



The Launceston Preparatory School

Truth and Happiness

Drug Policy

DEFINITION

Drugs are foreign substances, which when introduced to the body alter its normal physical or psychological functioning. The drugs that this policy refers to are alcohol, tobacco, pharmaceutical drugs, inhalants (including vaping products) and illicit substances.

RATIONALE

The Launceston Preparatory School Health Policy states “for children to fulfill their potential and be happy, productive citizens their health is important.” Therefore part of our Health and Physical Education Curriculum is devoted to the development of knowledge, problem-solving and decision-making skills in regard to drugs within our community.

A comprehensive understanding of drugs and their effects on the human body is something acquired throughout a lifetime. We aim to provide the students with a basis on which they can learn the facts about drugs, form their own educated opinions and act accordingly.

Drugs are a community issue and can not be solved by schools alone. Schools must work together with students, their families and the community to model appropriate behaviours, to create a safe and supportive environment and to support action taken by the school to discourage any inappropriate drug related behaviour.

This policy is binding to all members of the school community and actively opposes the inappropriate use of legal drugs and the possession and use of prohibited substances.

PREVENTION STRATEGIES

- Age appropriate drug education is taught by a Physical Education and Health teacher as part of the Health curriculum. Each student from Prep to Grade 6 is allocated one health lesson per week. Age appropriate drug education is also incorporated into the Pre-Primary curriculum by the Kindergarten and Early Learning teachers.

The program aims to:

- inform students of up to date, factual information on drugs (age appropriate);
- build self esteem and encourage personal choice and informed decision-making;
- recognise peer pressure and learn practical ways to deal with it;
- place an emphasis on drugs our students are likely to come in contact with (such as; home medications, epi-pens, asthma medication, tobacco, alcohol, vapes and other inhalants etc.);
- reinforce the importance of using pharmaceutical drugs correctly and never taking another person's medication;
- develop an understanding of the functions of the human body and how drugs affect the body;
- encourage students to investigate other alternatives to adolescent risk-taking such as stress management, exercise, sport etc;
- provide knowledge of appropriate basic first aid action when someone has taken drugs.

2. The school community cannot address the issue of student drug use without parental support. It is essential that the messages for positive health behaviours are consistent at school and at home. Communications to parents and school family members of drug/health programs and policies will be through information evenings and the weekly newsletter.

3. We will ensure ongoing professional development on drugs and related behaviours.

4. All medication on school premises is stored in secure staff areas or stored in the first aid locker. With parent permission medication is issued by a staff member unless a written permission has been given by a parent/guardian for a student to self-administer their own medication.

5. All short term/topical medication brought to school by students must be given to the relevant home group teacher in an envelope or plastic bag. The medication must be clearly named and a written note from the student's parent/guardian must also be included for the teacher. The note should include:

- the child's name
- name of the medication
- dosage required by the child
- storage details – refrigerator, etc.
- time of day or when medication is required
- any possible side effects the child may experience
- contact phone number for parent/guardian
- if the medication needs to go home each night

6. Long term medications such as asthma puffers will be stored in a bum-bag with the child's name and photograph attached so they can be easily identified and carried by the child when required.

7. Parents or care-givers of Early Learning students must complete the AUTHORISATION FOR THE ADMINISTRATION OF MEDICATION form in the Early Learning classroom if they require their child/ren to receive medication at school.
8. On camps all medications are collected and issued by staff members unless written permission has been given by parents/guardians for students to self-administer their medications.
9. All staff will aim to facilitate an atmosphere within the school so students can openly discuss issues and feel confident asking questions on all matters including health and drug related issues.
10. School grounds are checked each morning for inappropriate items, including remains from drug related activities. This procedure is in place to protect students and to ensure the safe removal of objects.

STORAGE OF MEDICATION

1. Medicines are to remain in the original, labelled containers.
2. All medication must be stored at the temperature stated on the container, in a labelled, lockable or child-resistant container/ or in a staff only area.
3. Emergency medication needs to be accessible to staff, whilst inaccessible to children in an under school age care setting.
4. Medication for self-administration in a school age care setting must be stored safely and accessed by children according to written instructions from a medical practitioner or the parent.
5. Narcotic substances must be stored apart from other goods in an enclosure (e.g. a cupboard) that is securely locked and the key must be retained either on a person entitled to administer the substance or stored in a place not readily accessible to others. All other medications must be securely stored away from narcotics.
6. Adrenaline auto-injecting devices, e.g. EpiPens will be labelled with the child's name, kept in a location known to staff, but not in a locked container. An Action Plan for Anaphylaxis will be kept with each child's EpiPen.

INTERVENTION STRATEGIES

The objective of intervention is to reduce the harmful and/or inappropriate use of drugs. Incidents will be dealt with in a positive and supportive manner in the best interests of the student, staff and other parties concerned. Adult members of the school community will be expected to model health-promoting attitudes and social behaviour.

The identification of problems may occur in the following ways:

- a student may be seen with or using a drug inappropriately
- students may voluntarily approach staff

- another student may inform a staff member of their concern for a friend
- students may be identified through inappropriate behaviour at school resulting from drug use
- school staff may approach Principal to express concerns about an individual.

When a problem is identified it will be dealt with in an appropriate manner by the Principal, taking into account the nature of the incident, the circumstances of the student/s involved, including relevant age, development, gender, cultural and social considerations, the needs and safety of others in the school and the school's discipline policy.

ACTION STRATEGIES

1. If a student talks openly to friends or staff about use of drugs outside of school, the student will be counselled by staff and parents informed of the student's behaviour. Socratic seminars may also be used alongside drug education programs to assist in accurate knowledge and understanding of drug related incidents and how to handle drug related issues.
2. If a student brings drugs onto the school premises, is under the influence of drugs, attempting to inhale inappropriate substances etc.
 - he/she will be reported to the Principal
 - an assessment of student/s and incident will be conducted by Principal
 - Principal will take the appropriate action according to the offence. Disciplinary action may range from a warning, loss of privileges, detention, discussion with parents, talk with school's adopt-a-cop, referral to support services, detention, suspension, etc.
 - staff should be informed of the incident (if appropriate), with due consideration given to the privacy of the individuals involved.
 - The incident and action taken will be recorded and placed in the student's file.
3. When a drug related incident has been identified, this may lead to the need for additional education programs for students, staff and parents. This would need to be assessed at the time by the Principal.
4. Students may be requested to empty pockets or open a bag or locker themselves, but may not be required to do so. It is strongly recommended that in the absence of exceptional circumstances and without clear, written consent of the person to be searched or the person whose property is to be searched, searching should be left to the police. (Teachers should never put their hands into pockets or bags – students should always be asked to empty their own property onto a flat surface, thus avoiding hidden sharp and dangerous objects.)

5. Police should be informed if:

- drug dealing is occurring in or close to the school
- there is danger to students from someone under the influence of drugs
- if Principal/s have concern for drugs found on the premises

Evaluation:

This policy will be reviewed as part of the school's policy review cycle.

Related Information:

[Health Policy](#)

[Behaviour Policy](#)