

# ROWAN GATE PRIMARY SCHOOL



## A CURRICULUM POLICY FOR DRUGS EDUCATION

### POLICY REVIEW

This policy has been reviewed in line with the following: (Reviewer please tick box)

a) Ensuring the policy is up to date and meets mandatory requirements

✓

b) Ensuring the policy is fit for purpose and that practice adheres to the policy.

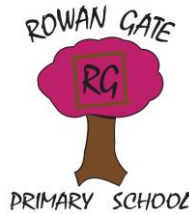
✓

*Reviewed and Updated in March 2021 by* .....*RALLEN*.....

*Print Name* .....*Rachel Allen*.....

***Policy will be reviewed again in March 2022.***

# ROWAN GATE PRIMARY SCHOOL



*This school policy reflects the consensus of opinion of the whole teaching and support staff and has the full agreement of the governing body.*

*"This policy reflects the philosophy of the Equality Policy, the Mission Statement and the School Aims in relation to the whole curriculum".*

## **1. Description of School**

Rowan Gate is a day special school for children who have learning difficulties which may be moderate, severe or profound and complex. Rowan Gate has 2 sites, one in Wellingborough and one in Rushden and a satellite class based at Tennyson Road

The children come from a variety of different social backgrounds e.g. owner occupied/rented accommodation, employed/unemployed parents. There are several one parent families and a number of children on free school meals. Some of the children at our school may have witnessed instances of drug use amongst older children and adults and through media references.

The school feels that information and skills to resist drugs are best first provided before experimentation is likely. Outsiders could use the large school grounds for drugs misuse, so even the youngest children may need to be warned of the dangers from discarded equipment.

Many of the children also receive daily prescribed medication in school or have inhalers for asthma. Children within school are therefore often familiar with seeing children taking drugs – that have been prescribed by a doctor.

## **2. How the policy was formulated**

This policy was formulated after consultation with the staff, senior management, school nurse and the school governors.

## **3. Aims of Policy**

To raise awareness of the effects drugs can cause to individuals, the family and society to enable young people to take responsibility for themselves by making appropriate decisions which enable them to meet their full potential.

- to enhance the delivery of drugs education within the curriculum by providing training where appropriate for individuals or teams

- to ensure that where outside agencies are involved in the delivery of drugs education or the management of drug related incidents that this is managed within agreed guidelines.

The aim of our drugs education is to enable pupils to make healthy informed choices about the many substances involved and their related dangers.

#### **4. Objectives**

- to ascertain children's present ideas / concepts regarding drugs
- to provide opportunities for pupils to acquire knowledge and understanding about the dangers of drugs misuse.
- to provide opportunities for pupils to be equipped with attitudes and skills that they will need to avoid the misuse of drugs
- to increase knowledge of social and personal issues relating to drugs in line with the National Curriculum.

#### **5. Moral and Value Framework**

The school does not condone either the misuse of drugs, tobacco or alcohol by members of the school, nor the illegal supply of these substances.

The school is committed to the health and safety of its members and will take action to safeguard their well being.

Fundamental to our school's value and practices is the principle of sharing the responsibility for education of young people with parents by keeping them informed and involved whenever possible.

#### **6. The Context**

Drugs education will be provided within the broader context of the teaching of personal social and health education PSHE. It will take account of the age, developmental level and cultural/social background of the pupils currently at the school.

Within the Science Curriculum children will be taught about the roles of drugs as medicines and that tobacco, alcohol and other drugs can have harmful effects.

#### **7. Equal Opportunities**

Regardless of race and gender and taking the children's own individual learning difficulties into account all children will be given access to the Drugs Education as developmentally appropriate.

#### **8. Who will teach it?**

All teaching staff as appropriate to the age/developmental level of their children.

Parents and carers are involved as learners and educators through the provision of information from school. This will raise their awareness of drugs issues and enable them to reinforce the drug education programme outside the curriculum.

Any disclosure by a young person of drug use by another (or themselves) must be handled discreetly and in line with the drugs and child protection policies.

## **9. The Drugs Education Curriculum**

In England and Wales there is a statutory requirement to teach specific aspects of drugs education.

At Key Stage 1 - 5-7 year olds should be taught about the role of drugs as medicine.

At Key Stage 2 - 7-11 year olds should be taught that tobacco, alcohol and other drugs could have harmful effects.

These requirements are only the minimum and drugs education may, where appropriate to the children's developmental levels, be taught also through the PSHE curriculum.

## **10. Aspects covered within our Schools Drugs Education Programme**

Due to the structure of the curriculum and developmental needs of children at Rowan Gate there is a variety of aspects covered within the drugs education programme, the majority of the work for all children related to drugs education will be linked into the everyday experiences of understanding right from wrong and making choices.

As children will be in contact with other children requiring daily medication there is an expectation that staff make children aware of the importance of not using medicines that are not intended for them or touching/handling resources used to give medicines.

How drugs education is taught/covered across the 5 areas of the curriculum:

Pre-formal (KS1/2)

Children will engage in activities related to their EHC plans and therefore encounter activities related to their cognition and learning, communication and interaction, social, emotional and mental health, sensory and physical and independence.

For drugs education this may include developing an understanding of what can/can't be safely eaten/placed in their mouths, developing an understanding of their need for certain medications at certain times of the day and experiencing working with different medical staff.

EYFS and Semi Formal Key stage one

classes the Early Years Foundation Stage curriculum is followed and therefore children's Personal, Social and Emotional Development skills and activities related to their self-confidence and self-awareness and managing feelings and behaviour supports knowledge of themselves and others, making choices and being safe. Understanding the world, people and communities related activities also support the knowledge of others and changes.

Key stage 2 semi- formal

Teachers in Key stage 2 continue to build upon previous learning and also use the PSHE/RSHE scheme of work within the curriculum to teach units about health and well-being, medicines and drugs, how bodies change and making choices.

Key stage 2 formal

Teachers in Key stage 2 continue to build upon previous learning and also use the PSHE scheme of work within the curriculum to teach units about keeping safe, taking responsibility and changes. Where developmentally appropriate activities will relate to the effects of drugs and alcohol misuse, peer pressure and where to find support.

## **11. Content Method and Organisation**

Drugs Education should be delivered in a clear and honest manner that informs without encouraging drug misuse and provided at regular intervals through the child's time at Rowan Gate so as to maximise its effectiveness.

The essential aim is to give pupils the facts, emphasise the benefits of a healthy life style and give young people the knowledge and skills to make informed responsible choices now and later in life.

Teaching about illegal drugs is unlikely to have a lasting effect if a lesson is given in isolation. Teaching approaches which set out to shock and frighten may actually increase interest and encourage experimentation. Children should be encouraged to reject drugs because they believe that to be the right thing to do not just because they have been told to say "No". Pupils need skills to help them resist pressure to experiment with drugs and they need positive attitudes towards living healthy lives which will be strong enough to influence their behaviour.

- Reports of intimidation in relation to drugs should be dealt with in accordance with appropriate policy.
- Young people should feel able to make disclosures without fear of rejection, intimidation or discrimination.
- Young people should be encouraged to assist in the prevention of drug misuse and any suggestions should be welcomed and discussed.

## **12. Management of Incidents in School**

See our Management Policy about the use of drugs.

## **13. Parents**

Parents will have access to the school's Curriculum Policy for Drugs Education and drugs pamphlets with advice for parents to be sent home when available.

Parents will also be informed that all libraries have in stock literature and information in relation to drugs for all age groups and will display information about local support services.

Information may be supplied in translated form where available from local statutory and voluntary agencies. Local drugs agencies may have advice and information about suitable books and resources for parents.

## **14. Dissemination of Policy**

All staff/governors and parents will have access to a copy of the Curriculum Policy Drugs Education. The school follows the LEA drugs policy guidelines.

## **15. Review**

This policy was reviewed in March 2021 and will be revised annually.