SPERRIN
INTEGRATED COLLEGE
MAGHERAFELT

Policy & Procedure for Drugs Education

Roles and Responsibilities

Training

Drugs Education Programme

Procedures for dealing with drug-related incidents

Procedures for the administration of prescribed medication

Pastoral Response

Disciplinary Response and Sanctions

Monitoring and Evaluation

Communication and Dissemination of policy

Updated May 2021

Contents

Introduction

- Ethos and Rationale
- Range of Substances and Definitions
- Aims and Objectives

Development and Implementation

Roles and Responsibilities

Training

Drugs Education Programme

Procedures for dealing with drug-related incidents

Procedures for the administration of prescribed medication

Pastoral Response

Disciplinary Response and Sanctions

Monitoring and Evaluation

Communication and Dissemination of policy

Appendix 1 – Organisations which may provide assistance

Appendix 2 – Staff Questionnaire

Appendix 3 – Drugs Education: Pupil Evaluation Sheet

Appendix 4 – Finding a suspected substance or drug-related paraphernalia on school premises

Appendix 5 – Pupil suspected of possessing/distributing an illegal substance

Appendix 6 – Pupil suspected of having taken drugs/alcohol in school

Appendix 7 – Pupil in possession of alcohol or unauthorised prescribed medication on school premises

Appendix 8 – Drugs: Related Incident Form

Appendix 9 – Procedures for dealing with suspected drugs- related Incidents

Appendix 10 – Signs and Symptoms of Drug Use

Appendix 11 – Summary of Relevant Legislation Applicable to Northern Ireland (PSNI, PHA)

Appendix 12 – Referral Pathway for Specified School Incidents

Introduction
The Magherafelt Learning Partnership (MLP) Drugs Education Policy provides a focus for our Schools and Colleges 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.

Copies of the guidance on which this policy is based *Drugs Guidance for Schools in Northern Ireland* (CCEA,2015), are available from the Department of Education website www.deni.gov.uk (Circular 2015/23)

Where appropriate, the implementation of this policy will operate in tandem with other relevant MLP and school policies including:

- Pastoral Care Policy
- Child Protection Policy
- Medicines Policy
- Health & Safety Policy

Ethos
The Magherafelt Learning Partnership (MLP) sees its role as that of a caring community, committed to the physical, mental, social, emotional, moral and spiritual health, safety and well-being of its pupils and staff. The values and ethos of all Schools and Colleges in the Magherafelt Partnership is reflected in this policy.

It is hoped that primary prevention and the protection of all school members will be achieved through the general ethos of the Partnership Schools and Colleges through an effective Pastoral Care Programme and a comprehensive Drugs Education Programme.

Rationale
The Schools and Colleges in the MLP are committed to protecting and promoting the health and safety of all members of the school communities and to adopting a consistent approach to drug related issues. The Schools and Colleges have a vital preventative role to play in combating the misuse of drugs by young people. Therefore, a Drugs Education Programme is included in the curriculum of all Partnership Schools and Colleges to take account of changing circumstances and trends in schools and the local community.

The Partnership wants its pupils to make informed and responsible decisions about drugs by increasing their knowledge and by developing in them appropriate values, attitudes and skills. However, it is recognised that drug misuse is a whole-community issue and that schools alone cannot solve the drugs problem. School is only one of a number of groups and agencies which must play a part in the education of young people. The expertise of these groups and agencies is utilised where possible in the delivery of the programme.

Consequently, neither the misuse of drugs or alcohol by the members of the School/College nor the illegal supply of these substances on school premises is condoned within the partnership. Any instances of possession, use or supply will be regarded with the utmost seriousness. A distinction will be made between those using the drug and those engaged in drug trafficking

The Schools and Colleges in the MLP do not condone the misuse of drugs but recognise that there has been a considerable increase in the abuse of drugs in recent years in Northern Ireland. Drug misuse appears to be affecting an ever-younger population and the so-called "recreational" use of drugs can lead to a dangerous acceptance of illegal and harmful drug misuse as part of everyday life.

Range of Substances and Definitions
For the purpose of this document, and in line Department of Education Circular 2015/23 and *Drugs Guidance for Schools in Northern Ireland* (CCEA, 2015),
'A drug or substance include any product that, when taken, has the effect of altering the way the body works or the way a person behaves, feels, sees or thinks.'

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

- Alcohol, tobacco and tobacco related products, including nicotine replacement therapy (NRT) and electronic cigarettes.

- "over-the-counter" medicines, such as paracetamol and cough medicine.
- prescribed drugs, such as antibiotics, painkillers, anti-depressants, antipsychotics, inhalers and stimulants such as Ritalin
- volatile substances, such as correcting fluids/thinners, gas lighter fuel, aerosols, glues and petrol
- controlled drugs, such as cannabis, LSD, Ecstasy, amphetamine sulphate (speed), magic mushrooms, heroin and cocaine
- new psychoactive substances (NPS) which contain one or more chemical substances that produce similar effects to illegal drugs and are sold as incense, salts or plant food and marked 'not for human consumption' to avoid prosecution, and
- other substances such as amyl/butyl nitrite ('poppers') and unprocessed magic mushrooms.

Drug Use: refers to taking a drug; there is no value judgement, although all drug use has an element of risk.

Drug Misuse: refers to illegal or illicit drug taking or alcohol consumption, which leads a person to experience social, psychological, physical or legal problems related to intoxication or regular excessive consumption and/or dependence. Drug misuse is therefore taking drugs, including prescribed drugs and NPS that cause harm to the individual, their significant others or the wider community.

Aims

1. To protect young people from the harm associated with the use and misuse of substances so that they will know how to make healthy, informed choices through increased knowledge, developing a positive self-image, challenging their attitudes and developing and practising the skills needed to resist temptation.
2. To promote a collaborative and consistent approach to a Drugs Education Policy and procedures across all participating post-primary Schools and Colleges.

Objectives

1. To have a clear and agreed understanding among all members of the MLP community about the implications and possible consequences of drug use/misuse.
2. To identify and address the training needs to provide all staff ***(teaching and non-teaching)*** with adequate training and support to enable them to deal effectively and confidently with incidents of suspected drug misuse, and to ensure that the agreed procedures and protocols are consistently and sensitively applied in all situations.
3. To empower teaching staff through appropriate training and support to develop and deliver an effective Drugs Education Programme. Where appropriate, further advice and support can be sought from the appropriate Statutory/External Agencies (Appendix 1).
4. To develop, implement and review a Drugs Education Programme as part of the LLW PD strand which;
   - develops pupils' self-esteem and promotes positive attitudes in their relationships with others;
   - gives pupils opportunities to develop the values, skills, knowledge and understanding necessary to make informed and responsible decisions about the use/misuse of drugs including tobacco, alcohol and volatile substances, within the context of a healthy lifestyle;
   - helps pupils develop the skills necessary to assert themselves confidently and resist negative pressures and influences.
5. To provide appropriate support and assistance for those pupils affected by drug-related issues. This may include referrals to appropriate External Agencies at the discretion of a School or College (Appendix 1) with the School or College endeavouring to ensure that the support being offered is appropriate and not conflicting with support offered by other agencies including counselling if required.
6. To inform parents/carers of the content of this Policy and the procedures to be implemented in the management of incidents of suspected drug misuse.
7. To establish an environment in which Schools and Colleges are free from the misuse of all drugs.
8. To establish procedures to monitor and evaluate the effectiveness of the Policy.
9. Make pupils aware of offences under Misuse of Drugs Act 1971. (Appendix 11)

Roles and Responsibilities

The Board of Governors

Governors are responsible for their individual school/college. They should collaborate with appropriate staff, pupils and parents or carers to foster and support developing and reviewing this Drugs Education Policy. They should also:

- facilitate the consultative process where the school community can respond and contribute to the policy's effectiveness and quality, which the governors should examine and approve before implementing in the School/College;
- ensure details of the Policy are published in the School/College Prospectus and that these are reviewed at least annually and after a drug-related incident; and
- be fully aware of and adequately trained to deal with suspected drug-related incidents, including alcohol and tobacco, tobacco-related products, electronic cigarettes, and their appropriate disciplinary response.
- agree, in consultation with the Principal, appropriate pastoral and disciplinary responses in relation to suspected drug related incidents including counselling services/support
- work with the Principal and Designated Teacher for Drugs in relation to drug-related incidents.

The Designated Governor for Drugs is Mrs F Symington Chair of Governors

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

After contacting the PSNI, Principals should confine their responsibilities to:
- the welfare of the pupil(s) involved in the incident and the other pupils in the School/College;
- health and safety during the handling, storage and safe disposal of any drug or drug-related paraphernalia, using protective gloves at all times;
- informing the Board of Governors;
- agreeing any appropriate pastoral or disciplinary response including counselling services/support;
- reporting the incident to the Education Authority or CCMS if appropriate, for example if an incident:
  - is serious enough to require PSNI involvement;
  - requires that a child protection procedure is invoked; or
  - leads to the suspension or exclusion of a pupil; and
- completing a written report and forwarding a copy to the Board of Governors and the Designated Officer in the Education Authority or CCMS.

The Designated Teacher for Drugs (Mrs B.A Heron, Principal)
The Designated Teacher with responsibility for drugs should have procedures in place for handling cases of suspected drug misuse on the premises and ensure that every member of staff, both teaching and non-teaching, should be completely familiar with these procedures and know who to contact and what to do when a young person is suspected either of being in possession of drugs or being under the influence of drugs, including alcohol. The Designated Teacher is responsible for:
- co-ordinating the school/college's procedures for handling suspected drug-related incidents and training and inducting new and existing staff in these procedures;
- ensuring that the school/college's Disciplinary Policy has an appropriate statement about any disciplinary response resulting from suspected drug-related incidents;
- ensuring that the school/college's Pastoral Care Policy has an appropriate statement about any pastoral response resulting from suspected drug-related incidents;
- ensuring that all staff and parents are aware of and have access to a copy of the Drugs Education Policy.
- overseeing and co-ordinating the planning of curricular provision in compliance with the statutory requirements including periodic update and review of the Policy.
- co-ordinating the training and induction of all staff in the procedures for dealing with incidents of suspected drugs misuse.
- liaising with other staff responsible for pastoral care;
- being the contact point for outside agencies that may have to work with the School or College or with a pupil or pupils concerned;

- responding to advice from first aiders, in the event of an incident, and informing the Principal, who should contact the pupil's parents or carers immediately;
- taking possession of any substance(s) and associated paraphernalia found in a suspected incident;
- dealing with pupil(s) involved in a suspected incident;
- completing a factual report using the Drug-Related Incident Report Form (Appendix 8), which they forward to the Principal; and
- reviewing and if required updating the Policy at least annually and after a drug-related incident, where learning from the experience could improve practice.

Pupils

Pupils should be aware

- of and adhere to school/college rules in relation to drug use/misuse, including tobacco, alcohol, over-the-counter and prescribed medication, volatile substances and controlled drugs.
- that any issue drugs related includes incidents while travelling to and from school/college, whilst in school uniform or whilst on a school trip, is a very serious breach of school discipline.

All Staff (Teaching and Non-Teaching)

All staff should be familiar with the content of the MLP Drugs Education Policy. They should also be fully aware of their responsibilities, should a suspected drug-related incident occur. It is not the staff's responsibility to determine the circumstances surrounding the incident, but they should:

- assess the situation and decide on the appropriate actions to take;
- notify the Principal and the Designated Teacher for Drugs at the earliest opportunity;
- deal with any emergency procedures to ensure the safety of pupils and staff, if necessary (Appendix 9);
- forward any information, substance or paraphernalia received to the Designated Teacher for Drugs, who will respond accordingly (Appendix 4);
- use the Drugs Incident Report Form (Appendix 8) to complete a brief factual report on the suspected incident and forward this to the Designated Teacher for Drugs;
- consider the needs and safety of a pupil when discharging him or her into the care of a parent or carer who appears to be under the influence of alcohol or another substance. Staff, who are *in loco parentis*, should maintain a calm atmosphere when dealing with the parent or carer and, if concerned, should discuss with the parent or carer alternative arrangements for caring for the pupil; and
- be alert to the possibility of drug use/misuse.
- be familiar with the procedures in the handling of suspected drug-related incidents and who to contact. It is not the responsibility of the individual staff member to investigate the circumstances surrounding an incident.
- be aware that smoking (including use of e – cigarettes) or the consumption or possession of alcohol on school/college premises during school hours is a serious breach of conduct.

Teachers delivering The Drugs Education Programme

In addition to the above, teachers delivering the Drugs Education Programme should:

- deliver the school's Drugs Education Programme.
- try to create an atmosphere in the classroom in which pupils can freely contribute to discussion, safe in the knowledge that the comments, ideas and feelings of the group are valued.
- support pupils in their class if necessary.
- liaise with the Designated Teacher for Drugs regarding any aspect of the programme/policy, as necessary.

Parents/Carers

Parents/Carers should support

- the School/College and Learning Community in the development and implementation of this Policy, including the School/College's procedures for handling incidents of suspected drug misuse and the Drugs Education Programme.
- their son/daughter if they have become involved with drugs.

The Caretaker

The Caretaker should

- be vigilant and conduct regular checks of the school grounds for drug-related paraphernalia and inform the Designated Teacher for Drugs as appropriate.
- ensure the safe storage, handling and disposal of potentially harmful substances such as solvents and cleaning fluids.

Staff Training
Governors, parents/carers and all staff will receive a copy of the MLP Drugs Education Policy. Professional Development in Drugs Education will be provided on the basis of a Professional Development Programme in each school/college. This may include drugs awareness, safe storage of harmful substances, teaching methodologies, procedures for managing drugs-related incidents, first aid training and communication with parents and pupils. Schools/Colleges should provide staff training on: implementing the Drugs Education Policy; delivering drugs education as part of the LLW PD Programme; and responding to a suspected drug-related incident. Training will be organised by the MLP.

Additional training as required is provided through in-service sessions during and after school by external speakers from the PSNI, Education Authority or other local agencies. All staff are audited on their understanding of and satisfaction with the Policy on a biennial basis. (Appendix 2)

The Drugs Education Programme
The MLP will ensure that Drugs Education features in the learning experience of all pupils and will be provided for all pupils via the Pastoral Programme, Personal Development Programme, Religious Education Programme, Health Education Programme and, where practicable, through all relevant areas of the curriculum. The Programme does not confine itself to the issue of illegal drugs but encompasses also misuse of alcohol, tobacco, solvents and sports related drugs and builds on the work covered in Key Stage 2.
In addition, the Drugs Education Programme provides opportunities for pupils to:

- acquire knowledge and understanding in relation to drug use/misuse;
- identify values and attitudes in relation to drug use/misuse;
- develop skills to enable them to consider the effects of drugs on themselves and others;
- make informed and responsible choices within the context of a healthy lifestyle.

The Drugs Education Programme is delivered mainly in core LLW lessons as part of PD. Suspended timetabling enables visits and workshops by experts and outside agencies at all Key Stages. External agencies should receive a copy of MLP Drugs Policy.

Across the Key Stages pupils should be:

- Made aware of the School/Colleges's rules relating to drugs (legal and illegal);
- Informed about legal and illegal drugs, the different categories of drugs, their effects and associated health risks, legal status, effects and appearance and the nature of addiction and scientific terminology;
- Informed about the law relating to drugs; Misuse of Drugs Act 1971
- Informed about the misuse of drugs in sport;
- Helped to identify and understand pressures and influences relating to drugs;
- Given advice on support available within the School/College, locally and nationally;
- Given the opportunity to assess personal strengths and weaknesses and attitudes towards drugs and drug users;
- Given the opportunity to develop communication skills and assess the consequences of actions and manage conflict and aggressive behaviour;
- Given the opportunity to explore alternative social and leisure pursuits;
- Given the opportunity to evaluate the Drugs Education Programme / agency presentations

Teaching strategies employed include instruction, discussion, brainstorming, buzz groups, debating, case studies, role-play and drama, ranking, standpoint taking, group work and video showing.

At each Key Stage, the content of the lessons is appropriate to the age, maturity and experience of the pupils concerned. The teacher will seek to deal sensitively with issues with due regard for the level of maturity of the pupils in the classes while avoiding the over dramatised or sensationalised approach which can be counterproductive with young people.

Heads of Year/Heads of Key Stages will liaise to ensure continuity and progression in the knowledge, understanding, skills and values addressed. Pupil evaluation of the Drugs Educaion Programme will take place after the programme of lessons is complete. (Appendix 3).

Procedures for Dealing with Suspected Drug-Related Incidents

The following procedures are based on the fundamental principle that the school/college acts ***'in loco parentis'*** and the School/College will always take steps that would reasonably be expected of any parent/carer to safeguard the well-being and safety of the pupils and staff in its charge. For the purposes of this Policy, a drug-related incident may include:

- a pupil displaying unusual or uncharacteristic behaviour;
- an allegation;
- suspicion of possession, possession with intent to supply and/or supply of any substance;
- finding substance-related paraphernalia.

The School/College will at all times give careful consideration as to how any information relating to an incident of suspected drug misuse is communicated to staff, pupils and parents/carers/media.

A summary of the actions to be taken by members of staff in the event of a suspected drugs-related incident are outlined below. Further details can be found in Appendix 4, Appendix 5, Appendix 6, Appendix 7 and in Appendix 9 which provides further details regarding Emergency Procedures. Signs and Symptoms of Drug Use are found in Appendix 10 and includes details of specific physical and behavioural signs that may be associated with drug use. These signs and symptoms are not a checklist, indeed many of them could have other explanations.

1 Individual Staff Members should

- 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, with protective gloves.
- Pass all information and evidence to the Designated Teacher for Drugs;
- Write a brief factual report of the incident and forward it to the Designated Teacher for Drugs.

2 Designated Teacher for Drugs should

- 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, with protective gloves
- Inform Principal;
- Take initial responsibility for pupil(s) involved in suspected incident; and
- Complete a Drugs-Related Incident Report Form (Appendix 8) and forward it to the Principal.

3 Principal should

- Determine the circumstances surrounding the incident.
- Ensure that when, in the reasoned opinion of the Principal, there is evidence that illegal drugs have been used, handled, sold or brought into school, the following people are informed where relevant:
  - Parents/carers; (contact parent/carer before involving PSNI)
  - Board of Governors;
  - Designated Officer in Education Authority/CCMS, if appropriate, for example if an incident is serious enough to require PSNI involvement; requires that a child protection procedure is invoked; or leads to the suspension or exclusion of a pupil;
  - PSNI, if involving a controlled substance:
- Complete a written report and forward a copy to the Board of Governors and the Designated Officer in the Education Authority or CCMS.
- Review procedures and amend, if necessary.

Procedures for the administration of Prescribed Medication

Guidance from the DE publication *Supporting Pupils with Medication Needs*
In summary:

- There may be occasions where school/college staff may be asked to administer medication, but they cannot be directed to do so.
- The administration of medication to children remains the responsibility of the parent/carer or those with parental responsibility.
- Medication should only be taken to school/college when absolutely essential and with the agreement of the Principal.
- Parents/carers should be encouraged to request, where possible, that medication be prescribed in dose frequencies which enable it to be taken outside school hours e.g. medicines that need to be taken three times a day could be taken in the morning, after school hours and at bedtime.
- Schools/Colleges should be alerted to the particular risks for pupils in taking Aspirin, Paracetemol and Ibuprofen and should not routinely administer these unless under clear medical guidance.

Communication with Staff, Pupils and Parents/Carers
Schools/Colleges should carefully consider how they communicate any information about a suspected or confirmed substance-related incident to staff, pupils and parents or carers. They should only disclose information to members of staff concerned with the pastoral needs of the individual pupils. They should inform only the parents or carers of the pupil or pupils directly involved of the incident and subsequent outcomes before involving police

Teachers should not discuss individual cases with other pupils. The school may, however, need to make a general statement informing the school/college community after an incident where rumours may create a negative atmosphere.

Confidentiality
Schools/Colleges should:
- Explain to pupils that they can never guarantee confidentiality; and
- Pass on any information about a suspected criminal offence associated with drugs to the Designated Teacher, PSNI and Education Authority or CCMS.

Interviewing Pupils
In certain circumstances, the PSNI may interview a pupil on school premises with the Principal's agreement. This may be a less intrusive and upsetting option for a pupil than going to a Police Station. If the School/College takes this course of action, the PSNI will conduct the interview in accordance with the Police and Criminal Evidence (Northern Ireland) Order (PACE) 1989. This has strict guidelines about when and where to excuse this option. The SchoolCollege needs to make all possible efforts to inform the pupil's parents or carers before a PSNI interview takes place. The PSNI should not conduct an interview without the correct persons being present.

Dealing with the Media
If the School/College receives an enquiry from the media, only the Principal or a designated nominee should respond to the call. When responding to the media, it is essential that the School/College respects the privacy of pupils and their families. The principal should prepare a checklist of the appropriate ley facts and decide whether to liaise with the PSNI before issuing a statement. Any statements made should be positive, short, factual and with elaboration. Concluding statements should be reassuring and restate that the School/College has managed the incident effectively.

Pastoral Response
Fundamental to dealing with incidents of suspected drug misuse is the principle of ***'in loco parentis*** '. The School/College will always take the steps that would reasonably be expected of any parent/carer to safeguard the well-being health and safety of all the pupils in its charge, when making an appropriate response to a drug-related incident.

Supporting Pupils on return to School
Where a pupil returns to school/college following their involvement in an issue relating to illegal drugs, the school/college will provide counselling/support for the pupil, **who will be expected to engage with such support services**, to ensure that there is no repeat of their behaviour in relation to a similar matter.

Counselling
During and after an incident, the individual needs of the pupil will be considered since the values and ethos of Schools and Colleges are built on the holistic needs of the child. Parents/carers will be involved and counselling, where appropriate, will be arranged.(Appendix 12) Schools/Colleges should identify:

- The counselling services available for pupils;
- How to access, monitor and evaluate counselling services;
- The support services available for parents or carers; and
- The referral pathways for a range of scenarios.

Concern for other pupils in the school/college is also important and where the incident may have endangered, or is likely in the future to endanger, the welfare of other pupils, it is their interests which will be paramount.

Disciplinary Response
Whatever response the School/College puts in place, it should always aim to give pupils the opportunity to learn from their mistakes and to develop as individuals. Schools/Colleges should not take a zero tolerance approach that leads to immediate exclusion as a suitable response. They should consider what sanctions or actions would be in the best interest of the pupil in the longer term, while ensuring the safety and well-being of other pupils.

Sanctions
A range of options for responding to the identified needs of those involved in a drug-related incident should be developed and aligned to with the School/College's Discipline Policy. The School/College should also be able to justify a sanction it imposes according to:

- The seriousness of the incident;
- The published School/College rules and expectations; and
- Disciplinary action for breaches of other School/College rules (such as theft, violence or bullying).

The School/College will consider any issue relating to the possession, use, sale or handling of drugs in school/college, or in connection with the school/college (e.g. whilst travelling to and from school/college, whilst in school uniform or whilst on a school trip) as a very serious breach of school discipline. The procedures outlined below will be followed in dealing with such matters:

- Any incident reported will be fully investigated by Principal and/or Vice Principal
- Pupils involved in such drug related incidents will be suspended from school/college while
  - Further investigations are carried out; and
  - The School/College's Board of Governors can meet to discuss the matter.
- The School/College's Board of Governors will consider what action should be taken in relation to such issues. This may include the option of requesting that pupils involved be expelled from the School/College. Schools/Colleges should take into account whether a pupil involved in an incident has previously displayed good discipline and engagement with the School/College, and how the proposed sanction might affect the pupil's educational outcomes. Such requests, if deemed appropriate, should be carried out within terms of schemes prepared depending on the management type of the School/College.
- Parents/carers will be kept informed at all stages of the process and will be entitled to discuss the matter with the Board of Governors' Chairperson/full Board of Governors, as and when appropriate.

Monitoring and Evaluation
The following will be monitored, evaluated and reviewed at least annually, by designated members of staff and/or a post-incident as part of self-evaluation.

- The MLP Drugs Education Policy
- Post-incident processes
- Curricular provision
- Trends in local community and in school/college.

Identifying the training needs and addressing the support that all staff require, are an important part of this process.

- Following a drug-related incident the Principal and relevant personnel will meet to ensure that the MLP Policy still meets the individual and collective needs of the School/College and changing circumstances and trends in substance use.
- The MLP Vice-Principals will ensure that procedures are in place to monitor and evaluate the effectiveness of all aspects of this Policy. Information will be collected from pupils, staff and parents. The MLP will endeavour to be fully informed of all developments/publications in drugs-related issues before amending this Policy.
- An established timescale for the Monitoring and Evaluation process should be agreed.

Staff
All staff will be audited via the biennial audit regarding the Drugs Education Policy. Issues raised will be addressed by the Designated Teacher and passed onto the MLP Pastoral VPs as part of the review process.

Staff involved in the delivery of the Drugs Education Programme will be audited each year to ascertain any issues regarding content and further training requirements, if any, by the relevant Head of Key Stage/Head of Year. Issues raised will be brought to the attention of the Designated Teacher for Drugs.

The Designated Teacher for Drugs will liaise annually with the Heads of Key Stage/Heads of Year and be responsible for addressing any issues raised. Responsibility for the review and implementation of this Policy lies with the Designated Teacher for Drugs in each School/College.

Parents/Carers
Parents/Carers have a vital role to play in the prevention of drug misuse and should be involved fully in the education of their child. They will be consulted in relation to this Policy, especially the Drugs Education Programme. Parents/carers will be informed when external agencies are being used to address drugs-related issues and are encouraged to discuss drug issues with their child whenever possible. Parents/carers will also be made aware of the procedures for dealing with drug related incidents in their child's school/college. Parents/carers should receive a summary of policy for inclusion in School Prospectus.

- Publish details relating to the policy in the School Prospectus / website
- Year 13 MLP Induction Evenings
- Ensure that all parents/carers are aware of and have access to a copy of the Policy.

Pupils
Consultation with pupils in relation to this Policy helps to develop a strong sense of shared understanding and the development of credible programmes tailored to meet their needs and expectations. This is done through

- The Student Council,
- Discussion groups and a consultation process
- PD lessons
- Assemblies

Creating a Summary Policy for inclusion in the School/College Prospectus.
Schools/Colleges should consider the following when drawing up information for the School/College Prospectus:

- The rationale for the Policy;
- The School/College ethos;
- The aims and objectives of the Policy;
- Key roles and responsibilities;
- A brief outline of curricular provision;
- An overview of the School/College's response to a drugs-related incident;
- Reference to course of support available in the community; and
- Information on where to find a copy of the full Policy.

APPENDIX 1
The following organisations may be used for more specialised assistance:

NEW LIFE COUNSELLING
Phone number: 028 90391630
Email: info@newlifecounsellin.net
Website: www.newlifecounselling.net/contact

FAMILY ADVICE CENTRE - L'Derry / Belfast/ Magherafelt
Phone number: 028 79365097
Contact Ms Hazel Mercer
Telephone 0808 8010 722
Email belfast@pcshelp.org
Website www.parentingni.org

DUNLWEY ADDICTION CENTRE – Ballymena
Phone Number 02825652105/07766740153
Ms Pauline O'Reilly

THE HOPE CENTRE
7-9 Broughshane Street, Ballymena. BT43 6EB.
Phone Number: 028 25632726
Website: www.hopeballymena.com

LIFELINE HELPLINE
Phone number: 0808 808 8000
Website: www.lifelinehelpline.info

MIND YOUR HEAD
Phone number: 028 90311611
Website: www.mindingyourhead.info

PUBLIC HEALTH AGENCY
Phone number: 028 90311611
Website: http://www.publichealth.hscni.net

SAMARITANS
Phone number: 0845 90 90 90
Email jo@Samaritans.org
Website: http://www.Samaritans.org

THE PARENTS' ADVICE CENTRE (Support and Advice for Parents RE Alcohol)
Phone number: 0808 8010722
Website www.parentsadvicecentre.org

ZEST SELF-HARM - Counselling
15A Queen Street
Phone number: 028 71266999
Website: www.zestni.tk.org

Further information can be found in Appendix 10, *Drugs Guidance for Schools in Northern Ireland* (CCEA 2015).

APPENDIX 2: QUESTIONNAIRE FOR STAFF

1. Are you aware of the school/college's Drugs Policy?

   ☐ Yes ☐ No

2. Have you received a copy of the school/college's Drugs Policy?

   ☐ Yes ☐ No

3. Do you know who the Designated Teacher for Drugs is within the school/college?

   ☐ Yes ☐ No

4. Are you familiar with the school/college's position on: (Please √)

   ☐ Confidentiality

   ☐ Procedures for inviting/using visitors

   ☐ Procedures for dealing with an allegation of an incident of suspected drug misuse

5. Do you think the school/college's Drugs Policy is workable?

   ☐ Yes ☐ No

6. Are you involved in delivering the Drugs Education Programme?

   ☐ Yes ☐ No

7. In your opinion which areas of the Drugs Education Programme have been successful?

   _____

   _____

8. In your opinion which areas of Drugs Education Programme have not worked well?

   _____

   _____

9. What, in your opinion, are the reasons for this? (Questions 7 and 8)

   _____

   _____

10. In your opinion what aspects of the Drugs Education Programme are not meeting the needs of the pupils?

    _____

    _____

11. Have you participated in any in-service training about using active learning approaches in your teaching? (Please √).

    ☐ In the last year ☐ In the last 2 years ☐ In the last 4 years ☐ Never

12. Have you received any in-service training about basic drugs awareness or procedures for handling suspected drugs-related incidents (Please √)

☐ In the last year ☐ In the last 2 years ☐ In the last 4 years ☐ Never

TRAINING NEEDS ASSESSMENT:

How competent do you feel in each of the following areas? (Please √)

(Numbers **1 to 4** rated from: **Very Competent** . . . . . **Not Very Competent**)

Trends in young people's drug use	☐ 1	☐ 2	☐ 3	☐ 4
Legal issues relating to drug use	☐ 1	☐ 2	☐ 3	☐ 4
Society's attitude towards drug use	☐ 1	☐ 2	☐ 3	☐ 4
Approaches to drug and alcohol education	☐ 1	☐ 2	☐ 3	☐ 4
Interactive teaching methodologies	☐ 1	☐ 2	☐ 3	☐ 4
Building self-esteem	☐ 1	☐ 2	☐ 3	☐ 4
Dealing with drugs-related incidents	☐ 1	☐ 2	☐ 3	☐ 4
Specialised support available to pupils	☐ 1	☐ 2	☐ 3	☐ 4

DRUGS EDUCATION TEACHER EVALUATION SHEET

Year Group/Class _____

Unit(s) taught _____

Please comment on the following:

Content • Length/amount • Easy to follow • Age appropriateness • Links to curriculum	
Activities • Suitability • Effectiveness	
Pupil response • Involvement • Learning • Homework	
Resources • Suitability • Ease of use	
Other • Further suggestions • Good practice	

Many thanks for your help!

APPENDIX 3

DRUGS EDUCATION PUPIL EVALUATION SHEET

1. What did you enjoy most about the drugs lessons you have been studying?

_____

_____

2. What did you like least about the lessons?

_____

_____

3. What was the most important thing you learnt?

_____

_____

4. What would you have liked to have covered that you did not?

_____

_____

5. Has your attitude to drugs changed because of the lessons? Please tick the appropriate box.

Yes ☐ No ☐

6. If "Yes", state how.

_____

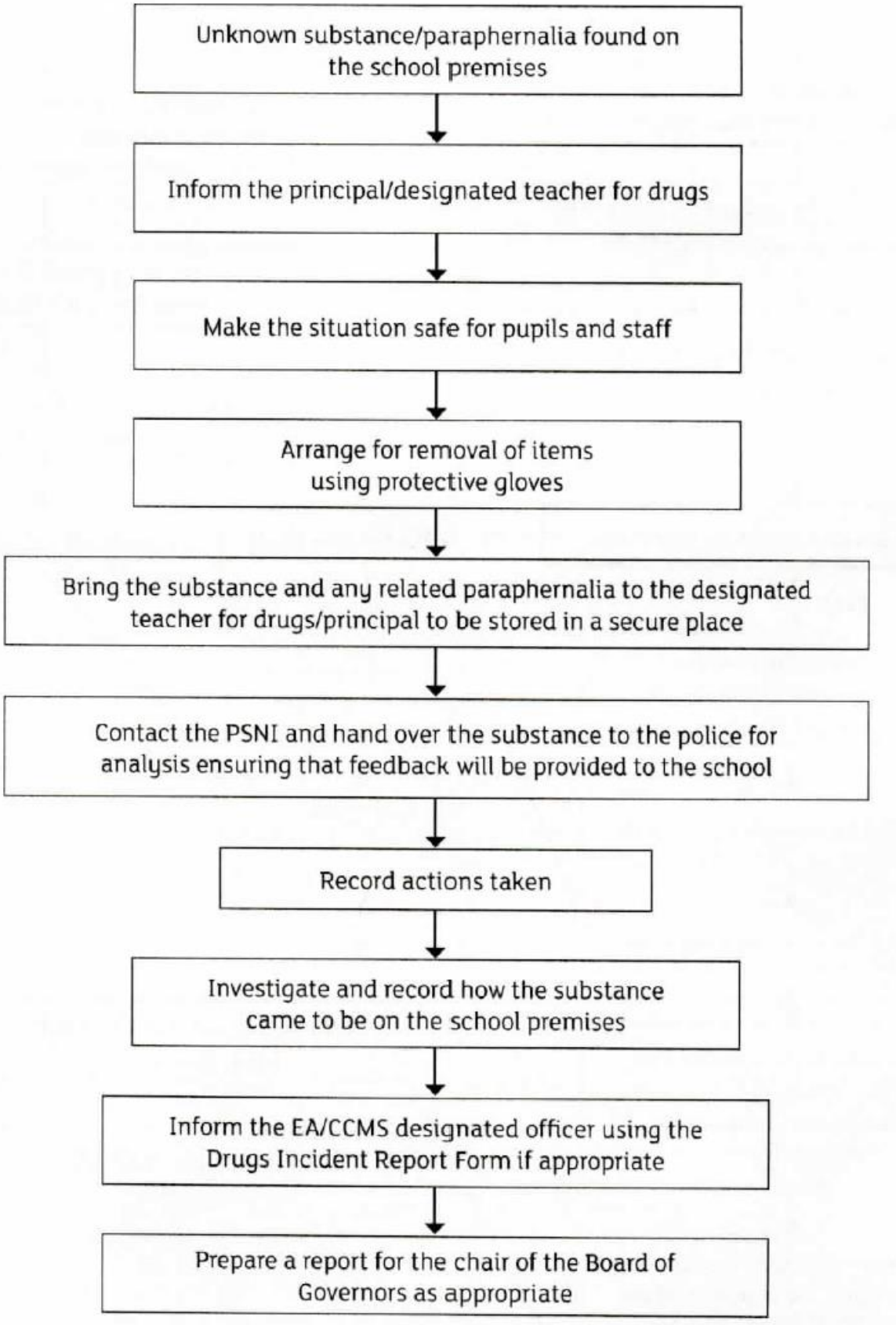
_____

7. Would you be more or less likely to use the drug(s) studied in the future?

- More likely _____
- Less likely _____
- Unsure _____

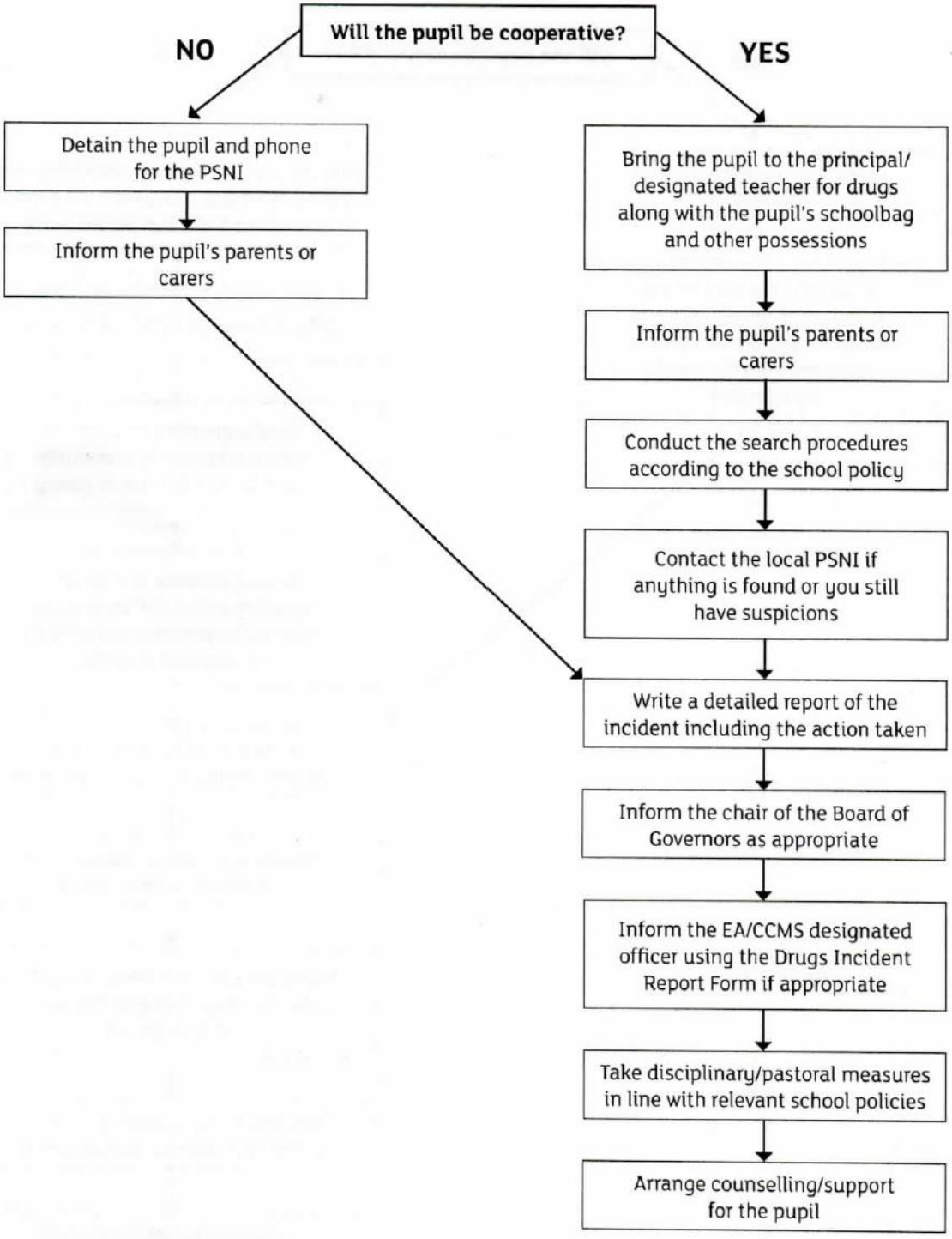
APPENDIX 4

Finding a suspected substance or drug-related paraphernalia on or close to school premises



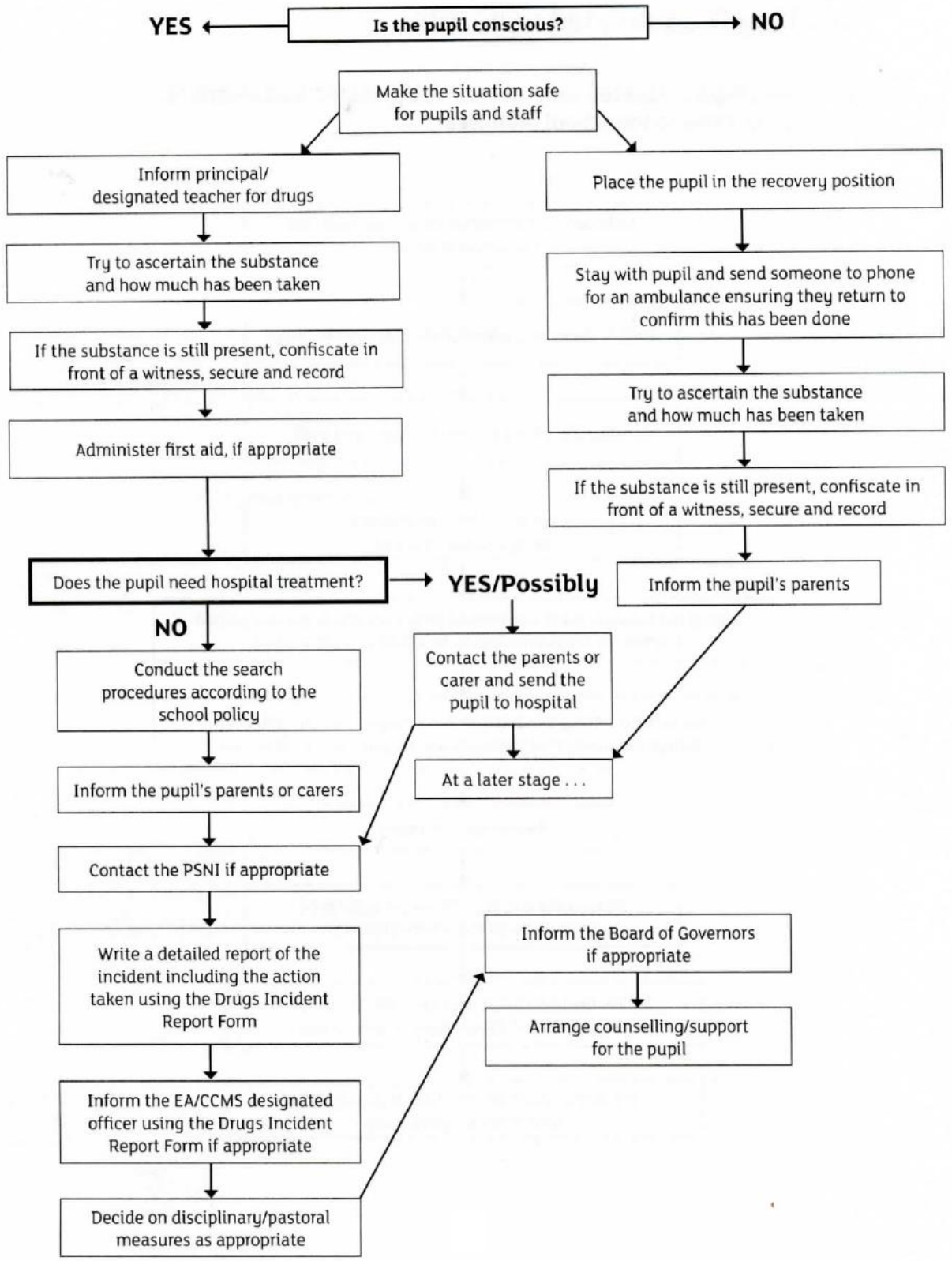
APPENDIX 5

Pupil suspected of possessing/distributing an illegal substance



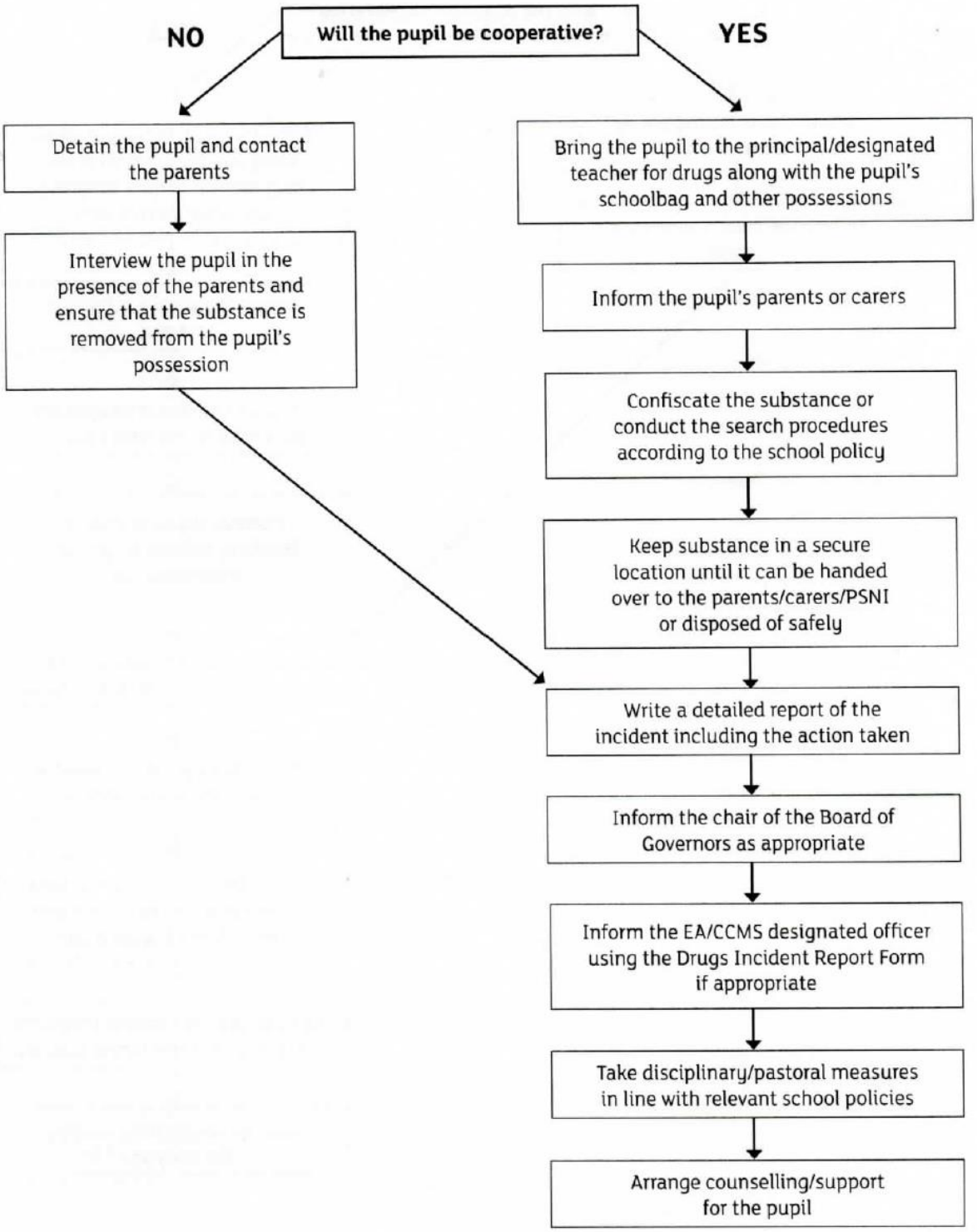
APPENDIX 6

Pupil suspected of having taken drugs/alcohol on school premises



APPENDIX 7

Pupil in possession of alcohol or unauthorised prescribed medication on school premises



APPENDIX 8

Drugs-Related Incident Report Form

Section 1: General Details	
Name of pupil:	**D.o.B.**
Home Address:	**Post Code:**
Reported by:	**Position:**
Date of Incident:	**Time:**
Location:	**Year/Class**

Section 2: Medical/First Aid		
First Aid Given?	**Yes/No:**	
	By whom?	
	Brief Details:	
Ambulance Called?	**Yes/No:**	
	By whom?	**Time:**
Sample Found?	**Yes/No:**	
	By whom?	**Time:**
	Brief details	

Section 3: Contact(s):		
Parents Informed?	**Yes/No**	
	By whom?	
	Date:	**Time:**
Police informed?	**Yes/No**	
	By whom?	
	Date	**Time:**
Sample given to police?	**Yes/No:**	
	By whom?	**Date:**
EA/CCMS Designated Officer informed?	**Yes/No**	
	By whom?	**Date:**

Section 4 Details Of The Incident:	
Incident Details:	
School Principal Signature:-	**Date:**
Board/CCMS Officer Signature:-	**Date:**

Section 5 Outcome: (To be completed by the Principal only)	
Disciplinary:	
Pastoral:	
Other:	
Outline support available to pupil:	
School Principal Signature:-	**Date:**

APPENDIX 9

Procedures for Dealing with Suspected Drug-Related Incidents

These procedures, depending on the circumstances, should be followed if a drugs related incident occurs on the school premises, during school activities, on school trips or while pupils are representing the school. The school will at all times give careful consideration as to how any information relating to an incident of suspected drug misuse is communicated to staff, pupils and parents/carers. When the media are involved, the Principal will deal with the matter.

PROCEDURES FOR HANDLING ALCOHOL MISUSE

School premises are alcohol free zones. MLP schools do not allow any alcohol to be brought onto or consumed in school premises. This applies to visitors, staff and pupils. (There may be exceptions to this e.g. an organised wine tasting to raise funds)

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

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

PROCEDURES FOR HANDLING TOBACCO MISUSE

Each MLP school is a restricted environment with no one being permitted to smoke on the school premises or within the grounds.

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

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

THE MANAGEMENT OF PRESCRIBED MEDICINES

MLP schools will not administer any medicines to pupils except:

- to retain and administer as necessary an epi-pen for any pupil liable to suffer allergic reactions in accordance with that pupil's Health Care Plan. The epi-pen dosage will only be administered by those staff trained to do so;
- to allow one panadol tablet for pain relief where the written permission of parents/guardians has been obtained;
- to allow pupils to take, under supervision, prescribed medication which must be taken between 9:00am and 3:30pm where the written permission of parents/guardians has been obtained and in accordance with each school's Medicine Policy.

All prescribed medicines remain the responsibility of the parent and should a child require taking such, it is the responsibility of the parent to inform the school in writing accordingly. Parents should refer to their school's Medicine Policy which may be accessed via the school's website.

PROCEDURES FOR DEAING WITH A DRUGS RELATED INCIDENT

When an incident occurs the member of staff involved should:

- Make the situation safe for all pupils and other members of staff, secure first aid and send for additional staff support, if necessary;
- Carefully gather up any drugs and/or associated paraphernalia or evidence and pass all information or evidence to the designated teacher for drugs; and
- Assess the situation to see whether or not it is a life threatening situation
- Write a brief factual report of the incident and forward it to the designated teacher for drugs

The incident will be in the first instance reported to the Designated Teacher for Drugs and then to the Principal, who will contact the PSNI. 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 for Drugs. The Board of Governors will also be informed. All staff should be made aware of the procedures to be carried out, which follow the guidance in the Department of Education Circular 2015/23 and *Drugs Guidance for Schools in Northern Ireland* (CCEA, 2015)

If there is a risk involved in the incident, then every effort should be made to ensure the **safety** of the **individual pupil** involved**,** other **pupils,** and all **staff**.

The following are examples of suspected drug related incidents and the procedures to be followed are outlined in the Flowchart in the relevant Appendix.

1. Finding a substance on school premises (Appendix 4)

Carefully gather up any drugs/paraphernalia/evidence lying around **being careful to take any appropriate safety precautions e.g. making use of latex gloves.** Give the materials as soon as is practical to the Designated Teacher for Drugs or an appropriate Senior Teacher **for suitable secure storage** until it is handed over to the police.

2. A pupil suspected of possessing/distributing an illegal substance (Appendix 5)

- Every effort should initially be made for that pupil to voluntarily produce the substance(s);
- If the pupil refuses, request the presence of parents;
- If there is no resolution the PSNI will be called to deal with the situation;
- At all times there should be two members of staff present.

Carrying out a search

School staff are not permitted to search pupils' clothing or possessions. Staff may search **school property** such as lockers, cupboards or stores. However, **personal belongings** cannot be searched without consent. A search of a pupil's **personal belongings, including school bag, coat or other items** should only be made **with the pupil's consent**. Such a search should be made in presence of the pupil and another adult witness.

If the school suspects pupils of concealing controlled drugs on their person or in their personal belongings, staff should make every effort to encourage them to produce these substances voluntarily. Staff should ask pupils to turn out their pockets or schoolbags. If staff recover a substance or an object that they suspect has a connection with drugs, they should take possession of it and make a full record using the school's Drug Incident Report Form. If the pupils refuse, staff should contact their parents or carers and the PSNI to deal with the situation. **A member of staff should never carry out a physical search of a pupil.**

Detaining a pupil

When managing a suspected drug-related incident the school should invite the pupils concerned to remain in school under the supervision of appropriate members of staff until their parents or carers and the PSNI arrive. If the pupil refuses to remain, the school cannot detain a pupil against their will. Staff must be able to recognise the point where a young person becomes a danger to either themselves or others. They should also be aware of their duty of protection because they are ***in loco parentis***.

3. A pupil suspected of having taken drugs in school (Appendix 6)

The following emergency procedures should be carried out if a pupil is in difficulty as a result of misusing drugs:

- Contact an ambulance and/or seek member of staff with First Aid Training to administer emergency aid;
- Stay calm; calm them and be reassuring; don't scare them or chase after them.
- Remove any other bystanders from the immediate vicinity.
- If they are anxious, tense or panicky, sit them in a quiet, calm room; keep them away from crowds, bright lights and loud noises, remain with them and tell them to take slow deep breaths.
- Seek to find out what has been taken; this will benefit an ambulance crew and emergency aid.
- If the person has taken a depressant substance, such as solvents, alcohol, sleeping pills or painkillers, it is likely that they will become drowsy or unconscious. If the person is drowsy, it is important to keep them awake by talking to them or applying a damp cloth or towel to the back of the neck. They should **NOT** be given anything to eat or drink as this could lead to vomiting or choking.
- If they are, or become unconscious, put them in the recovery position, clear their airway if blocked and keep checking on any changes to pulse and breathing rates.
- If they stop breathing, begin mouth-to-mouth resuscitation, starting with chest compressions. (If you have not been trained in CPR or are worried about giving mouth-to- mouth resuscitation to a stranger, you can do chest compression-only (or hands-only) CPR). Stay with the person until the ambulance crew arrive and then tell them all the facts, including what the person has taken. This is very important as it could save his or her life.
- If the person has taken a stimulant, such as amphetamines (speed) or ecstasy, they may show various signs of distress. If the person is panicking, try to reassure them. It is important that they calm down and

relax. Get them to breathe in and out, deeply and slowly. Help them by counting aloud slowly. If they start to hyperventilate – that is they can't control their breathing – ask them to breathe in and out of a paper (not a plastic) bag, if there is one available.

- If the person has taken a hallucinogen, such as LSD, magic mushrooms or cannabis in combination with ecstasy, they may become very anxious, distressed and fearful. They may act in an unusual way. It is very important to reassure the person – tell them that you will look after them, that they are in no danger, that it is the effects of the substance and that these will soon wear off. You may want to take them to a quiet place, keep other people away and continue to reassure them. Just stay with them and talk calmly to them until the ambulance arrives.

If the incident involves only legal drugs and poses no immediate risk, the incident should be investigated by the member of staff who should pass a written record of the details (a brief factual report, date, times, location and names of witnesses) to the Year Head who will apply appropriate sanctions. The Designated Teacher for Drugs should also be given a copy of the details.

APPENDIX 10 Signs and Symptoms of Drug Use

The recognition of current drug use is a major issue for many professionals who work with young people. There is also the issue of identifying those young people who may be at increased risk of drug use. Below are specific physical and behavioural signs that may be associated with drug use but it should be noted that some of these can also be confused with the onset of adolescence.

Physical Signs
These can differ depending on the type of drug taken, for example stimulant or hallucinogenic. Below are some of the physical signs related to those drugs used illicitly in Northern Ireland.

Solvents
Solvents include glues, butane gas refills, aerosols, typewriting correcting fluids and thinners.
• Usual signs of intoxication – uncoordinated movement, slurred speech;
• Possible odour on clothes and breath;
• If using glue, redness around the mouth and nose;
• A cough; and
• Possible stains on clothing etc. depending on type of solvent used.

Cannabis
Cannabis can have the effect of a depressant or mild hallucinogen, depending on the amount taken and situational factors. The effects of taking cannabis include:
• Tendency to laugh easily;
• Becoming talkative;
• More relaxed behaviour;
• Redding of the eyes; and
• Hunger.
If the drug is smoked, it produces a distinctive sweet smell.

Ecstasy
Ecstasy is sometimes referred to as a hallucinogenic stimulant. Its effects will therefore include those listed for stimulants. In addition it can cause:
• Increased temperature;
• Perhaps excessive sweating;
• Very dry mouth and throat;
• Jerky, unco-ordinated movements;
• Clenched jaws;
• Occasional nausea when first used; and
• Fatigue after use, but also possibly some anxiety, depression and muscle pain.

Stimulant drugs (amphetamines (speed), butyl nitrite (poppers) or cocaine)
The effects can result in:
• Increased pulse rate/blood pressure;
• Agitation;
• Lack of coherent speech or talkativeness;
• Dilated pupils;
• Loss of appetite;
• Damage to nasal passages;
• Increased tendency to go to the toilet;
• Mouth ulcers; and
• Fatigue after use.

Hallucinogens (LSD, Magic Mushrooms)
Effects can vary depending on nature of experience. They include:
• Relaxed behaviour;
• Agitated behaviour;
• Dilation of pupils; and
• Uncoordinated movements.

Heroin
Heroin acts as a depressant. The effects of taking heroin include:
• Decrease in breathing and heart rate;
• Suppression of cough reflex;
• Increase in size of certain blood vessels;
• Itchy skin;
• Runny nose;
• Lowering of body temperature; and
• Sweating.

Behavioural Signs
Drug use can often cause behavioural changes. These changes can be difficult to recognise. Some prior knowledge of the person is required to make an accurate evaluation of behaviour. The changes can be obvious or very subtle and may be due to some other reason, unconnected with drug use.

Signs can include:
• efforts to hide drug use through lying, evasiveness and secretive behaviour;
• unsatisfactory reasons for unexpected absences or broken promises;
• changes in friendships;
• changes in priorities, including less concern with school work; less care of personal appearance, non-attendance at extra-curricular activities;
• efforts to get money for drug use, ranging from saving dinner or allowance money, borrowing from friends and relatives and selling own possessions, stealing from friends and home and involvement in petty crime; and
• secretive telephone calls.

Other possible signs include:
• being very knowledgeable about drugs and the local drug scene;
• a defensive attitude towards drugs and drug taking;
• unusual outbreaks of temper;
• absence from or poor performance at school on days following nights out in night clubs or bars; and
• a pattern of absences on a certain day, for example, Monday.

These signs may often only become apparent in pupils who are using drugs on a regular basis. Such signs can be difficult to see in the experimental or casual drug user.

APPENDIX 11

Summary of Relevant Legislation Applicable to Northern Ireland (PSNI, PHA)

1 Misuse of Drugs Act (1971)
It is an offence under the Misuse of Drugs Act (1971):
• to supply or offer to supply a controlled drug to another in contravention of the Act;
• to be in possession of, or to possess with intent to supply to another, a controlled drug in convention 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/she took all such steps as were reasonably open to him/her to destroy the drug or to deliver it into the custody of a person lawfully entitled to take custody of it;
• 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/she knowingly permits or suffers any of the following activities to take place on those premises, that is to say:
• producing or attempting to produce a controlled drug in contravention of section 4 (1) of this Act;
• 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;
• preparing opium for smoking;
• smoking cannabis resin or prepared opium.

2 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:
• that the offence or some other arrestable offence has been committed;
• that he/she 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/she fails to do so then that person is committing an offence;
• this places an onus on individuals to inform a constable.

3 Police and Criminal Evidence (PACE) (Northern Ireland) Order 1989
Article 26 (4)
• Any person may arrest without a warrant:
(a) anyone who is in the act of committing an arrestable offence; or
(b) anyone whom he/she has reasonable grounds for suspecting to be committing such an offence.

Article 26 (5)
• Where an arrestable offence has been committed, any person may arrest without a warrant:
(a) anyone who is guilty of the offence; or
(b) anyone whom he/she has reasonable grounds for suspecting 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.
(a) Possession of Controlled Drugs;
(b) Possession of Controlled Drugs with Intent to Supply; or
(c) Supply of Controlled Drugs.

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

The Medicines Act (1968)
This Act divides medicines into three distinct categories:
• restricted medicines or prescription-only medicines, which can only be supplied by a pharmacist on receipt of a doctor's prescription;
• pharmacy (or over-the-counter) medicines, which can be sold without a prescription but only by a pharmacist in a pharmacy;
• general sales medicines, which can be sold without a prescription by any shop; and
• pharmacists and other retailers can be prosecuted and fined for offences under this Act. Possession of some prescription-only medicines, such as Temazepam, is illegal under the Misuse of Drugs Act (1971) if no prescription is held.

Tobacco Laws
It is an offence under section 7 of the Children and Young Persons Act 1933 (as amended by the Children and Young Persons (Protection from Tobacco Act 1991) for a vendor to sell tobacco products to anyone under the age of 16.Children under the age of 16 who purchase tobacco products are not themselves committing an offence. Police have the power to confiscate tobacco products from under 16s who are found smoking in a public place.

Alcohol Laws
It is an offence under the Children and Young Persons Act (Northern Ireland) 1968 to give alcohol to any child or young person under the age of 14. A person under the age of 14 is only allowed to consume alcohol in a private residence for medical purposes only. It is illegal for vendors to knowingly sell alcohol to anyone under the age of 18. Police have the power to confiscate alcohol from under 18s who are found drinking in a public place.

Intoxicating Substances (Supply) Act (1985)
Solvents (e.g. aerosols, gases, glues) are not illegal to possess, use or buy but this Act makes it an offence for a shopkeeper to sell them to anyone under the age of 18 in the United Kingdom (excluding Scotland), knowing they are to be used for intoxicating purposes.

Cigarette Lighter Refill (Safety) Regulations 1999
In recognition of the high number of butane-related deaths, butane product sales, such as lighter refills, are further restricted under the Cigarette Lighter Refill (Safety) Regulations 1999. These regulations make it an offence for retailers to sell butane products to anyone under the age of 18, in any circumstances.

APPENDIX 12

Referral Pathway for Specified School Incidents

Type of Incident

Internal Staff referral:

Refer incident to:

a. _____

b. _____

External agency referral

Contact details of relevant agencies or personnel

Name of Agency_____ **Name of contact:** _____ **Address:** _____ _____ **Relevant details:**_____ _____ **Contact Number:** _____ **Email Address:** _____	**Name of Agency**_____ **Name of contact:** _____ **Address:** _____ _____ **Relevant details:**_____ _____ **Contact Number:** _____ **Email Address:** _____
Name of Agency_____ **Name of contact:** _____ **Address:** _____ _____ **Relevant details:**_____ _____ **Contact Number:** _____ **Email Address:** _____	**Name of Agency**_____ **Name of contact:** _____ **Address:** _____ _____ **Relevant details:**_____ _____ **Contact Number:** _____ **Email Address:** _____