

DRUGS POLICY

Version:	Draft Policy November 2018
Approving Committee:	
Date Ratified:	to be ratified
Reference Number:	
Name/Department of Originator/Author:	R Lastiotis
Name/Title of Responsible Committee/Individual:	
Date Issued:	November 2018
Review Date:	July 2019
Target Audience	Staff/Parents/Governors

Version	Date	Control Reason



Drug, Alcohol and Tobacco Policy for Eastbury Secondary School

1. School context

Eastbury is a large multi-cultural school in the East London Borough of Barking and Dagenham. Our students are vulnerable to the pressures from wider society and their local communities to experiment with drugs, alcohol and tobacco. This policy aims to clarify our approach to drugs, alcohol, NPS and tobacco for all students, staff, governors, and parents/carers. Implicit in the policy is the school's role in combining social competence, i.e. the teaching of self-management and social skills to resist peer pressure, with managing social norms and myths around drug taking. Ensuring that throughout their schooling at Eastbury our students are given every opportunity to develop their life skills to assist them in making healthy choices around drugs, alcohol, NPS and tobacco, not only when they are a student at the school but when they move into adulthood.

2. Development process

We have developed this policy in consultation with students, staff, governors, parents/carers, partner agencies and the wider community.

3. Local and national guidance

This policy has been informed by the following guidance documents:

- 'Drug, Alcohol and Tobacco Policy Guidance 2015', LBBD:
- 'Quality Standards for effective Drug and Alcohol Education' (2014), Mentor-Adepis: <http://mentor-adepis.org/wp-content/uploads/2014/05/Quality-standards-for-alcohol-and-drug-education.pdf>
- 'DfE and ACPO drug advice for schools' (2012): <https://www.gov.uk/government/publications/drugs-advice-for-schools>

4. The purpose of this policy is to:

- clarify the school's approach to drugs for all students, staff, governors, parents/ carers, partner agencies and the wider community
- give guidance on developing, implementing and monitoring the drug education programme
- clarify the legal requirements and responsibilities of the school
- reinforce and safeguard the health and safety of all members of the school community
- enable staff to manage drug related incidents on school premises, and any incidents that occur, with confidence and consistency, and in the best interests of those involved
- provide a basis for evaluating the effectiveness of the school drug education programme and the management of drug related incidents

5. Definitions

Drugs: A drug is 'a substance people take to change the way they feel, think or behave'¹. This term encompasses all prescribed and over-the-counter medicines, all legal drugs such as alcohol, tobacco, volatile (sniffable) substances, and all illegal drugs covered by the Misuse of Drugs Act (1971)'.

Drug, Alcohol and Tobacco Education (DATE): DATE is the provision of 'planned and structured learning opportunities to develop pupils' knowledge, skills, attitudes and understanding about all

¹ United Nations Office on Drugs and Crime

drugs; as well as awareness of the benefits of a healthy lifestyle in relation to their own or other's actions.'²

NPS: Novel Psychoactive Substances – formally known as “legal highs”.

In this document the term DATE and drug education are used interchangeably.

6. School Approach

6.1 At Eastbury we believe that effective DATE is essential if our students are to make responsible and well-informed decisions about their lives. DATE contributes to promoting the spiritual, moral, social, cultural, emotional, mental and physical development of our students, preparing them for the opportunities, responsibilities and experiences of adult life. Eastbury strongly opposes the misuse of drugs, including alcohol, tobacco, NPS and solvents, by all members of the school community. Eastbury school is committed to the well-being and safeguarding of all members of the school community.

6.2 This policy is consistent with and should be read in conjunction with our other school policies on:

- Behaviour management;
- Child protection/safeguarding;
- Health and safety;
- PSHE;
- Smoke free.

7 Roles and Responsibilities

7.1 The governing body will:

- ☐ Support the Executive Headteacher in ensuring the implementation of the policy
- ☐ Review the effectiveness of the policy on a regular basis

7.2 The Executive Headteacher will:

- ☐ Ensure that staff and parents are consulted and informed about this drugs policy
- ☐ Ensure that the policy is implemented effectively
- ☐ Manage any drug-related incidents
- ☐ Ensure that staff are given sufficient training, so that they can teach effectively about drugs, and handle any difficult issues with sensitivity
- ☐ Support the subject leader to ensure delivery is in line with current best practice
- ☐ Monitor delivery of the policy on a day to day basis and report to governors, when requested, on the effectiveness of the policy.

7.3 The subject leader will:

- ☐ Produce a planned programme of drug education which reflects current best practice
- ☐ Support colleagues in demonstrating best practice in the classroom
- ☐ Liaise with external agencies as necessary regarding enhancement of the school drug education programme.

8. Drug Alcohol and Tobacco Education Curriculum Content

8.1 Our curriculum has been informed by the national science curriculum and **LBBB's PSHE Curriculum**, which is based on the PSHE Association's Programme of Study for PSHE and takes into account local health data and priorities.

² Mentor-Adepis 2014 / Drug Guidance, DfES 2004

- 8.2 We regard DATE as a whole-school issue, and we believe that opportunities to teach about the importance of a healthy lifestyle occur naturally throughout the curriculum. We will provide our students with an age-appropriate DATE programme through a spiral curriculum, which builds on previous learning, from Year 7 through to Year 11 and which takes place during scheduled lesson time. See Appendix 1 for programme content details.
- 8.3 We aim to teach pupils about the effects of NPS as they attempt to imitate illegal substances. Pupils therefore need to be educated on the risks associated with the use of NPS.
- 8.4 We aim to teach all students about drugs, however different their attainment levels, and however diverse their requirements. We recognise that students with special educational needs may be more vulnerable, that different communities have different attitudes towards drug use/misuse, and that some students may have parents who use drugs.

9. Methodology and resources

- 9.1 We recognise that learning is most effective when it addresses the development of knowledge, attitudes and skills together, and when teaching and learning are participative and active. We use a variety of teaching styles that are characterised by active learning. We use age appropriate resources and materials, which support our active learning approach and are differentiated to reflect students' learning needs. The subject leader will review resources on a regular basis to ensure they reflect current best practice.
- 9.2 Eastbury will seek the involvement of evaluated and approved partner agencies to enhance the programme of DATE delivered by teachers, as required.

10. Staff support and training

- 10.1 It is essential that all school staff have a clear understanding of the school's drug policy and other related policies. The PSHE Lead will be responsible for ensuring that continuing professional development is provided for all those involved in teaching drug education so that they have the necessary skills, knowledge and confidence to deliver the curriculum and to address relevant issues with pupils.

11. Assessment, monitoring and evaluation of DATE

- 11.1 Assessment of the drug education programme will identify what knowledge and understanding students have gained, the skills they have developed and how their feelings and attitudes have been influenced during the programme. Strategies for assessment such as self/ peer/ teacher assessment are built into lesson plans in the teacher resources. The PSHE Lead is responsible for monitoring and evaluating delivery of the DATE programme and reporting on its effectiveness to the headteacher.

12. Management of drugs at school

- 12.1 Where students have medical needs, parents/carers must give the school details of the child's condition and medication. The medication should be brought to school in a secure, labelled container. Records will be kept of students requiring medication. Emergency medication may be stored securely in the school office (for anaphylaxis or asthma).
- 12.2 Solvents and other hazardous chemicals must be stored securely, to prevent inappropriate access, or use by students. Teachers are cautious with older, solvent-based Tippex, with aerosols, with glues and with board-cleaning fluids, and follow COSHH guidelines.
- 12.3 Please consult the Smoke Free Policy for guidelines about tobacco and smoking cigarettes on the premises.
- 12.4 Alcohol to be consumed at community or parents' events will be stored securely beforehand. To sell alcohol, we must be licensed under the Licensing (Occasional Permissions) Act 1983.

13. Managing drug incidents

- 13.1 We recognise that there will still be some young people who choose to experiment with drugs, even if they have both the knowledge of the risks and the skills to resist peer pressure. Our aim is to balance the interests of the school, the need to protect other young people and the need to help those who misuse drugs.
- 13.2 **If there is any question of a medical emergency the school will immediately call for medical assistance.** The first priority in a medical emergency is safety and first aid, i.e. calling the emergency services and placing unconscious people in the recovery position. An intoxicated student does not represent a medical emergency, unless unconscious.
- 13.3 Students suspected of being intoxicated from inhaling a volatile substance will be kept calm; chasing can place intolerable strain on the heart, thus precipitating sudden death
- 13.3 The Executive Headteacher will be responsible for deciding how to respond to particular incidents and all factors influencing the incident will be taken into account (e.g. the age of the student concerned, whether the incident involved one student or a group of students and whether there is evidence of particular peer group pressure.) The *Behaviour Policy* has clear disciplinary measures that will be applied to drug related incidents and a variety of consequences/sanctions are possible.
- 13.4 School staff will not attempt to analyse or taste an unidentified drug, but will take temporary possession of any drug suspected of being a controlled drug for the purpose of protecting our students from harm or committing the offence of possession. The school will follow the advice given in "Searching, screening and confiscation" DfE January 2018 available on https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/674416/Searching_screening_and_confiscation.pdf
- 13.5 If it is suspected that a student is concealing illegal drugs or NPS, they will be encouraged to voluntarily surrender the drug. Under no circumstances will any teacher undertake an intimate physical search. If the student refuses, the Executive Headteacher may decide to contact parents and/or the Police Schools Liaison Officer. Parents will always be informed if the police are called to an incident.
- 13.6 If the drug cannot be identified it will be treated as illegal. It should be placed in a sealed container and the police informed so they can collect it as soon as possible for disposal. We will always ensure that a witness is present when taking temporary possession of any drug.
- 13.7 In any incident involving illegal and other unauthorised drugs the school will normally involve the student's parents/carers and explain how they intend to respond to the incident and to the student's needs. As our primary concern is the welfare of all our students, alternative action may be taken, for example, if we feel that parents are directly involved in the situation causing concern or that they may seriously over-react and cause harm to the child; in this case we may have to inform other appropriate agencies.
- 13.8 The school will keep a written record of the action taken when responding to incidents of this nature, irrespective of the seriousness of the case.
- 13.9 Further detail is provided in '*DfE and ACPO drug advice for schools*' (2012).

14. The role of parents/carers

- 14.1 The school is well aware that the primary role in young people's drug education lies with parents/carers. We wish to build a positive relationship with the parents/carers of our students, through mutual understanding, trust and cooperation.
- 14.2 Parents/carers are encouraged to approach the school if they are concerned about any issue related to drugs and their child and the school will refer parents/carers to other sources of help, for example, specialist drug agencies or family support groups, as required.

- 14.3 If parents/carers are suspected of being under the influence of alcohol or drugs on school premises, staff should attempt to maintain a calm atmosphere and call for a second adult, if necessary. On occasion, a teacher may have concerns about discharging a student into the care of a parent/carer. In such instances, the school will implement its child protection/safeguarding policy.

15. Confidentiality

Teachers cannot and should not promise total confidentiality and any issues regarding confidentiality are outlined in the school's confidentiality policy.

16. Referral and external support

- 16.1 The school is aware of the impact that parental or family member drug misuse can have on a student and their education. The school will be alert to behaviour which might indicate that a student is facing difficult home circumstances.
- 16.2 Heads of year, the SENDCO, school nurse and senior leadership team are responsible for referral to agencies. Details of local support services and national helplines/ websites are included in the list of organisations provided in appendix 2.

17. Monitoring and evaluation of this policy

- 17.1 As identified in section 11 above, the impact of the DATe programme in terms of teaching and learning and its overall effectiveness is monitored by the PSHE Lead and the Executive Headteacher.
- 17.2 The governing body will be kept up-to-date about the impact of the DATe programme on students' health and wellbeing and how effectively this drug policy is implemented via the Executive Headteacher's report and governors' own monitoring and evaluation systems.
- 17.3 The outcomes of any evaluation process will be used to inform the future planning of the DATe programme and any relevant drug policy issues.

Appendix 1

National Science Curriculum Requirements (DfE 2013):

Key Stage 3

Biology

Gas exchange systems

Pupils should be taught about:

the impact of exercise, asthma and smoking on the human gas exchange system

Health

Pupils should be taught about:

the effects of recreational drugs (including substance misuse) on behaviour, health and life processes.

Expectations for Good Practice in PSHE

In addition to these specific national curriculum requirements, it is the aim of DATe to develop the following knowledge, skills and attitudes:

Knowledge

- increase pupils' knowledge and understanding and clarify misconceptions about:
- the short and long term effects and risks of drugs
- the rules and laws relating to drugs
- the impact of drugs on individuals, families and communities

Skills

Develop pupils' personal and social skills to make informed decisions and keep themselves safe and healthy, including:

- assessing, avoiding and managing risk
- communicating effectively
- resisting pressures
- finding information, help and advice
- devising problem solving and coping strategies
- developing self-awareness and self-esteem

Attitudes

Enable pupils to explore their own and other peoples' attitudes towards drugs, drug use and drug users, including:

- challenging stereotypes
- exploring media and social influences

Curriculum Content by Year Group

The overview reflects the guidance given in the Health and Wellbeing section of LBBB's PSHE Secondary Curriculum and the PSHE Associations Programme of Study. This forms the basis of the DATe programme at our school.

Year 7 Legal and Illegal Drugs	Alcohol, tobacco, legal and illegal drugs Tobacco including shisha Volatile substance abuse Getting help and First Aid Why people do/ don't
Year 8 Drugs and Their Effects	Situations involving drugs Alcohol Nitrous oxide Physical, emotional and social effects Managing drug-related situations
Year 9 Attitudes to Risk	Views on drugs, drinking and smoking Contact with the law NPS (Novel Psychoactive Substances) Research and presentation on drugs (including physical wellbeing)
Year 10 Choices and Responsibility	Consequences of drug use Choices and consequences Sexual Health and Drugs and Alcohol Healthy lifestyle exercise and nutrition - what's in your local area
Year 11 Impact on Adult Life	Influence of Drugs and Alcohol on behaviour Impact of Drugs and Alcohol on Society Impact of Drugs and Alcohol on Personal Relationships Positive ways of managing stress

*Needs assessment activities are carried out each year to establish appropriate content for delivery and ensure topics are relevant to the cohort's knowledge and experience.

Appendix 2 - Useful Organisations

Teacher Training and PSHE Resources

British Red Cross

Provides information and teaching resources about first aid and a range of other topics related to PSHE: <http://www.redcross.org.uk/>

CWP Resources

Provides INSET, in-class coaching programmes for teachers and up-to-date schemes of work, lesson plans and materials for teaching SRE and DATE: <http://cwpresources.co.uk/>

PSHE Association

Subject association for PSHE. Provides information, resources and training in PSHE, including the PSHE Programme of Study for KS1-4: <https://www.pshe-association.org.uk/>

Mentor-Adepis

Alcohol and Drug Education and Prevention Information Service which provides free downloadable guidance, resources and factsheets on all aspects of DATE:
<http://mentor-adepis.org/>

St John Ambulance

First aid courses and free teaching resources on all aspects of first aid: <http://www.sja.org.uk/>

Local Support Services

CRI Subwise – a local drug and alcohol support service for children, young people and their families living in Barking and Dagenham. The service works with young people from age 6 up to the age of 21. The team are able to come to your school weekly on Fridays and provide information and advice sessions. Tel: 020 8227 5019 or email: subwise@cri.org.uk

Contact details also available via the CRI website: <http://www.cri.org.uk/>

National support services

Addaction

One of the UK's largest specialist drug and alcohol treatment charities:
<http://www.addaction.org.uk/>

ADFAM

Offers information to families of drug and alcohol users, and the website has a database of local family support services: <http://www.adfam.org.uk/>

Childline

Free help and advice about a wide range of issues, talk to a counsellor online, send ChildLine an email or post on the message boards: www.childline.org.uk 0800 1111

Drinkaware

A charity which works to reduce alcohol misuse and harm in the UK: www.drinkaware.co.uk

Drinkline

A free and confidential helpline for anyone who is concerned about their own or someone else's drinking: 0300 123 1110 (9am - 8pm weekdays; 11am – 4pm weekends).

FRANK

Free confidential advice, information and help about drugs. Helpline open 24 hours a day. Calls are free. They can refer you onto local drug services and send out free literature: www.talktofrank.com

Tel: 0800 123 6600

NACOA

National Association for Children of Alcoholics. Information, advice and support to children of alcoholics, or anyone else concerned for a friend or relative's drinking.

<http://www.nacoa.org.uk/>

Tel: 0800 358 3456

NHS Smoking Helpline

Don't give up giving up. Friendly advice and support from a specialist advisor about giving up smoking: <http://www.nhs.uk/smokefree> Tel: 0300 123 1044

Smoke Free Policy- Eastbury Community School

Introduction

At Eastbury, we take seriously our duty to promote children and young people's wellbeing and their spiritual, moral, social and cultural development (Education and Inspection Act, 2006). We see our commitment to creating a smoke free environment and developing pupil's knowledge, attitudes and skills in decision making around smoking as part of our work on keeping children and young people safe around drugs and managing risk. Accordingly, this Policy compliments our school's Drug Policy.

Aim

To ensure a whole-school approach to tobacco in order to protect all members of the school community from the harms of second-hand smoke and to prevent the uptake of, and reduce the prevalence of, smoking across the school community.

Objectives

- ☐ To provide a smoke free school environment for the whole school community.
- To ensure that tobacco education is part of the school's progressive entitlement curriculum of drug education as delivered through Science and PSHE
- ☐ To ensure that all staff promote positive attitudes and behaviour in relation to creating and maintaining a smoke free environment and reducing the prevalence of smoking across the school community.
- ☐ To ensure that staff have the knowledge and understanding of policies, procedures and agreed practice to support the implementation of the Smoke Free Policy.
- ☐ To involve all staff, governors, pupils, parents/carers and members of the wider school community including outside agencies as appropriate, in the development of policy and practice in relation to tobacco.
- ☐ To support interventions that aim to prevent the uptake of smoking amongst pupils, staff, parents/carers and members of the wider school community.
- ☐ To ensure that pupils, staff and other members of the school community who smoke and wish to stop are signposted to the appropriate services.
- To ensure that the School's Smoke Free Policy is applied when children / young people are taken off site.

Rationale

All members of the school community have the right to learn and work in a smoke free environment.

Exposure to second hand smoke (passive smoking) increases the risk of lung cancer, heart disease and other illnesses. Exposure to role models who smoke also normalises smoking behaviour, which can have a significant negative impact on the delivery of the smoke-free message.

Smoking remains the largest preventable cause of death and illness in England, responsible for over 80,000 deaths per year. It kills half of all long term users. Two thirds of all new smokers in England are young people under the age of 18. Those who start smoking before the age of 16 are twice as likely to continue to smoke compared to those who begin later in life, and are more likely to be heavier smokers (Muller 2007). The earlier children become regular smokers, the greater their risk of developing life-threatening conditions, such as lung cancer or heart disease if they continue smoking into adulthood.

Smoke-free school sites and non-smoking staff provide positive role models for children and young people and contribute to the development of a health-promoting school (School Smoke Free Policy Template UK).

This includes the use of e-cigarettes (electronic cigarettes) due to the following reasons:

1. Some e-cigarettes look like normal cigarettes, and from a distance it would be difficult to differentiate the vapour they emit from cigarette smoke. There are potential regulatory issues around enforcing e-cigarette bans.
2. There are evidence based Nicotine Replacement Therapy products available on prescription if your staff member is trying to stop smoking or having difficulty with nicotine cravings during work hours.
3. Young people may be influenced by adults smoking e-cigarettes; for example, if youth workers or librarians start using e-cigarettes during their paid work time.

Providing a Smoke-Free Environment (Procedure)

- ☒ This Policy applies to pupils, staff, parents/carers, members of the public, contractors or others working / using the School premises or vehicles and all vehicles used to transport pupils.
- Smoking is not permitted in any part of the school's premises and grounds including the entrance area to the school, on land adjacent to the School building (e.g. car parks, garden areas, walkways, playgrounds, playing fields etc.) or on the school road crossing patrol areas. This Policy will apply equally to future premises at the construction stage of any new building and refurbishment or relocation project.
- ☒ There are no designated smoking areas provided within the School buildings or grounds.
- ☒ The Smoke Free Policy applies to all events / activities held in the School including before and after school sessions, any meetings organised which are attended by school employees as part of their work and/or visitors to such meetings/events.
- ☒ Suitable posters, displays and statutory no smoking signage will be displayed in school areas to create a positive visual message which supports a smoke-free working environment.
- ☒ Smoking is not permitted in any school owned/hired/leased vehicles, as well as private vehicles when used for carrying pupils or staff on school business. **Please note: this is a**

statutory requirement. Schools also have a duty to reinforce the smoking legislation on buses used for pupil transport.

- ☐ This Policy applies when pupils are taken off site on school excursions/ visits/trips. Staff and accompanying helpers will be reminded that smoking is not permitted when on duty / looking after pupils.

Smoking Prevention Activities (Procedure)

Pupils

- ☐ Pupils are not permitted to smoke when in uniform or when representing the School in any capacity. This includes all tobacco products and electronic (e) cigarettes.
- ☐ Employees are not permitted to smoke in the view of pupils. Employees who do smoke will be asked to ensure they cannot be seen smoking by pupils (even if it is off the school grounds).
- Tobacco education is part of the School's programme of drug education in Science and PSHE (including the health effects, legal, economic and social aspects of tobacco use). Tobacco education may also be delivered in other subjects to reinforce the work done in PSHE and Science.
- ☐ A range of age appropriate methodologies will be used to deliver tobacco education with the aim of preventing the uptake of smoking including E.g. discussion and drama strategies, use of new technologies, and where appropriate use of outside agencies.
- Parents/carers are encouraged and supported to be actively involved in their child's drug/tobacco education through information provided to parents and carers and through home /school activities.

Staff

- ☐ Training on drugs including tobacco is available for all teaching staff as appropriate as well as pastoral staff and those involved in smoking prevention work including: The Head teacher, Year Heads, school governors, pastoral staff.
- ☐ Training needs with regards drugs including tobacco will be reviewed at the time of policy review.

Other Related Policies /Guidance

Within the School this Policy is linked to/consistent with:

- ☐ Drug Education Policy
- ☐ PSHE Policy
- ☐ Health and Safety Policy
- ☐ Behaviour Policy
- ☐ Educational Visits Policy
- ☐ Confidentiality Policy
- ☐ Equality /Diversity Policy
- ☐ Staff Continuing Professional Development Policy
- ☐ Disciplinary Policy

Responding to smoking related incidents

The following procedures will apply when there is non-compliance with the Smoke Free Policy.

Staff

The Schools Disciplinary Procedure will be followed for members of staff who do not comply with the School's Smoke Free Policy.

The staff member will be offered support to help them stop smoking through linking them with appropriate support in the community.

Pupils

The following procedure will be followed for pupils in breach of the School's Smoke Free Policy:

The pupil(s) will be signposted to smoking cessation services either in school or the community and begin a programme of support. If they choose not to seek support, a letter will be sent to parents/carers informing them of the support available and the sanction.

In the first instance, support must be offered to stop smoking as nicotine is highly addictive and research shows that children /young people and adults are more likely to stop smoking with support from a smoking cessation advisor. NRT is available on prescription for 12 years old and above and use of certain products can be agreed upon within the school, for example; lozenges but not gum.

Non staff members/school visitors

Staff are authorised to ask non-employees who breach the Policy to adhere to the Policy.

Assistance for those who smoke

Local Stop Smoking Services are available to staff, parents/carers and pupils who would like to stop smoking (*please note: this service should **not** be seen as a disciplinary action*).

London Borough of Barking and Dagenham (LBBB) Specialist Stop Smoking Service (SSS)

The LBBB SSS offers both face to face and telephone support to smokers who:-

- ☐ would like to stop smoking and receive support from the service
- ☐ live, work, or are registered with a GP in Barking or Dagenham
- ☐ are a current smoker of a tobacco product
- ☐ are aged 12 years or over

LBBB SSS Self Service Referral

Residents can self-refer into the service by calling 020 8724 8018 or emailing: stopsmoking@lbbd.gov.uk

The LBBB SSS offers a twelve-week programme that will be focused on pregnant women, and on people with mental health conditions and learning disabilities.

For smokers that live outside of the borough of Barking and Dagenham and do not meet the above criteria for the LBBB SSS please go to www.nhs.uk/smokefree to find your local stop smoking service.

- ☒ Pupils in the first instance, should access services through the school nursing service or their GP Practice, or by contacting the LBBB Specialist Stop Smoking Service.
- The School will promote these services regularly within the school and through parents' /carer's newsletters/ website etc.

Monitoring and Evaluation

The Policy will be reviewed and developed in consultation with the whole school community. It will be widely publicised (staff induction, staff appointment contracts, handbook, website, notice boards, prospectus, promoted) and will be included in contracts for those hiring the use of the School premises.

The Policy will be monitored by the Head teacher to ensure compliance and its successful implementation. The Policy will be reviewed every 3 years and ratified by the Governing Body.

References

Developed by School Improvement Services and Public Health August 2010. Based on Kick Ash Smoke Free Policy

DiFranza JR, Wellman RJ, Sargent JD et al. (2006) Tobacco Promotion and the initiation of tobacco use: assessing the evidence for causality. *Pediatrics* 117 (6): e1237-48

Fuller E (Editor) 2007. Smoking, drinking and drug use among young people in England, 2006. London: Information Centre for Health and Social Care

Goddard E (1990). Why children start smoking. London: Office for Population, Censuses and Surveys and Department of Health

Muller T (2007). Breaking the cycle of children's exposure to tobacco smoke. London: British Medical Association

NICE Public Health Guidance 23 (2010): School-based interventions to prevent the uptake of smoking among children and young people.