



BALLYMENA ACADEMY

EST. 1828

Drugs Education Policy

Policy ratified by Board of Governors: June 2025
Date of next Review: June 2026

RATIONALE

Schools have a key role to play in ensuring that young people understand the risks involved in drug misuse. Pupils should have the knowledge, skills and confidence, to avoid the dangers associated with contemporary drug culture.

The misuse of drugs and other potentially harmful substances is potentially an issue for any young person regardless of their background.

With the prevalence and accessibility of drugs in the community many young people in Northern Ireland are in contact with controlled drugs and harmful substances. Indeed, some may view their misuse as acceptable behaviour.

Ballymena Academy is aware of adverse peer pressures, endangering social circumstances and situations, and the limited guidance given by many parents to their children in relation to drugs.

Ballymena Academy will endeavour to enable young people to avoid drug misuse. Our pupils will be provided with the knowledge and skills which they need in order to make informed and responsible decisions.

Where pupils are found to be in breach of the Positive Behaviour Policy by engaging in drug misuse, they will be subject of disciplinary action.

OBLIGATIONS of BALLYMENA ACADEMY in RELATION to DRUGS

Ballymena Academy is legally obliged to:

- teach Drugs Education to all pupils
- devise and implement a Drugs Education and Prevention Policy
- inform the PSNI where they believe or suspect a pupil to be in possession of a “controlled drug”
- inform the PSNI of any suspect substance found on school premises.

DRUGS: DEFINITION

In its broadest sense, the term ‘drugs’ includes any substance which when taken has the effect of altering the way the body works or the way a person behaves, feels, sees or thinks.

As well as everyday substances such as tea and coffee, substances may include:

- alcohol, tobacco-related products, including nicotine replacement therapy (NRT) and nicotine pouches , and electronic cigarettes (more commonly now referred to as vapes (see appendix 1)).
- 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, products containing cannabis oil, LSD, ecstasy, amphetamine sulphate (speed), magic mushrooms, heroin and cocaine (see appendix 2);
- new psychoactive substances (NPS), formerly known as legal highs, which contain one or more chemical substances that produce similar effects to illegal drugs and are sold as incense, salts or plant food and marked 'not for human consumption' to avoid prosecution; and
- other substances such as amyl or butyl nitrate (known as poppers) and unprocessed magic mushrooms.

Many drugs are classified as illegal. However, some "legal" substances can also be classified as "illicit" because they are against the rules of the school. Illicit but legal substances include solvents, glues, correcting fluids, raw magic mushrooms, aerosols and "legal highs". Alcohol and tobacco products, therefore, can be both illegal and illicit.

AIMS AND OBJECTIVES

- To provide drugs education which develops pupils' self-esteem and promotes positive attitudes to choices they can make.
- To give pupils opportunities to develop the values, skills, knowledge and understanding to make informed and responsible decisions about the use/misuse of drugs including tobacco, alcohol and volatile substances within the context of a healthy lifestyle.
- To help pupils develop the skills necessary to assert themselves positively and confidently to resist negative pressures and influences.
- To offer appropriate advice for pupils who may be affected by drug-related issues.
- To have clear understanding among everyone in the school community about the implications and possible consequences of drug misuse.
- To provide all staff with guidelines to enable them to deal effectively with incidents of suspected drug misuse.
- To ensure there are clear procedures to be followed in a drug related incident in school.
- To inform parents of the content of this policy and the procedures implemented in the management of incidents of suspected drug misuse.

ROLES AND RESPONSIBILITIES

The role of the Board of Governors

The Board of Governors is responsible for Ballymena Academy and will collaborate with appropriate staff, pupils and parents or carers to implement and review the drugs policy. They are responsible for:

- Facilitating the consultative process where the school community can respond and contribute to the policy's effectiveness and quality, which the governors should examine and approve before implementing in the school;
- Ensuring details of the policy are published in the school prospectus and that these are reviewed at least annually and after a drug-related incident; and
- Being fully aware of and adequately trained to deal with suspected drug-related incidents, including alcohol and tobacco, tobacco-related products, vapes, and their appropriate disciplinary response.
- Ensuring a member of the Board of Governors receives specific training in drugs related matters.

The role of the Principal (Mr. S. Black)

It is the Principal's responsibility to determine the circumstances of all incidents, but it is the responsibility of the PSNI to investigate any criminal or suspected criminal offence. In any suspected drug-related incident, the principal should contact the parents or carers of those pupils involved. The Principal must ensure that in any incident involving a controlled substance there is a close liaison with the PSNI. **Failure to inform the PSNI of a suspected incident involving controlled drugs is a criminal offence.**

After contacting the PSNI, the Principal should confine their responsibilities to;

- The welfare of the pupil(s) involved in the incident and the other pupils in the school;
- Health and safety during the handling, storage and safe disposal of any drugs or drug-related paraphernalia, using protective gloves at all times;
- Informing the Board of Governors;
- Agreeing any appropriate pastoral or disciplinary responses;
- Reporting the incident to the Education Authority, for example if an incident;
 - Is serious enough to require PSNI involvement;
 - Requires that a child protection procedure is invoked; or
 - Leads to the suspension or exclusion of a pupil; and
- Completing a written report and forwarding a copy to the Board of Governors and the designated officer in the Education Authority.
- Where a pupil is suspected of having taken or being in possession of an illegal substance, the school reserves the right to search the pupil and their possessions, with their permission. Where a pupil is non-cooperative, the PSNI and parent will be contacted.

Contacting the PSNI

The school should establish and maintain contact with the designated officer in their local PSNI area to ensure an appropriate response when dealing with suspected drug-related incidents that might arise in school.

The school must notify the local PSNI in every case where a pupil has or is suspected of having controlled drugs in their possession, either on their person or in their belongings, or if controlled drugs are found on the school premises.

In certain circumstances, the PSNI may interview a pupil on school premises with the Principal's agreement. The school needs to make all possible efforts to inform the pupil's parents or carers before a PSNI interview takes place. The PSNI will not conduct an interview without the correct persons being present.

The Role of Designated Teacher for Drugs

The duties and responsibilities of the Designated Teacher for Drugs include:

- Ensuring that all staff and parents are aware of, and have access to, the Drugs Education Policy
- Liaising with other staff responsible for coordinating the delivery of the drug education programme (LLW & Tutor Groups)
- Coordinating the induction of all staff in the procedures for dealing with incidents of suspected drug use.
- Ensuring that the Pastoral Care Policy, Child Protection Policy and Positive Behaviour Policy support the Drugs Education Policy
- Co-ordinating the school's procedures for handling suspected drug-related incidents and training and inducting new and existing staff in these procedures;
- Ensuring that the school's disciplinary policy has an appropriate statement about any disciplinary response resulting from suspected drug-related incidents;
- Ensuring that the school's pastoral care policy has an appropriate statement about any pastoral response resulting from suspected drug-related incidents;
- 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 a pupil or pupils concerned;
- Responding to advice from first aiders, in the event of an incident, and informing the principal, who should contact the pupils parents or carers immediately;
- Taking possession of any substance(s) and associated paraphernalia found in a suspected incident;
- Managing pupil(s) involved in a suspected incident;
- Completing a factual report along with the school's incident report form (see appendix 6), which they forward to the Principal;
- Reviewing and if required updating the policy at least annually and after a drug-related incident, where learning from the experience could improve practice.

In view of the responsibilities involved, the Designated Teacher should be a member of the school's Senior Leadership Team . In the absence of the Designated Teacher, the school should appoint a recognised deputy.

The Role of All Staff – teaching and non-teaching

All Staff, both teaching and non-teaching, are expected to lead by example and present a united message on the dangers and unacceptability of substance abuse by pupils or others. All Staff should be familiar with the content of the Drugs Education and Prevention Policy and to be involved in its implementation. All staff should;

- Be familiar with the content of this policy
- Be familiar with recognising signs of substance use and report this to the Designated Teacher (see appendix 3)
- Be familiar with the school procedures in the handling of a drug related incident (see appendix 4)
- Be familiar with the emergency procedures (see appendix 4)
- Deal with any emergency procedures to ensure the safety of pupils and staff (a thorough investigation will be carried out by the Designated Teacher)
- Forward information, substance or paraphernalia to the Designated Teacher immediately
- Use the Drugs Incident Report Form to complete a brief factual report on the suspected incident and forward to the Designated Teacher (see appendix 5)
- Adhere to the school's Safeguarding Policy
- Engage as required in appropriate related INSET training

The Role of Pastoral Care Staff

Pastoral Care Staff are responsible for:

- Counselling and encouraging pupils to avoid the misuse of drugs,
- Providing any information to the Principal about drug use or suspected drug use as discovered whilst carrying out pastoral duties,
- Assisting the Principal and Vice Principal with any drug related inquiries as required.

The Role of Health Education Co-Ordinator

It is their responsibility to manage the delivery of the PD programme to ensure drugs education is provided in line with the statutory NI curriculum requirements.

The Role of Pupils

Pupils are responsible for:

- Adhering to, the school's policy related to a drugs-related incident
- Engaging with the school's drug education curriculum
- Informing staff of any information related to a suspected drug-related incident

The Role of Parents and Carers

Parents and carers are responsible for;

- Accessing the policy and become familiar with the school's procedures for drugs education and drug-related incidents
- Supporting the school in the implementation of the policy, including the procedures for handling of suspected drug misuse.

For further information see;

Appendix 6; “Managing Drug Related Incidents Summary”

Appendix 7; “Managing a Parent or Carer that arrives to school to collect a child and appears to be under the influence of alcohol or another substance”

Appendix 8; “Workplace Drug Testing”

Appendix 9; “Useful Contacts in Northern Ireland”

THE MANAGEMENT of SOLVENTS in SCHOOL

See: Ballymena Academy Health and Safety Policy.

See: COSHH regulations.

THE MANAGEMENT of PRESCRIBED MEDICINES in SCHOOL

See: Ballymena Academy Pupil Medical Conditions Policy.

POLICY REVIEW

The Drugs Education and Prevention Policy will be reviewed annually.

DRUGS EDUCATION IN THE CURRICULUM

WELFARE, CARE and PROTECTION

Ballymena Academy recognises that the welfare, care and protection of our pupils are of central importance. The school grounds and buildings are alcohol free zones. The premises, for which Ballymena Academy are responsible, are completely smoke-free environments at all times. (See appendix 3)

Drugs Education is a whole-school issue so that all our pupils make informed, considered choices. Drugs Education is delivered, across the curriculum, by trained and informed teachers.

Drugs Education forms a part of a comprehensive programme of personal, social education and health education. Through Drugs Education, pupils will develop their knowledge and understanding of the use, misuse, effects and risks of drugs and other potentially harmful substances. Pupils will develop a critical awareness of the relevant personal, social and economic implications of drug misuse.

A pastoral care and support programme operates throughout the school, and support and counselling are available to all pupils.

DRUGS EDUCATION PROGRAMME DELIVERY

In Ballymena Academy, Drugs Education is part of the Health Education provision. It is delivered as part of the Personal Social and Health Education programme throughout KS3 and the Pastoral Programme at KS4 KS5.

The Drugs Education programme is reinforced within such subjects as Science, Religious Education, English, Home Economics, Physical Education and through Learning for Life and Work.

The Drugs Education programme covers all aspects of substance misuse and ensures progression and continuity.

The depth of coverage is in accordance with the age group addressed.

Programme Aims

In delivering the Drugs Education Programme, the School aims:

- to equip pupils to make informed and responsible choices
- to continue to create a climate of fulfilment, confidence and support in which drug misuse is unlikely to flourish
- to ensure Staff and Parents are aware of the school's approach to drugs education.

Programme Objectives

The following are the principal objectives of the Drugs Education Programme:

Increasing Knowledge

- to be aware of the different categories into which drugs are placed
- to consider their possible benefits, use or misuse, and harmful effects
- to encourage a healthy and critical respect for all substances taken into the body
- to acquire an understanding of the factors that lead to drug use and misuse
- to teach the benefits of a drug-free lifestyle

Enhancing Skills

- to develop skills which will enable young people to live safely in a drug-affected society
- to empower pupils to take responsibility for their own health and safety
- to enable them to avoid exploitation, pressure and abuse
- to explore beneficial methods of dealing with peer pressures, personal anxieties, boredom and lethargy

Developing Citizenship

- to have a preventative role in combating the possible misuse of drugs by young people
- to promote a sense of responsibility with respect to family and community health
- to help pupils understand the positive influence they can bring to bear upon their friends
- to enhance pupils' decision-making skills, using drugs education as a vehicle

Improving Behaviour

- to minimise the number of young people who will ever engage in drug misuse
- to persuade those who are experimenting with drugs or misusing them to stop or to seek help

Changing Attitudes

- to enable pupils to explore their own attitudes towards drugs and drug-related issues
- to build up the self-esteem of the pupils who are at risk.

APPENDIX 1

Vapes

Vapes 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 vapes are perceived to be less harmful than tobacco, there are concerns about their safe use and health impacts, particularly when ~~children~~ and young people use them, because the electronic cigarette market is unregulated. Disposable vapes are banned in (since 1st June 2025) and The Chief Medical Office (CMO) of Northern Ireland has advised that schools prohibit all vapes on their premises, in line with tobacco products, because:

- nicotine is very addictive and there is a risk that using vapes could act as a gateway into smoking or illicit drug use 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 vapes is reversing progress made by smoke-free legislation to de-normalise smoking; and
- there is currently insufficient evidence to determine whether the vapour produced by vapes causes damage to users health in the long term, initial studies are pointing towards a negative impact. The same applies to the impact of second-hand vapour that the user exhales.

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

Ballymena Academy does not permit the use of smoking of any kind on its premises.

APPENDIX 2

Main Types of Controlled Drugs 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 PSNI can take away a suspected temporary class substance | Up to 14 years in prison, an unlimited fine or both |

Please note:

- Although a Class C drug, the maximum penalty for supply/possession with intent of cannabis is 14 years.
- Magic mushrooms are not illegal to possess or eat in their raw state, but it is an offence to process them, dry them, store them or use them in tea, stew etc.
- The above table refers to some commonly available drugs. It is not a complete list of controlled drugs.

Offences under the Misuse of Drugs Act (1971)

These include:

- Possession – to knowingly be in possession of a relatively small quantity of a controlled drug for personal use. What constitutes a small quantity is left to the discretion of the PSNI.
- Possession with intent to supply another person a controlled drug – possessing a larger quantity of a drug or packaging it in a way that indicates it is going to be supplied to others.
- Supplying another person a controlled drug – giving or selling drugs to someone else, including friends.
- Supplying or offering to supply drug paraphernalia – this includes equipment for smoking cannabis or crack cocaine, but needles and syringes are exempt.

APPENDIX 3

Recognising Signs of Drug Use

What to look out for

If someone is having a bad time on drugs, they may be:

- anxious;
- tense;
- panicky;
- overheated and dehydrated;
- drowsy; or
- having difficulty with breathing;
- nauseous.

What to do

The first things you should do are:

- stay calm;
- calm them and be reassuring.
- 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.
- request for a school nurse/ First Aider.

If they are **really 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;
- don't scare them, shout at them or shock them;
- don't give them coffee to wake them up; and
- don't put them in a cold shower to 'wake them up'.

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

- immediately phone for an ambulance;
- 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 4

Procedures for Handling Possible Incidents of Drug Misuse

The Drugs Education and Substance Misuse Prevention Policy applies to any school activity both on and off site and in and out of uniform or on the way to or from school or a school activity. Recognising drug misuse is a major issue for Teaching Staff. *Appendix 3 (Recognising Signs of Drug Use)* contains essential information which will be kept under review.

- Teachers should seek to identify those young people who may be at risk of drug misuse.
- All Tutors are requested to look for patterns of absence and to interview pupils when appropriate.
- All matters concerning a drug-related incident must be dealt with in the strictest confidence.
- The misuse of drugs is regarded by the school as unacceptable and disciplinary procedures will be implemented in accordance with the School Positive Behaviour Policy.

The following general guidelines are provided for Staff who may be called upon to deal with situations which may involve drug misuse.

A1a/b and A2 [Emergency Situations]

B [Non-emergency Situations]

EMERGENCY SITUATIONS

A1a. Loss of consciousness. Note: this may be due to a medical condition

- Make the situation safe for pupils and staff
- Inform Principal / Designated Teacher ~~for drugs~~
- Try to ascertain the substance and how much has been taken
- If the substance is still present, confiscate it in front of a witness, secure and record
- Administer first aid, if appropriate
 - o Send for help from the nearest first-aider or send directly for an ambulance if necessary.
 - o Use the ABC: (Airway, Breathing, Circulation).
 - o Place the pupil in the 'recovery position'.
 - o Stay with the pupil.
 - o If the pupil needs hospital treatment contact the parents / carer and send pupil to hospital.
- If the pupil does not need hospital treatment conduct a search for drugs according to the school policy.
- The parents/guardians should be informed immediately.
- Contact the PSNI if appropriate.
- Write a detailed report including the action taken and fill out an accident report form.
- Inform the EA-designated officer.

- Decide on disciplinary / pastoral measure as appropriate.
- Inform the Board of Governors if appropriate.
- Arrange counselling / support for the pupil.

A1b. No loss of consciousness.

- Make the situation safe for pupils and staff.
- Place the pupil in the recovery position.
- Stay with the pupil and send someone to get the school nurse and if necessary phone for an ambulance.
- Try to ascertain the substance and how much has been taken.
- If the substance is still present, confiscate in front of a witness, secure and record.
- Inform the pupils parents.
- Contact the PSNI if appropriate.
- Write a detailed report including the action taken and fill out an accident report form.
- Inform the EA designated officer.
- Decide on disciplinary / pastoral measure as appropriate.
- Inform the Board of Governors if appropriate.
- Arrange counselling / support for the pupil.

Follow-up action

If it is ascertained that loss of consciousness was induced by misuse of a controlled drug, the local Community and Schools Involvement Officer (CSIO) of the PSNI must be informed by the school. This is irrespective of any action which may have been taken by the hospital.

All requests or enquiries for information about an incident involving drug misuse must be referred to the Principal. Other Staff must not comment.

A2. Intoxication. Note: this may be due to a medical condition or, for example, accidental inhalation of noxious fumes

- Send for help from the nearest first-aider.
- Arrange conveyance to sick-bay.
- Stay with the pupil and monitor his/her condition.
- Be prepared to apply ABC if required.
- If ABC is applied the pupil should subsequently be removed to hospital.
- The parents should be informed immediately.

Follow-up action

The teacher(s) involved should make a written report, recording the time, place, date and circumstances of the incident.

All requests or enquiries for information about an incident of 'intoxication through drug misuse' must be referred to the Principal. Other Staff must not comment.

The Principal will inform the Board of Governors as soon as possible.

NON-EMERGENCY SITUATIONS

B. Suspected drug misuse. **Note: misuse could be accidental or intentional**

Any indications of illness/inappropriate behaviour as a result of suspected drug misuse should be brought to the attention of the Head of Year/Pastoral Advisor who will then inform the Designated Teacher for Drugs.

No judgement should be made until the circumstances surrounding the incident have been determined.

If the pupil or subsequently the pupil's parents admit that the pupil is misusing controlled drugs, the Principal has no alternative but to inform the PSNI.

Should the pupil or the pupil's parents deny that the pupil is misusing controlled drugs, there may be a case against the school for negligence if, at a later stage, it is found that the school has not taken the appropriate action. This includes informing the PSNI of the school's suspicions. Therefore, in cases of suspected drug misuse, whether admitted or denied, the school should inform the PSNI. This will enable appropriate investigations to be made and any necessary action taken.

Appropriate action also includes providing follow-up pastoral care, as necessary.

Follow-up action

The teacher(s) involved should make a written report, recording the time, place, date and circumstances of the incident.

All requests or enquiries for information about suspected drug misuse must be referred to the Principal. Other Staff must not comment on the incident.

PROTOCOLS for DEALING with SUSPECTED PUPIL DRUG ABUSE

Avoiding detection

If a member of Staff suspects that a pupil has swallowed a drug in order to avoid detection, medical assistance should be sought immediately. The PSNI may be informed.

Upon discovery of any drug which has been secreted, the parents and PSNI must be informed at the same time.

Searching

Physical searches of pupils should never be carried out by a member of Staff.

A member of Staff may search a pupil's ~~desk~~ or locker if he/she has reasonable cause to believe that it contains unlawful items, including drugs of misuse.

A search of the pupil's school bag and coat can be made only with the pupil's or parent's consent, in his/her presence and in that of another adult witness.

Every effort should be made to persuade the pupil voluntarily to hand over any drugs and associated paraphernalia.

If a pupil refuses, the PSNI should be called to deal with the situation and parent informed.

Possession

Staff may take temporary possession of a suspected drug or controlled drug for the purposes of protecting a pupil from harm or from perpetrating the offence of possession.

Staff should take the suspected drug or controlled drug to the Designated Teacher for Drugs or Principal as soon as possible. Arrangements will then be made for its safe storage and subsequent transfer to the PSNI for identification.

No member of staff should attempt to analyse, taste or smell an unidentified substance.

Detention of pupil

When managing a suspected drug-related incident the pupil/s concerned should be invited to remain in school under supervision of appropriate members of Staff until parents/guardians and PSNI arrive.

If the pupil refuses to remain beyond the end of the normal school day, the school cannot, as a rule, detain a pupil against his/her will.

DISCIPLINARY MEASURES

Any pupil found possessing, supplying or using drugs ~~or misuse~~ during any school activity, both on and off site and in and out of school uniform, may expect to be excluded from school during investigation of the incident.

The Vice-Principal/Principal will discuss the situation with parents.

At the discretion of the Principal and the Board of Governors the pupil will be suspended from school pending investigation.

Where pupils are found to be in breach of the Positive Behaviour Policy by engaging in drug misuse they will be subject to disciplinary action which may include suspension and/or expulsion.

APPENDIX 5

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 _____ |
|----|---|

| | |
|----|---|
| 4. | Parent or carer informed YES / NO. Date _____ Time _____ |
|----|---|

| | |
|----|---|
| 5. | Where substance is retained _____ or Date substance destroyed or passed to PSNI _____ Time _____ |
|----|---|

| | |
|----|--|
| 6. | Principal/ Designated Teacher informed YES / NO. Date _____ Time _____ |
|----|--|

| | |
|----|---|
| 7. | Chairperson of the Board of Governors informed YES / NO. Date _____ Time _____ _____ |
|----|---|

| | |
|----|---|
| 8. | PSNI INFORMED YES / NO. Date _____ Time _____ |
|----|---|

| | |
|----|---|
| 9. | Education Authority informed, as appropriate YES / NO. Date _____ Time _____ _____ |
|----|---|

| | |
|-----|--|
| 10. | Form completed by _____ Date _____ Position _____ |
|-----|--|

| | |
|----------------|-----------------------------|
| 11. | Description of the Incident |
| | |
| | |

| | |
|----------------------------|------|
| Incident form completed by | Date |
|----------------------------|------|

APPENDIX 6

MANAGING DRUG RELATED INCIDENTS - SUMMARY

The individual Staff Member should:

- assess the situation and decide on appropriate action
- secure First Aid and send for additional Staff support, if necessary
- make the situation safe for all pupils and other members of Staff; where necessary, remove the pupil to a safe area
- gather up carefully any drugs and/or associated paraphernalia/evidence
- as soon as possible give a verbal report and pass on all information/evidence to the Designated Teacher for Drugs
- write a brief factual report of the incident and forward it to the Designated Teacher for Drugs.

Should the drug related incident occur offsite then the above procedures should be followed in as pragmatic a manner as possible.

Please note: it is not a member of Staff's responsibility to determine the circumstances surrounding the incident since this is a matter for the PSNI.

Designated teacher for Drug incidents

The Designated Teacher for Drugs should:

- take possession of any substance(s) and associated paraphernalia
- respond to the first aider's advice/recommendations
- in the case of an emergency inform parents/guardians and PSNI as appropriate
- inform the Principal as soon as possible
- take initial responsibility for pupil(s) involved in suspected incident
- complete an Incident Report Form and forward it to the Principal. (see Appendix 5)

Please note: any suspected substance and associated equipment and/or paraphernalia should be stored safely until it can be handed over to the PSNI.

Principal

On the basis of information supplied the Principal should:

- depending on the seriousness of the incident ensure the following are informed sequentially
 - Parents or Guardians
 - Community and Schools Youth Diversion Officer of the PSNI
 - Chairperson of the Board of Governors
 - Education Authority Designated Officer for Health Education
- agree pastoral responses to include counselling support and services
- agree disciplinary responses; determine any sanctions
- respond to Press requests for information or to any other enquiries
- if appropriate, forward a copy of the incident report form to the Chairperson of the Board of Governors and to the Education Authority Designated Officer for Health Education.

APPENDIX 7

MANAGING A PARENT OR CARER THAT ARRIVES TO SCHOOL TO COLLECT A CHILD AND APPEARS TO BE UNDER THE INFLUENCE OF ALCOHOL OR ANOTHER SUBSTANCE

The individual staff member should:

- Discretely detain the pupil in the classroom and send for the designated teacher / principal.
- Principal speaks to the parent or carer to assess the situation.
- If the principal is satisfied that it is safe to release the pupil to the parent / carer then allow the pupil to leave school.
- If the principal is not satisfied that it is safe for the pupil contact another relative to come and collect the child.
- Ask the parent or carer to come into the school to quietly discuss the school's concerns.
- Contact social services in line with the schools Safeguarding and Child Protection Policy.
- If the parent or carer becomes violent, tries to forcibly remove the child or intends to drive while under the influence, contact the PSNI.
- Write a detailed report of the incident including action taken.
- Inform the chair of the Boards of Governors as appropriate.
- Inform the EA-designated officer.

APPENDIX 8

WORKPLACE DRUG TESTING

Drug testing and your rights (legal information from <http://www.nidirect.gov.uk/drug-testing-and-employee-monitoring> and http://www.findlaw.co.uk/law/employment/problems_at_work/500163.html)

Your employer may decide to test employees for drugs. To do this, however, they need the agreement of employees. This should normally be given where your employer has grounds for testing you under a full contractual occupational health and safety policy.

The policy should be set out in your contract of employment or in the company handbook. Your employer should limit testing to the employees that need to be tested to deal with the risk. If your employer wants to carry out random tests of these employees, bear in mind that the tests should be genuinely random. It's potentially discriminatory to single out particular employees for testing unless this is justified by the nature of their jobs.

Searching employees is a sensitive matter and your employer is recommended to have a written policy on this. Searches should respect privacy, be carried out by a member of the same sex, for example, and take place with a witness present. You can't be made to take a drugs test, but if you refuse when your employer has good grounds for testing you under a proper occupational health and safety policy, you may face disciplinary action. This could include being sacked.

Notice

If your employer wants to carry out workplace drug testing, the first thing you should do is take a look at your employee handbook or contract of employment. This should outline how and when your employer can conduct tests -- and what happens if you fail one.

If your employee handbook or contract does not discuss workplace drug testing then your employer may not be able to ask you to undertake such a test. You should raise any concerns you have regarding the legality of the test with your supervisor and/or follow your employer's grievance procedure.

There is no legal requirement that an employer provide advance notice of testing, which can be problematic if you have recently taken a drug like cannabis, which remains detectable in your urine for several weeks after use.

Informed consent

Your employer must obtain your informed consent before they perform a drug test. This means they have to explain the purpose of the test and wait for you to agree to be tested before taking a sample.

Your employer certainly cannot force you to take a drug test or covertly test you. And if you fail the drug test, your employer cannot rely on the illegally obtained sample to dismiss or discipline you.

If your employer tests you without informed consent, you should speak with a solicitor since this is unlawful.

Selection

If your employer has reasonable grounds to test employees (e.g., because of the nature of the work) and says it will select people randomly, selection must be *genuinely* random. If your employer singles you out for a test without valid justification, you may be able to claim unfair discrimination.

Privacy

The results of your drug test must remain confidential, even if you fail a test. Moreover, because of the sensitive nature of testing, it should be conducted by a person of the same sex.

Refusing to take a drug test

If you unreasonably refuse to take a drug test, you should expect to face disciplinary action and, quite likely, dismissal. Therefore, before you refuse to take a test, consult a solicitor for advice.

If you work in transportation or operate dangerous machinery, however, your employer may select you randomly and give you little time to accept or refuse the test. In these circumstances, you may not be able to consult a solicitor -- even asking for a postponement may be considered unreasonable.

Failing a drug test

Provided your employer has a right to test you, you may face summary dismissal for gross misconduct if you fail a drug test.

Being summarily dismissed for gross misconduct is significant because it may excuse your employer from providing notice and paying you redundancy.

First things first, however, check your employment contract to see what it says your employer can do, and consult a solicitor for advice.

APPENDIX 9

Useful contacts in Northern Ireland

| Education Authority (Formerly Education and Library Boards) | | |
|---|--------------------|--|
| Belfast Region | Tel: 028 9056 4000 | www.eani.org.uk |
| North-Eastern Region | Tel: 028 9448 2200 | www.eani.org.uk |
| South-Eastern Region | Tel: 028 9056 6200 | www.eani.org.uk |
| Southern Region | Tel: 028 3751 2200 | www.eani.org.uk |
| Western Region | Tel: 028 8241 1411 | www.eani.org.uk |

| 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. | https://www.education-ni.gov.uk/articles/counselling-service-schools https://familywork-sni.com/our-services |

| 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 multi-disciplinary, 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 |

| PSNI Service for Northern Ireland (PSNI) | | |
|--|--------------------|--|
| Drug 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.talktofrank.com www.thesite.org/drinkanddrugs www.nhs.uk/Livewell/Pages/Topics.aspx https://www.mindyourhead.org.uk https://pha.site/textanurse (07480635982) |

APPENDIX 10

'Encouraging a Smoke-Free & E-Cigarette Free Environment in Schools & Youth Organisations'

Recommendations based on the Department of Education's Circular of December 2014:

- The premises for which Ballymena Academy are responsible are completely smoke-free environments at all times.
- Legislation was introduced in September 2008 to raise the minimum age of sale for tobacco products from 16 to 18 years. It is therefore forbidden for any pupil to smoke within the school grounds at any time, whilst moving to or from school in uniform or whilst on any school related activity.

Dealing with pupils suspected of or caught smoking in school

- The statutory curriculum provides teachers with opportunities to teach young people about the dangers of smoking and this will be covered in the Personal Development strand of Learning for Life and Work at Key Stages 3 and 4 and in Junior Science.
- All pupils caught using, in possession of, suspected of using or in close association with others whilst using will be subject to the schools positive behavior policy and related sanctions.

Nicotine Containing Products (NCPs)

While they are perceived to be less harmful than tobacco, NCPs (of which e-cigarettes are the most common form) are currently unregulated. As such, there are concerns about their safe use, particularly by children and young people. In order to address these concerns, the Chief Medical Officer (CMO) for the north of Ireland has advised that the use of e-cigarettes on school premises should be prohibited, in line with tobacco products. At present, there are no age restrictions placed on the sale of e-cigarettes. In the interim the CMO has advised that schools should be encouraged to extend the ban on smoking on school premises to include a ban on the use of e-cigarettes/vapes.

The school classes these products in the same category as cigarettes.