



Young Peoples Pathway

Drugs Policy

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Young Persons Guide

Staff Guide

Acknowledgement

This policy draws on the 'Sample Drugs Policy' developed by Kevin Flemen/KFx. This is located at www.kfx.org.uk.

1. Purpose, Aims and Ethos

The aim of the Young People's Pathway is to work with young people in housing need. This includes those who currently use a range of legal and illegal drugs.

The Pathway neither condones nor approves or the possession, use or supply of illegal drugs.

However, the Pathway seeks to work with young people to promote their well-being and reduce harm. In order to do this it seeks to offer a service that is accessible to drug users, and will seek to avoid excluding drug using young people where possible.

While we wish to provide an accessible and inclusive service to people who use drugs, the Pathway also recognises that it has other duties and obligations including:

- To work within the law
- To provide a safe arena for all workers and volunteers
- To provide a safe arena for all customers including non users
- To work with and be sensitive to the local community.

2. Staff and the Drugs Policy

Staff are expected to work to the drugs policy. Where staff are unhappy with an aspect of the policy they should speak to their line manager. Failure to adhere to this policy will be treated as a serious disciplinary matter.

- All staff should, as part of their induction, have the drugs policy explained to them. They should be given a copy of the drugs policy.
- As part of the induction process, staff should 'sign off' to confirm that they have had the drugs policy explained to them.
- Security and agency staff should have the policy available to them while on shift. Wherever possible security and agency staff should receive an induction that familiarises them with the drugs policy.
- As soon as practical after starting staff should attend a drugs training course. Regular training courses should be held in house to refresh staff knowledge and ensure consistency in responding to situations.
- All staff should receive regular supervision; implementation of the drugs policy should be discussed in supervision and difficulties in delivering the drugs policy addressed.
- In some circumstances it may be necessary to take disciplinary action such as when there has been a serious failure to follow the drugs policy and related procedures.

3. Young People and the Drugs Policy

The Young People's Pathway works with young people who are in need of housing and support. The drugs policy is there to protect the rights and safety of all young people, staff, volunteers and members of the public. We support young people who use drugs and those who do not and we do not want customers to be barred or excluded.

Procedures

- All young people should have the organisation's drug rules explained to them when they start using the service. This needs to be done in a clear way accessible to the needs of the young person.
- Young people must also be given a copy of Appendix 1 in their induction pack be asked to sign it to say they have had the policy explained to them and that they understand it.
- Young people should be issued the Young Person's Guide and a copy displayed on the notice board.
- Posters outlining key points from the policy should be displayed around the building. These can be designed locally by the young people themselves.
- If young people wish to give feedback on the policy then they should be encouraged to do so via the feedback process.

4. Drugs Covered by the policy

The drugs policy covers many drugs, including:

- Illegal drugs
- Medicines, including controlled drugs
- New Psychoactive Substances.

The Law

Drug law is complex, and is covered in the *Misuse of Drug Act (1971)* and the *Misuse of Drugs Regulations (1985)*, the *Intoxicating Substances (Supply) Act 1985*, the *Medicines Act (1968)* and the *New Psychoactive Substances Act (2016)*. Other legislation such as the *Criminal Justice and Public Order Act (1994)*, the *Drug Trafficking Offences Act (1986)*, the *Crime and Disorder Act (1998)*, the *Antisocial Behaviour Act (2003)* and the *Drugs Act (2005)* and licensing laws all have an impact on drugs offences.

Procedures

- This policy is primarily concerned with controlled drugs illicitly held. This includes, but is not limited to: heroin, ecstasy, cocaine, LSD, cannabis, and

amphetamines. It also includes controlled drugs such as methadone or benzodiazepines held without prescription.

- The policy considers offences covered by The New Psychoactive Substances Act 2016
- This policy also addresses prescribed controlled drugs, prescription-only medicines and over the counter medicines where applicable.

5. The Premises

Staff will take action under the drugs policy when they have concerns about drug related activity both on and near the premises. This includes the entire building and the area around it.

Drug related activity in the neighbourhood around the building also needs to be addressed and must always take action when we become aware of such activity.

The Law

Section 8 of the *Misuse of Drugs Act (1971)* places obligations on managers of premises to prevent certain activities on those premises.

'Premises' refer to dispersed accommodation, hostels and night shelters, day centres and other settings such as drop ins. Any yards, gardens, front steps, adjoining alleys or out buildings are also defined as 'premises'. All areas within buildings, including individual resident's rooms should be treated as part of the premises.

The powers to close premises included in the *Antisocial Behaviour Act (2003)* can be triggered by antisocial behaviour associated with a property even if the activity is not taking place in the property. Hence it is important that the policy has regard for activity taking place near as well as on the premises.

Procedures

- While staff are on the premises, they will ensure that buildings and the surrounding areas are supervised effectively.
- 'Hot Spots' where supply or other activities could take place should be checked regularly, especially during evening hours as part of the routine building checks e.g. hourly or as part of the routine daily checking of CCTV
- All complaints from the public or other young people regarding drug related activity in the vicinity of the building should be logged, and the complaint should be looked into in line with the provider's complaints policy.
- If the investigation supports the complaints then appropriate action must be taken. (See STEP policy)
- We need to assume that our organisations could be held responsible for prohibited activities taking place in tenants flat whether they are in hostels on licences or individual assured short-hold tenancies.

- While we may not be legally responsible for what goes on off our premises we need to respond to local incidents.

6. Intoxication on the premises

People who wish to use any part of the service should be 'fit to participate' in that part of the service.

Young people who are behaving in a disruptive way whether due to drugs or not, will be challenged and asked to change their behaviour. If they refuse to do so they may be asked to leave communal areas or to leave the building.

Emergency services should be called if intoxication or related behaviour causes significant risk to any people affected including the user, staff, residents or the wider public.

Procedures

- When assessing an intoxicated person, the priorities are the safety of staff, other young people, the intoxicated person and the wider public.
- If staff have concerns about their own safety or the safety of other young people they should address this first and consider calling the emergency services.
- If there are serious concerns about the intoxicated person's safety then the emergency services should be called. It is not safe or acceptable to simply require significantly intoxicated young people to leave the premises as this brings risks both to the user and the wider public.
- If the situation is unclear but doesn't currently warrant emergency interventions, staff should try to contain the situation, keeping it calm. If the situation deteriorates, emergency services may be required. If the situation improves, or the person is less acutely intoxicated then fitness to participate can now be assessed.
- Where a young person appears to be intoxicated, but doesn't represent a significant risk to themselves or others, their fitness to participate should be assessed; this means looking at the level of intoxication and the intended activity.
- All such incidents should be recorded.

7. Use on Premises

Staff must not tolerate the use of any drugs on or near the premises that puts staff, volunteers or other young people at risk of harm or prosecution or causes distress.

Where staff know or suspect use is taking place they must always take some action. This could range from advice and support to enforcement action, which in some circumstances may include the police being involved.

Law

The young person is committing an offence by being in unlawful possession of a controlled drug. The organisation is not committing an offence even if they know or suspect that a young person is in possession of a controlled drug.

8. Use of Illegally held controlled drugs: cannabis and opium law

Where staff know that cannabis (or opium) are being smoked on the premises they are obliged, under the *MDA s.8d* to take steps to stop it happening. Failure to do so would be an offence under the Act.

Procedures

- Some action must always be taken and the guiding principle here should be that the action should be both reasonable and readily available.
- Staff are not obliged to act in a way that would put their own safety at risk.

The following steps should be initiated on discovering someone smoking cannabis in the building:

- The person should be challenged immediately, unless there are real concerns about personal safety. The behaviour should be challenged at the earliest available opportunity.
- The young person should be instructed to stop the activity immediately. If they do then the organisation's obligations under Section 8 MDA have been discharged.

Staff should proceed by:

- Ensuring staff are aware of the incident and are vigilant for reoccurrence.
- Warning the young person that future incidents will be dealt with more robustly, if this is the first incident.
- Reminding the young person that if they are still in illegal possession of controlled drugs this means that they are committing an offence under the *Misuse of Drugs Act (1971)*, and workers will highlight the legal risks that this carries for the young person.
- Ensuring that information about drugs and relevant support agencies is available to the young person, in order that they have the opportunity to look at reducing their drug use or reducing the risk of drug related harm as appropriate.
- Taking more robust action if this is a recurring problem through the STEP process including recording discussions, sanctions such as suspension of service elements for a period of time, written warnings, conditional notices, termination of tenancy, commencement of eviction procedures or police involvement as appropriate. The nature of action should be in consultation with team members, senior managers and other agencies as appropriate.

- All breaches of the drugs policy, responses initiated, and reasons for those responses should be recorded.

9. Use of other illegally-held Controlled Drugs

Example: Heroin, cocaine, ecstasy

Law

If a young person is known to be using illegally held controlled drugs (other than cannabis or opium) on the premises, the person in question is committing an offence of possession of controlled drugs under the *MDA*.

Organisations are not, however committing an offence under Section 8 of the *MDA* where it is known that drugs other than cannabis or opium are being used.

Organisations are still required to address their obligations under health and safety and their duty of care: they should also be conscious of their obligations to manage anti-social behaviour.

Procedures

Staff should ensure that information about drugs and relevant support agencies is available to the young person, in order that they have the opportunity to look at reducing their drug use or reducing the risk of drug related harm as appropriate.

Where the use is not presenting a risk to others, initial responses should be safety driven and include:

- Ensuring the safety of the worker encountering use
- Ensuring the safety of staff and other young people
- Ensuring the safety of the person using – for example to assess overdose risk or if they have injured themselves.

If there is a concern about the safety of wellbeing of the person using, or their behaviour puts others at risk, emergency services may need to be involved.

The use of drugs in a way that creates risk for the young person using, or their behaviour puts others at risk, emergency services may need to be involved.

The use of drugs in a way that creates risk for other young people cannot be tolerated. Examples of this include:

- Using in the presence of other people – e.g. in communal areas, shared rooms
- Discarding injecting equipment carelessly
- Leaving spilt blood

- Sharing equipment or paraphernalia.

Where use is taking place in communal areas staff should assess if it is safe to stop it there and then; if they feel it is safe to do so then they should request that the behaviour stops. If it is not possible to stop it at that point, then the safety and wellbeing of other residents should be considered.

Once the initial incident has been resolved, it should be made clear that the risk-taking behaviour must stop. Options may include increased vigilance, issuing warnings, or suspension of services as appropriate.

The action plan should be taken in consultation with other team members, senior managers or other agencies as appropriate.

Breaches of drugs policy, responses initiated and reasons for those responses should be recorded.

Where workers become aware of use taking place in private areas (e.g. young person's own room) staff should:

- Still ensure that the young person's actions are not putting others at risk, and
- Assess the young person's wellbeing and
- Reminding the young person that they are committing an offence under the Misuse of Drugs Act (1971), and highlighting the legal risks that this carries for the young person
- Highlighting the health and welfare implications of the drug use
- Reminding the young person that incidents that create risk for staff or other young people will not be tolerated.

Staff should ensure that information about drugs and relevant support agencies is available to the young person in order that they have the opportunity to look at reducing their drug use or reducing the risk of drug related harm as appropriate.

10. Home Visits by Staff

Where staff are visiting customers in dispersed properties support must only be carried out if the young person is 'fit to participate' and this includes:

- The young person not being intoxicated
- The young person not having visitors during a support visit unless agreed with the support worker
- The young person not using any substances during the visit
- The property being safe for visits to take place without anything dangerous being around like used equipment.

Law - Support providers who are also the landlord

Where the home visits are made by organisations who are also the landlords, the visiting staff members are to an extent 'concerned in the management' of the property. Where staff become aware that a property is being used for production or supply, there may be an offence under Section 8 of the *MDA*.

This will require the organisation to take action to prevent production or supply continuing.

Where use is taking place on site – even during a visit – the worker would not be committing a criminal offence by remaining present (unless cannabis was involved). Staff should not continue with a visit if use is taking place.

Floating support

If staff who are providing floating support they should report any of the following to the landlord:

- Serious section 8 offences which bring a realistic risk of prosecution
- Serious offending
- Behaviour likely to cause significant risk to people on the premises or neighbours
- Serious antisocial behaviour.

Procedures

- Solo home visits should not take place until a full risk assessment has taken place
- Prior to solo visits, the expectations relating to home visits should have been discussed with the young person
- If on arrival or at any point during a visit, the staff member feels that it is unsafe or inappropriate to continue the visit, they should leave as soon as practical
- If the staff member is concerned about the safety or wellbeing of the young person or other people in the property the staff member should contact emergency services when it is safe and practical to do so
- Staff should not put themselves at risk during a support visit and should err on the side of caution
- If use is taking place the staff member should leave immediately.

Supply and production

- Staff should not remain in a property if they are aware that production or supply of controlled drugs is taking place

- Staff should only challenge this behaviour if they feel that it is safe and appropriate to do so; it's usually going to be better to leave
- Further action will need to be taken to prevent the production or supply which may include warning letters, joint working with landlords, enforcement action, police involvement, eviction.

11. Finding Drugs

Drugs that are left unattended are a risk to others—even if they are prescribed medicines. Providers are obliged, under their duty of care to customers, staff and visitors, address this risk and so if staff find any substances unattended in communal or shared areas, they must to remove them.

The Law

Staff can take possession of a controlled drug for the purposes of destroying it or to deliver it to someone authorised to possess it (e.g. the police). If staff take possession for any other reason they would be committing an offence of possession and possibly intent to supply.

Procedures - Illegal drugs found in communal or shared areas.

- These should be removed from the communal area, a record made and taken to the police for destruction.
- Young people involved should be challenged as per possession procedure.

Illegal drugs found in private areas (e.g. bedrooms)

It is not acceptable to search people, their personal possessions or rooms for drugs however during routine Health and Safety Checks staff may observe suspected drugs. If residents keep drugs in their rooms, they commit the offence of possession rather than the provider.

- Where a young person has moved out, staff should act as if the drug were in a communal area, as described above.

If the young person is expected to return, the following processes could be used:

- Where quantities of drug or packaging suggest supply may be taking place, the police should be involved immediately
- The drugs on view should be removed and the room should be secured, to ensure other young people are not put at risk. On their return, the young person should be reminded of the policy and the reasons for the policy and invite them to surrender any other drugs they may have on the premises for staff to hand to the police. Any drugs removed should be handed to the police.
- Once the young person is back in the building, the resident can be treated as described in the section on possession

- All actions should be recorded.

12. Disposal

Staff can take possession of non-prescribed controlled drugs and other substances for the purpose of handing them to the police.

Law

Though the Law states a controlled drug may be considered destroyed for the purposes of regulation 26 of the *Misuse of Drugs Regulations (1985)* if it has been:

'dissipated or denatured to the extent that it is incapable of being retrieved, reconstituted and used and it is the responsibility of the person carrying out the destruction to ensure this criteria is met.'

For the purposes of this policy all drugs found must be handed to the police by staff and not destroyed in-house.

Procedures

- On finding substances, a written description of what has been found should be made and ideally witnessed if possible by another member of staff
- The staff member finding the drug should not pass it on to another staff member and take it to the police themselves. If this is not possible log the action taken to taken hand the drug to police.
- A record should be kept of the incident.
- When drugs are to be taken to the police for destruction the police should be informed that a staff member is coming to the police station prior to setting off
- Police liaison should be agreed allowing the delivery of controlled drugs to the police on a 'no questions asked' basis.
- If the substance is, or appears to be, a medicine it should be handed in to a pharmacist and a written record of this kept

Large quantities: Where the quantity of drugs found suggests supply may be taking place, the police should be involved immediately. If possible the drugs should not be touched or moved and the police called to the premises.

13. Finding Drugs Paraphernalia

The possession of drugs paraphernalia such as scales, cannabis/crack pipes, or bongs is not illegal but may suggest other illegal activity – including those covered by Section 8 of the *MDA*. Where this, or risk is created by the paraphernalia, further action will need to be taken.

Law

There is no law against possessing drugs paraphernalia however if it has traces of drugs on it, it can result in charges of possession of a controlled drug.

The presence of some paraphernalia – such as that which indicates supply of drugs or smoking of cannabis is taking place, would equate with ‘knowingly’ under Section 8 of the *MDA* and so further action would be required.

Procedures

- Staff should remove paraphernalia if it has been associated with drug use if it is on full view and the young person informed
- If an item suggests supply is taking place, workers should lock the room and decide if Police action is warranted. If it does the Police should be called
- If Police involvement is not required, the resident should be challenged and enforcement action taken when it is safe and appropriate to do so
- If the paraphernalia indicates another section 8 offence such as smoking cannabis, then the room should be sealed if possible and enforcement action taken if the young person is absent when they return to the building
- If the paraphernalia represents a significant risk it will need to be removed and should not generally be returned to the young person
- If in other circumstances when paraphernalia is found, but it is not associated with significant risk or a section 8 offence, a more measured approach can be taken including education and awareness raising and sanctions if required.

14. Possession

We do not condone people bringing illicit drugs into the building. Where we know or suspect that this is happening we will discuss the matter with the young person and may take further action, especially if they are putting other young people or staff at risk or distress.

Law

The young person is committing an offence by being in unlawful possession of a controlled drug. The organisation is not committing an offence even if they know or suspect that a young person is in possession of a controlled drug.

Procedures

These stages apply if drugs are found at a time when the customer is present. If they are found when the young person is absent see section 10 on finding drugs.

- The worker will assess the situation from a risk perspective and act based on this assessment. It is not acceptable to search people, their personal possessions or rooms for drugs. The police can be called if a search is required.

- If a young person is known or believed to be in possession of controlled drugs they will be reminded that this means they are committing an offence under the *Misuse of Drugs Act (1971)* and the legal risks will be highlighted
- The young person should be given the opportunity to surrender or dispose of the drugs themselves if they wish
- Workers will ensure that information about drugs and relevant support agencies is made available to the young person, in order that they have the opportunity to look at reducing their drug use or reducing the risk of drug related harm as appropriate
- If the quantity or other factors suggest supplying—see section on supply
- All actions should be recorded.

15. Supply of Controlled Drugs and NPS's

The supply of controlled drugs will not be tolerated on the premises. Supply on site creates a serious risk for young people and staff and is something that we must take action to stop. We will always act where we know or suspect that supply is taking place.

Examples of supply are a young person giving someone some methadone, two people sharing a cannabis cigarette, a young person selling drugs, one person injecting another with heroin.

Law

The supply of controlled drugs and NPS's on the premises can have serious consequences for both the young people concerned and organisations. The young person is committing an offence of supply which could carry heavy penalties on conviction. Where staff are aware that supply is taking place we are obliged to take reasonable steps readily available to them to stop this supply taking place. If staff fail to do so they may be committing an offence under S.8 of the MDA for controlled drugs. However, as staff cannot be sure an NPS is not a controlled drug then the same approach applies.

Procedures

- When staff know that supply is taking place, they should take steps to prevent it there and then if it is safe to do so at that moment
- If it is not safe to do so, a record of the incident should be made, and an intervention made when it is safe to do so
- Depending on the context, gravity and history an initial response may be to instruct the person to stop, reminding them of the drugs policy and the legal risks that they are taking
- Such a step, if successful, would discharge staff responsibility under Section 8 of the MDA. However, workers should be vigilant to ensure that the

measure taken has been effective and that there is no reoccurrence of the supply

- If these measures were ineffective or the incident was more serious, further steps would need to be taken, such as requiring the person to stop and move off the premises. However, if this step is ineffective staff will have to take further steps to fulfil our obligations under Section 8. This may include measures such as evicting the person or giving notice to quit
- If the incident involves a significant level of supply, or it has been a recurring issue, police involvement is required
- Records should be kept at each stage documenting what measures have been taken and the outcome.

16. Suspicion of Supply – Third Party Information

Procedures

- Acknowledge the information and ensure that it is recorded in appropriate places
- Advise the informant that the information will be looked into
- Discuss matters raised with other workers, identify if they share concerns
- Ensure that staff apply a high level of vigilance
- Discuss the matter with the accused, in a non-confrontational manner, to establish facts
- If these steps support the accusation, then further action will need to be taken, as described in the supply section
- If there is no corroborating information, staff should log the steps taken in looking in to the accusation, that there was no evidence to support it and record any further action taken, such as warnings given
- Where the informant subsequently asks why nothing was done they should not be given additional information but advised that the matter was looked into and you will always look into such matters when brought to your attention
- All information and actions should be recorded.

Staff Suspicions

Where no information is received from third parties, but staff are suspicious of behaviour, a similar set of steps could be followed, including challenging, discussing with colleagues, increased vigilance and where appropriate, checking rooms. Staff must act on every episode where there is suspicion that supply is taking place. There is a risk otherwise that workers could be accused of colluding to supply taking place.

17. Use of Other Substances - Examples: solvents, amyl and butyl nitrites, caffeine, betel, New Psychoactive Substances

Law

These and other substances are not covered under the Misuse of Drugs Act, but some are covered under other Legislation. The possession or use of these drugs does not constitute an offence. The supply of some of these drugs is an offence, but, as the drugs are not controlled under the MDA, they do not fall under S8 of the MDA.

1. Policy

The use of these drugs is not allowed in shared or communal areas, unless in socially accepted forms such as tea, coffee, chocolate etc. This is to prevent exposure of nonusers to these drugs, to reduce distress to other customers and to encourage consistency in the treatment of drug users where possible. Where they are being used elsewhere, for example in the customers own room, staff will always take some action, and initiate some response.

2. Procedures:

- a) Where the use is not presenting a risk to others, responses could include:
 - i. Highlighting the health and welfare implications of the drug use,
 - ii. Reminding the customer that incidents that create risk for staff or other customers will not be tolerated.
 - iii. Support Workers should ensure that information about drugs and relevant support agencies is available to the customer, in order that they have the opportunity to look at reducing their drug use or reducing the risk of drug-related harm as appropriate.
- b) The use of drugs in a way that creates risk for other customers cannot be tolerated, examples of this include:
 - i. Using in the presence of other people – e.g. in communal areas, dormitories, shared rooms,
 - ii. Sharing these substances with others; in the case of NPS this would constitute supply taking place which is an offence under The NPS Act 2016 and should be reported,
 - iii. Using flammable drugs in an unsafe way, such as while smoking.
- c) In such circumstances the risk-creating behaviour must stop. Options may include;
 - i. increased vigilance,
 - ii. issuing warnings,
 - iii. suspension of services as appropriate.
- d) The nature of the action should be taken in consultation with the line manager and other agencies as appropriate.
- e) Breaches of drug policy, responses initiated, and reasons for those responses should be recorded.

18. Prescribed Controlled Drugs and Medication

Where young people are in possession of controlled drugs that have been prescribed to them, no offences are being committed.

Procedures

- Young people should be encouraged to inform staff what drugs they have been prescribed
- With the young person's consent, workers should seek to work with prescribers and pharmacies to ensure young people are not prescribed large quantities of drugs at one time
- Prescribed drugs should be kept in their original packaging with labels left intact. Such medication should not be openly displayed, left unattended or given to others for safekeeping.

19. Storage of Prescribed Controlled Drugs

We cannot store prescribed controlled drugs on a young person's behalf. They are responsible for ensuring that their prescribed controlled drugs are safely and securely stored. Examples of prescribed controlled medicines are methadone or diazepam.

Law

If workers were to take possession of methadone or another controlled drug in order to store it for a young person, it is likely they would be committing an offence. The *MDA* makes it an offence to be in possession of a controlled drug unless you have legal authority to be in possession of it.

The only exceptions to this is if the member of staff has taken possession of it to take to the police, pharmacy or prescribing agency and if they do so they have to do as soon as possible after taking possession of it. The other exception is if a person authorised to have it in their possession was delivering it to the person who has it prescribed.

Procedures

- Staff should encourage young people to inform that they are bringing prescribed methadone or other controlled prescribed drugs into the building
- Staff should work with prescribers and pharmacies to ensure people are prescribed daily rather than receiving large weekly quantities
- Special provision should be agreed with pharmacies to prevent large quantities being dispensed over holiday periods.

20. Other Medicines

Staff should help and support young people to take responsibility for their own medication. If they find it difficult to manage they should be encouraged to discuss this with staff so they can take their medication safely.

While staff can legally store some medication it is not good practice and we should not do this and support the young person to be responsible for their own medicines and keep a record of any prescribed medicines, the prescribing instructions, and contact details for the prescriber.

21. Police Involvement

All providers working across the Young People's Pathway should maintain effective working relationships with the Police and ensure they support the Police in their work. Where possible protocols should be established with the local Police as to how to deal with drug related incidents.

Law

Police can search premises in a variety of circumstances, including;

- When they have the consent of the occupier
- When a warrant has been obtained
- Following an arrest, the Police are allowed to search premises the detained person occupies or has control over
- To capture an escaped prisoner
- To arrest someone for a public order offence or certain arrestable offences
- To protect life or to stop serious damage to property.

Other laws give Police specific powers to enter premises. Obstructing the Police or hampering a Police enquiry can result in prosecution.

Procedures

Staff will involve the Police in any incidents where Police assistance is required. The senior staff member on shift will assess such incidents as to whether they require 'fast' or 'slow' responses.

- 'Fast' response situations (e.g. serious violence) will mean dialling 999
- 'Slow' response situations (e.g. seeking assistance in disposing of drugs) can involve phoning the local station or the local non-emergency number such as 101.

Concerns about Police requests for information or other issues should be referred to senior management who will discuss matters with senior Police officers.



Drugs Policy - Induction

This organisation seeks to work with people who use drugs and those who do not. In order to do so, the organisation operates a drugs policy.

- The drugs policy should have been explained to you when you started using the service.
- You are always welcome to look at the policy, to discuss it with staff, and to see how it affects you.
- It is important to highlight the following rules:
 - We do not ignore the possession or use of illegally-held controlled drugs on the premises.
 - Where we know or suspect such possession or use is taking place, we will always take some action.
 - This may result in you being asked to leave services, especially where we are concerned that such possession or use puts other clients at risk.
 - We will not tolerate the supply of controlled drugs and NPS's (previously known as Legal Highs) on these premises.
 - If we know or suspect that you are involved in supplying drugs, we must prevent this happening.
 - This may involve you being barred from some or all of the premises and may mean we have to involve the police.
 - We do not want you to be barred or excluded, so please make sure that you understand the drugs policy, and follow the rules for your own safety and the safety of others.

I confirm that the Drugs Policy has been explained to me and I understand the contents.

Comments/questions/concerns raised at the time:

Signed _____ Date _____
Copy to young person and copy to file.