Drug, Alcohol, Nicotine and Vaping Policy

Brackenfield SEND School

Policy Owner	**Sophie Evitts**
Role	**Head of Site**
Date issued	November 2026
Chair of Governors Signature	
Date and Minute Number	16th Nov 2026 - 2058

This policy is based on Derbyshire County Council's January 2026 example Drug & Alcohol Education and Incident Management Policy and has been updated for KCSIE 2026.

Review date	Reviewed by	Changes	Approval
November 2026	Sophie Evitts	Full rewrite using Derbyshire January 2026 model. Updated KCSIE 2026, RSHE, vaping and nicotine products, safeguarding-first incident response, SEND adjustments, exploitation, medical response, referral and recording arrangements.	
November 2027	Policy owner	Annual review or earlier following statutory, local or school change.	

Contents

.....1
1. Purpose and principles 3
Policy objectives.....3
2. Scope and definitions 3
Definition of a drug or substance 3
3. Roles and responsibilities.....3
4. Whole-school education and prevention 4
Curriculum principles.....4
Approaches the school will avoid.....4
External contributors 5
5. SEND, communication and reasonable adjustments 5
6. Vulnerability, early help and targeted support 5
Support routes.....5
7. Recognising safeguarding and exploitation concerns 6
8. Responding to an incident 6
Immediate response.....6
Safeguarding-first decision framework.....6
9. Searching and confiscation 7
Taking temporary possession of a suspected controlled or harmful substance 7
Alcohol, tobacco, vapes and nicotine products.....7
10. Vaping and nicotine 7
11. Parents and carers 8
Parent or carer under the influence 8
12. Police and multi-agency involvement 8
13. Behaviour, support and reintegration 8
14. Recording and information sharing.....8
15. Monitoring, evaluation and review 9
16. Related policies and reference points 9
Appendix 1: Incident response checklist example.....9
Appendix 2: Emergency information to gather 10

1. Purpose and principles

This policy sets out Brackenfield SEND School's approach to drug, alcohol, nicotine and vaping education, prevention, support and incident management. It aims to protect pupils from harm, challenge myths and misinformation, reduce risk-taking, support informed choices, provide targeted early help and maintain a safe, inclusive and healthy school environment.

Substance-related concerns will be treated as both a safeguarding and behaviour matter. The first response will always be child-centred, proportionate and focused on immediate safety.

The school will consider the pupil's age, developmental stage, SEND, communication method, sensory profile, health needs, previous experiences, vulnerability, capacity to understand, potential exploitation and the views and wishes of the pupil.

Policy objectives

- Deliver accurate, developmentally appropriate and accessible education.
- Prevent and reduce harm associated with drugs, alcohol, tobacco, vaping and nicotine products.
- Identify emerging concerns early and provide support before problems escalate.
- Respond consistently, safely and proportionately to incidents.
- Recognise substance use or supply as a potential indicator of abuse, neglect, child criminal exploitation or wider vulnerability.
- Work effectively with parents, Derbyshire CGL, Space 4 U, Public Health, the police, health services and social care.

2. Scope and definitions

This policy applies on both school sites, during school transport and journeys linked to school, educational visits and residentials, work experience, off-site provision, online activity connected with school, and any circumstance in which a pupil is identifiable as a member of Brackenfield SEND School.

Definition of a drug or substance

For this policy, "drug" or "substance" includes:

- Illegal drugs, including cannabis, cocaine, MDMA, amphetamines and synthetic cannabinoids.
- Alcohol.
- Tobacco, cigarettes and smoking products.
- Vapes and electronic cigarettes, including disposable and refillable devices and associated liquids.
- Nicotine products, including nicotine pouches.
- Volatile substances, including aerosols, solvents and gases.
- Medicines used without authorisation or contrary to the school's medication procedures.
- New psychoactive substances, unknown powders, tablets, liquids or other unauthorised substances.
- Caffeine or energy products where use creates a health, behaviour or safeguarding concern.
- Drug-related paraphernalia or equipment.

The school does not need to identify a substance before acting to protect a pupil. Unknown or suspected substances will be treated cautiously and escalated for medical or police advice where appropriate.

3. Roles and responsibilities

Role	Responsibility
Governing Body	Approves the policy, assures itself that statutory duties are met, and receives appropriate information about

Role	Responsibility
	implementation, themes and impact.
Executive Headteacher	Ensures policy implementation, resources, training, partnership working and proportionate decision-making.
Head of Site/ Deputy Headteacher / DSL	Leads safeguarding responses, coordinates referrals and multi-agency work, advises on parent contact and oversees safeguarding records.
Behaviour Lead	Ensures behaviour responses are consistent, proportionate and aligned with safeguarding and support.
Personal Development Lead	Ensures a sequenced and accessible curriculum, evaluates impact and coordinates external contributors.
All staff	Recognise concerns, respond to immediate risk, preserve evidence safely, report promptly and record accurately.
Pupils	Follow school rules, engage in learning and seek help for themselves or others where able.
Parents and carers	Support safe choices, share relevant information and work with school and services to reduce harm.

4. Whole-school education and prevention

Brackenfield will use a whole-school approach consistent with Derbyshire's Coriell framework. Education will be planned through PSHE/RSHE, health and wellbeing learning and relevant wider-curriculum opportunities.

Curriculum principles

- A sequenced, spiral curriculum that revisits learning at increasing depth.
- Content matched to pupils' developmental stage, communication and understanding, not chronological age alone.
- Accurate learning about medicines, alcohol, tobacco, vaping, nicotine, illegal drugs, risk, law, peer influence, exploitation and help-seeking.
- Safe-classroom practice with clear ground rules, distancing techniques and signposting.
- Interactive learning that develops decision-making, communication, refusal, problem-solving and help-seeking skills.
- Approaches that challenge myths without normalising substance use.
- Pupil voice and accessible evaluation used to improve provision.

Approaches the school will avoid

- Scare tactics, fear-based approaches or shocking imagery used without educational purpose.
- Using a person's recovery story as the intervention in itself.
- Knowledge-only delivery without skills, context or support.

- One-off events that are not linked to planned curriculum learning.
- Messages that stigmatise pupils, families or people experiencing dependence.

External contributors

External contributors supplement rather than replace the planned curriculum. All contributors must be approved and managed under the school's Frequent Visitors, Students and External Speakers Policy. Content, resources, safeguarding arrangements, learning outcomes and follow-up must be agreed in advance. Staff remain present and responsible for pupils throughout.

5. SEND, communication and reasonable adjustments

Staff will make reasonable adjustments during education, discussion, investigation and support. Adjustments may include:

- Using the pupil's established communication system, symbols, objects, visuals, signing, AAC or plain language.
- Allowing additional processing time and checking understanding without leading questions.
- Considering sensory, medical, physical, cognitive and regulation needs.
- Using a trusted adult where this supports communication and safety.
- Avoiding assumptions that silence, repetition, distressed behaviour or apparent non-cooperation is a deliberate refusal.
- Recording the adjustments made and the pupil's views, wishes and communication accurately.

A pupil's disability or communication need must never reduce the safeguarding response. It should improve how the response is adapted and delivered.

6. Vulnerability, early help and targeted support

Some pupils may be more vulnerable because of exploitation, family substance misuse, trauma, mental ill health, homelessness, care experience, exclusion, offending, transition, learning disability or developmental delay. Staff will consider whether the concern indicates unmet need, abuse, neglect or exploitation.

Support routes

Need	Possible response
Pupil using substances or wanting to reduce/stop	DSL-led assessment; Derbyshire CGL discussion or referral with the young person's voluntary consent where appropriate; health input; pastoral plan; harm-reduction support.
Pupil affected by another person's substance misuse	Safeguarding assessment; Space 4 U or other family support; early help or social care where thresholds are met.
Immediate or significant harm	999 or urgent medical help; DSL; police or social care referral; parent/carer contact where safe.
Emerging or lower-level concern	Early help, school nursing/public health, targeted education, parent work, review and monitoring.

Consent should normally be sought for voluntary treatment or support referrals. This does not prevent proportionate information sharing without consent where necessary to safeguard a child or another person.

7. Recognising safeguarding and exploitation concerns

Possession, use or supply may indicate grooming, coercion, criminal exploitation, debt, trafficking or abuse. Staff must report indicators such as:

- Carrying, storing or delivering substances for another person.
- Unexplained money, devices, travel, gifts, clothing or changes in peer group.
- Threats, intimidation, violence, sexual harm, debt or pressure linked to substances.
- Repeated missing episodes, unexplained travel or links to unfamiliar adults or locations.
- Use of victim-blaming language or accounts that suggest the pupil is "choosing" exploitation.

The DSL will consider child criminal exploitation, county lines, contextual safeguarding, risk outside the home and the need for referral or multi-agency planning. Records must use language that reflects coercion and lack of control rather than blaming the pupil.

8. Responding to an incident

Order of response: immediate medical safety → safeguarding risk → preserve evidence → inform DSL/SLT → parent/carer decision → police/agency advice → support and behaviour response → recording and review.

Immediate response

1. Stay calm, reduce access to danger and protect the pupil and others.
2. If intoxication, poisoning or overdose is suspected, seek first-aid support immediately and call 999 where indicated. Do not leave the pupil alone.
3. Do not induce vomiting or give food, drink or medicine unless advised by a healthcare professional.
4. Retain packaging, containers or information about the substance where safe to do so.
5. Notify the DSL or senior leader promptly.
6. Consider whether other pupils may have used, received or accessed the substance.
7. Inform parents or carers as soon as safe and appropriate, unless this may increase risk or conflict with police or social-care advice.
8. Record the incident and all decisions on My Concern before the end of the working day, or as soon as practicable after an emergency.

Safeguarding-first decision framework

Question	What staff must consider
Medical risk	What was taken, how much, when, route of use, current symptoms, known conditions, medication and emergency advice.
Safeguarding risk	Abuse, neglect, self-harm, exploitation, coercion, family circumstances, missing episodes and risk outside the home.
Risk to others	Supply, contamination, access by other pupils, weapons, threats, group involvement and site safety.
Support need	Communication, dependence, mental health, learning needs, family support, early help and specialist referral.

Question	What staff must consider
Behaviour response	Intent, understanding, vulnerability, impact, previous incidents, reasonable adjustments and proportionality.

9. Searching and confiscation

All searches must follow the school's Searching, Screening and Confiscation Policy and current DfE guidance. Staff must not improvise a search or exceed their authority.

- Only the Executive Headteacher or an authorised member of staff may conduct a search.
- The pupil's welfare, dignity, communication and SEND must be considered before, during and after the search.
- Staff must never conduct a strip search.
- Parents or carers will be informed in accordance with the searching policy, unless this creates a safeguarding risk or conflicts with police advice.
- Searches, items found, witnesses, decisions, disposal and follow-up must be recorded.

Taking temporary possession of a suspected controlled or harmful substance

9. Do not taste, smell, test or unnecessarily handle the substance. Use gloves and follow health and safety advice where available.
10. Have a second member of staff witness the process.
11. Place the substance or item in suitable sealed packaging without contaminating or altering it.
12. Label the package with date, time, location, pupil, item description and names of staff present.
13. Store it in a locked safe or secure container with access limited to authorised senior staff.
14. Contact the police for advice and collection where a controlled drug, illegal substance, weapon, evidence or significant harm is suspected.
15. Maintain a clear record of every transfer or access to the item.
16. Do not return a suspected illegal or harmful item to a pupil or parent.

Alcohol, tobacco, vapes and nicotine products

These items are prohibited for pupils. Items will be confiscated, recorded, stored and disposed of appropriately under the Behaviour Policy, DfE confiscation guidance, manufacturer safety information and any police or Trading Standards advice. Vapes must not be dismantled, punctured, crushed or placed in ordinary waste where batteries or unknown liquids may present a risk.

10. Vaping and nicotine

The school is a smoke-free and vape-free environment. Possession, use, supply or promotion of tobacco, vapes, vape liquids, nicotine pouches or other nicotine products by pupils is prohibited.

- A vape or nicotine incident will prompt consideration of health risk, dependence, peer pressure, exploitation, illegal supply and access by other pupils.
- Unknown, illicit, modified or contaminated vapes will be treated as a heightened health and safeguarding concern.
- The response may include confiscation, parent/carer contact, accessible education, pastoral support, school nursing or specialist support, proportionate behaviour action and referral where required.
- Support for dependence and harm reduction will sit alongside consequences rather than being replaced by them.

11. Parents and carers

Parents and carers will normally be informed and involved promptly. The school will explain the concern, action taken, support available and any next steps. Where contacting a parent or carer may place the pupil at increased risk, the DSL will follow safeguarding procedures and seek advice before contact.

Parent or carer under the influence

If a parent or carer appears under the influence on school premises, staff will prioritise safety, seek senior support and ask the person to leave where appropriate. If the person intends to drive or remove a child and staff believe the child or others may be at risk, the school will contact the police and follow safeguarding procedures. Staff must not use physical force to prevent departure unless lawfully necessary to prevent immediate harm.

12. Police and multi-agency involvement

Police involvement will be based on risk, suspected offence, evidence, immediate safety and current NPCC guidance. Police will be contacted immediately for emergencies, weapons, serious violence, significant supply, suspected exploitation, serious criminality or where urgent advice is needed. For non-emergencies, 101 or local police advice may be used.

Any planned police operation on a school site requires Executive Headteacher oversight, safeguarding and communication planning, and coordination with Derbyshire Constabulary and relevant local procedures. The school does not routinely use drug-detection dogs. Any exceptional proposal would require a documented safeguarding and equality impact assessment and consultation with the police and local authority.

13. Behaviour, support and reintegration

Each case will be considered individually. A behaviour consequence does not replace safeguarding assessment or support. Responses may include:

- Restorative or educational work.
- Targeted PSHE/RSHE or brief intervention.
- Pastoral, health or therapeutic support.
- Parent/carer work.
- Early Help, Derbyshire CGL, Space 4 U, school nursing, social care or police involvement.
- Risk assessment, safety planning and review.
- Proportionate action under the Behaviour Policy, suspension or permanent exclusion only where lawful, justified and after relevant safeguarding and SEND factors are considered.

14. Recording and information sharing

All drug, alcohol, nicotine and vaping incidents must be recorded on MyConcern. The record should include:

- Date, time, location and people involved.
- What was observed, reported, found or disclosed, using the pupil's own words where possible.
- Immediate health and safety action.
- Description and handling of any substance or item.
- Search or confiscation details and witnesses.
- Safeguarding and exploitation considerations.
- Reasonable adjustments and communication support.
- Parent/carer contact or rationale for delay.
- Police, health, social care or service advice.
- Behaviour response, support plan, referrals, outcome and review date.

Information will be shared lawfully, proportionately and on a need-to-know basis. Safeguarding information may be shared without consent where necessary to protect a child or another person.

15. Monitoring, evaluation and review

Senior leaders will monitor implementation with the DSL, Behaviour Lead and Personal Development Lead. Governors will receive anonymised assurance on curriculum delivery, staff training, incident themes, safeguarding response, referrals, repeat concerns and impact of support.

This policy will be reviewed annually and sooner following changes to KCSIE, Derbyshire guidance, RSHE guidance, searching and confiscation guidance, local services, legislation or school practice.

16. Related policies and reference points

- Keeping Children Safe in Education 2026.
- Derbyshire County Council January 2026 example Drug & Alcohol Education and Incident Management Policy and current Coriell guidance.
- DfE Relationships Education, Relationships and Sex Education and Health Education statutory guidance.
- DfE Searching, Screening and Confiscation guidance.
- DfE Behaviour in Schools guidance.
- NPCC When to Call the Police guidance.
- Derby and Derbyshire Safeguarding Children Partnership procedures.
- School Child Protection and Safeguarding Policy.
- School Behaviour Policy.
- School Searching, Screening and Confiscation Policy.
- School Online Safety Policy and Acceptable Use arrangements.
- School Frequent Visitors, Students and External Speakers Policy.
- School Supporting Pupils with Medical Conditions and Medicines Policy.

Appendix 1: Incident response checklist example

Step	Completed / details
1. Immediate safety and first aid; 999 if required	
2. Notify DSL / senior leader	
3. Identify and isolate immediate risk to others	
4. Preserve packaging, item or evidence safely	
5. Consider exploitation, abuse, self-harm and risk outside the home	
6. Make SEND and communication adjustments	
7. Decide parent/carer contact with DSL	

Step	Completed / details
8. Seek police, health or agency advice where required	
9. Record fully on MyConcern	
10. Agree support, behaviour response and review date	

Appendix 2: Emergency information to gather

- What is believed to have been taken or used?
- How much and by what route?
- When did use occur?
- What symptoms are present?
- Are there known allergies, medical conditions or prescribed medicines?
- Is packaging, a device or the substance available for paramedics?
- Could anyone else have accessed the substance?
- Is there any indication of coercion, supply, debt or exploitation?

In an emergency, do not delay calling 999 while trying to obtain every detail.