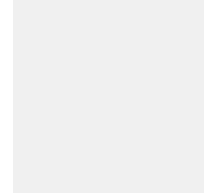


## **Drugs and Substance Misuse**



### **SCOPE OF CHAPTER**

This Chapter sets out a framework the safe management of drugs or substances in relation to All Children, which must form the basis of further strategies, arrangements or guidance as necessary.

Where it is identified that a child may be at risk from the use of drugs or substances, managers must ensure that these risks and any agreed strategies are outlined in a Service Plan.

Managers in the Looked After Service must ensure that staff and children are provided with information/guidance on the safe storage, management and administration of drugs and substances in homes. As a minimum, this must be outlined in **Statement of Purpose**, Foster Care Agreements and Children's Guides.

### **RELEVANT CHAPTERS**

For **Looked After** Children, see **Administration and Storage of Medication in Residential Care Procedure**

Also see **Substance Misuse Interventions and School Guidance**

[Psychoactive Substances Act 2016](#)

### **AMENDMENT**

In August 2016, a link to [Psychoactive Substances Act 2016](#) was added.

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### **1. Definition**

Drugs and Substances are defined as any substances, whether restricted or prohibited, which may have a harmful effect upon a child, such as:

Alcohol, Cigarettes, Tobacco, Aerosols, Gas, Glue, Magic Mushrooms (Amanita), Petrol, Solvents and all controlled substances such as Amphetamines, Barbiturates, Cannabis, Cocaine, Hallucinogens, Hashish and Narcotics.

### **2. Access/Use of Drugs and Substances**

#### **2.1 Purchasing/Obtaining Drugs or Substances – General**

All reasonable measures must be used to reduce or prevent children from obtaining drugs or substances which may harm them.

If it is known or suspected that children are obtaining products which may harm them, whether off the streets, from dealers or from traders of any kind, the social worker must be informed and a strategy adopted to reduce or prevent it. It also includes psychoactive substances which can cause a very similar range of problems to the drugs which they mimic, including a risk of dependence developing with repeated use. Some appear to be more dangerous even than the traditional drugs they mimic.

This may include engaging or involving the supplier, if it is safe to do so.

If the problem persists or is serious, relevant specialists or bodies, including Trading Standards or the Police, should be informed.

#### **2.2 Cigarettes and Tobacco**

Staff may not smoke in the presence of children and may not purchase or give cigarettes, tobacco or the materials for making or lighting cigarettes or tobacco to children.

If Looked After children already smoke when placed, a person with **Parental Responsibility** should give permission and should agree/determine the arrangements for the smoking (e.g. how cigarettes will be purchased, whether the child may smoke in the home). These arrangements must be out in the **Placement Plan** for the child.

### **2.3 Alcohol**

All children should be discouraged from purchasing or consuming alcohol. For staff working in children's homes, see **Alcohol in Residential Settings Guidance**

### **2.4 Aerosols, Gas, Glue, and Petrol**

Aerosols, gas, glue, petrol and other similar substances may only be used for the purpose they were designed for. Staff should take all reasonable measures to restrict their use to children who are known to pose a risk to themselves or others if they have access to such substances.

### **2.5 Controlled Drugs or Substances**

Controlled drugs and substances must not be accessible to children, except Prescribed Medicines (those prescribed by a medical practitioner), any arrangements for access to individual children must be outlined in a Placement Plan.

## **3. Prevention and Planning**

For detailed guidance see **Substance Misuse Interventions and School Guidance**.

If it is known or suspected that a child is at risk of participating in drug or substances misuse activities, such as using and/or trading in, consideration should be given to the following:

- The provision of relevant information, guidance and/or advice to help reduce or prevent risks;
- A strategy for managing the risk;
- Consideration to making a referral to relevant specialists for support, guidance and/or treatment;
- Consulting or involving the Police (See **Contacting the Police Procedure**).

Any such measures/strategies must be outlined in a relevant Service Plan.

## **4. Emergencies**

If it is suspected that a child or others are at risk of serious harm resulting from the misuse of drugs or substances, staff should adopt the measures set out in any previously agreed plan.

In the absence of such a plan, or if the plan is unsuitable in the circumstances, staff should take what actions are immediately necessary to protect the child or others at risk; then inform their manager and the child's social worker at the first opportunity.

The actions that may be taken will be dependent on the circumstances and the likelihood and seriousness of any Injury being caused. In some circumstances it may be appropriate to use Physical Intervention or search a child and/or a child's belongings.

### **Physical Intervention Procedures**

#### **Searching Children and their Belongings Procedures**

If there is a risk of significant injury, including the risk of a serious criminal offence, the Police should be notified.

#### **Contacting the Police Procedures**

If solvents are involved, allow air to circulate freely and extinguish naked lights.

If any person is unconscious, in a fit, convulsing or otherwise seriously ill, emergency first aid should be given and an ambulance requested. The emergency services should be informed that there are suspicions of drug or solvent misuse. See **Administration and Storage of Medication in Residential Care Procedure**.

The drugs/substances should be removed or confiscated, preferably with the co-operation of the child(ren); and all actions must be recorded, describing what they have obtained and where it has been safely stored.

- Legal but potentially harmful substances such as cigarettes, alcohol, aerosols, gas, glue, and petrol should be put in a safe place out of the reach of children or disposed of safely;
- Controlled substances and any associated materials or paraphernalia must be placed in a clearly marked box or other strong container, sealed and given to the manager who must arrange for it to be taken to a competent authority e.g. the police, pharmacist or doctor; and a receipt obtained.

Once the child/others are safe, the social worker, manager or supervisor must be notified and consideration given to drawing up a plan to prevent or reduce further occurrences.

## **5. Recording**

Non-serious occurrences should be recorded on the child's file; in relation to children placed in Children's Homes and Foster Care, it should be recorded in the child's Daily/Occurrence Record.

If an Incident has occurred, there are certain records that must be completed and a Management Review must be undertaken. See **Incidents – General Guidance**.