TAMBORINE MOUNTAIN AND DISTRICT EDUCATION COOPERATIVE (TMDEC)

Drug Education Policy & Procedures

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SCOPE OF DRUG EDUCATION POLICY

The Tamborine Mountain and District Education Cooperative (TMDEC) Drug Policy covers all students who:

- Are enrolled at Tamborine Mountain State High School, Tamborine Mountain State School and St Bernard State School;
- Are involved in an extra-curricular activity at school or an excursion / camp;
- Are representing the schools at formal functions or sporting events; or
- Any other school representation.

MISSION STATEMENT

Tamborine Mountain and District Education Cooperative (TMDEC) is committed to:

1. Ensuring all students have throughout their time at school, access to drug education, which has clearly defined educational outcomes.

2. A collaborative coordinated approach to drug education in the context of local, state and national strategies.

3. Establishing prevention programs based on accepted principles and intervention practices that include referral, counselling and procedures for managing drug related incidents.

4. Involving students, parents and the wider community at both the planning and implementation stages of the drug education program.

5. Developing programs that endorse harm minimisation as the fundamental principle.

6. Creating a school environment in which unlawful drug use, possession and selling is unacceptable.

7. Applying consistent and fair disciplinary processes for violations.
DRUG EDUCATION PRINCIPLES

1. Drug education is best taught in the context of the school health curriculum.
2. Drug education is best conducted by the classroom teacher.
3. Drug education programs have sequence, progression and continuity over time throughout schooling.
4. Drug education messages across the whole school environment be consistent and coherent.
5. Drug education programs and resources should complement the professional role of the classroom teacher.
6. Approaches to drug education should address the values, attitudes and behaviours of the community and the individual.
7. Drug education must be based on research, effective curriculum practice and identified student needs.
8. Objectives for drug education should be linked to the overall goal of harm minimisation.
9. Drug education strategies should be related directly to the objectives of the program.
10. Effective drug education should reflect an understanding of characteristics of the individual, social context, the drug and interrelationships of these factors.
11. Drug education should respond to developmental, gender, cultural, language, socio-economic and lifestyle differences.
12. Mechanisms should be developed to involve students, parents and the wider community in the school drug education.
13. The achievement of drug education objectives should be evaluated.
14. The selection of drug education programs should be made on the basis of an ability to contribute to long term positive outcomes.
OBJECTIVES AND OUTCOMES

OBJECTIVES

♦ Implement guidelines for intervention in drug related incidents that are fair and just and that recognise the educational and welfare needs of students
♦ Apply consistent and fair disciplinary processes for violations
♦ Support students, parents and school personnel in the process of coping with drug related incidents
♦ Coordinate school and community resources relevant to drug related incidents
♦ Create a school climate in which unlawful drug use, possession and selling is unacceptable
♦ Provide guidelines on acceptable and unacceptable drug use behaviour
♦ Minimise harm associated with illicit drug use among students
♦ Eliminate drug possession and/or selling on school premises and
♦ Identify students with drug related problems and encourage them to seek help.

OUTCOMES

♦ School personnel, parent and student knowledge and understanding of drug related issues will be enhanced
♦ School personnel, parents and students will perceive that there is an increased level of information available to and support for all individuals involved in drug related incidents in schools and
♦ All school community members will consider that the intervention processes developed and implemented by schools are clear, fair and consistent.
DRUG EDUCATION PROGRAM

The school’s drug education program is based on the Queensland Years 1 – 10 HPE syllabus and interwoven into the Health and Physical Education Program in Prep through to Year 12. The program is based on the “Principles for Drug Education in Schools”, which is the framework to make decisions about the selection, design and implementation of drug education for students.

Through the immersion of this content, it is envisaged students will develop the following:

PREP – YEAR 4 (LEVELS 1, 2 AND 3)

KNOWLEDGE

Students will know:

- Ways of enhancing their own and others’ self confidence and self esteem.
- How to share with and care for family and friends.
- People who can help them when they have questions or concerns.
- Physical and emotional differences and ways of accepting these differences.
- Recognition of medicines, awareness of safety rules and dangers of incorrect use.
- Dangers of handling used needles, syringes and epi-pens.
- Ways that substances can enter the body.
- Alternatives to medicines.
- Possible effects of others’ smoking on their health.

ATTITUDES AND VALUES

Students will articulate:

- Valuing one’s body and recognising their individuality.
- Responsible attitudes towards medicines, health professionals.
- Positive attitudes towards the non use of tobacco.
- A responsible attitude towards the social use of alcohol.
- Critical responses to advertising presentations of medicines.
- Feelings.

SKILLS

Students will be able to:

- Demonstrate basic listening and communication skills when interacting with others.
- Express feelings constructively and appropriately and show respect for the feelings of others.
- Work effectively in small groups.
- Recognize situations where choices can be made and identify consequences of choices.
- Set goals to keep themselves safe and healthy.
- Follow simple safety instructions and know when and how to seek help from adults and others.
YEARS 5 - 6 (LEVEL 3)

KNOWLEDGE
Students will know:

• School and society rules relating to legal and illegal drugs.
• Safe use of products and services used to maintain health.
• Appropriate health professionals and services and how to access them.
• Dangers of handling used needles, syringes and epi-pens.
• How manufacturers, media and advertisers try to influence decisions about alcohol, tobacco and other legal drugs.
• Consequences of smoking.
• Consequences of misuse of alcohol.
• That drugs can alter the way a person behaves and feels.
• Contribution of misuse to lifestyle diseases in relation to social, emotional, legal and economic costs.
• That changing the type of drug, the person(s) involved or the context and situation can vary the risk to individuals and groups.

ATTITUDES AND VALUES
Students will articulate:

• How values about drug use can be shaped by teachers, family, friends, media and religion.
• An acceptance of responsibility for their actions and safety.
• A positive self image.
• Respect for the rights of others to have different attitudes and values and live differently.
• Realistic attitudes and accurate beliefs about drugs and people who use them.

SKILLS
Students will be able to:

• Communicate effectively with a wide range of people.
• Identify problem or risk situations and make decisions based on firmly held values.
• Cope with peer influences, assert their ideas and convey their decisions.
• Use decision making and assertiveness in situations relating to drug use.
• Maintain friendships.
• Carry out the correct procedure for dealing with discarded syringes and needles.
• Give care and seek help.
• Recognize and deal with a range of feelings and changes in relationships over time.
School Community Involvement in the Prevention and Reduction of Drug Related Issues

Parents need to know that the school:

• Is a smoke free environment;
• Advocates the safe and responsible use of medicines;
• Follows a harm minimisation approach to the use of alcohol, tobacco and other drugs;
• Prohibits the illegal use, possession or supply of alcohol, tobacco or illicit drugs at school;
• Will take action when information about drug use, possession or supply at school is disclosed;
• Has procedures for managing drug related incidents; and
• Provides referral and counselling for students with drug-related problems.

Inform the community by:

• Providing constant information to parents and the community about drug programs and health related issues.
• Providing parents and community with information in relation to the use and distribution of illicit drugs as per the school’s policy.
• Providing families with access to appropriate advice and recommended support agencies for assistance with drug-related issues;
• Ensuring a school environment that encourages any student experiencing drug related problems to seek help;
• Offering parents drug information sessions that are accessible to a range of cultural backgrounds and sensitive to differing ability levels.
• Providing clear understanding of the drug usage patterns among school age persons
• Giving parents a clear understanding of the underlying reasons for drug use
• Assisting parents in forming a personal perspective on alcohol and drugs, based on facts and to assist them in clarifying their own attitudes and beliefs towards alcohol and drugs
• Outlining effective parent strategies for preventing and coping with drug use by their children.
1. Work within the principles for Drug Education.

2. Be aware of the critical success factors which include:
   a) provision of inservice training
   b) adequate resources to support programs
   c) continued support and follow up after training
   d) opportunity of regular feedback on student learning outcomes
   e) provision of a forum for the regular exchange of learning and collaborative decision-making
   f) the support of the community.

3. Work within the assumptions and values that underlie the policy for drug education:
   a) unsanctioned drug use at school, including alcohol and tobacco use, can have significant social, legal, health, safety and educational implications for young people
   b) responses to student drug use should recognise that some drug use is a common, but usually transient, behaviour among many young people
   c) unlawful drug use, possession and/or distribution, has no place in schools
   d) illicit drug use, possession and/or selling must be detected in schools as early as possible
   e) the consequences of possession and/or selling of drugs at school should be reinforced publicly, fairly and consistently
   f) curriculum and management practices should take account of individual student needs and circumstances
   g) a range of strategies should be utilised to reintegrate students where appropriate
   h) the most significant action is to discourage use and/or dealing at school through the definition, of, and education about, the real and inevitable consequences of such activities
   i) students involved in drug incidents should experience one or more consequences including: counselling, involvement of parents, involvement with police and the justice system, detention, loss of privileges, suspension and exclusion
   j) student drug use and the consequences of drug use should be considered in the context of their life, family situation, mental and emotional health, intellectual ability and degree to which they may be in control of their actions and decisions.

4. Be aware of the components of drug education and drug intervention:

   4.1 Drug education:
   ♦ is a core component of school curriculum
   ♦ focuses on equipping young people with information, skills, attitudes, values and understanding to enable them to learn to make responsible decisions about drugs.
Clearly communicates policies and procedures that strive to achieve:

- Promotion and maintenance of a safe and supportive school environment.
- A team approach, which involves staff, students, parents, health workers and related professionals and the police in addressing drug related issues.
- Strategies for ensuring all members of the school community can contribute to, understand and support the school policies and procedures.
- Appropriate professional development for all relevant staff.
- Information and support for parents, particularly parents and students involved in illicit drugs.
- Mechanisms for the ongoing monitoring and review of the school’s approach to drug education and incident management.

4.2 Intervention Components

- School policy and procedures for drug related incidents, based on the principles adopted by the schools.
- An action plan for managing drug related incidents.
- A communication strategy for drug related incidents.
- A directory of relevant professionals and agencies, including the police.
- Protocols with relevant professionals and agencies, including the police.
- Arrangements for supporting students involved in drug related incidents.
- Maintenance of records of incidents involving possession, use and/or distribution of illicit drugs.

5. Be aware of the rights and responsibilities of students.

- A young person does not have to divulge information that may incriminate themselves and other people.
- A young person has the right to have a legal guardian present when being questioned.
- Unless given permission by the young person, school authorities cannot search their belongings for suspected illicit drugs. Only police can do this if they have reasonable suspicion and/or a search warrant.
- School authorities do not have the right to carry out a body search of a young person who they suspect is hiding illicit drugs on their person.

6. Rights and responsibilities of staff

- When staff become aware of incidents that have the capacity to constitute an offence, they need to speak to students to substantiate their belief.
- An investigation process has to be put in place.
- All information obtained as part of the investigation has the capacity to assist police in the investigation of these incidents.
- During the process of investigation great care needs to be taken to ensure the rights of the student. This is imperative in order not to hamper any further investigation conducted by the police.
- At no point in any conversation with students are they to be threatened, promised or induced either to participate in any interview, to make any admission or to participate in any search of their person or possessions.
7. Plan for success:
   a. Utilise consultative, collaborative processes across school community members, government and non-government agencies to develop drug education programs and procedures for managing drug related incidents.
   b. Identify roles and responsibilities of personnel in implementing and evaluating drug education programs and procedures for managing drug related incidents.
   c. Inform the school community of the aims of drug education programs and the procedures for managing drug related incidents.
   d. Relate intervention procedures to principles, policies and practices identified in relevant system policy statements.
   e. Provide opportunities for school personnel to attend drug education and intervention professional development programs.
   f. Ensure adequate resources are available to school personnel responsible for implementation of drug education programs and intervention procedures.
   g. Access appropriate resources and services to meet identified drug related problems of students or their families.
   h. Ensure that school drug education programs are consistent with the *Principles for Drug Education in Schools*.

8. To provide professional development for staff involved.

9. To ensure the integration of the Drug Education program into the school curriculum throughout the time students attend school.
LEGISLATION AND RELATED POLICIES

Procedures for managing drug related incidents at Tamborine Mountain Schools Cluster are considered in conjunction with the relevant Queensland legislation and education sector policies.

Legislation

- Public Service Management and Employment Act 1988
- Education (General Provisions) Act 1989
- Drugs Misuse Act 1986
- Anti-Discrimination Act 1991
- Judicial Review Act 1991
- Juvenile Justice Act 1992
- Freedom of Information Act 1992

Department of Education Policies and Guidelines

- CS-02 Human Relationships Education for Queensland Schools
- CS-10 Drug Education in Schools
- HS-04 Total Ban on Smoking in Government Buildings and Offices
- LL-03 Judicial Review
- LL-07 Freedom of Information
- LL-09 Police Investigations at State Educational Institutions
- SM-06 Schools and Discipline - Management of Behaviour in a Supportive School Environment
PROCEDURES FOR MANAGING DRUG RELATED INCIDENTS AT SCHOOL

- Substance found with/consumed by student, or evidence of above
  - Establish the health status of the student/s involved in the incident
    - Report the incident to the administration
      - Administration establishes who and what substance/implement is involved, the substance is then secured labelled and stored
      - Administration advises student that a support person is available to assist them and their parents
        - Administration forms a management group to devise a response based on the available data
          - Advise the student and the family of the proposed school response
            - School allows time for clarification from student and/or family
              - School implements appropriate action based on evidence of the incident and devises a plan for student reintegration
                - Teachers
                - Parents
                - Student involved
                - Other students
              - Management group implements a process of reintegration for the student involved
                - Refer to Department Drug Policy and School Procedures
                  - Refer to first aid room and monitor
                    - Notify police if an illicit substance
                      - Notify parents and advise that a support person is available to assist the family
                        - Police feedback as per Juvenile Justice Act
                          - Student support person
                          - School administrator
                          - Year level coordinator
                          - Parents/guardians
                          - Student involved
                            - Recommendation to appropriate system office
                              - Student support person assists student and family if required
                                - Support person refers to other government or community service
                                  - School staff informed of school response
                                    - Whole school community informed if appropriate
                                      - Respond to media if necessary

- Refer to the ambulance if emergency treatment is needed/or
- Refer to first aid room and monitor
- Notify police if an illicit substance
- Notify parents and advise that a support person is available to assist the family
- Police feedback as per Juvenile Justice Act
- Student support person
- School administrator
- Year level coordinator
- Parents/guardians
- Student involved
- Recommendation to appropriate system office
- Student support person assists student and family if required
- Support person refers to other government or community service
- School staff informed of school response
- Whole school community informed if appropriate
- Respond to media if necessary
CONSEQUENCES OF DRUG USE FOR STUDENTS

These suggested consequences will be considered in the context of the student’s whole life, family situation, mental and emotional health, intellectual ability and degree to which they may have been in control of their actions and decisions.

<table>
<thead>
<tr>
<th>LEVEL OF INVOLVEMENT</th>
<th>POSSIBLE RESPONSE/S</th>
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</table>
| 1. Knowledge of drug-related activities at school and not communicated to teachers or administration. | ♦ Counselling by administration  
♦ Referral to parents |
| 2. Requesting supply of an illicit substance from another student on school premises. Request not fulfilled. | ♦ Counselling by Guidance Officer  
♦ Referral to parents  
♦ Withdrawal of privileges  
♦ Suspension (1-10 days) |
| 3. Involvement via proximity to a drug-related activity, in the presence of others using or supplying. | ♦ Counselling by administration  
♦ Referral to parents  
♦ Detention  
♦ Withdrawal of privileges  
♦ Suspension (1-10 days) |
| 4. Coming intoxicated onto school premises or to school functions. | ♦ Counselling by administration  
♦ Referral to parents  
♦ Suspension (10-20 days)  
♦ Counselling by Guidance Officer |
| 5. Smoking tobacco on school premises or at school functions. | ♦ Health warning / counselling School Based Nurse (SBN)  
♦ Warning as to breach of school rules  
♦ Suspension (1-10 days) |
| 6. Repeatedly smoking tobacco on school premises or at school functions. | ♦ Referral to parents  
♦ Quit program and / or counselling by guidance officer / SBN  
♦ Suspension (10-20 days)  
♦ Counselling |
| 7. Using alcohol on school premises or at school functions. | ♦ Health and illegality warning  
♦ Referral to parents  
♦ Suspension (10-20 days)  
♦ Counselling by Guidance Officer / SBN |
| 8. Supplying alcohol on school premises or at school functions. | ♦ Health and illegality warning  
♦ Referral to parents  
♦ Suspension (10-20 days)  
♦ Recommended exclusion  
♦ Counselling by Guidance Officer / SBN |
| 9. Purchase, sale or supply of a purported illicit substance on school premises or at a school function. | ♦ Health and illegality warning  
♦ Parents notified  
♦ Suspension (10-20 days)  
♦ Counselling by Guidance Officer / SBN |
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|10. In possession of or using a small quantity of an illicit substance on school premises or at a school function. | Health and illegality warning  
Referral to police  
Parents notified  
Suspension (10-20 days)  
Counselling by Guidance Officer / SBN |
|11. In possession of drug-related implements on school premises or at a school function | Health and illegality warning  
Referral to police  
Parents notified  
Suspension (10-20 days)  
Counselling by Guidance Officer / SBN |
|12. Repeated possession or use of a small quantity of illicit substance on school premises or at a school function. | Health and illegality warning  
Referral to police  
Parents notified  
Suspension (10-20 days)  
Recommended exclusion  
Counselling |
|13. In possession of a large quantity of an illicit substance on school premises or at a school function. | Health and illegality warning  
Referral to police  
Parents notified  
Recommended exclusion  
Counselling |
|14. Sale, purchase or supply of a small quantity of an illicit substance on school premises or at a school function, to minors. | Health and illegality warning  
Referral to police  
Parents notified  
Suspension (10-20 days)  
Recommended exclusion  
Counselling |
|15. Sale, purchase or supply of a large quantity of an illicit substance on school premises or at a school function, to minors. | Health and illegality warning  
Referral to police  
Parents notified  
Recommended exclusion  
Counselling |
## Police Involvement in Drug Related Incidents

The Requirement for Police Involvement in Drug Related Incidents in Schools

<table>
<thead>
<tr>
<th>Description of Drug Related Incident at School</th>
<th>Must inform police</th>
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<tbody>
<tr>
<td>1. A substance believed to be an illicit drug is found.</td>
<td>Yes</td>
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<tr>
<td>2. Student admits to drug use at school, but no substance found.</td>
<td>No</td>
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<tr>
<td>3. Reason to believe (reliable witness) a student has an illicit drug in their possession, or in their bag or locker.</td>
<td>Yes</td>
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<tr>
<td>4. Student seen flushing what is thought (or a student or teacher thinks) to be a drug down a toilet, no substance is obtained.</td>
<td>No</td>
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<td>5. A bong is found, no student and no substance (Place the bong in a secure place with details of where it was found)</td>
<td>Yes</td>
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<tr>
<td>6. A student admits to using marijuana on Saturday night, not at a school function.</td>
<td>No</td>
</tr>
<tr>
<td>7. A student is <em>dobbed in</em> by another student for using a drug, but no evidence is presented.</td>
<td>No</td>
</tr>
<tr>
<td>8. Reasonable evidence is presented that a student is selling drugs to other students.</td>
<td>Yes</td>
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</table>

The responses indicated above are generally in line with police procedures and comply with relevant laws. They can, however, only be a guide and each situation needs to be assessed on a case-by-case basis.
LEGAL ISSUES AND DRUG INCIDENTS

1. Students aged 17 years and over
   • Police must be called if an adult student, 17 or older, is found in possession of or using an illicit substance or drug-related implement at school.
   • There is no requirement for another adult to be present at the formal interview. Parents need not be advised, although the school may choose to do so.
   • A student support person must not be utilised in the police investigation stage because of potential legal ramifications.
   • The Principal should not be the support person. The Principal may be required to conduct a formal investigation at a later stage and this might influence the role of the Principal in the initial stages of an incident.

2. Freedom of information issues
   • Information recorded, whether written or electronic, concerning drug related matters may be subject to a Freedom of Information request. All factual and relevant information should be recorded.

3. Legal and professional responsibilities of school staff
   • All school personnel have legal and professional responsibilities to respond to information incidents involving student use or possession of licit and illicit drugs at school or during school activities.
   • School personnel, students and the broader school community should understand these responsibilities.
   • School staff, students and the broader school community understand that:
     “under the law, the possession of a suspected illicit substance must be reported to police”.

4. Procedure for lawfully searching and securing student property
   • Where reasonable grounds to suspect that a student may have an item/substance that contravenes school rules, school staff can request the student to hand over the item/substance or to cooperate in the search of the student’s property.
   • The student may decline to either hand over the property or to cooperate in the search.
   • School staff must then advise the student that the information will then be passed on to parents and/or police.

For further consideration:
   • Only when reasonable grounds exist for believing, from behaviour or statements, that students may cause immediate harm to themselves or others, can the property of a student be seized.
   • It is important to have a witness present during a search.
   • Excessive force must be avoided.
   • Any substance being suspected as being illicit should be secured in a place restricted from general access.
   • Substance should be labelled with the date, time, and allocation where the substance was obtained and names recorded of all staff who had contact with it.
   • An administrator should confirm the labelling of the substance and accept responsibility for its containment prior to handing it over to police.

Refer: Department of Education Manual Legal and Legislation, LL-09, Police Investigations at State Educational Institutions, or other sector documents.
The Tamborine Mountain and District Education Cooperative (TMDEC) will ensure that all students have access to drug education programs and will offer provision for intervention throughout their time at school in the context of curriculum and policy requirements. Tamborine Mountain and District Education Cooperative (TMDEC) underwrites the following responsibilities:

a) To implement drug education programs within appropriate curriculum areas.

b) Incorporate statements in long term planning and reporting processes about drug education and intervention that include referral, counselling and procedures for managing drug-related incidents at school.

c) Inform the school community of drug education programs and procedures developed within the context of the Education Queensland Policy for Drug Education and Intervention in Schools.

d) Report on policy implementation and the achievement of educational outcomes related to minimising drug related harm.

e) Provide professional development opportunities that assist teachers to achieve drug related educational outcomes.
**ACTIONS TO MINIMISE DRUGS AT SCHOOL**

1. **ADVERTISE POLICY**
   Advertise widely that illicit drug use, possession and supply in the school is unacceptable and, when detected, will result in serious consequences, including police and parental involvement.

2. **REINFORCE MESSAGE**
   Reinforce the unacceptability of illicit drugs in schools by consistently carrying through on stated actions.

3. **APPLY CONSEQUENCES**
   Identify consequences and apply them consistently and fairly to users and suppliers.

4. **SAFE ENVIRONMENT**
   Establish an environment in which all school community members have enough care and concern for each other that they will confidentially pass on information about people using, carrying and/or selling drugs.

5. **REINTEGRATE**
   Use police cautioning processes where possible and utilise reintegration processes such as Community Accountability Conferencing and community service where appropriate.

6. **EDUCATION PROGRAMS**
   Implement education programs which reinforce consequences of having illicit drugs at school.

7. **MAINTAIN AND SUSTAIN**
   Ensure that detection and deterrent processes are maintained and sustained.

8. **INFORM THE COMMUNITY**
   Inform the whole community about the process, possible consequences and potential outcomes of being found with drugs at school.

9. **REVIEW AND REVISE**
   Review and evaluate strategy and procedures regularly and revise them as required.

10. **MEDIA STRATEGY**
    Devise a strategy to inform and educate the media in relation to procedures for managing drug incidents in the school.
MANAGING AND INFORMING THE MEDIA

- *One* person should be the designated media contact. This person should be confident in this role and provided with all relevant information.

- Where possible, provide short and concise written statements to the media. Avoid telephone or face-to-face interviews as these can be difficult to manage and are subject to editing.

- Do not be drawn into broader issues that are not directly relevant to the situation.

- Neither mention the names of teachers, students, parents or administrators nor discuss specific aspects of an incident.

- Consider the option of making *no comment*.

- It is generally advisable to avoid discussing issues *off the record*.

- Confirm statements to the media with the principal and, where possible, inform other school staff prior to contact with the media.
APPENDIX 1

MANAGING AN INTOXICATED STUDENT

Assessing Toxication

Intoxication is the state resulting from the intake of a quantity of a drug/alcohol that exceeds the individual’s tolerance and produces behavioural and/or physical abnormalities. Assessment of the intoxicated young person is important because of the physical risks associated with this state. The safety of the person should be determined and action needed, by asking:

- What are their immediate safety needs?
- What risk do they pose to themselves? (injury, alcohol poisoning)
- What risk do they pose to staff or other students? (disruption, violence)
- Who needs to be notified of the situation? (parents, school principal)

Assessing the danger to the intoxicated young person

Always monitor intoxicated people. Call an ambulance if the person is:

- having seizures;
- demonstrates extreme confusion or delirium;
- unresponsive to stimuli – not opening eyes when called, unresponsive to pain;
- complaining of persistent severe headache, particularly with recent head injuries; or
- unconscious.

Behavioural effects of intoxication are not easy to control.

- Adopt a calm and confident manner.
- Have a staff member stay with the young person to provide reassurance and support until a relative can escort them home.
- Inform appropriate people: parents, guardians, school principal.

Emotional effects

If the person is in immediate danger of harming himself/herself because of severe depression, suicidal thoughts, agitation or hallucination, a staff member should stay with them until the situation has settled. In severe cases, a psychiatric assessment and/or hospital admission may be required.

Monitoring

Monitoring is essential as some young people inaccurately estimate the quantity of what they have taken. Also, drugs can have different effects on different people, particularly if more than one drug is taken at a time. The golden rule, therefore, is never to accept on face value the stated drug or alcohol of anyone without monitoring them over time. Students who are kept on the school premises and who do not appear to be fully oriented or conscious, should be checked at regular intervals, quarter-hourly or as applicable to condition, until such time as a relative or support person can escort them safely home.
APPENDIX 2

DRUG OVERDOSE INCIDENTS

Overdose occurs when a person has taken a drug quantity higher than the recommended therapeutic dose and that also exceeds his/her tolerance. Staff with current first-aid skills should be consulted. Current knowledge and regular practice of taking a pulse, mouth-to-mouth resuscitation and cardio-pulmonary resuscitation and cardio-pulmonary resuscitation are essential.

Signs that may indicate a young person has overdosed or is progressing towards an overdose include:
• suspicion or conformation that a drug has been taken;
• signs of deterioration in general functioning which are not consistent with the quality of a drug the young person claims to have taken;
• decreased level of consciousness;
• difficulty with breathing;
• abnormal pulse rate (racing, slowed, irregular);
• seizures, fits, convulsions; and
• hallucinations, extreme anxiety, depression.

Overdose can be fatal, including alcohol poisoning. If concerned about a possible overdose, RESPOND IMMEDIATELY.

a) Initial Assessment
• Clear airways.
• Check for regular breathing. If breathing has stopped, start mouth-to-mouth resuscitation and have another staff member or student immediately call for an ambulance.
• Check pulse rate. If there is no pulse, start CPR (cardio-pulmonary resuscitation) and have another staff member or student immediately call for an ambulance.
• If the young person is awake and their breathing and pulse are normal, place them in a comfortable position and arrange for an ambulance to take them to the accident and emergency section of the local hospital for a medical assessment.

b) Further Assessment

<table>
<thead>
<tr>
<th>What drug(s) was taken?</th>
<th>How much is normally taken? And</th>
</tr>
</thead>
<tbody>
<tr>
<td>When or how long ago?</td>
<td>How was the drug(s) taken?</td>
</tr>
<tr>
<td>How much was taken?</td>
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</tr>
</tbody>
</table>

c) Continuous Monitoring of the young person

While waiting for the ambulance to arrive, constantly monitor the young person and inform the ambulance officers of any changes when they arrive.
APPENDIX 3

APPROACHING YOUNG PEOPLE ABOUT THEIR DRUG USE

Often, young people are themselves reluctant to talk, believing that adults will attempt to persuade them to stop, or criticize their behaviour or even punish them. In this instance:

- Convey your desire to understand and accept, but not condone, the reasons behind the person’s behaviour.
- Be inquisitive and non-judgemental.
- Resist trying to change their thoughts or behaviour.
- Ensure confidentiality of the discussion and student access to counselling sessions; but inform students of the possible ramifications of disclosing certain information, before they compromise themselves.
- Generalize the behaviour without condoning or condemning it.
- Try to balance your view of the drug use itself against the reasons behind it. Concentrate on discovering what the young person finds attractive about the drug use, rather than assuming they must believe it is a problem.
- Increase open communication and resist playing the private detective.
- Consider who is the best person to broach the subject. It does not have to be you, perhaps another member of the staff knows the student better, and could help.
- Gather all the facts first, including information on the drugs being used/abused.
- If the use is only suspected, discuss the “observable facts” (these cannot be denied) and ask the student what conclusions they would draw from these facts, and avoid accusations.
- Explore reasons behind the use. Weighing up the benefits and costs is useful.
- Make sure the person is drug-free when you approach them, so that their perception and memory of the discussion are not distorted.
- Take advantage of opportunities to open up a conversation on the topic. For example; relevant news piece on the television.
- Be aware of the appropriateness of the environment. Confidentiality is critical.
- By being respectful and amiable, construct an atmosphere where future discussion is likely.
- Show a caring attitude and manifest your intentions to understand the nature and context of the situation, rather than focusing on disciplinary consequences.
- Convey a sense of genuine interest in the reasons behind the student’s decision to use/abuse drugs, rather that a determination to change behaviour.
- Discuss the issue as a concern not a problem. The student may negatively perceive a problem label, thus diminishing their motivation to address the issue.