



Drug Education Policy

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1 INTRODUCTION

The school Drugs Policy is a statutory document, in accordance with Drugs: Guidance for Schools in Northern Ireland 2004. The policy follows the guidance given in the SEELB Drug Policy Document.

Bangor Central Integrated Primary School believes that the misuse of drugs endangers not only our pupils but also affects the wider community in which we live. It is the school's responsibility to ensure the child's health and safety while in our care and we also strive to promote their personal and social wellbeing. Drug misuse undermines this and hinders the development of the young person.

The policy provides a focus for the school to consider how drugs education should be implemented and developed within the curriculum, and outlines the roles, responsibilities and legal duties of key staff. From a wider perspective, it gives parents and the local community an opportunity for involvement in drug issues. The policy should form an integral part of the Personal Development for Mutual Understanding strand in the Primary Curriculum.

1.1 RATIONALE

Bangor Central Integrated Primary School recognises that young people in today's society are exposed to the risks associated with the drug culture which exists.

Young children are exposed to messages about drug use from an early age. The messages they receive from television and the media tend to glamorise the use of drugs. They are likely to have seen parents or older brothers and sisters smoking, drinking or taking pills and medicines. Some children may have already tried alcohol or cigarettes and taken prescribed medicines or other drugs. Inevitably older children want to pass on their knowledge and experiences in an effort to try to influence younger children; these experiences are likely to include their experimentation with drugs.

The school wishes to promote the development of the 'whole person' which encompasses physical, mental, emotional, social and environmental health; by equipping pupils with the knowledge, skills, attitudes and values to handle their lives effectively in the present and prepare them for adulthood.

'We care, we share, we achieve, we learn together'.

Research cites personal inadequacy, a lack of self esteem and peer pressure as the main reasons for drug misuse among young people. This places a responsibility on the school to 'better prepare young people for adult life.' (Education Reform (NI) Order 1989)

Drugs education should therefore form an integral part of the school curriculum.

1.2 DRUGS EDUCATION IN CONTEXT

'A drugs education programme is just one part of a whole school response to drug misuse. It should provide opportunities for pupils to acquire the knowledge, understanding and skills to enable them to consider the effects of drugs on themselves and others, and to make informed and responsible choices within the context of a healthy lifestyle' (Drugs: Guidance for Schools in NI 2004)

The programme of education is integrated within the Personal Development Strand of the Curriculum. A life skills approach to drug prevention is essential and within the programme, pupils are taught about raising self-esteem, self confidence and assertiveness to prepare them for making informed decisions about drug use, the main focus being on knowledge, social skills, attitudes and values.

In the Northern Ireland Curriculum Personal Development will form part of the Statutory Core Curriculum and drugs education is specifically included within this

In addition to the drugs education provided within the curriculum, the school offers support for pupils to explore their own attitudes and values as well as an opportunity to discuss any drug related problems they may have. This is generally done through the pastoral system within the school and the pupils are informed that confidentiality cannot always be guaranteed.

2 THE RANGE OF SUBSTANCES

The school's policy on drugs education covers any substance under the DENI definition: (CCEA 2004)

'A drug is 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, drugs include:

- *alcohol and tobacco*
- *'over the counter medicines' such as paracetamol for headaches*
- *prescribed drugs, such as antibiotics and tranquilisers*
- *volatile substances such as glues and aerosols*
- *illegal drugs such as cannabis, LSD and ecstasy*
- *other substances such as amyl / butyl nitrate ('poppers') and magic mushrooms*

Procedures for handling alcohol and tobacco misuse are outlined in Appendix 1 and are also covered by discipline procedures. Procedures for handling prescribed medicines and volatile substances are also outlined in Appendix 1 and are in the school *Health and Safety policy*. This policy complements these policies and also the *Child Protection and Pastoral Care Policies*. It does not exist in isolation.

3 PROCEDURES FOR HANDLING AND REPORTING INCIDENTS

A suspected drug related incident is described as

- Suspect drugs or paraphernalia found on the school premises
- A pupil suspected of being in possession of drugs
- A pupil found to be in possession of drugs
- A pupil suspected of being under the influence of drugs

When an incident occurs the member of staff involved should:

- Make the situation safe
- Send for support
- Administer first aid if necessary
- If a drug is found, gloves should be used and it should be secured in a safe place until dealt with by the police
- Report the incident

The incident will be in the first incidence reported to the designated teacher and then to the principal, who will contact the Community and Schools Involvement officer (CSIO) from the police in this area. The parents will also be contacted and made aware of the situation. The incident will be recorded by the teacher involved and by the designated teacher. A 'record of action' form will be filled out. One copy will be sent to the SEELB designated officer for Drugs Education – Kim Scott, and a copy will be retained for the school's confidential file. The Board of Governors will also be informed.

All staff are made aware of the procedure, which follow the guidelines issued by CCEA Drugs: Guidance for Schools in Northern Ireland 2004. This is outlined in Appendix 3 of this policy.

School staff are not permitted to search pupils' clothing or possessions. Staff may search **school property** such as lockers or desks. However, personal belongings within a desk or a locker cannot be searched without consent. **A search of pupils' personal belongings, including school bag, coat or other items should only be made with the pupils' consent.** Such a search should be made in presence of the pupil and another adult witness. It is acceptable to ask the pupil to empty pockets and school bags.

3.1 PROCEDURES RELATING TO DISCIPLINE AND COUNSELLING

Procedures should be carried out in line with the Positive Behaviour Policy. The Principal will be responsible for deciding how to respond to particular incidents as they occur. He will take into account all the factors associated with each separate incident, such as the age of the pupil concerned, whether the incident

involved one pupil or a group of pupils, whether there has been evidence of particular peer group pressure and whether it is a first offence. Bangor Central Integrated Primary School is committed to tackling drug misuse and any instances of possession, use or supply of illegal drugs on school premises will be regarded with the utmost seriousness. Whilst it is not appropriate to prescribe specific sanctions, the decision rests with the Principal who will respond appropriately incorporating sanctions which may include suspension or, in extreme cases expulsion. External counselling will be offered if appropriate.

3.2 EMERGENCY PROCEDURES

For the purposes of this policy, an emergency is considered to be either:

- A situation in which a pupil or staff is in danger, or
 - A sequence of events which require urgent attention.
- A flow chart for dealing with emergencies is contained in Appendix 3 of this policy.
- Emergency first aid and procedures are contained in Appendix 4.

3.3 CONFIDENTIALITY

The spirit of confidentiality is of primary importance to those who work professionally with young people in a trusting and secure environment. However the legal requirements of drug legislation will mean that in certain circumstances there will be a change in the convention of confidentiality. The Children (Northern Ireland) Order (1995) makes it clear that the welfare of the young person is paramount and therefore confidentiality must be included.

Where a pupil discloses to a teacher that he or she is taking drugs, the teacher should make it clear that he or she can offer no guarantee of confidentiality. However the teacher can advise the pupil of other sources of confidential information or advice. Pupils should also be encouraged to talk to their parents.

3.4 DEALING WITH THE MEDIA

If the school receives an enquiry from the media, the caller will be referred only to the principal.

When responding to the media, the privacy of the pupil will be respected. Short, factual statements will be given and the concluding statement will be positive, and reassuring. No further comments will be given.

4 THE PLACE OF DRUGS EDUCATION WITHIN THE CURRICULUM

Drugs education is not taught in isolation. It is a continuous process which involves the development of skills and attitudes enabling pupils to make informed choices. Effective drugs education should take account of not only the individual, but also the family, their peer groups, and the wider community. Where possible, the school promotes the partnership between the parent and child, when addressing drug issues.

The school's drugs education programme is grounded in the requirements outlined in the area of Personal Development and Mutual Understanding with the Revised Curriculum. The area of PDMU focuses attention on children's emotional development, health and safety, relationships with others, and development of moral thinking, values and actions.

CCEA describes it as:

'Encouraging each child to become personally, emotionally, socially and physically effective to lead healthy, safe and fulfilled lives and to become confident, independent and responsible citizens making informed and responsible choices and decisions throughout their lives.'

Set learning activities focus on the development of:

- Knowledge;
- Attitudes;
- Skills;
- Relationships;
- Thinking Skills & Personal Capabilities;
- Emotional awareness;
- Values; and
- Life skills.

5 THE AIMS AND OBJECTIVES OF THE DRUGS EDUCATION PROGRAMME

The school's drugs education programme is grounded in personal development and the enhancement of protective factors.

5.1 AIMS

- To promote positive attitudes towards personal health.
- To develop self-discipline and self-respect.
- To build pupils' self esteem.
- To develop decision-making skills which may delay or prevent the onset of experimentation.
- To inform pupils of the effects of drug abuse, and the risks involved.
- To help pupils to understand how they can influence their peers.
- To develop knowledge and understanding of themselves and others as individuals.

5.2 OBJECTIVES

Drugs Education should enable pupils to develop a knowledge and understanding about drugs and drug issues, as well as the skills needed to cope with challenges they will encounter.

Pupils should be able to:

- Understand their own personality, needs, abilities and interests.
- Understand the process of reasoning required to make informed choices.
- Explore their own attitudes towards drugs and drug issues.
- Develop coping strategies to deal with peer pressure.
- Develop a competence in challenging attitudes and patterns of behaviour associated with drug misuse.
- Develop self-discipline.
- Understand what is meant by 'a drug' and the definition of 'addiction'.
- Understand how some drugs affect the body.
- Be aware of the benefits of healthy lifestyles.
- Recognise potential drug exploitation and how to take avoiding action.
- Be aware of the current drug culture and the effect of advertising campaigns.

These objectives are closely linked with our school policy on pastoral care and they should not be seen in isolation.

5.3 Implementation

The aims and objectives for the drug education programme are centred upon providing certain key experiences at each important Key Stage. These are summarised below:

Working at Foundation Stage

Explore and discuss the importance of keeping healthy and how to keep safe in familiar and unfamiliar environments:

- Being aware of how to care for their body in order to keep it healthy and well;
- Understanding that many substances can be dangerous; and
- Knowing the safety rules that apply when taking medicines.

Working at Key Stage 1

Strategies and skills for keeping themselves healthy and safe:

- Recognising and valuing the options for a healthy lifestyle, including the benefits of exercise, rest, healthy eating and hygiene; and
- Understanding that medicines are given to make you feel better, but that some drugs are dangerous.

Working at Key Stage 2

How to sustain their health, growth and well being and coping safely and efficiently with their environment:

- Understanding the benefits of a healthy lifestyle, including physical activity, healthy eating, rest and hygiene;
- Knowing about the harmful effects to themselves and others of tobacco, alcohol, solvents and other illicit and illegal substances.

These objectives are closely linked with our school policy on pastoral care and they should not be seen in isolation.

6 THE DELIVERY AND ORGANISATION OF THE DRUGS EDUCATION PROGRAMME

Drugs Education is a whole staff issue. Bangor Central Integrated Primary School ensures that staff are regularly updated with changes in the curriculum and changes to the policy, which have an effect on their delivery of the curriculum.

The Designated Teacher for Drugs, Mrs Hutchinson, will ensure that the appropriate themes are covered under Personal Development for each year group. It is the responsibility of the classroom teacher to include drugs education in other subject areas if it forms part of the Northern Ireland Curriculum, and to spend an adequate amount of time delivering drugs education.

6.1 RESOURCES

The main resources used for the delivery of the drugs education programme are: *'Living, Learning Together'* see Appendix 6. Additionally, the *'Life Education Centre'* visits the school each year for sessions on drug awareness – see Appendix 6 for an outline of the programme.

6.2 OUTSIDE AGENCIES

Bangor Central Integrated Primary School may occasionally use outside agencies to help deliver the drug education programme providing the following criteria are met:

- The content and delivery of the programme has been jointly agreed.
- The programme and methods of delivery are consistent with the aims and objectives outlined in this policy.
- The principal has given his approval for the use of the outside agency.
- The staff from the agency have been vetted in relation to Child Protection.
- The agency is familiar with the school's drug policy and is prepared to adhere to it.
- The resources used are appropriate to the age range and maturity of the pupils.
- The visitor (s) to the school are clear that confidentiality cannot be maintained and any disclosure which might suggest that a pupil is at risk must be passed to the designated teacher for drugs.
- The teacher will always be present when a visitor to the school is taking a class.
- Outside agencies will be asked to complete the External Agencies Form – Appendix 5

7 LINKS WITH PARENTS, THE COMMUNITY AND THE POLICE

Parents play a vital role in the prevention of drug misuse. They are involved in the planning of the school drug policy and they should be involved fully in the education of their child. This is especially so with the drugs education programmes. Parents will be informed when external agencies are being used to address drugs related issues and are encouraged to play an active role in homework tasks, and discuss drug issues with their child whenever possible. Parents are also aware of the school's procedures for dealing with drug related incidents.

The school endeavours to work closely with the local community to help reduce the number of drug related incidents.

Bangor Central Integrated Primary School has developed good working relationships with the local police. This helps to ensure that if a drug related incident is reported, it will be dealt with in a professional and discrete manner, and in keeping the best interests of the child concerned in mind.

Community and Schools Involvement Officers offer advice and support when it is needed.

8 THE ROLE OF THE DESIGNATED TEACHER FOR DRUG RELATED INCIDENTS

Mrs Montgomery is responsible for the co-ordination of the arrangements to deal with individual cases of suspected or actual drug misuse. Her role includes:

- Oversight of co-ordination of planning of curricular provision
- Implementing procedures as outlined in this policy for dealing with an incident
- Receiving any substance and associated paraphernalia found in school
- Regularly updating staff on the policy and the procedures for dealing with a drug related incident
- Liaison with the principal on any drug related incident
- Liaison with other staff responsible for pastoral care
- Liaison with outside agencies in relation to drug related incidents
- The induction of new staff and training of existing staff as appropriate
- Reviewing and updating the school drug policy after an incident and when required.
- Completing an incident report form.

8.1 THE ROLE OF THE PRINCIPAL

It is the responsibility of the Mr Campbell to ensure that correct procedure is followed if a drug incident occurs. His role includes:

- Determining the circumstances surrounding incidents.
- Liaison with the PSNI.
- Ensuring pupils' welfare.
- Handling, storage and safe disposal of any drug/drugs related paraphernalia.
- Liaison with the Board of Governors and SEELB.
- Ensuring the completion of a written report and forwarding to the Board of Governors and SEELB.
- Contacting parent / guardian of pupil/s involved.

8.2 THE ROLE OF THE BOARD OF GOVERNORS

School governors have the responsibility for their individual school and foster and support the development and on-going review of the policy and education programme. Their role includes:

- Facilitation of the consultative process whereby the school community can respond and contribute to the effectiveness and quality of the policy and programme which they examine and approve prior to implementation in the school.
- Ensuring the policy is published in the school prospectus
- Ensuring that it is reviewed at regular intervals.
- Appointing a governor who is aware of the Drug Education Policy and appropriate disciplinary response.

9 MONITORING AND EVALUATING

The school drugs education policy is periodically reviewed to reflect changing circumstances and trends in drug use. The programmes of study for drugs education are continually reviewed and any changes deemed necessary are implemented.

The policy is a regular item on the agenda of staff meetings and all new staff are familiarised with it.

The policy is available to parents if they request it and a synopsis is printed in the school prospectus and school handbook.

The policy can also be accessed from the school website.

APPENDIX 1

PROCEDURES FOR HANDLING ALCOHOL MISUSE

The school premises are an alcohol free zone. The school does not allow any alcohol to be brought onto or consumed in school premises. This applies to visitors, staff and pupils.

Adults breaking this rule will be referred to the principal directly.

Pupils will be dealt with under the school's discipline policy.

PROCEDURES FOR HANDLING TOBACCO MISUSE

The school is a restricted environment with no one being permitted to smoke on the school premises. This area is for staff only and visitors are not permitted to smoke whilst in the building.

Adults breaking this rule will be advised by other members of staff.

Pupils breaking this rule will be dealt with under the school's discipline policy.

THE MANAGEMENT OF PRESCRIBED MEDICINES

At the start of the school year, parents must complete a medical form indicating any medical illness their child has. For full information on prescription medicines within school please see the First Aid and Administration of Medication Policy

If a pupil needs to bring a prescribed medicine into school, the following guidelines must be adhered to:

- A letter from the parent explaining the nature of the illness and the dosage required must be sent with the pupil
- The pupil must immediately give the medicine to their class teacher
- The class teacher must store the medicine in a secure place and ensure that only the pupil for whom the medicine is prescribed, takes the medicine.

THE MANAGEMENT OF SOLVENTS

Pupils are not permitted to bring solvents or aerosols into school. This includes tippex fluid and pens, tippex thinners, glue, marker pens and spray deodorants. Pupils are permitted to bring felt tip pens to school.

All members of staff are responsible for the safe storage and usage of solvents in their classroom. Where possible they should be locked away when not in use. This includes white board markers, glues and paints. The cleaners and caretakers should also ensure that their stores are locked when not in use and that solvents are held in a secure place.

APPENDIX 2 - THE LAW IN NORTHERN IRELAND

All staff are aware of their responsibilities under the law. The law in Northern Ireland differs in certain aspects from elsewhere in the UK. The relevant pieces of legislation are 'The Misuse of Drugs Act 1971, Section 5 of the Criminal Law Act (Northern Ireland) 1967, and the Powers of Arrest – Police and Criminal Evidence (Northern Ireland) Order 1989.

If the principal has reasonable grounds to suspect that drugs are being used or supplied on the school premises, he will inform the police immediately in order to avoid any liability as a 'manager or occupier' of premises.

If staff have taken possession of a substance for the purposes of protecting a pupil from harm and from committing an offence; they should under no circumstance, try to analyse or identify it. If they suspect it to be LSD, they should wear gloves when handling it, to avoid ingestion through the skin. The drug should be immediately stored in a safe place, and the police contacted.

MISUSE OF DRUGS ACT 1971

It is an offence under the Misuse of Drugs Act 1971:

- i. to supply or offer to supply a controlled drug to another in contravention of the Act;
- ii. to be in possession of, or to possess with intent to supply to another, a controlled drug in contravention of the Act; it is a defence to the offence of possession that, knowing or suspecting it to be a controlled drug, the accused took possession of it for the purpose of preventing another from committing or continuing to commit an offence and that as soon as possible after taking possession of it he took all such steps as were reasonably open to him to destroy the drug or to deliver it into the custody of a person lawfully entitled to take custody of it;
- iii. for the occupier or someone concerned in the management of any premises knowingly to permit or suffer on those premises the smoking of cannabis: or the production, attempted production, supply, attempted supply, or offering to supply of any controlled drug.

The offences listed above are arrestable offences.

Section 8. A person commits an offence if, being the occupier or concerned in the management of any premises, he knowingly permits or suffers any of the following activities to take place on those premises, that is to say:

- (a) producing or attempting to produce a controlled drug in contravention of section 4 (1) of this Act;

- (b) supplying or attempting to supply a controlled drug to another in contravention of section 4 (1) of this Act or offering to supply a controlled drug to another in contravention of section 4 (1) of this Act;
- (c) preparing opium for smoking;
- (d) smoking cannabis resin or prepared opium.

CRIMINAL LAW ACT (NORTHERN IRELAND) 1967

Section 5. Failing to give Information. Where a person has committed an arrestable offence, it shall be the duty of every other person who knows or believes:

- (i) that the offence or some other arrestable offence has been committed; and
- (ii) that he has information which is likely to secure, or to be of material assistance in securing, the apprehension, prosecution or conviction of any person for that offence;

to give that information, within a reasonable time, to a constable and if, without reasonable excuse, he fails to do so then that person is committing an offence.

This places an onus on individuals to inform a constable.

POWERS OF ARREST – POLICE AND CRIMINAL EVIDENCE (NORTHERN IRELAND) ORDER 1989

Art. 26(4) – Any person may arrest without warrant anyone who is, or whom he with reasonable grounds suspects to be, guilty of the offence.

Art 26(5) – Where an arrestable offence has been committed, **any person** may arrest without warrant anyone who is, or whom he with reasonable grounds suspects to be, guilty of the offence.

These powers of arrest are available to non-police and, as the following drug offences fall within the definition of Arrestable Offence, are available for use in such circumstances.

(1) Possession of Controlled Drugs

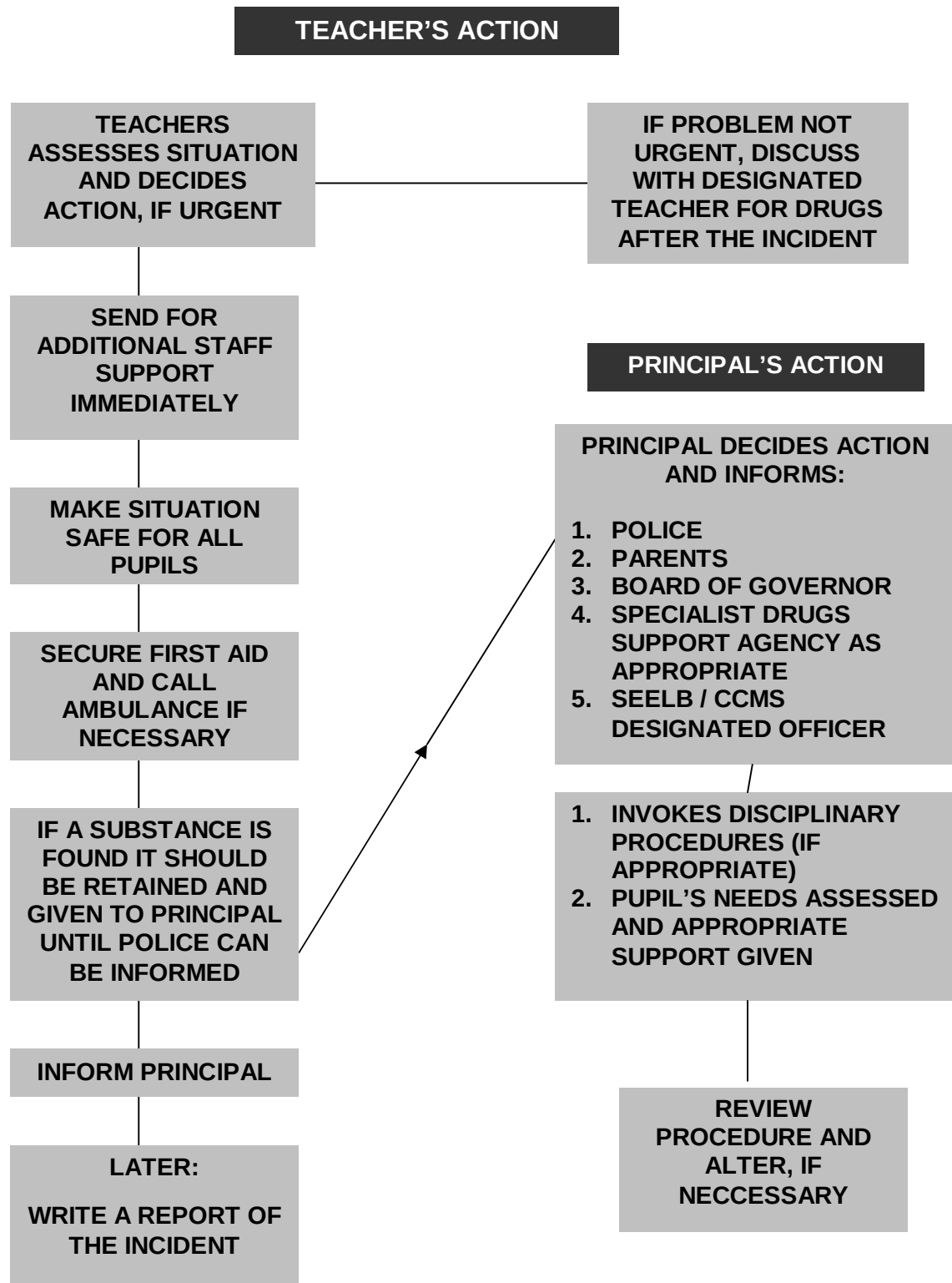
(2) Possession of Controlled Drugs with Intent to Supply

(3) Supply of Controlled Drugs

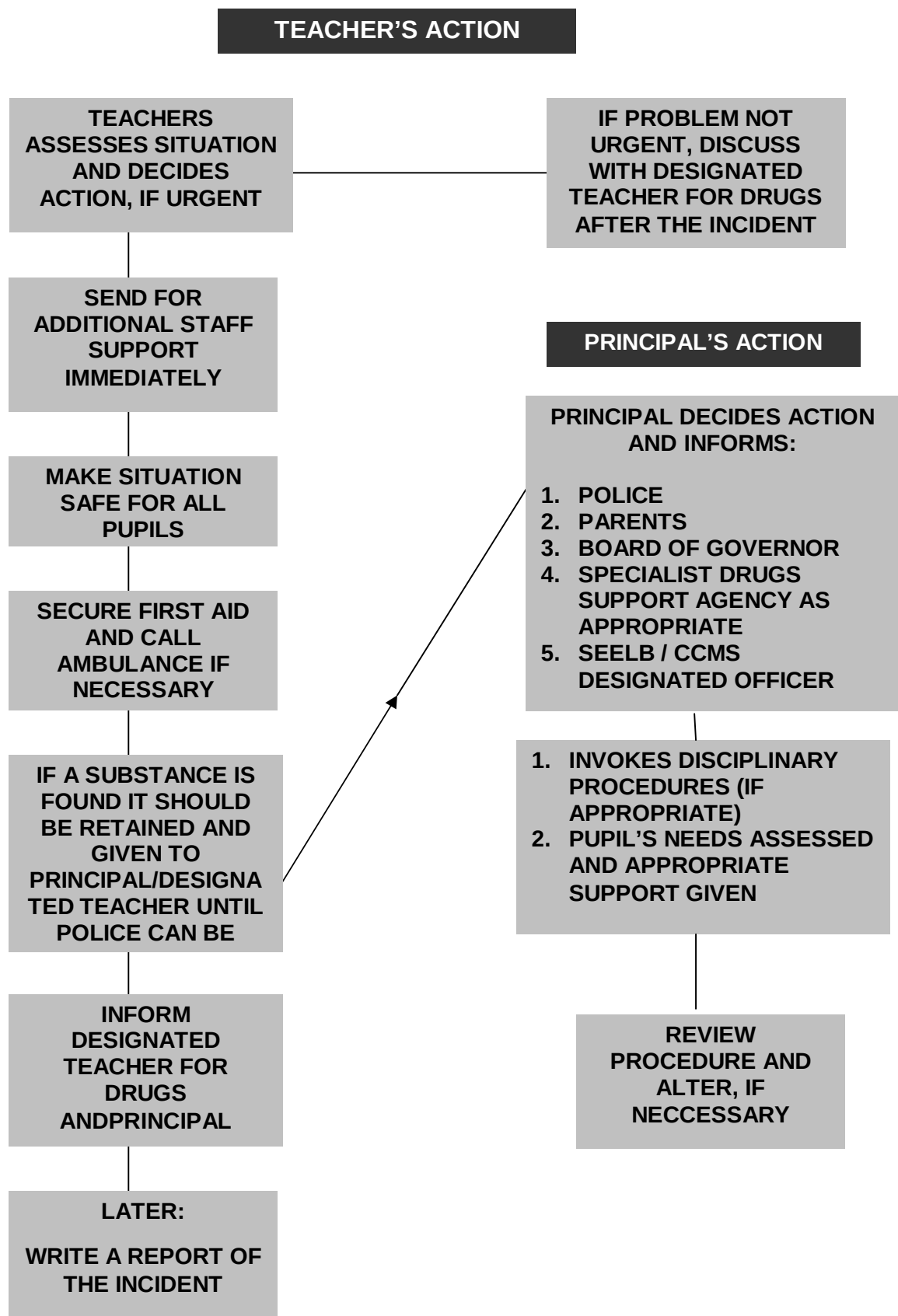
NB: The above information is advisory only and does not represent legal opinion.

APPENDIX 3 - HANDLING INCIDENTS

Action to be taken in the event of a suspected incident of drug misuse where the designated teacher for drug issues is the principal:



Action to be taken in the event of a suspected incident of drug misuse where the designated teacher for drug issues is not the principal:



Managing an Incident - Summary

Actions by members of staff in the event of a suspected drugs-related incident::

1 Individual Staff Member

- Assess situation and decide action;
- Secure First Aid and send for additional staff support if necessary;
- Make situation safe for all pupils and other members of staff;
- Carefully gather up any drugs and/or associated paraphernalia/evidence. Pass all information/evidence to the designated teacher for drugs; and
- Write a brief factual report of the incident and forward it to the designated teacher for drugs.

2 Designated Teacher for Drugs: Mrs Montgomery

- Respond to first aiders advice/recommendations regarding the incident;
- In the case of an emergency inform parents/guardians immediately;
- Take possession of any substance(s) and associated paraphernalia found;
- Inform principal;
- Take initial responsibility for pupil(s) involved in suspected incident; and
- Complete an incident report form (see Appendix 7) and forward it to the principal.

3 Principal: Mr Campbell

- Determine the circumstances surrounding the incident;
- Ensure that the following people are informed where relevant:
 - Parents/guardians;
 - Community and Schools Involvement Officer (CSIO);
 - Board of Governors;
 - Designated Officer in ELB/CCMS.
- Agree pastoral and disciplinary responses including counselling services/support;

- Forward a copy of the incident report form to the chairperson of the Board of Governors and the designated officer within the ELB and CCMS if appropriate; and
- Review procedures and amend, if necessary.

APPENDIX 4 – EMERGENCY FIRST AID

The school's trained first aiders are:

Mrs Rosie Heaney, Mrs Jayne Manogue, Mrs Jenni Elliott, Mr Adam Murray & Mrs Helen O'Kane.

Emergency Action for all members of the school community:

In the event of finding someone collapsed and unconscious, summon help and follow these procedures until help arrives:

1. Check that the mouth is free of obstruction and the airway clear.
2. If necessary pull the tongue forward.
3. Loosen clothing at the neck-line.
4. Place the person in the recovery position with the head forward (refer to illustrations of recovery position next page).
5. Check for chest movement and colour of face, lips and tongue; if these begin to turn blue, a person qualified in first aid should resuscitate.

Appendix 5: Exemplar Form when using External Agencies

Drugs Education Programme – External Agency

School: _____
Principal: _____
Contact Teacher: _____
Tel No: _____
Fax No: _____
E-mail: _____

Agency: _____
Agency contact: _____
Tel No: _____
Fax No: _____
E-mail: _____

Agreed Aims

- _____
- _____
- _____

Sessions to be Delivered

Date(s): _____
Times(s): _____

Audience

Number of participants: _____
Type of group (age, ability, etc) _____

Methodology

(Brief description of programme content and methods)

Intended Learning Outcomes

- _____
- _____
- _____

Evaluation

(Brief description of how this will be conducted and reported) _____

Signed _____ (Contact Teacher/Principal)

Signed: _____ (Agency contact) Date: _____

Appendix 6

UNITS OF STUDY FOR DRUGS EDUCATION PROGRAMMES AND STATEMENTS OF MINIMUM REQUIREMENT

HEALTH, GROWTH AND CHANGE		
Foundation Stage	Key Stage 1	Key Stage 2
Teachers should enable pupils to develop knowledge, understanding and skills in developing:		
Strand 1 The importance of keeping healthy. • Be aware of how to care for their body in order to keep it healthy and well. • Recognise and practise basic hygiene skills. • Realise that growth and change are part of the process of life and are unique to each individual.	<u>Strand 1</u> Strategies and skills for keeping healthy. • Recognise and value the options for a healthy lifestyle including the benefits of exercise, rest, healthy eating and hygiene. • Have respect for their bodies and those of others. • Be aware of the stages of human growth and development. • Recognise how responsibilities and relationships change as people grow and develop. • Understand that medicines are given to make you feel better, but that some drugs are dangerous. • Understand that if not used properly, all products can be harmful. • Be aware that some diseases are infectious and some can be controlled.	Strand 1 How to sustain their health, growth and well-being. • Understand the benefits of a healthy lifestyle, including physical activity, healthy eating, rest and hygiene. • Recognise what shapes positive mental health. • Know about the harmful effects tobacco, alcohol, solvents and other illicit and illegal substances can have on themselves and others. • Understand that bacteria and viruses affect health and that risks can decrease when basic routines are followed. • Know how the body grows and develops. • Be aware of the physical and emotional changes that take place during puberty. • Know how babies are conceived, grow and are born. • Be aware of the skills for parenting and the importance of good parenting. • Recognise how responsibilities change as they become older and more independent. • Know that AIDS is a prevalent disease throughout the world and is a major health issue for many countries.

DRUG EDUCATION PROGRAMME: Living and Learning Together

Units of study to be covered by each year group:

YEAR 1 'Keeping Healthy and Safe'

Learning Intention: Recognise what constitutes a healthy lifestyle.

Learning Activity 5: *Things I put on my body.*

Learning Activity 6: *Miss Polly.*

Learning Activity 7: *Feeling Safe.*

YEAR 2 'Keeping Healthy and Safe'

Learning Intention: Recognise what constitutes a healthy lifestyle.

Learning Activity 2: *Things that go in my body.*

Learning Activity 3: *Five little children.*

Learning Activity 6: *My body.*

YEAR 3 'Keeping Healthy and Safe'

Learning Intention: Recognise and begin to appreciate a lifestyle, which is both healthy and safe.

Learning Activity 1: *Healthy choices.*

Learning Activity 5: *People, places and things.*

Learning Activity 6: *Rules about medicines.*

YEAR 4 'Keeping Healthy and Safe'

Learning Intention: Recognise and begin to appreciate a lifestyle, which is both healthy and safe.

Learning Activity 3: *My body needs food.*

Learning Activity 4: *Too much of a good thing.*

Learning Activity 5: *Do I want to smoke?*

Learning Activity 6: *Injectons.*

YEAR 5 'Stay Safe and Healthy'

Learning Intention: Understand and value the elements that contribute to a safe and healthy lifestyle.

Learning Activity 1: *On and off balance.*

Learning Activity 2: *Body balance.*
Learning Activity 3: *Lots or little.*
Learning Activity 5: *Drinking.*

YEAR 6 'Keeping Healthy and Safe'

Learning Intention: Understand and value the elements that contribute to a safe and healthy lifestyle.

Learning Activity 1: *Feeling the air in our bodies.*
Learning Activity 2: *Smoking – what do you think?*
Learning Activity 3: *Don't make it a habit.*
Learning Activity 4: *Alcohol.*
Learning Activity 5: *What is a drug?*

YEAR 7 'Fit for the Future'

Learning Intention: Understand and value the elements that contribute to a safe and healthy lifestyle.

Learning Activity 1: *Alcohol – how we see it.*
Learning Activity 2: *Alcoholism – who pays the price?*
Learning Activity 3: *Second hand smoke.*
Learning Activity 4: *What is a drug?*
Learning Activity 5: *Hazards.*
Learning Activity 6: *Lets do something.*
Learning Activity 7: *Healthy Choices and Decisions.*

Life Education Centre

Outline of programme for each year group.

Year 1

Our Bodies: food, water, oxygen, sleep, exercise and hygiene.

Year 2

My Wonderful Body: different types of food to give us energy, balanced diet

Year 3

The Human Machine: different feelings and how to cope with them

Year 4

Meet the Brain: how the brain controls our bodies and our personalities.

Year 5

Great to be me: how different we all are and what makes us special. This is the first programme to mention drugs and the different issues around decision making and choices.

Year 6

Friends: a drug discussion about responsibility and the fact that it is up to us what we put in our bodies.

Year 7

Decisions: Systems in the body and the environment and influences including image and advertising influences. Explores issues around legality.



RECORD OF DRUG RELATED INCIDENT



**SOUTH EASTERN EDUCATION
AND LIBRARY BOARD**

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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

1.	Name of Pupil / Young person _____	DOB _____
	Address _____	
	School / Youth Club _____	
2.	Date of Incident _____	Reported by _____
	Time of Incident _____	Location of Incident _____
3.	First Aid given YES / NO	Administered by _____
	Ambulance/Doctor Called YES / NO	Time of Call _____
	Drug Involved (if known) _____	Sample Found YES / NO
4.	Parent Informed YES / NO	Date _____ Time _____
	By whom _____	
5.	Where sample retained _____	or
	Date Sample Destroyed _____	Time _____
	Witnessed by _____	
6.	Police Informed YES / NO	Date _____ Time _____
	By _____ Name of Station / Officer _____	
7.	SEELB Drug Education Officer Informed	YES / NO Date _____
	Time _____	By whom _____
8.	Form completed by _____ Date _____	
	Position _____	
	Countersigned by School Principal/Board Officer _____	
	Dated _____	

Please retain one copy for your confidential file
and return the original to:

**Designated Officer – Drug Education
SEELB Headquarters
Grahamsbridge Road
BELFAST
BT16 2HS**

Tel No: 028 9056 6407

Fax No: 028 90485309

