

Foróige's Tobacco, Alcohol and Drugs Policy and Guidelines (Updated 2019)

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Introduction

Youth organisations have an important role in guiding, informing and enabling young people to make healthy choices in relation to all areas of their personal and social development and in trying to prevent the onset of drug use.

Foróige's Tobacco, Alcohol and Drugs Policy and Guidelines provides relevant information and guidance to staff and volunteers to support young people with a view to preventing drug use and reduce drug related harm among all young people involved with Foróige.

Scope

This Policy outlines best practice in drug prevention and education and provides (i) detailed guidelines and procedures for staff and volunteers which they can use in responding to drug related incidents and (ii) guidelines related to prescription medication.

Policy

Foróige is committed to the development, health and well-being of all its members and of all those with whom we work through Foróige-operated Clubs, Services and Projects. Foróige recognises the unique contribution youth work services can make to responding to the many issues associated with tobacco, alcohol and drug misuse.

It is the policy of the Board of Foróige that, working within the context of the philosophy and purpose of the organisation, Staff and Volunteers will seek to prevent drug use and reduce drug-related harm among all young people involved in Foróige's work.

Foróige has a broad and holistic approach to prevention that focuses on facilitating activities and behaviours, which are likely to lead to healthy growth and development of young people.

Specifically Foróige will:

- **Engage** young people in health promoting activities and activities that build the strengths and competencies of young people.
- **Implement** primary and secondary drug prevention and education programmes where appropriate and possible.
- **Follow guidelines** for international best practice in drugs education.
- Where appropriate, **play a supportive role** in the treatment of drug misuse by complementing those services offered by health care professionals and others.

'A drug is any substance, which changes the way the body functions either mentally, physically socially or emotionally, including actions and behaviours' (Corrigan, 1996).

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Section 1: Best Practice in Drug Prevention and Education

This section includes information on best practice in drug prevention and education. It also looks at effective strategies in preventing drug and alcohol abuse and interventions that work with young people.

Substance use is a key issue that can affect young people as they grow up. Research says that providing information alone is not enough in drug prevention and education. Strengthening young people's protective factors and reducing their risk factors can help them to negotiate the challenges substance use problems present. Supporting young people by using motivational interviewing techniques, including experiential learning within programmes and young people having positive relationships with 'one good adult' ([My World Survey](#)) all contribute to changing attitudes of young people.

Good youth work itself can provide very positive experiences for young people, building resilience and enhancing their coping skills for the future. The education and pro-social skill development which underpins youth work is a significant protective factor in the context of drug misuse prevention.

Best Practice in Drug Prevention and Education

According to *Adolescents and Substance Use: The handbook for professionals working with young people* (James et al, 2014), drug prevention should have **two goals**:

- a) **Preventing adolescents from ever using substances in the first place**
- b) **Delaying the age of onset of drug use**

Foróige contributes to the above points through its broad and holistic approach to drug prevention and education that focuses on facilitating activities and behaviours which lead to the healthy growth and development of young people.

Foróige's Drug Prevention and Education programmes focus mainly on **primary prevention** (i.e. preventing the onset of drug use/experimentation, as outlined by Morgan (2001)).

While maintaining abstinence as the ultimate objective, in some cases it may be determined that this is not a realistic short-term goal. With the support of a line manager and Training, Learning and Development, the relevant staff member or volunteer can use the **secondary prevention** guidelines (i.e. preventing the escalation of drug use and/or reducing the harm associated with drug use). Secondary prevention approaches can be used with young people who are known or considered to be using drugs. Foróige's secondary prevention guidelines do not condone any drug use but allow the staff member or volunteer to acknowledge the drug use or potential misuse with the young person and then respond appropriately.

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Staff and volunteers must adhere to Foróige's Child Protection Guidelines. When Child Protection is in conflict with harm reduction it is the Child Protection Policy which is the primary policy. Any volunteer in Foróige who becomes aware of a child protection or welfare concern has a duty to act. Staff will support him/her in all aspects of responding to the situation, including helping the volunteer to report it to Tusla jointly with the staff member.

Drug Prevention

Youth work itself is a strong preventative factor in delaying young people's experimentation with substances and also develops their skills to reduce harm associated with substance misuse. Positive relationships are built up between staff, volunteers and young people. Individuals or groups of young people are provided with a safe environment where they can socialise, develop skills, and build strengths and competencies to make healthy lifestyle choices.

Drug Education

Drug education includes clarifying information, dispelling myths, challenging attitudes and providing factual information about tobacco, alcohol and drugs relevant to the age and developmental stage of the young people in the group. It should take into account the group's knowledge, attitudes, experience and their social environment. It's important to provide young people with a safe environment where they can discuss their opinions and attitudes about drugs, develop and enhance their life skills to deal with situations in the future and make decisions which will improve their overall health and well-being.

Foróige facilitates training in a number of Drug Prevention and Education Programmes including the following:

- Putting the Pieces Together
- Foróige's Brief Intervention Programme
- It's up to you

Other Drug Education Related Programmes Foróige is currently facilitating:

- Adolescent Community Reinforcement Approach (ACRA)
- Strengthening Families Programme
- Parents Plus

Please see the Drug Prevention and Education section on Foróige's [staff portal](#) or [volunteer portal](#) for more information.

Best Practice Guidelines for Staff and Volunteers working with young people

- Engage young people in health promoting activities and activities that build the strengths and competencies of young people.
- Implement primary and secondary drug prevention and education programmes where appropriate and possible.
- Inform parents about drug awareness programmes taking place. (Consent should be given for their child to participate in drug prevention and education programmes).
- Recap on the group agreement and draw specific attention to the boundaries of confidentiality and the staff/volunteers duty of care in relation to child protection procedures. It is important that young people understand that as facilitator you are required by law to report child protection concerns.
- Where appropriate, play a supportive role in the treatment of drug misuse by complementing those services offered by healthcare professionals and others.
- A non-judgemental approach is essential when having discussions around tobacco alcohol and drug use.
- Be realistic. Substance misuse is a complex problem with multiple causes. Drug education should be part of a wider health promotion programme.
- Start as early as possible. It is best to try to deliver drug education to young people before they are likely to begin experimenting.
- Know what to prioritise for the drug and alcohol education programme, set clear outcomes and objectives based on young people's needs.
- Ensure the programme is relevant. Take into account young people's age, knowledge, attitudes, experiences and environment. Consider young people's development and maturity.
- Use resources that are evidenced and research based.
- Focus on short term, preferably social consequences rather than long term effects when providing drug specific information.
- Monitor and evaluate drug prevention and education programmes. Identify areas that work well and areas that could be improved.
- Avoid 'once off talks' from guest speakers including former drug users.
- Foróige believes that compulsory drug testing of young people is not an appropriate course of action and does not support or encourage this practice.

Section 2: Guidelines for staff and volunteers on drug related situations

This section outlines:

- Expectations of staff and volunteers
- Guidelines on Managing of Drug Related Situations
- Procedures to be followed by staff and volunteers in responding to drug related incidents
- Procedures to be followed by staff and volunteers in dealing with a drug related incident involving a young person
- Guidelines on Tobacco Use
- The “Do’s and Don’ts” of Drug Education and Prevention

Expectations of staff and volunteers

What is expected of me as a staff member or volunteer?

- To read and adhere to Foróige’s Tobacco Alcohol and Drugs Policy
- To inform, supervise, and support young people in any instance of disclosure of drug use
- To ensure that you act as a positive role model for young people at all times, in all interactions and all experiences you share with them
- To discourage tobacco, alcohol and drug use
- To follow the guidelines when dealing with a drug related incident

More specifically, we expect staff and volunteers:

- To attend drug prevention and education training
- Not to smoke / vape in the presence of young people
- Not to consume, or be under the influence of alcohol or any illegal substances during their working/volunteering time
- Refrain from having conversations relating to their own (the adult’s) smoking or drinking habits
- To provide young people with a safe environment in which they can discuss their opinions and attitudes about drugs
- To develop and enhance young people’s life skills to deal with future situations and make decisions which will improve their overall health and well-being
- To discourage “smoke breaks” during programmes, even if young people are the legal age to smoke

Management of Drug Related Situations

Drug related situations may include, but are not limited to:

- Suspicion that a young person is under the influence of a drug at an inter-club event/club/project/trip away
- Young person is under the influence of alcohol or another substance at an inter-club event/club/project/trip away
- Young people found to be in possession of alcohol / empty alcohol container
- Discovering illegal drugs / drug-related litter on the premises / on the person / in the vicinity

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- Prescription medication misuse
- Disclosure of drug misuse (young person / parent / other organisation)
- Adults breaching guidelines
- Suspicion of drug related activity at club / project
- Disclosure of drug debt / intimidation
- Drug dealing / use outside the project / club premises
- Cigarette smoking / vaping / preparation of cigarettes on premises
- Allegation of drug related activity against young people

Assessing the Situation

It is important to establish the facts and assess the seriousness of the situation. Considering questions such as whether drug use is suspected or confirmed or whether the young person was pleasure seeking or in personal turmoil, will help you build a whole picture of the situation and plan the best possible response. Please see ***'Procedures to be followed by staff and volunteers in responding to drug related incidents'*** and ***'Procedures to be followed by staff and volunteers in dealing with a drug related incident involving a young person'*** further below.

Reporting a Drug Related Situation

It is important to keep a written record of any drug related situation. The information recorded on the [Drug Related Situation Report](#) Form (appendix 1) is confidential and should be stored in compliance with data protection guidelines.

The drug related situation should be reported to the relevant Foróige staff member or manager as soon as possible.

Involving Parents/Guardians

Parents will usually need to be involved when there has been a drug related situation involving their child. If you feel that a young person should be sent home, it is important to accompany them and support them through this situation. Alternatively, it might be appropriate to supervise the young person on the premises until a parent can come to collect the young person. When talking to parents/guardians about a drug related situation involving their child, it is important to handle the situation sensitively. If by reporting the drug related situation to parents you feel that the safety of the young person may be put at risk, please refer to Foróige's Child Protection Guidelines on the [staff portal](#) or the [volunteer portal](#)¹.

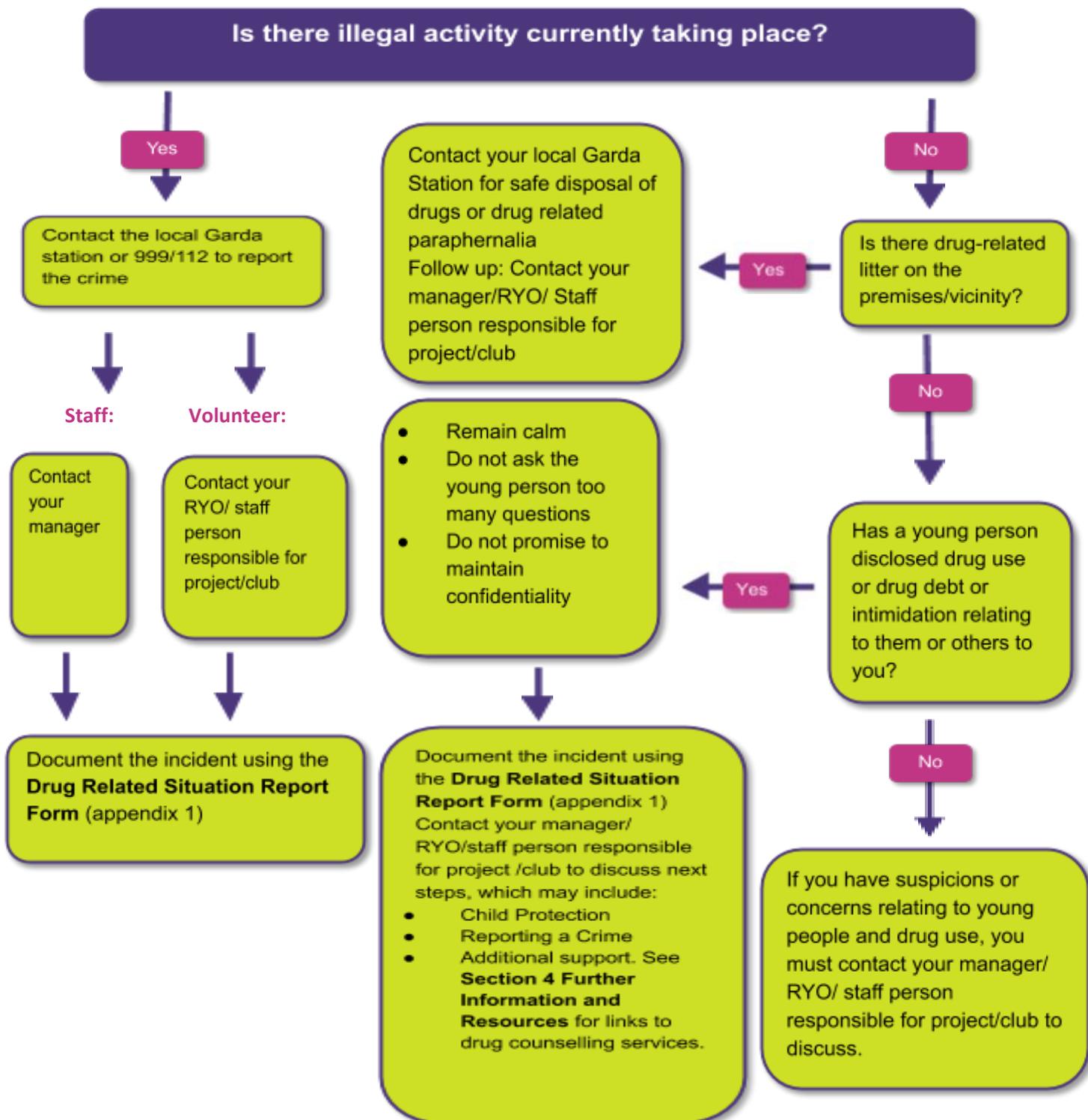
¹ It is the policy of the Board of Foróige that the organisation's staff and leaders take all reasonable care to seek to ensure that all young people involved in its services are protected from abuse of any kind.

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Procedures to be followed by staff and volunteers in responding to drug related incidents

Examples of drug related incidents:

- Drugs, or drug-related paraphernalia (i.e. needles) found on premises
- Drug dealing on the premises
- Disclosure of debt or intimidation

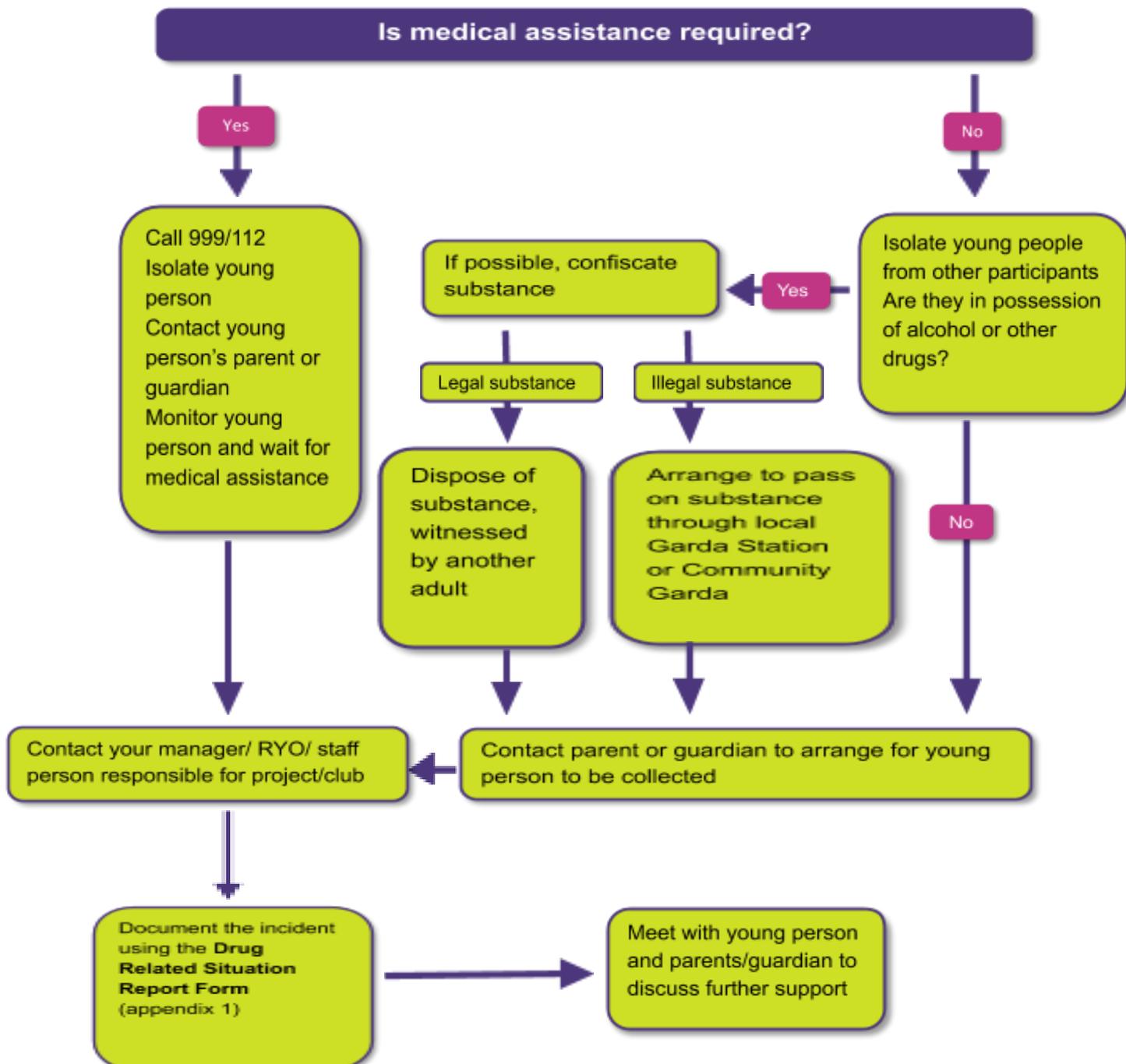


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Procedures to be followed by staff and volunteers in dealing with a drug related incident involving a young person

The young person:

- Appears under the influence of alcohol or drugs
- Is under the influence of alcohol or drugs
- Is in possession of alcohol or drugs

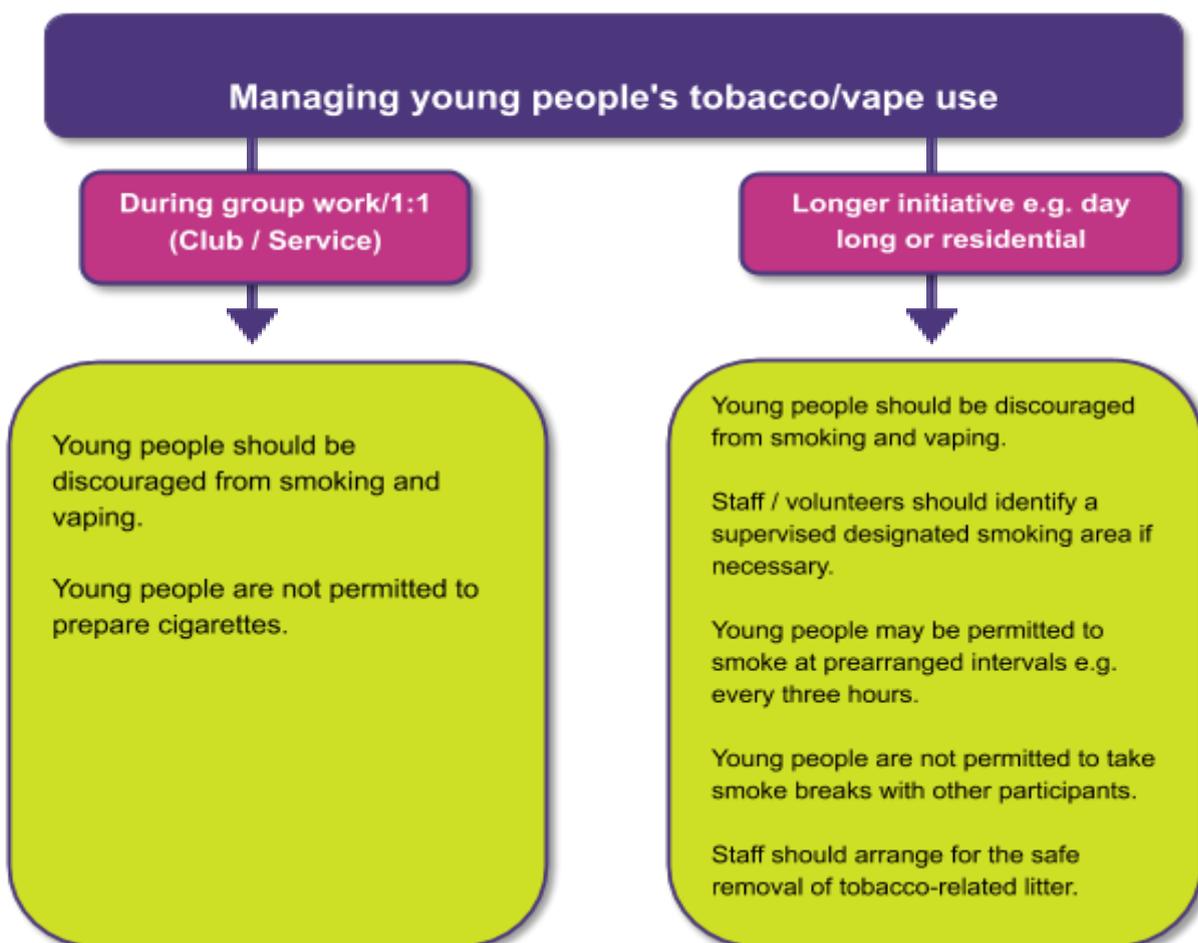


Guidelines on Tobacco Use

Smoking / Vaping:

Foróige recognises that some young people smoke. Young people should never be excluded from participating in Foróige clubs/projects/services because they smoke, however they must adhere to the following guidelines:

- Staff and volunteers should act as positive role models to young people regarding smoking and should not smoke / vape in the presence of young people.
- Smoking should be actively discouraged at all times, especially the social element of smoking.
- Young people who wish to stop smoking should be encouraged and supported to stop at every opportunity.
- Where club or project rules allow, smoking must be in accordance with legal regulations and venue rules.
- Staff and volunteers must not purchase for or supply cigarettes, tobacco, e-cigarettes or nicotine replacement products to young people. Any purchase of these products in contravention of this may lead to disciplinary sanctions against staff or volunteers.
- Staff and volunteers must not request young people to buy cigarettes on their behalf.



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The “Do’s and Don’ts” of Drug Education and Prevention

Do follow all legal obligations:

- Report any child protection concerns to your Designated Liaison Person
- Contact your local Garda Station for safe disposal of drugs or drug related paraphernalia

Do discourage smoking

Do store solvents in a locked room or cupboard

Do supervise young people when using potentially harmful materials e.g. art products, cleaning products or solvents

Do ensure that young people have evidence of prescription and parental permission for prescription drugs

Don’t purchase or supply cigarettes / tobacco / e-cigarettes / nicotine replacement products to young people

Don’t allow alcohol at any Foróige event involving young people

Don’t consume alcohol or be under the influence of alcohol while working / volunteering with young people

Don’t allow any person under the influence of illegal drugs or solvents to take part in Foróige operated programmes, activities or events²

Don’t search any young person who is suspected of possession of alcohol or drugs

Don’t store over-the-counter drugs in First Aid boxes or on Foróige premises

Don’t administer over-the-counter / prescription drugs to a young person unless under the instruction of qualified medical personnel or parents or guardians

² See ‘Procedures to be followed by staff and volunteers in responding to drug related incidents’ within this section for guidance in these situations

Section 3: Guidelines for staff and volunteers regarding prescription medication

This section provides guidance on prescription medication, asthma inhalers, epi pens and diabetes. Specific guidelines will be provided on medical documentation required from young people or their parents/guardians, storing medication and what to do in cases of a young person having an asthma attack or an allergic reaction. The section also provides guidance to staff and volunteers in supporting a young person with diabetes.

Guidelines relating to Prescription Medication/Asthma Inhalers/Epi-pens/ Diabetes

Prescription Medication

This may be used to treat a number of things, for example: Depression, Anxiety, Attention Deficit Hyperactivity Disorder (ADHD), Asthma, Chest Infection etc.

- A young person should have evidence of the prescription in their possession e.g. their name should appear on the label or disclosed on the medical consent form by a parent/guardian.
- It is a young person's responsibility to take their medication. Staff/volunteers may only remind young people to take medication with parental consent.
- With consent from parent/guardian, staff/volunteers should store the prescription medication for the young person while on a Foróige activity or event (e.g. on an overnight trip).

Asthma

- Asthma sufferers should keep their inhalers on their person at all times. A delay in administering reliever can cause an increase in symptoms.
- Reliever inhalers should never be locked away.
- If a young person has an asthma attack who does not have their asthma inhaler on their person they can use another person's reliever inhaler (usually the blue inhaler).³ This could prevent the person becoming further distressed and should only occur in an emergency situation. Reliever medication is very safe, therefore do not worry about the young person overdosing. Only people with asthma would look for an inhaler to relax the muscles and open the airways. If the person is not asthmatic and experiments with someone else's inhaler then the inhalers will not provide any relief. At higher doses the person may experience an increased heart rate or tremor but these symptoms are temporary only.
- If a young person has an asthma attack, a record of the incident should be recorded on a [Drug Related Situation Report Form](#) (appendix 1).

³ Best Practice Asthma Management Guidelines for Schools in Ireland, Asthma Society of Ireland, 2011

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Severe allergic reactions: Epipens

- An epipen is a medical device for injecting measured doses of adrenaline. It is most often used for the treatment of anaphylaxis; a potentially severe or life-threatening allergic reaction. It may be triggered by a certain food (e.g. nuts or shellfish), bee stings, medication, latex etc.
- Staff/volunteers should be aware of young people with food allergies in the club/project. This information should be recorded in the parental consent form.
- Staff/volunteers should seek a written emergency action plan from parent/guardian of young person to manage an anaphylactic reaction.
- Staff/volunteers should ask parent/guardian for medical documentation, instructions and medications as directed by a GP, so that staff/volunteers will know how to react should their child have an allergic reaction.
- Every young person with life-threatening allergies must have a medically prescribed epipen in the club/project. The epipen needs to be accessible for quick access within several minutes of a reaction and kept in a secure but unlocked location. It can be administered by staff/volunteers for the treatment of anaphylactic shock. If a young person attending a club/project has a severe or life threatening allergy, it is recommended the staff/volunteer working with that young person attend training to provide treatment for anaphylactic shock.
- It is extremely important that staff/volunteer administer the epipen where any relevant symptoms present. Administering an epipen in a healthy individual may only result in an increase in the person's heart rate therefore staff/volunteer should not delay in administering the epipen if they suspect any symptoms are present. The adrenaline simply provides vital time to get the person to hospital where treatment can be provided to save a life. Staff/volunteers must follow exactly the instructions on the epipen.
- If a child with an unknown allergy has a severe reaction, staff/volunteers should call emergency services and follow the directions given.
- A record of the incident should be recorded on a [Drug Related Situation Report Form](#) (appendix 1).

Diabetes

- Diabetes is a long-term condition where the amount of glucose (sugar) in the blood is too high because the body cannot use it properly.
- Staff/volunteers should be aware of young people with diabetes in the club/project. This information should be recorded in the parental consent form.
- Staff/volunteers should support and implement the plan agreed with parents/guardian and agree the storage requirements of the diabetes medication. This could be in a named container in a central but accessible place or kept on the young person if appropriate. If necessary, staff/volunteers should provide a place with privacy for the young person to administer insulin.
- Staff/volunteers should support and implement an emergency diabetes plan agreed by the club/project and the young person's parents/guardian.
- Staff/volunteers should provide a supportive environment for the young person to manage their diabetes effectively and safely. This may include unrestricted access to the bathroom, drinking water, snacks, blood glucose monitoring and taking insulin.

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- The young person's parents should provide the club/project with a hypo kit⁴. This should be stored in a safe place in the club/project and available to the young person in the event of hypoglycaemia.
- Staff/volunteers should ensure that the young person with diabetes has the appropriate medication or food with them during any activity/trip and are allowed to take it when needed. This also includes blood glucose monitoring when needed during the day.
- Young people with diabetes who use insulin pens should have access to a special sharps disposal container to drop needles in after injecting insulin or after doing a blood test. A sharps box should be provided to the club/project by the parents and replaced when full. It must be stored in a safe place. This can be a locked cabinet when not in use and should be accessible to the young person when they need to take their insulin.

⁴ Hypo kit example- contains blood glucose meter, testing strips, finger pricking device with lancets, Lucozade, glucose sweets, cereal bar, biscuits, Glucogel and Glucagon injection.

Section 4: Further Information and Resources

- [Foróige's Drug Prevention and Education Programmes](#)
- [Drug Related Situation Report Form](#)
- www.drugs.ie
- www.spunout.ie
- [Health Research Board Ireland](#)
- [Drug Education Workers Forum, A Manual in Quality Standards in Substance Use Education](#)
- [National Advisory Committee on Drugs and Alcohol](#)
- [European School Survey Project on Alcohol and Other Drugs \(ESPAD\)](#)
- [Alcohol Action Ireland](#)
- [Reducing Harm Supporting Recovery. A health-led response to drug and alcohol use in Ireland 2017-2025](#)
- [HSE Drugs and Alcohol Helpline](#)
- [Local and Regional Drug and Alcohol Task Forces](#)
- [HSE Addiction Services](#)
- Local Gardaí/ Juvenile Liaison Officer
- Foróige Prevention and Education Workers

Internal

References

Best Practice Asthma Management Guidelines for Schools in Ireland, Asthma Society of Ireland, 2011

Corrigan, D (1996) Facts about Drug Abuse in Ireland. Dublin: Health Promotion Unit

Morgan, M (2001) Drug Use Prevention: Overview of Research: Stationery Office

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James, P., Kearns, C., Campbell, A. and Smyth, B. (2014) Adolescents and substance use. The handbook for professionals working with young people. London: Radcliffe Publishing Ltd.

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Appendix 1

Confidential

Drug Related Situation Report Form

To indicate type of situation, please circle one or more of the boxes below

Medical Emergency	Discovery of Use or Supply	Disclosure	Suspicion of use/ Allegation	Concern Expressed	Intoxication	Adult Use	Other
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Record of a Drug Related Situation

Foróige club/project/service:	
Name(s) of person(s) involved:	
Date incident occurred:	Report form completed by:

First Aid given?	Yes ___	First Aid given by:
	No ___	
Ambulance/Doctor called?	Yes ___	Called by:
	No ___	At time:

Drug involved (if known – or a brief description):		
Sample found?	Yes ___	If an illegal substance, confiscated and placed in locked box by:
	No ___	
In the presence of:		
Date handed over to Gardaí:	By:	
If a legal substance, disposed of by:	In the presence of:	

Parent/ Guardian informed?	Yes ___	By:
	No ___	At time:
Relevant Staff member/ Manager contacted:		

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Brief description of situation (continue on blank sheet if necessary)

Other action taken: (e.g. Other agencies involved or informed; any sanctions imposed; any action taken with other group members) (continue on blank sheet if necessary)