

Policy and Procedure for Managing Substance Misuse Incidents Involving Children and Young People in Schools



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SECTION 1

1. Introduction

This document sets out, in partnership with Aberdeen City Council, NHS Grampian, Police Scotland, Aberdeen City Alcohol and Drugs Partnership (ADP) and DA Aberdeen, the policy to be adhered to in relation to substance misuse, should an incident occur within a primary or secondary school. The policy applies to all staff within Aberdeen City Council educational establishments. It outlines the actions to be taken along with the relevant roles and responsibilities of staff.

When an incident of substance misuse involving a child or young person occurs it is important that all staff and partners working within schools are familiar with procedures and their responsibilities.

Despite the educative and supportive measures put in place by schools there will be times when staff are required to deal with the following situations:

- Clearing a school of substance related litter
- Substance misuse-related incidents involving adults (see p4)
- Suspicion, allegation, disclosure of substance misuse
- Child/young person/adult who displays symptoms of substance misuse
- Child/young person/adult taking, selling or found with harmful substances

This policy provides staff and partners with a procedure to follow when they are required to respond to information, evidence or allegations that children or young people are misusing drugs as well as in managing incidents involving substance misuse by children, young people and other adults.

2. Background

Aberdeen City Council regards substance misuse as a serious matter. It affects the physical and emotional health and wellbeing of our young people. The council and its schools have an important part to play in educating young people and their families about substance misuse and in reducing the risks associated with this.

In order to enable staff to meet their responsibilities in relation to substance misuse, this policy contains information and guidelines on the following areas:

- Management of incidents of substance misuse
- Child protection
- Principles of substance education

The national drug strategy for Scotland; The Road to Recovery (May 2008) – A New Approach to Tackling Scotland's Drug Problem, requires the Council to have a clearly laid out set of procedures to help deal effectively with incidents of substance misuse within schools.

<http://www.scotland.gov.uk/Publications/2008/05/22161610/0>

This policy should be considered in conjunction with:

- National Guidance for Child Protection in Scotland, 2014
- National Practice Model
- Getting it right for every child in Aberdeen – Operational Guidance 2012 (currently under review)
- Curriculum for Excellence
- Integrated children's services Policy developments
- Tackling Dugs in Scotland – Getting Our Priorities Right Guidelines (GOPR)
- Hidden Harm report.

(Links can be found in appendix 4)

Aberdeen City Alcohol and Drug Partnership (ADP) oversee the implementation of national strategy at a local level. Supporting policies "Together we will tackle drugs misuse and its effects in Aberdeen City (2011-21) and "A Safer, Healthier & Responsible attitude to Alcohol in Aberdeen" (2009-19). Both available here: www.aberdeencityadp.org.uk

3. Definitions

Definition of 'Substance' & 'Substance Misuse'

A *substance* here will be defined as that when administered (e.g. ingested, inhaled, or injected) into the body, will affect the central nervous system (i.e. has psychoactive properties). This often results in variable changes to cognition, and thereby affects the behaviour, mood and consciousness of the individual consuming (sometimes with unpredictable consequences).

A definitive list of such substances can never be complete but for purposes here will be broadly taken to include the following (excluding tobacco and tobacco related products, see Section 7):

- Alcohol
- Any psychoactive substance (controlled by legislation e.g. *Misuse of Drugs Act (1971)* (Appendix 1) and *Medicines Act (1968)*) including prescription and non- prescription (e.g. 'over the counter') medications
- Any psychoactive substance (uncontrolled by legislation) and referred to as 'new psychoactive substances' (NPS), but often given the term 'legal highs' by media sources
- Volatile substances (solvents, gases and other domestic/commercial products)

Substance *misuse* refers specifically to the use of a substance for a purpose not consistent with legal or medical guidelines (as in the non-medical use of prescription medications) with the term 'misuse' often preferred to 'abuse' in the belief that it is less judgemental.

Definition of a ‘*Substance related incident*’

Substance related incidents can be defined in relation to, for example:

- **Possession of a substance and/or substance related paraphernalia (e.g. papers, packaging needles, grinders, ‘bongs’/pipes, tin foil etc)**
- **Substance or paraphernalia (or substance related litter) found within the school or grounds**
- **A suspicion (or presentation) during the school day of a pupil being ‘under the influence’ of a substance. This may present in a variety of ways and could include obvious (but usually unexplained) changes in personal presentation, demeanor, ability to communicate and/or ‘out of character’ interaction**
- **Parent/Carer being under the influence whilst coming/visiting school. (see page 16 Managing incidents of substance misuse involving other adults)**
- **A suspicion that person or person(s) are dealing in substances and/or distributing paraphernalia in or around school premises**

4. *Role and responsibilities*

Senior Management Team (SMT)

SMT in schools must ensure that the policy is implemented. Incidents of substance misuse need to be managed effectively and ensure the safety and welfare of everyone within the school continues to be of paramount importance. SMT must ensure staff know how to access the relevant manager with responsibilities.

Good practice requires schools to identify the line-management duties for co-ordinating action both within the premises and between other relevant agencies. Local multi-agency networks involving staff, police, health and social work should be put in place for responding to incidents in which a child or young person may be at risk. The Child Protection Officer in schools should ensure that these linkages are effectively utilised to manage incidents of substance misuse. Appropriate training will be provided, to the Child Protection Officer of the school, on an annual basis in relation to how this policy works in practice and current substance misuse trends.

It is the responsibility of the SMT to ensure that staff:

- Are informed about their role in the management of incidents of substance misuse, and are fully committed to policies relating to substance misuse.
- Are aware of their responsibilities under law. It is important that staff are aware of the legal implications of discovering a child or young person with a controlled substance, and how they would be expected to deal with such an event.
- Are aware of to whom all incidents of substance misuse are reported to.
- Are informed of the limits of confidentiality that can be offered and that information about controlled and uncontrolled substance misuse may be offered in confidence but the recipient cannot keep such information to him or herself.

- Are aware that it is acceptable for a responsible person to take possession of a controlled drug for the purpose of preventing an offence in connection with that drug. The controlled drug must then be delivered into custody of a person lawfully entitled to take custody of it (Section 5(4)(b) of the Misuse of Drugs Act 1971). They will then have a defence against prosecution for possession if the incident were deemed severe enough for prosecution.

All staff and partners

All staff and partners when working for an Aberdeen City Council educational establishment, by association this includes the safety and well being of employees and the people in their care on visits, are responsible for implementing this policy.

It is crucial that all staff in schools are fully aware of their function and role in management of incidents of controlled and uncontrolled substance misuse.

Child Protection Officer

This is usually the Head Teacher of a school and they will provide a nominated other in their absence. In the occurrence of an incident they will assess the need for another agency's support and they will then contact the relevant service and discuss the case including discussion as to how parents are to be engaged. This may include contacting Police (telephone number 101), Children's Social Work Reception Team 01224 522055 or the Joint Child Protection Team 01224 306877. Where appropriate the Quality Improvement Officer (QIO) should be contacted who will inform all other relevant personnel including the Corporate Media Team.

Named Person

A named person is responsible for making sure that every child or young person has the right support in place to maintain their wellbeing and to encourage them to reach their developmental potential across each key life stage. These are not new responsibilities and are within the existing responsibilities of health practitioners, head teachers or members of the senior management or pastoral team in a secondary school.

5. Child protection

All children and young people in Scotland have the right to be cared for and protected from harm and to grow up in a safe environment in which their rights and needs are respected.

The Children (Scotland) Act 1995 places a general duty on the local authority to safeguard and promote the wellbeing of the individual child and/or young person within the area who are in need and to investigate if it believes that a child is suffering or is likely to suffer significant harm.

<http://www.scotland.gov.uk/Topics/People/Young-People/legislation>

Evidence of parental substance misuse or substance misuse within the family may be a cause for concern under the child protection guidelines and although, in itself the substance misuse does not confirm that abuse of the child is happening, it may indicate the need for further investigation. Each school has a designated Child Protection Officer who, when concerns arise, should follow the process in accordance with National Guidance for Child Protection in Scotland, 2014.

6. Education on substance misuse

Curriculum for Excellence is about making a difference to children and young people, developing values, attitudes and skills as well as knowledge and understanding.

There is also now a legislative duty on local authorities under the Schools (Health Promotion and Nutrition) (Scotland) Act 2007 to ensure that schools are health promoting.

<http://www.scotland.gov.uk/Topics/Education/Schools/HLivi/foodnutrition>

Substance misuse education in schools is often the first line of prevention against drug use, providing opportunities to pass on accurate, up-to-date facts, explore attitudes and, crucially, foster the skills needed to make positive, informed decisions.

Early years settings and Primary and Secondary schools have an important role to play in developing in young people qualities of resilience and adaptability so that they are able to make informed choices to enhance their own health and wellbeing.

To be effective, substance education should take account of children and young people's knowledge, beliefs and attitudes relating to substance misuse. It is not just about classroom teaching, but encompasses all policies, practices, programmes, initiatives and events connected with the prevention and reduction of substance related harm.

Teachers will always be in the front-line for delivery in schools, however, the message will be most effective if delivered in partnership with children and young people, a range of partners and agencies.

The following document contains the educational framework for substance misuse, specifically alcohol, drugs and tobacco.

Grampian Health Promoting School Substance Misuse guidance

<http://aberdeencityadp.org.uk/wp-content/uploads/2015/06/Substance-Misuse-Pack-3rd-edition-June-2016.pdf>

7. Tobacco

Under the Tobacco and Primary Medical Services (Scotland) Act 2010 (Scottish Government Jan 2010) the police have powers to confiscate tobacco products from under 18's although it is not illegal to smoke.

There is no legal duty to inform parents / carers if their children are smoking as the law focuses on the sale and purchase of tobacco products rather than the possession or use. However an effective dialogue with all can be beneficial and you would need young people's consent to share this information

It would be appropriate to provide information about what help and support is available to stop smoking for those who have breached policy should they wish it.

Everyone on school premises should be clear that use of tobacco products or bringing cigarettes is not tolerated. There are also potential legal issues for young people who sell cigarettes to each other if under the age of 18. Turning a blind eye to these situations sends out the wrong message. Any sanctions for breaches of policy by anyone should be explicit. These sanctions should be agreed by all. Punitive or hastily applied sanctions may have the opposite effect on smoking behaviour.

Scottish Directors of Public Health strongly advocate that e-cigarettes as they stand should be treated in the same way as normal cigarettes in relation to local policy, i.e. if the local policy indicates no smoking is permitted in Aberdeen City Council school buildings and grounds, the same should apply to e-cigarettes.

For more information please visit:

<http://www.ashscotland.org.uk/what-we-do/supply-information-about-tobacco-and-health/briefings/ecigarettes.aspx>

Consideration should be given to the fact that it may be an adult / staff member who breaches policy.

This reflects current legislation at July 2014.

8. Involvement of support agencies

In schools, the provision of substance education should be well supported by input from partner agencies from both the statutory and voluntary sectors.

Effective handling of any substance misuse incident will be enhanced where positive, trusting and respectful relationships exist between partner organisations. It is important therefore, to develop good collaborative links with Children's Social Work services, Adult Services, health services, police and other voluntary and statutory organisations in order to provide a network of support and guidance for children and young people. Staff should be familiar with Aberdeen City Council guidelines in relation to confidentiality and be aware that different agencies will operate under different guidelines.

As part of dealing with incidents of substance misuse services external to schools should be contacted. Advice and guidance from these services will assist in determining the next steps in supporting children, young people or families in relation to substance use.

Where good inter-agency working exists, incidents can be dealt with quickly ensuring the best outcome for the child or young person involved.

SECTION 2 - PROCEDURE

1. Managing incidents of substance misuse

Any member of staff who finds himself or herself involved in an incident of substance misuse, involving a young person, must contact a member of the SMT and where relevant the named person. They will also access another member of staff (teaching or non-teaching) to act as a witness. It is important to have an independent witness present in order to corroborate all actions taken in the event of the police making a subsequent charge and the case taken to court.

In some instances it may be difficult to access the support of another member of staff immediately. Until another member of staff can be contacted the child or young person will not be left alone or have contact with anybody else. The member of staff will contain the situation and make contact through the main office to the most appropriate person within the local network as soon as possible.

The member of staff will remind the child or young person of policy regarding substance misuse and the procedures to be followed to investigate the incident, including the intention to contact parents/carers (if the child or young person is under 16) and the police.

The SMT of Primary and Secondary schools are responsible for ensuring that they are well prepared to manage incidents of substance misuse, should they occur and that all members of staff are fully aware of their role and function in the event of their involvement in incidents of this type.

There will be no doubt as to the seriousness of incidents of substance misuse. It is important that such incidents are dealt with robustly.

2. **FLOW CHART - Actions for managing recording and reporting of substance related incidents**

Managing, Recording and Reporting of Substance Related Incidents

The implementation of all stages of this process depends on the severity of the incident and which steps are required will be decided at a local level

IF MEDICAL HELP IS REQUIRED

Provide first aid as necessary, minimise the risk of the child or young person damaging themselves or others. Access another member of staff for assistance

**IF SOLVENT ABUSE – SEEK MEDICAL HELP IMMEDIATELY
Call 999**

Immediate Actions

Check that the health needs of the young person are fully met

Remind the child or young person:
1. the incident may be investigated
2. parents/carers will be informed
3. police may be contacted

Ask child or young person to hand over any substance related material. If reluctant to do so, explain that this will be repeated in presence of parents/carers and possibly Police.
Record substance description and issue copy (appendix 2)

Next Steps

Arrange to interview the child or young person, with witnesses, to establish the facts of the incident, at what level the child or young person was involved, and whether other children and young people were involved

Arrange to interview staff and other children and young people involved, with witnesses, to establish the facts of the incident and obtain corroboration. A written record of events and contact calls should be made immediately after the event

Once the investigation has finished, give consideration to the guidance that has been given in terms of excluding the child or young person and involving others such as health or social work

Complete appendix 3 and submit to child's Pupil Personal Record (PPR). Enter a note in the pastoral section of SEEMis to advise of incident and complete the Aberdeen City Council Incident/Near Miss Report form <http://thezone/nmsruntime/saveasdialog.asp?IID=27492&SID=8040> and send it to your Service Health and Safety coordinator, Business Hub 13, 2nd Floor North, Marischal College

Ensure that the Named Person is informed of the incident

3. *Dealing immediately with the young person*

It is vital that the health needs of the child or young person are fully met before any formal investigation involving the child or young person is undertaken.

If the condition of the child or young person involved gives rise for concern, **medical help must be sought.**

Procedure to follow if medical assistance is required:

- **Provide first aid as necessary, minimise risk of the child or young person damaging him/herself or others.**

AND/OR

- **Send for an ambulance. Arrange for an adult to accompany child or young person to hospital.**

In the event of a young person requiring an ambulance, steps are required to take possession of any substances and/or related items. Recording must be made as described in the procedures that follow. Medical staff will require a description of any substances or related items that may have a bearing on the young person's health.

All staff should be made aware that extreme physical dangers present after an incident of solvent abuse. Solvent misuse demands a different approach from other types of substance misuse. The potential for heart failure demands that any suspected incident of this nature be treated as a medical emergency. Solvent misusers should not be 'excited' in any way; that is no additional stress, pressure exerted which may also exacerbate their condition.

Medical assistance should also be sought if there is any possibility that the young person has taken an NPS.

The medical treatment of the young person should be the priority.

4. *Taking possession of suspected substances*

Any child or young person suspected of being involved must be requested to hand over any suspected substances and/or related items to be delivered to the police. A description of the items handed over by the young person, including any packaging or paraphernalia, must be recorded and signed by both the person in charge, and the members of staff involved and the person acting as a witness (Appendix 2). The receiving adult must lock the suspected substances and/or related items away in a secure place, in the presence of a witness. The items must be handed over to the police at the first opportunity. If a young person refuses to hand over any substances or related items, isolate them until the police arrive who then have the power to search them.

The young person must be given a receipt for anything he/she hands over to staff, with a description (e.g. colour, quantity) of the items. Where possible this should be signed by the child or young person as confirmation of what has been handed over. Should the child or young person refuse to sign the receipt ensure the other staff member signs to witness the handing over of said materials.

It is important that the child or young person does not have the opportunity to destroy or pass on any evidence. They should not be left alone or permitted to go to the toilet.

In exceptional circumstances, for example while on an excursion, with no access to a safe place to hold the substance, and solely to reduce the risk of, or to prevent, harm to the child or young person, the person in charge should take overall responsibility for holding the substance(s). The substances require to be retained for possible use as evidence, or for chemical analysis. All such actions must be witnessed and recorded and subsequently reported to the police at the earliest opportunity.

5. *Contacting parents and police*

Guidance from the police states that if a child or young person approaches a teacher or some other person employed by the Council and discloses an issue they have around substance misuse, this is not a matter for the police provided there is no suspicion that the individual is in possession of a substance. The primary consideration is the health and wellbeing of that child or young person and the sharing of information should be concerned with ensuring this is addressed. There would be no requirement for police involvement in such cases, unless some kind of associated issue was raised, for example around extended criminality by the young person or others or because of a child protection concern.

If the child or young person is known or suspected to be in possession of a substance, then they must be advised of policy and told that their parent/guardian will be informed as required and the police will be notified. This must be the case regardless of what the substance is thought to be, as only laboratory examination will determine whether that substance is controlled or not. It is not for any employee of the Council to decide whether or not they can be discretionary about possession of one substance over another nor should they assume identification.

The policy of the service in respect of zero tolerance of possession of substances requires to be on open display so that those occupying schools can be in no doubt as to the action to be taken if policy is breached. In sharing this policy with children and young people, the responsibility is placed upon staff to report such instances. If an individual chooses to bring a substance onto school premises it is the individual who breaks the trust of the member of staff and not the staff member by reporting the incident to the police.

In regard to contacting parents, The Management of Exclusion in School Policy¹ states that;

The Age of Legal Capacity (Scotland) Act 1991 states that a person under the age of 16 has legal capacity where they have sufficient maturity and understanding, and there is a general presumption that children aged 12 and over have that capacity. This requires schools to communicate directly with the pupil if he/she has legal capacity. **However, it is considered good practice to also keep parents informed and involved at every stage regardless of the age of the child.** In general, there is a presumption that children over 12 have sufficient maturity and understanding to have legal capacity

¹ The Management of Exclusion in School Policy and Procedures August 2009

With respect to the above parents must be contacted immediately, unless this action is seen to be in contrast to the welfare of the child, and advised that the police will be informed and there has been an incident in which there is suspicion that a controlled substance might be involved, and which may involve their son / daughter. The time of the call should be recorded. The child/young person's parents will be asked to come to the school as soon as practicable, If the child or young person is deemed to be a looked after child, living at home, the schools should inform both the parents or guardians and the allocated social work team

If the child or young person is looked after and accommodated by the local authority and

- living with Foster carers / relative carers or guardians they should be informed and asked to come to the school immediately
- resident in a children's home – the officer in charge or appropriate member of staff should be informed and asked to come to the school immediately

If parents are not available, the authority has a duty of care to the young person and, accordingly, the designated senior member of staff must support the young person, until such a time as an interview can take place. This might include accompanying the child/young person to the interview venue, if this is not to take place within the school. Joint interviews of children are conducted by specially trained police officers and social workers.

If parents/carers arrive before the police, the parents/carers should be allowed access to the child or young person with an adult present at all times, unless otherwise instructed by the police.

If police arrive before parents/carers, the police must be asked to wait until the parents/carers arrive. However, circumstances may dictate the police taking immediate action. In such cases an adult must be present during the subsequent interview.

Police are entitled to detain and search anyone suspected to be in possession of suspicious substances. Such searches are the responsibility of the police.

If the police require to search the child/young person on the premises, this must be carried out in the presence of the parent and/or appropriate member of staff.

The police may wish to take the child or young person away for questioning. In such cases staff are asked to seek an explanation from the attending police officer(s) for their actions and ensure a member of staff accompanies the child/young person if the parents have not already arrived.

6. *Responding to the media*

Where applicable, following a substance misuse incident, the Aberdeen City Council press office should be informed by a Quality Improvement Officer and a statement for the press prepared.

http://thezone/AskHR/YourEmployment/additional_employee_info/EMP_media_protocol.asp

If staff are approached by the press, they must be directly referred to the QIO responsible for managing the incident. If the press, approach the establishment before an agreed

statement is prepared, they must be directed to Aberdeen City Council's press office. Apart from the agreed statement, no further comment should be made.

Where other agencies are involved, they should agree a strategy for handling any approaches from the media. Aberdeen City ADP can also be contacted and seen as an expert mediator between schools and the media. www.aberdeencityadp.org.uk/contact-us/

7. Reason and purpose of reporting and recording

The collection of data around substance use in Aberdeen serves to act as an early warning system for what substances are beginning to become more prevalent within citywide locations. The collection and collation of information can give an overview of trends and as such agencies and services can elicit a response. It is this hard evidence of data collection that informs where limited resources can be allocated as a way of reducing the likelihood of trends becoming common use. Without data collection it can be difficult to argue for additional support or input from funders, service or agencies intervention.

8. Keeping a record: Evidence and statements

The senior member of staff and any other member of staff present must keep a written record of events and contact calls (including times). This record should be made immediately after each event, or as soon as practically possible. (Appendix 3)

Anyone involved in dealing with an incident of controlled drug misuse should expect to be interviewed by a senior member of staff and possibly the police, and to supply a statement of their involvement. It should be remembered that a court case may result from an incident and, therefore, a written record of the interview with a young person suspected of being in possession of, or supplying substances, must be made. Staff must be aware of where record forms are kept.

Any further action taken must also be recorded, and the QIO responsible for dealing with the incident will ensure the relevant people are informed at the earliest opportunity. Copies of completed incident forms must be stored in a locked cabinet in line with the Data Protection Act 1998.

Reference to the incident is uploaded to the young person's pastoral notes on SEEMiS (Scottish Education Establishment Management Information System) (ensuring that the confidential box is ticked), education management software. Additionally incidents should be reported to the Health and Safety Officer responsible for Educational Establishments using the Aberdeen City Council Incident/Near Miss Report form available on The Zone, internal Aberdeen City Council site:
<http://thezone/nmsruntime/saveasdialog.asp?IID=27492&sID=8040>

9. Communication with parents & community members

Heads Teachers and managers of schools will need to consider how information on individual substance misuse incidents should be communicated. Staff will require to be informed but whether information should be communicated to all parents/carers generally and the wider community will depend on the nature of the incident.

9.1 School staff need to:

- **Be given the broad facts**
- **Know that the incident is being managed in line with current procedures**
- **Agree the response to inquiries by children and young people and parents/carers, and the need to follow this advice to ensure consistency**
- **Know that they are required to refer all media inquiries to the designated senior member of staff, including the corporate media team**
http://thezone/AskHR/YourEmployment/additional_employee_info/EMP_media_protocol.asp

In the event of school exclusion, all staff directly involved with the child/young person should be informed of the decision, but no details should be given.

Other than to the staff involved above, the name of child/young person involved must be kept confidential.

9.2 Parents

Generally it is not advisable for schools to write to all parents in response to a particular incident. However, there may be specific instances in which the headteacher may wish to consider, in consultation with appropriate officers, whether a letter should be written to all parents providing advice and reassurance:

- **That a substance-related incident has happened in the school**
- **That the school policy with which parents are familiar, has been fully adhered to in this instance**
- **That medical needs have been attended to**
- **That parents/guardians or carers and police are involved**
- **That procedures are in place to manage the incident effectively and bring it to a satisfactory conclusion**

10. Partners and other services

At the conclusion of the incident, a discussion with the agencies involved should be convened in order to review how the incident was managed, to help inform potential improvements in order to ensure best practice for the future, and to maximise

opportunities for agencies to work together as effectively as possible. A record of the outcome should be kept.

11. *Management review*

A review should also be organised by the HT/QIO to discuss incident management and procedures.

12. *Reporter to the children's panel*

Where the school has sufficient concern, the head teacher may wish to liaise with relevant professionals operating within the community network. School staff will follow the Getting it right for every child operational guidance, 2012 to meet the needs of the child/young person. The practice model highlights that 'children in need' may be eligible for social work assessment. Where this is the case, contact with the social work service should take place. Contact however may also be made with the Reporter to the Children's Panel, to consider whether compulsory measures of supervision may be required.

13. *Excursions outwith school*

School transport providers must be made aware that they should report any substance related incident directly to the head teacher, who will then be responsible for dealing with the incident.

This policy applies equally on school excursions. Before undertaking such excursions, the manager responsible must ascertain any relevant laws and penalties for substance misuse of the country to be visited and should agree procedures to be followed in the event of any incident. For any further guidance on excursions contact should be made with the Outdoor Learning and Education Excursions Coordinator based within the Education and Children's service.

14. *Managing incidents of substance misuse involving staff*

If a member of staff is involved in an incident of substance misuse the corporate policy and guidance notes for the operation of policy on alcohol and drug misuse must be followed. <http://thezone/nmsruntime/saveasdialog.asp?IID=23432&slD=8142>

15. *Managing incidents of substance misuse involving other adults*

Head teachers and managers of schools must deal appropriately with incidents involving substance misuse related behaviour by adults. The senior member of staff will need to take account of the safety of everyone both within and outwith the establishment when determining action to be taken.

There may be occasion when school staff encounter a concern regarding substance misuse or related behaviour that involves a parent or other adult. As with incidents involving children and young people, some situations will require immediate action in collaboration with other agencies to ensure the protection of a child or young person.

If a member of staff is not confident that a parent/carer is able to provide appropriate care and supervision of their child because he/she is under the influence of a substance, they

have a duty to protect the welfare of the child or young person involved. They will attempt to contact an alternative guardian/carer to make safe care arrangements for the child/young person. Where this cannot be done, it may be necessary to follow child protection procedures, contacting Children's Social Work, Reception Team 01224 522055 or Joint Child Protection Team 01224 306877, or out with normal office hours the emergency before contacting social work staff, Duty Social Worker at your local social work office, or Emergency out of Hours Service 01224 693936. If necessary Police Scotland – Phone 101.

If there are concerns about the safety of a child or young person, staff should attempt to persuade the adult not to leave with the child or young person until appropriate help arrives. If the adult insists on leaving with the child or young person, staff should immediately inform social work staff (Duty Social Worker or Out of Hours Service) and the police. Depending upon the age of the child, the course of action may vary.

Examples are given below.

Where the child is not of an age to look after themselves e.g. a young child attending Early learning and childcare services, the member of staff should:

- **Enlist the support of another member of staff**
- **Attempt to persuade the adult not to leave the premises with the child until appropriate assistance arrives**
- **Attempt to contact an alternative carer for the child (either the emergency contact or a family friend)**
- **NOT attempt to restrain the adult if they insist on leaving**
- **Contact the social work service or Police, contact numbers as detailed above.**

Where the child is older and able to look after themselves e.g. an upper stage pupil being picked up after school, the member of staff must check that the young person feels safe to go home with this adult. If not, an alternative (carer/neighbour/relative willing to take responsibility etc) should be contacted. If the young person is happy to leave, but the adult is intending to drive, the member of staff should:

- **Try to persuade the adult not to drive home**
- **Suggest the adult does not take the young person**
- **Offer to order a taxi**
- **Suggest a friend drives them home**

If the adult insists on leaving, the member of staff should contact the police.

If an adult is acting threateningly or aggressively on school premises, the member of staff should:

- **Attempt to calm the situation**
- **Attempt to isolate the young person or adult by taking them aside, preferably to a quiet room**
- **Advise the adult that the police will be called if the behaviour continues. (As above present as key information)**

These incidents must be recorded on the corporate 'Incident/Near Miss Report Form' <http://thezone/nmsruntime/saveasdialog.asp?IID=27492&SID=8040> and sent to your Health and Safety Coordinator.

16. Support for young people affected by parental substance misuse

A number of young people in school are affected – or may have been previously affected - by parental substance misuse. This may constitute a child protection issue and staff should liaise with other relevant agencies as directed by the National Guidance for Child Protection in Scotland, 2014. Getting Our Priorities Right and Hidden Harm are two further documents which outline the specific harms from parental substance misuse. Both of these, along with Getting it Right for Every Child (GIRFEC) Operational Guidance, emphasise the importance of strong partnership working in order to meet the needs of the child.

In all cases, staff should be alert to concerns about a child's welfare and report any issues to the relevant senior member of staff. The designated member of staff will co-ordinate a school support plan for the child/young person and liaise with other agencies as appropriate.

17. Support for young person(s) involved in incidents of substance misuse

It is important that children and young people receive appropriate support and reassurance in the period following a substance misuse incident or disclosure of substance misuse as they may feel extremely vulnerable at this time. Staff should work closely with parents and identified partner agencies, in supporting the young person.

Where necessary children and young people need:

- **To be told the facts of the incident, including the consequences**
- **To have the policy on substance misuse reinforced**
- **To have their substance misuse education programme reviewed and supplemented where necessary. Along with using the Grampian Health Promoting School – Substance Misuse guidance pack (link on page 7 and appendix 4), consultation with partner agencies will also enhance any educational programme.**

18. Support within the school

Education and Children's Services work towards an agenda for inclusion of all children/young

people. For this reason every effort must be made to allow the child/young person to continue his/her education. Schools should collaborate with parents and partner agencies to support the child/young person in identifying and planning possible referrals while also supporting the process when required. These programmes must be reviewed and amended on a regular basis.

19. Substance related litter

If any member of staff either finds substance-related litter (e.g. bottles, needles, syringes or product packaging) or it has been brought to their attention, they must first arrange for its safe retention where it may prove useful for identification or removal in accordance with Health and Safety protocols

For non-needle litter:

- **Arrange for the substance to be safely and securely stored whilst waiting to hand over to the Police.**

For needle/syringe type litter:

- **Discarded needles and used syringes present environmental health and safety implications for school, staff, young people and the wider community. Discarded injecting equipment should only be removed by persons appropriately trained and equipped to do so. The removal of substance related litter of this nature should be in accordance with Health Scotland protocols and the Council's Health and Safety at Work Standing Procedures.**
- **Staff, if not properly trained or equipped, should isolate discarded needles and syringes from young people and other staff members before calling Environmental Services (ph: 01224 219281) who will arrange the safe removal of needles. Needles and syringes can only be transported or stored safely in a "sharps" box.**

For all substance-related litter, the member of staff must:

- **Complete a substance receipt (Appendix 2), giving a description of the substance and/or related litter**
- **Ensure the school service manager or Quality Improvement Officer are notified of the incident at the earliest opportunity.**

APPENDIX 1 – Misuse of Drugs Act 1971

Background and Terminology

Drug Misuse – The Misuse of Drug Act 1971 defines the use of all illegal drugs covered in the Act as misuse. For this reason, the term drug misuse is generally used within official documents and has become more widely recognised and understood than terms such as drug use, abuse or drug taking.

Drug misuse within these guidelines is used to cover all these terms, primarily covering misuse of controlled substances such as heroin, cocaine and cannabis. However, substance misuse can also include the use of solvents, New Psychoactive Substances (“legal highs”), tobacco, medication and alcohol and these guidelines will be of help in managing incidents of all types.

Parents – References to parents in these guidelines should be taken to mean the primary care giver to the young person involved.

Staff – The term staff relates to all teaching and non-teaching staff within the service.

Temporary Classification Drug Orders (TCDO) under the Misuse of Drugs Act (1971) information available at:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/98006/temporary-class-drug-factsheet.pdf

Legislation

Age of criminal responsibility and criminal prosecution

Under age 8

The age of criminal responsibility in Scotland is 8 years of age. Children below this age are therefore generally deemed not to be responsible for any criminal act.

Age 8 – 15

The age of criminal prosecution in Scotland is 12 years of age therefore children who commit offences between the ages of 8 yrs and 12 years will be referred to the Scottish Children’s Reporters Authority (SCRA) and not to the Procurator Fiscal. Children between the ages of 12 years and 15 years will also generally be dealt with by SCRA, although for children over the age of 12 yrs, if the crime is determined as being of a serious nature, it may be dealt with in the criminal court system.

Accessing information

Up to date details on drug classification and legislation can be found here:

<https://www.gov.uk/government/publications/controlled-drugs-list>

with further information on particular substances available via “Know the Score”

<http://knowthescore.info> and <http://www.mycrew.org.uk/> a website providing impartial drugs information, advice and support.

APPENDIX 2 - Substance Receipt

Establishment:		
Date of Incident:	Date & time reported:	Reported by:
Person(s) involved:		
Name(s):	DOB:	Home contact number:
Description of substance:		
Description of any packaging:		
Substance surrendered by: Signed: Date:		
Substance surrendered to: Name: Designation: Signed: Date: Witnessed by: Name: Designation: Signed: Date:		
Where is substance being kept?		

A copy of this form must be given to the person(s) as receipt of surrender.

APPENDIX 3 - Record of Substance-related Incident including Medical Emergencies

Establishment:		
Date of Incident:	Date & Time Reported:	Reported by:
Person(s) involved:		
Name(s):	D.O.B.:	Home Contact Number:
Description of Incident:		

Category of Incident:	Action Taken	By whom	Contacted
Substance-related litter on or near establishment premises			
Suspicion, allegation & disclosure in and out of school activities			
Symptoms of substance misuse			
Person(s) with substances on establishment premises/trip/transport			
Person(s) taking substances on establishment premises/trip/transport			
Person(s) selling/ supplying substances on establishment premises/ trip/transport			
Substance Type (if known) or description and related materials			
Removed by	Where retained	Receipt given and countersigned	

APPENDIX 4 - Local support and links

Aberdeen City Council Integrated Children's Services Plan 2011-15

http://www.aberdeencity.gov.uk/social_care_health/social_work/childrens_services/integrated_childrens_services_plan.asp

Aberdeen City Council Local Authority Child Protection Guidelines

<http://www.aberdeencity.gov.uk/childprotection/>

The Aberdeen City Alcohol & Drugs Partnership (ADP)

A multi-agency partnership which was formed in 2009 following the publication of the Scottish Government / COSLA document, '[A Framework For Local Partnerships On Alcohol And Drugs](#)'.

ADP – Local services and support

<http://aberdeencityadp.org.uk/local-services-and-support/>

ADP - Contacts

www.aberdeencityadp.org.uk/contact-us/

ASH Scotland – Action on Smoking and Health (Scotland) - is the independent Scottish charity taking action to reduce the harm caused by tobacco.

<http://www.ashscotland.org.uk/what-we-do/supply-information-about-tobacco-and-health/briefings/ecigarettes.aspx>

Choices for Life

Information and advice on drugs, alcohol, tobacco and online safety

<http://choicesforlifeonline.org/>

Getting Our Priorities Right (GOPR) - Policy and Practice Guidelines for Working With Children and Families Affected by Problem Drug Use

<http://www.scotland.gov.uk/Publications/2001/09/10051/File-1>

Grampian Health Promoting School Substance Misuse guidance

<http://aberdeencityadp.org.uk/wp-content/uploads/2015/06/Substance-Misuse-Pack-3rd-edition-June-2016.pdf>

Hidden Harm

<http://www.drugscope.org.uk/OneStopCMS/Core/CrawlerResourceServer.aspx?resource=D5DC9EDC-E28E-4BF1-864F-75C7C456552D&mode=link>

Hidden Harm – 3 years on

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/119103/HiddenHarm20071.pdf

NHS Grampian Smoking Advice Service

http://www.nhsgrampian.org/nhsgrampian/gra_display_simple_index.jsp?pContentID=7731&p_applc=CCC&p_service=Content.show&

The national drug strategy for Scotland; The Road to Recovery (May 2008)

<http://www.scotland.gov.uk/Publications/2008/05/22161610/0>

Tobacco Fact Pack – Health Scotland

www.healthscotland.com/documents/311.aspx

A resource pack for teachers, youth workers and those working with children and young people on tobacco issues. For use with P7-S2.