



### **Drugs Education and Safety Policy**

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| <b>Date of issue:</b>         | September 2026                  |
| <b>Renewal date:</b>          | September 2027                  |
| <b>Individual Responsible</b> | Toby Fisher, Senior Deputy Head |

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## Related Policies

**Related policies:** Safeguarding and Child Protection Policy; Behaviour Policy; Suspension and Permanent Exclusion Policy; Conducting a Search Policy; First Aid Policy; Medical Conditions Policy; Staff Code of Conduct; Whistleblowing Policy; Educational Visits Policy; Privacy Notice.

## 1. Scope and Definitions

This policy applies to all students, staff, governors, volunteers, contractors and visitors. It applies on the school site, on the way to and from school, on school trips, visits and residential activities, and at any other time when a person is in the care of the school or is identifiable as a member of the school community.

For the purposes of this policy, "drugs" is used broadly and deliberately. It means all drugs, including:

- illegal and controlled substances;
- new psychoactive substances (NPS);
- alcohol;
- tobacco and other smoking products;
- vapes, vaping liquids, pods and nicotine pouches;
- volatile substances, solvents and nitrous oxide;
- prescribed and over-the-counter medicines; and
- caffeine and guarana-based energy drinks.

Alcohol and nicotine are drugs. Students are taught this, and the policy uses the word in that inclusive sense throughout.

"Parents" includes guardians and those with parental responsibility.

"DSL" means the Designated Safeguarding Lead.

## **2. Policy Statements**

Maida Vale School takes the welfare of its students and staff seriously and provides opportunities for individuals to access support. The school encourages students and parents to raise any concern that bears on a student's welfare and safety.

The school does not permit the use, possession or supply of drugs by any member of the school community, and will respond to every incident. Each incident will be considered on its own facts, with the welfare and safety of the students involved as the first consideration. That is not a softer position than a blanket rule; it is a more demanding one, because it requires the school to understand what has actually happened before it decides what to do about it.

As part of our care for the welfare of our students and staff, the school believes it has a duty to educate and inform young people about the risks, dangers and consequences of drug use and misuse, including nicotine, vaping and alcohol. See Appendix 1 for specific statements on smoking, vaping, alcohol, new psychoactive substances and energy drinks.

The school believes that health and citizenship education is a vital part of our overall care of our students and plays a substantial role within the Individuals in Society (IS) curriculum.

The Headmaster has overall responsibility for this policy and its implementation, and will ensure that all staff are adequately trained, informed and supported. The Headmaster is supported in this role by the Senior Deputy Head/DSL, who coordinates drugs education and training and leads the safeguarding response to any incident.

Where drugs are misused or supplied on school premises or during a school activity, the Headmaster (or, in his absence, the Senior Deputy Head/DSL) will inform the student's parents, unless the Senior Deputy Head/DSL advises that doing so would place the student at greater risk, and will contact the local police for advice and support. It is likely that a

student found using or in possession of illegal drugs will be suspended or permanently excluded.

Supplying illegal drugs with intent to profit financially will normally be met with permanent exclusion. Encouraging or promoting the misuse of drugs among other students may also be met with permanent exclusion.

Before any such decision is taken, the school will consider whether the student may be a victim of criminal exploitation (section 6). Where that is a possibility, the disciplinary process is paused until the DSL has completed a safeguarding assessment, and that assessment is put before the Headmaster in writing.

The terms "suspension" and "permanent exclusion" are used throughout this policy and have the meanings given in the school's Suspension and Permanent Exclusion Policy, which also sets out the process to be followed and parents' right to make representations.

### **3. What this Policy Prohibits**

The following are breaches of school rules and will be dealt with under this policy and the Behaviour Policy:

- possessing, using or consuming any drug (as defined in section 1) on school premises, on a school trip or activity, on the way to or from school, or at any other time when a student is in the care of the school or identifiable as a student of the school;
- bringing any drug onto school premises, or arranging for one to be brought in;
- supplying, offering to supply, or sharing any drug with another student, whether or not money changes hands, whether the arrangement is made in person or online, and whether the supply takes place inside or outside school;
- persuading, pressuring or encouraging another student to obtain or use a drug;
- possessing items associated with drug use, such as papers, grinders, pipes, wraps or nitrous oxide canisters and chargers;
- arriving at school, or at a school activity, under the influence of alcohol or any other drug.

Sharing prescribed medication with another student is included in the third bullet above and is also a criminal offence where the medicine is a controlled drug (see section 8).

### **4. What this policy does not treat as a disciplinary matter**

The following are not breaches of school rules and will not be sanctioned:

- being present when another student is found with, or is using, a drug;
- knowing about drug use and telling a member of staff;
- seeking help, for yourself or for someone else, including calling for help in an emergency;
- handing a substance straight to a member of staff.

A student who reports a concern, seeks help, or summons help in an emergency will not be sanctioned for having been present. This is deliberate. We would far rather a student tells us. Where a student has been present at an incident, the school's response will be a welfare and safeguarding one -- a conversation with the student, information and support for the family where appropriate, and pastoral follow-up -- not a disciplinary one.

This protection does not extend to a student who was themselves involved in possession, use or supply, or who concealed evidence, obstructed staff or gave a deliberately false account. Even then, coming forward voluntarily will be taken into account in the school's response.

## **5. Aims of our Drug, Alcohol, Tobacco and Nicotine Education**

To keep our students informed, healthy and safe, we seek to:

- provide accurate information about drugs, in the broad sense set out in section 1;
- provide opportunities for students to acquire knowledge and understanding about the risks and dangers of drug misuse;
- equip students with the protective factors, knowledge, attitudes and skills they need to avoid the misuse of drugs;
- widen understanding of related health and social issues, including criminal exploitation, serious youth violence, mental health and sexual health;
- enable students to identify sources of appropriate personal support. The school is not, however, able to guarantee confidentiality; see Appendix 2 on the role of the School Nurse;
- enable students to develop the personal and social skills that help them make sense of the risks drugs pose.

We want our students to:

- value and trust their own learning through positive reflection and the development of assertiveness and coping skills;
- build the confidence and communication skills to say no;
- see their achievements as well as their mistakes, making positive changes and setting personal goals;
- recognise risky behaviour and risk-taking in different situations and respond appropriately;
- understand that pressure to behave inappropriately or to take risks can come from a variety of sources, including people they know, and online and broadcast media;
- ask for help, and use basic techniques for resisting peer or unwanted pressure, so as to minimise harm to themselves and others;
- respect and care about other people's feelings, and try to see things from alternative points of view;
- understand that their actions affect others and affect others' quality of life;
- recognise that communication and problem-solving skills are central to bringing about positive change in attitudes and actions.

### **Curriculum and statutory guidance**

Drug, alcohol, tobacco and nicotine education is delivered as part of the school's Relationships, Sex and Health Education provision, principally through the Individuals in Society (IS) curriculum and supported by Biology, PE, the tutorial programme and assemblies. Specialist speakers provide guidance and support to staff, students and parents.

From 1 September 2026 this provision follows the Department for Education's statutory guidance "Relationships Education, Relationships and Sex Education (RSE) and Health Education" (July 2025), which requires students to be taught, by the end of secondary school:

- the facts about legal and illegal drugs and their associated risks, including the link between drug use and serious mental health conditions;
- the law relating to the supply and possession of illegal substances;
- the physical and psychological risks associated with alcohol consumption, and what constitutes low-risk alcohol consumption in adulthood;
- the facts about the harms of smoking and of vaping, and the risks of nicotine addiction;
- the physical and psychological consequences of addiction, including dependency;
- awareness of the dangers of drugs prescribed for a medical condition when they are misused;
- personal safety, including in relation to criminal exploitation and the involvement of young people in drug supply;
- where and how to seek help.

The scheme of work is mapped against the statutory guidance and reviewed annually by the Senior Deputy Head. Parents may request to see the resources used; details are on the school website.

## **6. Child Criminal Exploitation, County Lines and Drugs**

Child criminal exploitation (CCE) occurs where a child is coerced, manipulated or deceived into criminal activity, in exchange for something they need or want, or through violence or the threat of violence. It can affect any child, of any background, at any school. It does not require the child to think of themselves as a victim -- most do not -- and it can continue even where the child appears to be a willing participant.

County lines describes the use of children to carry and sell drugs, usually from a city to a smaller town, often involving travel, overnight absence and the use of a dedicated mobile phone line. Cuckooing describes the takeover of a vulnerable person's home as a base for dealing; students may be exposed to this in their own home or that of a relative.

### **The school's starting position**

A student found in possession of drugs may be a victim of exploitation rather than an offender, and may be both. Where there is any indication of exploitation, the school's response is led by safeguarding and by the DSL, and any disciplinary process is paused until that assessment has been made. Excluding an exploited child removes them from one of the few protective environments in their life and hands them back to those exploiting them.

### **Indicators to report to the DSL**

This list is not exhaustive, and no single item proves anything:

- unexplained money, expensive clothing, trainers or jewellery;
- more than one mobile phone, a phone the student is secretive about, or a sudden surge in calls and messages;
- going missing from school or home, returning late, or unexplained absences -- including a pattern of absence rather than outright non-attendance;
- travelling to, or being found in, other towns or areas with no clear reason;
- unexplained injuries, or reluctance to explain them;
- new associations with older individuals, or with groups outside the student's usual circle;
- carrying weapons, or expressing fear of a named individual or of going to particular areas;

- a sudden change in behaviour, presentation, attendance or academic performance;
- self-harm, significant changes in emotional wellbeing, or signs of substance dependency;
- possession of quantities or packaging inconsistent with personal use.

### **The school's response**

1. Any concern goes to the DSL immediately. Staff do not investigate.
2. The DSL considers referral to children's social care and to the police, and whether the case should be referred to the National Referral Mechanism as a potential victim of modern slavery. The DSL is responsible for making that referral where the threshold is met.
3. The DSL considers whether section 45 of the Modern Slavery Act 2015 -- the statutory defence for victims compelled to commit an offence may be relevant, and ensures the family understands that independent legal advice should be sought before the student is interviewed by the police.
4. Contact with parents is considered case by case with the DSL, since in a small number of cases informing a family may increase risk to the child. Where that is a possibility, the DSL takes advice from children's social care first.
5. Any decision to suspend or permanently exclude a student in these circumstances is taken by the Headmaster with the DSL's written safeguarding assessment before him.
6. Support continues whether or not the student admits to being exploited, and whether or not a referral is accepted.

This section should be read with the Safeguarding and Child Protection Policy, the Behaviour Policy, the Anti-Bullying Policy and the school's approach to serious youth violence. Staff receive training on CCE as part of the annual safeguarding programme.

### **7. If a student is unwell: Emergency Response**

Call 999 immediately if a student is or becomes unconscious or unresponsive; is having difficulty breathing; has a seizure; complains of chest pain; is severely agitated, confused or paranoid; is very hot to the touch; or is vomiting while drowsy.

Do not delay calling 999 in order to work out whether drugs are involved, to find a senior member of staff, or to consider the disciplinary implications.

While waiting for the ambulance:

- stay with the student; do not leave them alone;
- if unconscious but breathing, place them in the recovery position;
- keep them calm and warm, and talk to them reassuringly;
- note the time and, if it is known, what has been taken, how much and when -- but do not interrogate the student;
- keep any packaging, substance or container and give it to the paramedics;
- send someone to meet the ambulance and bring it to the student;
- summon the nearest first aider and the School Nurse;

- inform the Headmaster or the Senior Deputy Head, and contact parents immediately.

Do not induce vomiting, give food, drink or coffee, place the student in a cold shower, or attempt to walk them around.

### **Naloxone**

Naloxone temporarily reverses the effects of an opioid overdose and can be administered by anyone in an emergency in order to save a life. The school does not hold a supply of naloxone.

Where a student has been unwell, the disciplinary response is dealt with separately and only once the student has recovered.

This section should be read with the First Aid Policy, the Medical Conditions Policy and the school's emergency and critical incident procedures.

## **8. Procedures and Guidance for Staff**

### **The responsibility of the school**

Staff receive drugs education and safeguarding training as set out in section 13.

The Headmaster is in overall charge of any procedure and must be informed via the Senior Deputy Head immediately of any use, suspicion of use, or discovery of prohibited substances on school premises or during a school activity. When making any decision following a drugs incident, the Headmaster requires a full and complete picture of the available information and will consider the welfare interests of the wider school community as well as the interests and welfare of the individuals involved.

### **Legal considerations**

- The school acts in loco parentis and therefore has responsibilities to individual students, to the whole school community and to school facilities and premises.
- It is a criminal offence to supply or offer to supply a controlled drug. It is against school rules to supply substances that are not themselves controlled, such as alcohol, tobacco, vapes, nicotine products or solvents.
- Under section 8 of the Misuse of Drugs Act 1971 it is an offence for the school, as occupier, knowingly to permit the production or supply of controlled drugs, or the smoking of cannabis, on its premises.
- It is against school rules for a student to bring any medicine into school -- including over-the-counter medicines such as paracetamol -- or to keep or take medicine at school, without the knowledge and agreement of the School Nurse. Medicines are handed in and administered in accordance with the Medical Conditions Policy. This is a school rule, not a criminal offence.
- Separately, it is a criminal offence under the Misuse of Drugs Act 1971 to possess a controlled drug unless it has been lawfully prescribed to that person. Some prescription medicines are controlled drugs, including certain ADHD medications and benzodiazepines. It is an offence to give or sell such medicine to another person, including a friend, and students should understand that sharing prescribed medication is a supply offence.

## 9. Confiscation and Temporary Possession of Drugs by Staff

Section 5(4) of the Misuse of Drugs Act 1971 provides a defence for a person who takes possession of a controlled drug for the purpose of preventing another from committing or continuing to commit an offence, provided that they then take all reasonable steps to deliver it into the custody of a person lawfully entitled to take it (the police), or to destroy it, as soon as practicable. Staff who take temporary possession of a suspected controlled drug in the course of their duties are protected by this provision, provided they follow the procedure below.

1. Do not handle the substance more than is necessary. Do not smell, taste, or attempt to identify it by any means.
2. Have a second member of staff present as a witness from the moment the substance is taken.
3. Seal it in a bag or envelope. Both members of staff sign and date across the seal.
4. Record, on the school's drugs incident form, a description of the item, the approximate quantity, where and when it was found, who found it, who else was present, and what was said.
5. Store it in a locked cupboard. Access is restricted to the Headmaster and the Senior Deputy Head.
6. Notify the Senior Deputy Head/DSL immediately, and the Headmaster the same day.
7. Contact the police the same day and arrange handover. Obtain and record a receipt or reference number.
8. Do not return the substance to the student, and do not dispose of a suspected controlled drug yourself. Alcohol, tobacco, vapes and nicotine products may be disposed of by the school.
9. Retain the incident record in accordance with the school's retention schedule. Any illegal drugs found on site will be reported to the police, who will collect, record and dispose of them.

## 10. Searching and Screening

The Headmaster and staff authorised by him have a statutory power to search a student or their possessions where they have reasonable grounds to suspect that the student has a prohibited item. The prohibited items include knives and weapons, alcohol, illegal drugs, stolen items, tobacco and cigarette papers, fireworks, pornographic images, and any article that has been or is likely to be used to commit an offence or to cause personal injury or damage to property. Staff may also search, with the student's agreement, for any item banned under school rules.

Searches are conducted in accordance with the Department for Education's advice "Searching, screening and confiscation: advice for schools" (last updated 19 July 2023) and the school's Conducting a Search Policy. In particular:

- students have a right to respect for their private life under Article 8 of the European Convention on Human Rights. Any search must be justified and proportionate and conducted so as to minimise embarrassment and distress.

- reasonable force may only be considered in searching for items prohibited by law, never for items banned only by school rules.
- there will be two members of staff present, and the member of staff conducting the search will be of the same sex as the student.
- staff must never conduct a strip search. Only the police may do so, and then only in accordance with statutory safeguards including the presence of an appropriate adult. Where police attend to search a student, staff must satisfy themselves that they understand what is proposed and must advocate for the student, rather than deferring to police authority.
- the DSL is informed of any search for drugs, whether or not anything is found.

Items that pose a threat or breach school rules may be seized and dealt with under section 9.

## **11. Return to School after a drugs incident**

A student returning to school after a suspension for drug use will be provided with a safety plan, which is reviewed regularly by the Senior Deputy Head/DSL with the student's personal tutor.

The school will discuss appropriate support with the student and their parents. This may include counselling, or a referral to a local young people's substance misuse service. Consent will be sought from the student and their parents for any such referral.

The school may also make regular testing a condition of a student's continued education following a serious drugs incident. The arrangements, including the school's position on consent and on the use of test results, are set out in Appendix 3.

## **12. Staff Drug and Alcohol Misuse**

### **Expectations**

No member of staff may be under the influence of alcohol or any other drug while at work, while responsible for students, or while representing the school. This applies equally to school trips and residential visits, where at least one member of staff must remain wholly free of alcohol and fit to drive or to respond to an emergency at all times. Any consumption of alcohol on residential trips is subject to arrangements agreed with the trip leader in advance and recorded in the trip risk assessment. The possession, use or supply of illegal drugs on school premises or during school activities is prohibited.

### **Prescribed and over-the-counter medication**

A member of staff taking medication that may affect alertness, judgement or the ability to supervise students should tell their line manager so that reasonable adjustments can be made. This information is treated confidentially.

### **Raising a concern**

A member of staff concerned that a colleague may be under the influence, or may have a drug or alcohol problem, must report it to the Headmaster without delay. Where the concern is about the Headmaster, it should be reported to the Managing Director, Theo Brehony. Concerns may also be raised under the Whistleblowing Policy.

### **Response**

A member of staff who appears to be under the influence while responsible for students will be relieved of duties immediately. Where the conduct raises a safeguarding concern -- because it may mean that a member of staff has behaved in a way that harmed or may have harmed a child, or otherwise indicates that they may pose a risk of harm -- the Headmaster will consult the Local Authority Designated Officer (LADO) in accordance with Part 4 of Keeping Children Safe in Education and the Safeguarding and Child Protection Policy before taking any other action. Conduct of this kind may amount to gross misconduct under the Staff Disciplinary Procedure and may require a referral to the Disclosure and Barring Service.

### **Support**

The school recognises that dependency is a health issue. A member of staff who comes forward voluntarily about a drug or alcohol problem will be supported, including through occupational health referral and the Employee Assistance Programme, and the school will seek to distinguish the support route from the disciplinary route wherever it is safe and lawful to do so. Coming forward voluntarily does not remove the school's safeguarding obligations.

### **Convictions and cautions**

Staff must inform the Headmaster immediately of any charge, caution or conviction relating to drugs or alcohol, including a drink- or drug-driving offence, in accordance with their contract of employment and the Staff Code of Conduct.

## **13. Recording, Review and Training**

### **Recording**

Every drugs incident is recorded on the school's drugs incident form and entered in a central log maintained by the Senior Deputy Head. The log records the date, the students involved, what was found or suspected, the action taken, who was informed, and the safeguarding outcome. Records are retained in accordance with the school's retention schedule.

### **Review**

This policy is reviewed annually by the Senior Deputy Head and approved by the governing body. The review takes account of the pattern of incidents recorded in the log over the year, changes in the law, and changes in statutory guidance. Appendix 1 in particular is reviewed for currency, as the legal position on nicotine products and psychoactive substances is changing rapidly.

### **Training**

All staff receive an annual briefing covering the indicators of child criminal exploitation, vaping and nicotine products, the emergency response at section 7, and the confiscation procedure at section 9. Trip leaders receive an additional briefing on the residential visit provisions in this policy. The DSL and deputy DSLs receive training on criminal exploitation and the National Referral Mechanism as part of their two-yearly refresher training.

## **14. Sources of Advice and Information**

- FRANK -- the national drugs information and advice service. Telephone 0300 123 6600, twenty-four hours a day. Live chat and text services are also available. Website: [www.talktofrank.com](http://www.talktofrank.com)

- Release -- specialist drugs information and legal advice. Phone: 020 7324 2989 (Monday-Friday: 11.00am – 1.00pm and 2.00pm – 4.00pm Website: [www.release.org.uk](http://www.release.org.uk))
- We Are With You -- free, confidential support for young people experiencing issues with drugs, alcohol and mental health. Provides information and advice for parents and students, and operates a referral service through which young people may self-refer or be referred by an adult. Website: [www.wearewithyou.co.uk](http://www.wearewithyou.co.uk)
- See the Safeguarding and Child Protection Policy for the Local authority young people's substance misuse service and the Local authority child exploitation team and the Metropolitan Police Safer Schools officer names and contact details
- NSPCC Helpline -- 0808 800 5000, for adults concerned about a child.
- The School Nurse holds a range of NHS and other publications on drugs, available in the medical centre, and can make confidential referrals to other medical agencies.

## **Appendix 1: Smoking, Vaping and Nicotine, Alcohol, New Psychoactive Substances and Energy Drinks**

### **SMOKING**

Maida Vale School is aware of the health, social and legal implications of smoking tobacco and educates our students accordingly.

- All staff understand and support an educational and disciplinary approach to the issue.
- Students are educated about the health, social and legal implications of smoking in IS, Biology and PE lessons, in tutorial sessions and through the assembly programme.
- In line with government guidelines, the school is a smoke-free and vape-free environment. Parents and visitors are asked not to smoke or vape on site, and this also applies on off-site visits.
- The school, through the IS programme, arranges occasional events to raise awareness of smoking- and vaping-related issues, including parents' seminars, theatre groups and specialist speakers.
- Where a student's behaviour suggests habitual use of alcohol, cigarettes, vapes, nicotine products or new psychoactive substances, the Senior Deputy Head will meet the student's parents, and a safety plan may follow. Parents and guardians are always involved in this process.

The purchase, use and possession of cigarettes, tobacco and all smoking-related items are forbidden to students at times and in places where they are the responsibility of the school. See also the Behaviour Policy.

### **VAPING AND NICOTINE PRODUCTS**

#### **The law**

- It is an offence to sell vapes or tobacco products to anyone under 18.
- Single-use, or "disposable", vapes have been banned from sale and supply in England since 1 June 2025.
- The Tobacco and Vapes Act 2026 received Royal Assent on 29 April 2026. From 1 January 2027 it will be illegal to sell tobacco products to anyone born on or after 1 January 2009 -- which includes every student currently at this school. The legal age of sale rises by one year every year thereafter.
- Nicotine pouches, sometimes wrongly called "snus", are currently sold without an age restriction. An age of sale of 18 applies from 29 October 2026. A ban on the advertising and sponsorship of vapes and other consumer nicotine products follows on 1 June 2027.
- Further regulations on flavours, packaging and display are expected. This section is reviewed annually and will be updated as they are made.

#### **School rules**

The purchase, possession, use or supply of vapes, vaping liquids, pods, nicotine pouches and any related equipment is always prohibited for students when they are in the care of the school or identifiable as students of the school. These items will be confiscated and disposed of and will not be returned to the student. Parents will be informed.

## **Vapes containing controlled drugs**

Vapes and vape liquids bought from unregulated sources -- social media sellers, older students, shops selling illicit stock -- cannot be assumed to contain what the packaging says. Products sold as nicotine or THC vapes have been found to contain synthetic cannabinoids, which have caused collapse, seizures and hospital admission among school-age children nationally.

Any vape suspected of containing a controlled substance is treated as a drugs incident, not a behaviour incident. It is secured under the procedure at section 9, the Senior Deputy Head/DSL are informed and the police are contacted. Staff must not inhale from, dismantle or attempt to test a confiscated device. Where a student is unwell after using a vape, the emergency response at section 7 applies.

## **Detection**

Vape detection alarms are installed in student toilets. As set out in the Behaviour Policy, these devices detect airborne particulates and chemical signatures associated with vaping. They do not record audio or video and they are not cameras. Signage is displayed, their presence and purpose are explained to students and parents, and their use is covered by the school's Privacy Notice and by a Data Protection Impact Assessment.

An alarm activation tells the school that vaping has probably occurred in a particular location at a particular time. It does not identify who was responsible. An alarm activation alone will not be used as the sole basis for a sanction against an individual student. Any follow-up is conducted proportionately, in line with the Behaviour Policy and the Conducting a Search Policy and takes account of students' reasonable expectation of privacy.

## **Support**

Nicotine is powerfully addictive, and some students will be dependent rather than experimenting. A student who wants help to stop can speak to the School Nurse in confidence, and the school will arrange access to local stop-smoking and stop-vaping support. Habitual use is addressed through a graduated response -- conversation, parental involvement, pastoral support -- rather than by escalating sanctions alone.

## **ALCOHOL**

### **Context**

- Alcohol will not be consumed on the premises unless authorised by the Headmaster. It is illegal for a person under 18 to purchase alcohol. No student under 18 will consume alcohol while in the care of the school.
- The school's approach is a reasoned one, which takes account of the law and of research information as it becomes available.
- This policy informs trips and tours run by members of staff. Parents and students are given clear guidelines before these trips, and students must understand that breaches of those guidelines will be treated under this policy on their return to school.

Bars and public houses are out of bounds to everybody during the school day. The purchase, use and possession of alcohol is forbidden to students at times and in places where they are the responsibility of the school.

### **Response**

Where a student is found to have consumed alcohol, the school's first concern is their health and safety. If there is any concern about the amount consumed, the student's condition or their responsiveness, the emergency response at section 7 applies. Parents will be contacted and the student will normally be collected.

The disciplinary response is considered separately, and only once the student is well. The student will be interviewed by a senior member of staff, and their parents will be informed of that interview. Sanctions will reflect the circumstances, including the student's age, whether others were put at risk, whether alcohol was supplied to other students, and whether there is a pattern of use. A suspension is a likely outcome where a student has been intoxicated in the school's care, but it is not automatic.

The school will discuss appropriate support with the student and their parents, which may include counselling or a referral to a local young people's substance misuse service.

Senior students who breach these rules can expect to be treated as above and may also lose privileges and positions of responsibility.

Where alcohol use appears to indicate an underlying welfare, mental health, home or exploitation concern, the DSL will be involved and the response will be led by that concern rather than by the Behaviour Policy.

See also the Behaviour Policy.

## **NEW PSYCHOACTIVE SUBSTANCES (NPS)**

New psychoactive substances (NPS) are substances produced to mimic the effects of controlled drugs such as cannabis, cocaine, ecstasy, ketamine and benzodiazepines. They are sometimes still described as "legal highs".

That term is inaccurate and misleading, and the school does not use it.

### **The legal position**

- Under the Psychoactive Substances Act 2016 it is a criminal offence to produce, supply, offer to supply, import or export any psychoactive substance intended for human consumption. Buying a substance from an overseas website and having it posted to a UK address is importation.
- Outside a custodial institution, simple possession of a psychoactive substance is not in itself an offence under the 2016 Act. It is nonetheless prohibited by school rules and will be dealt with under this policy.
- Many substances formerly sold as "legal highs" are now controlled drugs under the Misuse of Drugs Act 1971, so that possession alone is a criminal offence. These include synthetic cannabinoids (often sold as "Spice"), synthetic cathinones (including mephedrone and products sold as "bath salts"), methoxetamine, NBOMe compounds, AH-7921 and etizolam.
- Nitrous oxide has been a Class C drug since November 2023, and possession for the purpose of inhaling it for a psychoactive effect is an offence.
- Students should understand that a substance sold as "legal" is very often a controlled drug, and that a seller has no way of telling them what is actually in the packet.

### **The risks**

These substances are not manufactured to any standard. Strength and ingredients vary between batches and within a single batch, so a dose that had little effect on one occasion can be dangerous on the next.

Effects can include severe paranoia and psychosis, seizures, dangerously high body temperature, cardiac problems, coma and death. Risks increase sharply when NPS are combined with alcohol or other drugs. Synthetic cannabinoids are many times more potent than cannabis and bear no useful resemblance to it. Substances sold as one thing are increasingly found to contain another, including potent synthetic opioids, which is why any suspected overdose is treated as a medical emergency under section 7.

The school does not publish a list of named substances. The market changes constantly, street names change faster still, and any list would be out of date within months. Staff should instead be alert to unbranded or "research chemical" packaging; small foil, zip-seal or brightly branded packets; herbal material; unmarked tablets or capsules; powders in paper wraps; unbranded vape liquids or refilled pods; and nitrous oxide canisters, chargers or balloons.

### **If a substance is found**

Any suspected NPS is confiscated and dealt with under the procedure at section 9. Staff must not attempt to identify a substance by smell, taste or any other means. The Senior Deputy Head/ DSL are informed the same day, parents are informed, and the police are contacted for advice and, where the substance may be controlled, for collection.

Where a student is found with NPS, the school will consider -- before any disciplinary decision -- whether the student may be being exploited (see section 6). Sanctions will then be applied under the Behaviour Policy, taking account of the circumstances, the student's welfare and any safeguarding concern.

Staff should be particularly vigilant on residential trips, during long journeys and at examination time.

### **CAFFEINE AND GUARANA-BASED ENERGY DRINKS**

Energy drinks, including Red Bull, Monster, 5-Hour Energy, Rockstar, Relentless and similar products, are not permitted at school. They are confiscated on sight and given to the Senior Deputy Head, who will inform the student's tutor and their parents that the item has been confiscated.

Parents are encouraged to collect confiscated items from school.

Students are taught about the effects of high-caffeine products, including on sleep, anxiety and concentration, as part of the IS curriculum.

## **Appendix 2: The Role of the School Nurse**

### **CONFIDENTIALITY**

In accordance with their professional obligations, the School Doctor and Nurses treat medical information about students as confidential and will not share it without good reason. Confidentiality is not absolute.

Where there is a safeguarding concern, information will be shared with the DSL and, where necessary, with children's social care or the police, in line with Keeping Children Safe in Education and the Safeguarding and Child Protection Policy. Fear of breaching confidentiality must never prevent a member of staff from sharing information in order to safeguard a child.

Information may be shared without the student's consent where:

- there is a safeguarding concern, or a risk of serious harm to the student or to another person;
- the student does not have sufficient maturity and understanding to make an informed decision about their own care (that is, is not Gillick competent), and it is in their best interests for their parents to be involved;
- disclosure is required by law or ordered by a court;
- it is necessary to protect the health or safety of others in the school community.

Wherever possible, the student will be told what is going to be shared, with whom, and why, before it is shared, and will be supported through that conversation.

It is recognised that, in providing medical care for a student, there may be occasions when the Doctor or a Nurse liaises with parents, the Headmaster or other staff. This will be done, ideally, with the student's prior consent.

### **THE NURSE'S ROLE IN DRUG TESTING**

The Royal College of Nursing and the Medical Officers of Schools' Association guidance is that the School Nurse should not be responsible for the drug testing process. Drug testing is essentially a disciplinary procedure and is therefore not part of a nurse's role.

The Nurse may agree to provide a venue for a test, and to be present as an advocate for the student, to ensure that the test is carried out correctly.

### **STUDENTS UNDER THE INFLUENCE**

If a student is thought to be under the influence of a noxious substance, they may be examined by the School Nurse, who will advise on treatment. Where any of the emergency indicators at section 7 are present, 999 is called first and immediately. If medical intervention is not required but the student's safety cannot be assured at school, parents or guardians will be required to collect the student.

## **Appendix 3: Testing of Students for the use of drugs at Maida Vale School**

### **PURPOSE**

Testing is carried out to help support individual students and the wider community. It is one method of managing drug-related issues, alongside counselling, medical briefings, lectures and IS lessons. It is not a substitute for the pastoral and safeguarding response set out elsewhere in this policy.

### **WHEN TESTING MAY TAKE PLACE**

Where the school has good reason to suspect that a student is using illegal drugs, the Headmaster or Senior Deputy Head may request that a test takes place.

Where the school has decided that a student may continue their education following a serious drugs incident, regular testing may be made a condition of that decision, for a period agreed with the student, their parents and the Headmaster.

### **CONSENT AND THE BASIS FOR TESTING**

The school will be explicit with the student and their parents about whether a test is being offered as a voluntary support measure or required as a condition of continued education and will not describe a condition as a choice.

Where testing is a condition, and a family is not willing to accept it, the school will consider whether it can meet the student's needs safely by other means. That decision is taken by the Headmaster, in writing, with reasons, and parents may make representations before it is confirmed.

The school will explain the legal basis on which it holds and uses test results. That basis is set out in the school's Privacy Notice and in the Data Protection Impact Assessment covering drug testing.

### **DATA PROTECTION**

The school has completed a Data Protection Impact Assessment covering drug testing. The lawful bases for processing, the retention period for test records, and the individuals who may access results are set out in that assessment and summarised in the school's Privacy Notice.

Test records are held securely by the Senior Deputy Head, separately from the student's academic file, and are retained for 2 years. Results are shared only with the Headmaster, the Senior Deputy Head/DSL, the student and their parents, unless disclosure is required for safeguarding purposes or by law.

### **WHO CARRIES OUT TESTING**

The following are authorised by the Headmaster to carry out testing: the Headmaster, the Senior Deputy Head and the Deputy Head Academic. Testing takes place in the office of the duty member of SLT, or in the medical room by agreement.

Two members of staff will be present throughout: the collector, and a second member of staff as witness. The student may ask for a particular member of staff -- for example their tutor, the School Nurse or the DSL -- to be present as the witness, or in addition as their supporter, and the school will accommodate that request wherever practicable. Parents may attend if they wish and if this can be arranged without significant delay.

Another student will not be used as a witness.

## **THE DEVICE**

Maida Vale School uses the SureScreen Multi-Drug Multi-Line Twist Screen Test Device (Oral Fluid). The device consists of a sample collector to be placed in the mouth and a testing device, which yields a presumptive result nine minutes after the sample collector leaves the mouth.

The device screens for: amphetamine; cocaine; opiates; methadone; methamphetamine; oxycodone; THC (cannabis); PCP; and benzodiazepines.

## **THE PROCEDURE**

1. Students subject to random testing are told in advance that they may be tested.
2. The student is asked to come to the venue at a specified time, and told not to place anything in the mouth, including food, drink and gum, for at least ten minutes before collection. If that is not possible, testing does not begin until ten minutes have passed.
3. The student is talked through the procedure before it begins and asked to sign the record of consent, collection and testing form. Any medication taken in the previous three weeks is recorded on the form before the test.
4. The student may decline to continue at any point during the procedure.
5. The collector wears gloves and inserts the sponge end of the sample collector into the student's mouth for at least three minutes, and until the sponge is saturated.
6. The sample is tested in front of all present immediately after the collector is removed from the student's mouth.
7. The result is read after nine minutes.
8. The result is reported to the student after ten minutes, and to parents as soon as it is practicable to do so.
9. The completed form is retained as set out under Data Protection above, and a copy is made available to parents.

## **SCREENING RESULTS AND CONFIRMATION**

The device gives a presumptive result only. A presumptive positive is an indication that a sample should be tested further. It is not proof that a student has used a drug. Screening devices can produce false positives, including because of prescribed and over-the-counter medicines.

No disciplinary decision will be taken on the basis of a presumptive positive alone.

Where a screening test is positive, the sample is sealed in the student's presence, signed across the seal by the collector and the witness, and sent for laboratory confirmation. The student is given the opportunity to explain the result, and the medication recorded before the test is considered alongside it. Parents are informed of the presumptive result and told that it awaits confirmation.

Pending confirmation, the school may take proportionate steps in the interests of the student's safety and that of others. It will not impose a sanction.

If laboratory confirmation is negative, no sanction follows, the record is annotated accordingly, and the student and their parents are told in writing.

## **OUTCOMES**

The decision to cease regular testing, or to suspend or permanently exclude a student following a confirmed positive result, is determined by the individual circumstances, and is taken having regard to section 6 of this policy and the Suspension and Permanent Exclusion Policy.

**RECORD OF CONSENT, COLLECTION AND TESTING OF ORAL FLUID FOR THE PURPOSES OF DRUGS DETECTION**

**Name and age of student:** \_\_\_\_\_

**Date and time of test:** \_\_\_\_\_

**Reason for test:** \_\_\_\_\_

**Test method used:** Oral fluid

**Medication taken in the previous three weeks** (to be completed before the test):

\_\_\_\_\_  
\_\_\_\_\_

**Statement by the student**

I confirm that I have agreed to provide this specimen of oral fluid, that the procedure has been explained to me, and that I understand I may stop at any point.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Collector's statement**

I confirm that the specimen presented to me by the student named above was screened by me, or secured and sealed in their presence by me.

**Signature:** \_\_\_\_\_ **Print name:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Witness statement (member of staff)**

I confirm that the screening product presented to me by the collector was examined and found to be: NEGATIVE / POSITIVE

**Signature:** \_\_\_\_\_ **Print name:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Student present at reading of result:** Yes / No

**Additional person present at the student's request** (name and role):

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**Result of screening (circle):**

NEGATIVE

POSITIVE for \_\_\_\_\_

POSITIVE -- student disputes the result

Sample sealed and sent to laboratory for confirmation

**Student's comments on the result:**

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**Parents informed: Date** \_\_\_\_\_ **By whom** \_\_\_\_\_

**Laboratory use only**

**Laboratory reference:** \_\_\_\_\_

**Confirmation result, with date, time and method:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Outcome recorded by:** \_\_\_\_\_ **Date:** \_\_\_\_\_