<p>Pupils should be taught:</p> <ul style="list-style-type: none"> <li>(Ct 1a) about the legal and human rights and responsibilities underpinning society, basic aspects of the criminal justice system, and how both relate to young people</li> <li>(Ct 1f) about the work of community based, national and international voluntary groups</li> <li>(PSHE 2b) how to keep healthy and what influences health, including the media</li> <li>(PSHE 2c) that good relationships and an appropriate balance between work, leisure and exercise can promote physical and mental health</li> <li>(Sc2 2m) that the abuse of alcohol solvents and other drugs affects health</li> <li>(PSHE 2d) basic facts and laws, including school rules, about alcohol and tobacco, illegal substances and the risks of misusing prescribed (and over-the-counter)* medicines</li> <li>(PSHE 2h) basic emergency aid procedures and where to get help and support</li> </ul> <p>During this Key Stage, pupils should be taught the knowledge, skills and understanding through opportunities to:</p> <ul style="list-style-type: none"> <li>(PSHE 4h) find information and</li> </ul>	<p>Pupils should be taught:</p> <ul style="list-style-type: none"> <li>(Ct 1a) about the legal and human rights and responsibilities underpinning society and how they relate to citizens, including the role and operation of the criminal and civil justice systems (e.g. in relation to drug, alcohol and tobacco laws)*</li> <li>(Ct 1c) about the work of Parliament, the Government and the courts in making and shaping the law (e.g. laws on use, misuse and supply, the reclassification of substances, etc)*</li> <li>(PSHE 2a) to think about the alternatives and long-and short-term consequences when making decisions about personal health</li> <li>(Sc2 2m) about the effects of solvents, alcohol, tobacco and other drugs on bodily functions</li> <li>(PSHE 2e) about the health risks of alcohol, tobacco and other drug use, early sexual activity and pregnancy, different food choices and sunbathing, and about safer choices they can make</li> <li>(PSHE 3j) to know about the statutory and voluntary organisations that relate to drug, alcohol and</li> </ul>

	<p>help and use basic techniques for resisting pressure to do wrong</p> <ul style="list-style-type: none"> <li>• (PSHE and Ct 3g) school rules about health and safety, basic emergency aid procedures and where to get help</li> <li>• (PSHE and Ct 4g) where individuals, families and groups can get help and support</li> </ul>	advice	tobacco use*
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## Appendix 2 Continued: Content of and progression within drug education – Skills

Key Stage 1	Key Stage 2	Key Stage 3	Key Stage 4
<p>Pupils should be taught:</p> <ul style="list-style-type: none"> <li>• (PSHE and Ct 1b) to share their opinions on things that matter to them and explain their view (e.g. about illness and taking medicines)*</li> <li>• (PSHE and Ct 1c) to recognise name and deal with their feelings in a positive way</li> <li>• (PSHE and Ct 2c) to recognise choices they can make, and recognise the difference between right and wrong</li> <li>• (PSHE and Ct 3a) how to make simple choices that improve their health and well-being</li> </ul> <p>During this Key Stage, pupils should be taught the knowledge, skills and understanding through opportunities to:</p> <ul style="list-style-type: none"> <li>• (PSHE and Ct 5a) take and share responsibility (e.g. for their own behaviour; by helping to make classroom rules and following them; by looking after pets well)</li> <li>• (PSHE and Ct 5d) make real choices</li> <li>• (PSHE and Ct 5e) meet and talk with people</li> <li>• (PSHE and Ct 5h) ask for help</li> </ul>	<p>Pupils should be taught:</p> <ul style="list-style-type: none"> <li>• (PSHE and Ct 1a) to talk and write about their opinions, and explain their views, on issues that affect themselves and society</li> <li>• (PSHE and Ct 2b) why and how rules and laws are made and enforced, why different rules are needed in different situations and how to take part in making and changing rules</li> <li>• (PSHE and Ct 3e) to recognise the different risks in different situations and then decide how to behave responsibly, including sensible road use, and judging what kind of physical contact is acceptable or unacceptable</li> <li>• (PSHE Ct 3f) that pressure to behave in an unacceptable or risky way can come from a variety of sources, including people they know, and how to ask for help and use basic techniques for resisting pressure to do wrong</li> <li>• (PSHE and Ct 4e) to recognise and challenge stereotypes</li> </ul> <p>During this Key Stage, pupils should be taught the knowledge, skills and understanding through opportunities to:</p> <ul style="list-style-type: none"> <li>• (PSHE and Ct 5e) meet and talk with people</li> <li>• (PSHE and Ct 5h) find information</li> </ul>	<p>Pupils should be taught:</p> <ul style="list-style-type: none"> <li>• (PSHE 2f) to recognise and manage risk and make safer choices about healthy lifestyles, different environments and travel</li> <li>• (PSHE 2g) to recognise when pressure from others threatens their personal safety and well-being and to develop effective ways of resisting pressures, including knowing when and where to get help</li> <li>• (PSHE 3a) about the effects of all types of stereotyping, prejudice, bullying, racism and discrimination and how to challenge them assertively</li> <li>• (PSHE 3d) to recognise some of the cultural norms in society, including the range of lifestyles and relationships (e.g. recognising that not all young people use drugs, alcohol or tobacco)*</li> <li>• (PSHE 3k) to communicate confidently with their peers and adults</li> </ul> <p>During this Key Stage, pupils should be taught the knowledge, skills and understanding through opportunities to:</p> <ul style="list-style-type: none"> <li>• (PSHE 4c) participate (e.g. in developing and putting into</li> </ul>	<p>Pupils should be taught:</p> <ul style="list-style-type: none"> <li>• (PSHE 1d) to recognise influences, pressures and sources of help and respond to them appropriately</li> <li>• (Ct 2a) to research a topical political, spiritual, moral, social or cultural issue, problem or event by analysing information from different sources, showing an awareness of the use and abuse of statistics</li> <li>• (PSHE 2b) to use assertiveness skills to resist unhelpful pressure</li> <li>• (PSHE 2g) to seek professional advice confidently and find information about health</li> <li>• (PSHE 2h) to recognise and follow health and safety requirements and develop the skills to cope with emergency situations that require basic aid procedures, including resuscitation techniques</li> <li>• (Ct 3a) to use their imagination to consider other people's experiences and be able to think about, express, explain and critically evaluate views that are not their own</li> <li>• (Ct 3b) to negotiate, decide and take part responsibly in</li> </ul>

	<p>and advice (e.g. through help lines; by understanding about welfare systems in society)</p>	<p>practice school policies about drugs and alcohol)*</p> <ul style="list-style-type: none"> <li>• (PSHE 4e) meet and work with people (e.g. people who can give them reliable information about health and safety issues, such as school nurses, community drug awareness workers).</li> <li>• (PSHE 4h) find information and advice (e.g. about drug misuse)*</li> </ul>	<p>school and community-based activities</p> <ul style="list-style-type: none"> <li>• (PSHE 3c) to challenge offending behaviour, prejudice, bullying, racism and discrimination assertively and take the initiative in giving and receiving support</li> </ul> <p>During this Key Stage, pupils should be taught the knowledge, skills and understanding through opportunities to:</p> <ul style="list-style-type: none"> <li>• (PSHE 4c) participate (e.g. in an initiative with local shopkeepers to highlight the law on selling tobacco to young people)*</li> <li>• (PSHE 4h) find information and provide advice</li> </ul>
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## Appendix 2 Continued: Content of and progression within drug education – Attitudes

Key Stage 1	Key Stage 2	Key Stage 3	Key Stage 4
<p>Pupils should be taught:</p> <ul style="list-style-type: none"> <li>(PSHE and Ct 2a) to take part in discussions with one other person and the whole class (e.g. by exploring attitudes to medicines and other substances)*</li> <li>(PSHE and Ct 2b) to take part in a simple debate about topical issues</li> </ul> <p>During this Key Stage, pupils should be taught the knowledge, skills and understanding through opportunities to:</p> <ul style="list-style-type: none"> <li>(PSHE and Ct 5b) feel positive about themselves</li> <li>(PSHE and Ct 5c) take part in discussions</li> <li>(PSHE and Ct 5g) consider social and moral dilemmas that they come across in everyday life (e.g. attitudes towards smoking and alcohol)*</li> </ul>	<p>Pupils should be taught:</p> <ul style="list-style-type: none"> <li>(PSHE and Ct 1b) to recognise their worth as individuals by identifying positive things about themselves and their achievements, seeing their mistakes, making amends and setting personal goals</li> </ul> <p>During this Key Stage, pupils should be taught the knowledge, skills and understanding through opportunities to:</p> <ul style="list-style-type: none"> <li>(PSHE and Ct 5a) take responsibility</li> <li>(PSHE and Ct 5b) feel positive about themselves</li> <li>(PSH and Ct 5g) consider social and moral dilemmas that they come across in life (e.g. attitudes towards smoking and alcohol)*</li> </ul>	<p>Pupils should be taught:</p> <ul style="list-style-type: none"> <li>(Ct 1a) the legal and human rights and responsibilities underpinning society, basic aspects of the criminal justice system, and how both relate to young people (e.g. by considering attitudes towards law-breaking and the criminal justice system in relation to drugs, alcohol and tobacco)*</li> <li>(PSHE 3b) how to empathise with people different from themselves</li> </ul> <p>During this Key Stage, pupils should be taught the knowledge, skills and understanding through opportunities to:</p> <ul style="list-style-type: none"> <li>(PSHE 4b) feel positive about themselves</li> <li>(PSHE 4g) consider social and moral dilemmas</li> </ul>	<p>Pupils should be taught:</p> <ul style="list-style-type: none"> <li>(Ct 1a) the legal and human rights and responsibilities underpinning society and how they relate to citizens, including the role and operation of the criminal and civil justice systems (e.g. by considering attitudes towards the law and the role of the criminal justice system in relation to drugs, in the UK and elsewhere)*</li> <li>(Ct 2a) to research a topical political, spiritual, moral, social or cultural issue, problem or event (e.g. young people's attitudes and values in relation to substance use)* by analysing information from different sources, including ICT-based sources, showing an awareness of the use and abuse of statistics</li> </ul> <p>During this Key Stage, pupils should be taught the knowledge, skills and understanding through opportunities to:</p> <ul style="list-style-type: none"> <li>(PSHE 4b) feel positive about themselves</li> <li>(PSHE 4g) consider social and moral dilemmas</li> </ul>

## **Appendix D**

### **Useful sources of information for members of staff**

PSHE framework – [www.nc.uk.net/home.html](http://www.nc.uk.net/home.html) - national curriculum framework  
Drugs: Guidance to Schools, DFCS 2004 – essential guidance for all drug related matters in schools

Joining Forces. Drugs : Guidance for police working with schools and colleges. ACPOA 2006

Drugscope – [www.drugscope.co.uk](http://www.drugscope.co.uk) – a centre for expertise on illegal drugs. School resources can be purchased.

National Children's Bureau – [www.ncb.org.uk](http://www.ncb.org.uk) – promotes the wellbeing of all children in all aspect of their lives

Parentline Plus – [www.parentlineplus.org.uk](http://www.parentlineplus.org.uk) – a source of information and support for parents

HIT – [www.hit.org.uk](http://www.hit.org.uk) – supplier of educational resources for drug education

Tacade – [www.tacade.com](http://www.tacade.com) - supplier of educational resources for drug education

## **Appendix E**

### **Useful sources of information for children**

FRANK – [www.talktofrank.com](http://www.talktofrank.com) – national illegal drug awareness campaign including sources of information and support

The Axe Street Project – [www.axestreet.com](http://www.axestreet.com) – a local substance misuse assessment centre based in Barking town centre (18 years and over)

Community Alcohol Team – [www.cri.org.uk](http://www.cri.org.uk) – a confidential service for people aged 16 and over experiencing alcohol problems

Subwize – A local drug and alcohol support service for young people aged 11-18 affected by alcohol or drugs. Tel 020 8491 2345. Based at 20 East Street, Barking, IG11 8EU.

**Signed: Mrs C. D'Netto**

**Reviewed:**

**Date: Summer term 2019**

**Date: 02/07/2019**

**Next review due – Spring term 2021**