

CHESHIRE EAST Community Safety Scrutiny Committee

Portfolio Holder: Rachel Bailey Children and Families and Rural Affairs
Les Gilbert Communities and Regulatory Services
Date: 31 March 2014
Report of: Tony Crane, Director of Children's Services
Title: Management and Prevention of Drug Misuse in Cheshire East
Secondary Schools

1.0 Purpose of Report

- 1.1 The Paper has been requested by the Community Safety Scrutiny Committee in regard to how secondary schools in Cheshire East manage and prevent drug misuse.
- 1.2 The paper sets out the current context and the policy framework that schools work in and the support that is available to schools.

2.0 Decision Required

- 2.1 Note the paper and request further updates as appropriate.

3.0 Background

- 3.1 In 2012, the prevalence of illegal drug use amongst secondary pupils Aged 11-15 nationally was at its lowest, based on research conducted by the Health and Social Care Information Centre. The proportions of pupils who had ever tried drugs were generally higher in the south of England than elsewhere. In the North and Midlands between 15% and 17% of pupils reported having tried drugs. In the south, the proportion who had ever taken drugs varied between 18% (the South West) and 20% (London).
- 3.2 The prevalence of ever having taken drugs increased with age from 7% of 11 year olds to 31% of 15 year olds. There were similar patterns for drug use in the last year (from 4% to 24%) and in the last month (from 2% to 13%). Boys and girls were equally likely to have ever taken drugs.
- 3.3 Pupils who had taken drugs in the last year were most likely to have taken cannabis. In 2012, 28% of pupils had ever been offered drugs.

- 3.4 It is difficult to compare these national figures with local as the LA is not required collect information from schools on drug misuse use in schools. However information from the Joint Strategic Need Assessment (JSNA), Appendix A, estimated drug use amongst young people in Cheshire East;
- 3,648 11-15 year old have tried or used drugs
 - 1,288 11-15 years olds have taken drugs and are at an early 'at risk' Stage
 - Most clients in specialist misuse services are aged 15-18 and most are male
 - Of the 36 young people who started a new treatment journey in 2012/13 the majority were referred via one of 5 routes Health and Mental Services, Youth Justice, Children and Family Services and Family , Friends and Self . Only 12% (3 Young People) were referred by education services
- 3.5 From these figures it is clear that the majority of young people of school age have never used an illegal drug. But there are specific risk groups including Cared for Children; Excluded from Schools or who truant on a regular basis; Involved with Youth Justice; Family member known to misuse substances. Of those who do experiment with illegal drugs very few will go on to become problem drug users. However, most will at some stage be occasional users of drugs for medicinal purposes and many will try tobacco and alcohol. Every school therefore has a responsibility to consider its response to drugs and all schools are expected to have a policy which sets out the school's role in relation to all drug matters. (Drugs: Guidance for Schools DFES 2004 updated 2012).
- 3.6 Tackling the problems of drug use among young people remains high on the government's agenda and schools are required to evidence both provision and impact on whether "learners are discouraged from smoking and substance abuse"
- 3.7 Whatever the health behaviour of young people, the reason for schools to teach about these issues to all pupils is to ensure they gain a greater understanding and develop informed decision- making skills. All young people will grow up needing to make decisions about substance use in a world where drug use whether medicinal or recreational, such as alcohol, or illegal drug use is common- place.
- 3.8 All secondary schools in Cheshire East have a policy that follows the guidance set out by Department or Education (DfE) and Association Chief Police Officers (ACPO)(appendix B). The guidance is **non-statutory** and has been produced to help school staff in this area, as

well as promoting understanding of the relevant powers and duties in relation to powers to search for and confiscate drugs, liaison with the police and with parents. This guidance does not focus on drug education. It covers broader behaviour and pastoral support, as well as managing drugs and drug-related incidents within schools.

3.9 As part of the duty on schools to promote pupils' wellbeing, schools have a clear role to play in preventing drug misuse as part of their pastoral responsibilities. To support this, the Government's Drug Strategy 2010 ensures that school staff has the information, advice and power to:

- Provide accurate information on drugs and alcohol through education and targeted information;
- Tackle problem behaviour in schools, with wider powers of search and confiscation;
- Work with local voluntary organisations, health partners, the police and others to prevent drug or alcohol misuse.
- The senior member of staff who is responsible for the school's drugs policy liaises with the police and has an agreed shared approach to dealing with drug-related incidents.

3.10 **The action schools currently take:**

3.10.1 They have developed drug and substance misuse policies that sets out their role in relation to all drug matters – this includes the content and organisation of drug education and the management of drugs and medicines within school boundaries and on school trips. It should be consistent with the school's safeguarding policy.

3.10.2 Have a designated named senior member of staff with responsibility for the drug policy and all drug issues within the school.

3.10.3 Have developed drug policies in consultation with the whole school community including pupils, governors, parents/carers, staff, and partner agencies.

3.10.4 Have established relationships with local children and young people's services, health services and voluntary sector organisations to ensure support is available to pupils affected by drug misuse (including parental drug or alcohol problems).

3.11 **Local Authority Support**

3.11.1 Historically, the Council directly supported schools regarding Personal Social Health Education (PSHE) but this provision is no longer available due to mainstreaming of various grants. The requirements of the former Healthy Schools initiative were for

schools to monitor drug related matters and much of the current programmes within schools relate to this initiative. The national review of PSHE leaves the emphasis with schools to deliver meaningful programmes involving school staff, school nurses and external expertise.

- 3.11.2 When specific issues arise in schools, if required the local authority can support schools through reviewing policies working with pupils, staff, parents, governors on issues t related to drug misuse.

3.12 Youth Support Services

All youth support provision includes generic sessions around substance reduction/misuse/harms and effect although this tends to be preventative work. If a Tier 2 referral is identified, appropriate support is offered based upon the specific need.

3.13 Family Information Service

The Council has a very detailed list of support services which identifies a range of resources which individuals/groups can contact. This is a useful reference point when considering local services and needs.

- 3.14 There are number of Commissioned Services that provide support and intervention for example:

- Xenzone – online counselling
- Just Drop in – a drop in facility for young people
- Visyon- local counselling service
- Cre8 – Macclesfield base young people support service
- FRANK – Government Specialist Advice Service

3.14 Preventing Offender Panels (POP)

- 3.15 Schools utilise the Youth Prevention Team (YPT) attached to the Youth Offending Service by referring any concerning children and young people to one of the two POP panels. This multi-agency group consider how best to intervene in ways that reduce the risks from drug and alcohol use, whilst looking to support and challenge them appropriately. Once a plan is in place the YP Team employ a range of specialist staff from health, education, police, social work, parenting, anti-social behaviour staff, youth work, drugs work and the voluntary sector to ensure that young people avoid harmful drug or alcohol use and potential criminality or anti-social behaviour in the future. They are encouraged to learn how to keep themselves well and happy without resort to substance misuse.

3.16 The Youth Offending Team also work with young people convicted in the courts with the same range of professionals to minimise further offending and harm to the public through continued and problematic substance misuse.

3.15 Cheshire Young Person's Substance Misuse Service

3.15.1 The service offer the following support for young people and families

- Telephone advice
- Drug education / Harm reduction advice
- Assessment
- Brief Intervention
- Care planned treatment for problematic substance use

3.16 In addition they offer the following for Professionals working with young people:

- Telephone consultation / advice
- Supporting professionals to develop their knowledge of substances
- Guidance on educating young people on the risks of substance use

3.18 Future Actions

- LA is planning a conference for schools on range of 'safeguarding' issues including drug and alcohol misuse
- Governor training is being developed
- Refinement of audit tools for schools
- Commission of an integrated adult and young people preventative and recovery service

4.0 Background Documents

4.1 Background papers relating to this report can be inspected by contacting the report writer:

Name: Fintan Bradley
Designation: Corporate Manager: Education Strategy
Tel No: 01606 271504
Email: fintan.bradley@cheshireeast.gov.uk