



PREVENTION OF ALCOHOL, TOBACCO AND OTHER DRUGS POLICY

POL-006-E

COMPREHENSIVE
CULTURE OF EXCELLENCE

COMMITTED COMMUNITY
THE ENGLISH WAY

EFFECTIVE GOVERNANCE
AND FINANCIAL SUSTAINABILITY





CONTENT

- 1. INTRODUCTION 3
 - 1.1 Policy Aims 3
 - 1.2 Statutory duties..... 4
 - 1.3 Scope and Application..... 5
 - 1.4 Monitoring the Policy, Review and Evaluation 6
 - 1.5 Evaluation..... 6
 - 1.6 Dissemination of Policy 6
 - 1.7 The Role of the Head of School 6
- 2. DEFINITIONS 7
- 3. POLICY FRAMEWORK 11
 - 3.1 Guiding principles..... 11
 - 3.1.1 Primary prevention approach 12
 - 3.1.2 Community action 12
 - 3.1.3 Engagement and empowerment of School community members 13
 - 3.1.4 Stakeholders Integration 13
 - 3.1.5 Matching the scope of the solution to the scope of the problem 14
 - 3.2 Implementation..... 14
 - 3.2.1 Essential steps for implementation..... 14
 - 3.2.2 Goals and strategies 18
 - 3.2.3 On the use of external input and sources 21
- 4. MANAGING ALCOHOL, TOBACCO AND DRUGS RELATED INCIDENTS..... 22
 - 4.1 Searches for tobacco, alcohol, drugs and substances..... 22
 - 4.1.1 Lockers..... 23
 - 4.1.2 Vehicles 24
 - 4.2 Testing 24
 - 4.2.1 Testing for alcohol 24
 - 4.2.2 Testing for Drugs 25
 - 4.2.3 Consent 26
 - 4.3 Procedures for identifying suspected alcohol and other drug use 26
 - 4.4 Procedures for handling actual alcohol and other drug use violations 27
 - 4.4.1 Alcohol or Inhalants 27



4.4.2 Marijuana, Imitation Marijuana, any Controlled Substance, Including Prescription Drugs, and Synthetic Marijuana, and Imitation Controlled Substances (collectively, Illegal Drugs), or Drug Paraphernalia 28

4.5 Procedures for handling tobacco products use violations..... 29

4.6 On the use of Prescription Marihuana by students in School grounds..... 29

 4.6.1 Restrictions, Limitations, and Liability..... 31

4.7 Sanctions 31

4.8 Reporting to Police and Parents or Guardians of Certain Policy Violations..... 33

5. RESPONSIBILITIES OF SCHOOL COMMUNITY MEMBERS 33

 5.1 Students responsibilities 34

 5.2 Staff and employees Conduct regarding, Tobacco, Alcohol and Drug Use..... 35

 5.2.1 On the use of Tobacco on-site by Staff and Employees..... 35

 5.2.2 On the use of Alcohol and Illegal Drugs by Staff and Employees..... 36

 5.3 Parents / Guardians responsibilities 36

— Sources: 37

— Legal References:..... 38

6. APPENDIX 39

 6.1 Form for recording Tobacco, Alcohol and other Drugs related Incidents..... 39

 6.2 Supportive Regime Request form 41

 6.3 Declaration of Parents/Guardian for Supportive Regime 41

 6.4 Procedure for the use of sniffing dogs in School grounds 42

 Procedures 42

 6.5 Procedure for dealing with confiscated drugs and paraphernalia..... 43

 6.6 Attention protocol for suspected consumption of psychoactive substances by a Child following SED directives..... 45

 6.7 FEI Attention protocol for suspected consumption of Alcohol..... 46

 6.8 Pre-testing questionnaire for suspected consumption of Alcohol 47

 6.9 Attention protocol for suspected consumption of Illegal drugs or substances..... 49

7. POLICIES AND RELATED PROCEDURES 50

8. APPROVAL AND DETAILS FOR REVIEW..... 50

9. EFFECTIVE DATE 50

10. VERSION CONTROL..... 51

1. INTRODUCTION

Adolescent substance use—the consumption of alcohol, tobacco, and other harmful drugs—remains a persistent global problem and has presented ongoing challenges for public health authorities and society in general. In Colombia, the consumption of illegal psychoactive substances has been increasing in recent years, which is evidenced in the results of national studies in school, universities and the general population, alcohol has remained more or less stagnant in the last couple of years. This situation has been on par with the decrease in the age at which people have contact with illegal substances, which leads to an increase in adverse consequences in human, biological and social development; consequences that can have serious impact in the long term, affecting the project of individuals and collective life of people and communities. In this regard, in Colombia studies show that children who begin to consume alcohol at age fourteen or less, are four times more likely to have a risky or harmful consumption when they are adults.

This situation is critical, if one takes into account that, during adolescence, brain structures undergo major changes in the development of basic cognitive tasks such as decision making, planning, good judgment, and impulse control; the consolidation of memory and learning; coordination of muscle movements and sense of balance; and, the processing of emotions. Therefore, as consumption begins earlier, greater and more irreversible will be the effects on these vital structures for the development of the person, so it is necessary that from the perspective of school policy, all the efforts needed are made in order to delay this contact.

In the national and international context, it is recognized that the approach to the consumption of psychoactive substances implies the recognition of personal, family and social realities, from a focus on guaranteeing human rights and integral attention to the particularities of people and communities, which implies to move from a repressive and prohibitionist vision focused on tobacco, alcohol and psychoactive substances, towards the vision of capacity building for individual and collective transformation typical of a perspective based on human development.

The evidence indicates that the interventions that have the greatest effects on the prevention of the use of tobacco, alcohol and psychoactive substances share two characteristics: a) they concentrate on early intervention in the closest social environment, whether school or family and b) also address different problems of the use of these substances such as social and behavioural development. One such approaches with a proven rate of success is the so-called “*Icelandic Model for preventing adolescent substance use*” in which the current policy would be framed as a community collaborative.

1.1 Policy Aims

The aim of the FEI Policy on Prevention of Tobacco, Alcohol and other drug use is to acknowledge and clarify the school’s role in drug prevention and education, and ensure it is appropriate to meet students’ needs and parent’s expectations. This policy provides

information about drug education, drug use prevention as well as procedures to respond to any tobacco, alcohol and drug-related incidents.

This policy aims to ensure that the approach taken on the issue of drugs is school-wide and is part of our commitment to, and concern for, the overall health and well-being of the whole school community. Teachers will need to be confident and skilled to teach drug education and students need to receive up to date, relevant and accurate information, as well as support.

This policy should be read in conjunction with the policies and documents listed as complementary to this document.

Specific objectives of this policy are as follows:

- to promote safety, welfare and good physical and mental health
- to reduce the risk of alcohol-induced misconduct in and out of the School
- to prevent smoking, vaping and the misuse of alcohol, drugs, inhalants and illegal substances in and out of the School
- to keep alcohol, tobacco and illegal drugs out of the School.

1.2 Statutory duties

In accordance with the provisions of Colombia's National Plan 2014-2021 for the Promotion of Health, Prevention and Attention to the Use of Psychoactive Substances and the goals of the Ten-Year Public Health Plan by Colombian government, schools have a statutory duty to promote student's wellbeing and hence have a clear role in preventing drug misuse as part of their pastoral care. Although there is no statutory requirement to have an Alcohol and Drug Policy, it is the advice of the FEI Board of Trustees, and a requirement for all FEI schools to have a clear procedure for managing any incidents related to tobacco, drug and/or alcohol misuse as indicated by the SED (Secretaria de Educación Distrital) in the Directory of comprehensive care protocols for school conduct. This includes offside trips and visits. In keeping with our commitment to the set guiding statements, it is essential for the protection of staff, parent/guardians and children.

For the purposes of this policy, we considered the following primary sources of legal framework, regarding prevention and management of incidents:

Colombian Laws, resolutions and protocols:

- Law 1335, July 21 2009. Public policy on child protection and prevention to tobacco exposure, *aka* Anti-tobacco law.
- Law 1630, March 15 2013. Public policy on 'Convivencia' and the exercise of human rights, education for sexuality and the prevention and mitigation of school violence, *aka* 'Convivencia' law.
- Law 30, 1986. National Statute on Narcotic Drugs and other norms
- Resolution 1841, 2013. Ten-Year Public Health Plan, 2012-2021, Health and Social

Protection Ministry.

- Guidelines for consumption prevention of alcohol and psychoactive substances, 2018. Health and Social Protection Ministry
- Resolution 00000089, January 16 2019. Comprehensive Policy for the Prevention and Care of the Consumption of Psychoactive Substances.
- Resolution 001478, May 10 2006. Rules for the control, monitoring and surveillance of importation, exportation, processing, synthesis, manufacturing, distribution, dispensation, purchase, sale, destruction and use of controlled substances, medications or any other product containing them and those that are monopoly of the State.
- Directory of comprehensive care protocols for school conduct and the exercise of human, sexual and reproductive rights. Version 3. District Education Secretariat, Bogotá D.C., 2019

International Directives

- United Nations Office on Drugs and Crime (UNODC) and World Health Organization (WHO) (2018) International standards on drug use prevention. 2nd Edn. Vienna: UNODC
- United Nations Convention on the Rights of the Child

1.3 Scope and Application

This policy applies to both the English Nursery (TEN) and The English School (TES) including the Early Years programmes, *i.e.* prenursery, nursery and pre-kindergarden.

This policy applies to all students at the School and at all times when a pupil is:

- in or at school
- representing the School or wearing School uniform
- travelling to or from School
- on School-organized trips
- associated with the School at any time
- anytime a student is under care of the School

This policy shall also apply to students at all times and places in circumstances where failing to apply this policy may:

- affect the health, safety or wellbeing of a member of the School community or a member of the public.
- have repercussions for the orderly running of the School or
- bring the School into disrepute.

This policy applies to the:

- possession
- use / consumption
- consumption inducement
- supply or distribution
 - manufacturing of tobacco, heated tobacco products, electronic nicotine delivery systems, alcohol, drugs, illegal substances or drug related paraphernalia.

1.4 Monitoring the Policy, Review and Evaluation

The Head of School and the SELT will monitor the policy yearly to ensure that it is of practical benefit to the School. In particular, the areas of:

- Tobacco, alcohol and Drug Education and Prevention Programs
- Managing Tobacco, Alcohol and Drug Related Incidents
- Parent, Staff and Management Training shall be reviewed.

1.5 Evaluation

The policy will be evaluated on a yearly basis in terms of its effectiveness according to the three criteria above and its relevance to changing national and/or international legislation.

The Head of School is given the continuing commission of calling to the Board of Trustees' attention all policies that are out of date or for any other reason appear to need revision or amendment.

1.6 Dissemination of Policy

The Tobacco, Drugs and Alcohol policy is available from the school website and also in the Parental Handbook (shared with all parents) and staff handbook (shared with all staff). Students will be made aware of the policy within the context of the "Consentidos" programmes or similar and/or during mentoring time. Parents will be made aware of the policy during the enrolment process or when the governing body deem necessary.

1.7 The Role of the Head of School

In order to promote a school environment that is free of the use of prohibited substances, alcohol, and other illegal substances the Head of School shall do the following:

- The Head of School takes overall responsibility for the implementation of this policy.
- Ensure that alcohol, tobacco, and other drug use education and prevention programs are in place and implemented.
- Ensure that the School develops and implements supportive programs for those



- students that might have problems of tobacco, alcohol or illegal drugs misuse.
- Ensure that the School’s Health Office has the required testing materials and devices as required by this policy as well as the training for its use.
 - The Head will ensure that all staff dealing with Alcohol, Tobacco and Illegal Substances issues are adequately trained and supported.
 - Identify annually one member of the staff to act as the Student Safety and Wellness Officer, this Officer shall coordinate the planning, implementation, and evaluation of the alcohol, tobacco, and other drug use prevention programs appropriate to the needs of the school in agreement with the School’s Prevention Team (Counsellors Team) or those on which he or she delegates its authority.

2. DEFINITIONS

TERM	DEFINITION
Administration plan	Means the plan created at the school site with primary caregiver, Head of School, or designee, Physician and other relevant medical staff, to determine time, place and manner for administration of medical cannabis for student by primary caregiver
Alcohol	Means intoxicating liquor of all descriptions (including beer, cider, wine and spirits)
“Angel Protector” Programme	An alcohol and tobacco prevention programme that seeks to raise awareness in adults about the inconvenience and illegality of the consumption of alcohol, tobacco and other psychoactive substances by children under the age of 18. In addition, it promotes compliance with applicable laws, and promotes actions that restrict the easy access of children and adolescents to these substances. The programme is developed and implemented by the Colombian Collective Red PaPaz. (https://www.angelprotector.co/)
Breath test	A test given to a subject to determine an estimated current level of alcohol in the subject’s blood stream.
Biological Sample	Refers to a sample of breath, saliva, hair or urine provided by a subject in accordance with the procedures set out in this policy.
Certifying practitioner	Means a health care practitioner who is licensed in Colombia to diagnose a qualified patient and recommend medical cannabis as a course of treatment.
Child	For the purpose of this policy and as indicated in the UN Declaration of the Rights of the Child, a child means every human being below the age of eighteen years.

Colorimetric test	Colorimetric test is a scientific testing of a person's urine, saliva, or blood to determine if s/he has consumed alcohol or drugs. The test reveals the alcohol or drug level in the person's sample.
"Consentidos" Programme	An alcohol and tobacco prevention programme geared towards increasing a student's perception of risk and the normative influences of the consumption of alcohol, cigarettes and other drugs before the age of 18, developed and implemented by the Colombian collective Aquí y Ahora. (http://colectivoaquiyahora.org/programa-consentidos/).
Drugs and illegal substances	Means controlled drugs and the paraphernalia of drugs (including the materials to roll cigarettes), psychoactive substances or substances intended to resemble drugs, or "legal" drugs which can be obtained from a chemicals shop, performance enhancing drugs, anabolic steroids, inhalers such as glue and other substances held or supplied in each case for purposes of misuse.
Drug paraphernalia	Drug paraphernalia is equipment, products and materials of any kind which are used, intended for use, or designed for use, in planting, propagating, cultivating, growing, harvesting, manufacturing, compounding, converting, producing, processing, preparing, testing, analysing, packaging, repackaging, storing, concealing, containing, injecting, ingesting, inhaling, or otherwise introducing into the human body a controlled substance.
Drug Substance	Drug substance means "an active ingredient that is intended to furnish pharmacological activity or other direct effect in the diagnosis, cure, mitigation, treatment, or prevention of disease or to affect the structure or any function of the human body.
E-Cigarette	While e-cigarette is a term that was commonly used when the first devices, which resembled tobacco cigarettes, became available, there has since been a rapid evolution of these technologies in the market. The common features remain that they contain a battery-powered heating element designed to aerosolise a solution of propylene glycol and/or glycerol, water and frequently flavouring and nicotine (freebase or nicotine salts). However, the products are diverse and currently range from (1) one-time disposable products (often referred to as cigalikes), (2) reusable, rechargeable kits designed with replaceable cartridges or pods, (3) reusable, rechargeable kits designed to be refilled with liquid by the user (often referred to as tanks, but there are also refillable pods) and (4) reusable, rechargeable kits that allow users to customise their product such as by regulating the power delivery from the batteries to the heating element. The shape of these products



	varies enormously from flat, memory-stick shapes, to pebbles, to pens, and different shapes and sizes found in box mods. The variation means the term e-cigarettes is no longer appropriate. An international consensus on what term to use is still under development.
Governing Body	This term applies to the duly constituted group which has the ultimate authority to make decisions on behalf of the school. In a given school it may be known as the School Board, the School Council, the Governing Council, the Board of Governors, the Board of Directors, the Board of Trustees, etc.
Head of School	This term denotes the person who leads and supervises the daily operations of the school, ensuring that the policies of the Governing Body are put into practice. In given schools titles such as Director, Headmaster/Headmistress, Head teacher, Principal (when it is the highest leadership post in the school), CEO, Chief Administrator, etc. may be in use.
Medical cannabis	Means cannabis that is authorized for use by qualified patients in accordance with the provisions of Colombian Law and is in the form of a capsule, extract, or concentrate to be ingested through the mouth and that: <ul style="list-style-type: none"> ● is recommended for treatment of a student’s debilitating medical condition, in a written certification (i.e., prescription) by a certified practitioner; ● is dispensed by a cannabis producer that has received approval from Colombian Government and INVIMA to conduct sales of medical cannabis; may be safely divided into measurable doses; ● is not an aerosol product, consumable through smoking, or in particulate form as a vapour or by burning; ● is not a food or beverage product; ● is not a salve, balm or other topical product; ● does not require refrigerated storage; and ● is in a package or container clearly labelled with: <ul style="list-style-type: none"> ○ the student’s name and date of birth; and ○ the dosage allotment.
Qualified student	Means a student who demonstrates evidence to the school that the student is authorized as a qualified patient pursuant to Colombian Law to use medical cannabis.
Primary caregiver	Means a parent, guardian or other person designated by a certifying practitioner as taking responsibility for managing the well-being of a qualified student authorized as a qualified patient with respect to the



	medical use of cannabis pursuant to the provisions of the Colombian Law.
School building	Means a public building owned or leased by the FEI in which school activities take place.
School Guiding Statements	includes the main statement which define the school and its reasons for existence, e.g. School Philosophy, Mission, Vision, Charter, Objectives, etc.
School Community	Usually used in the broad sense of all “stake-holders”. The following sectors are therefore included: students, parents, school staff, school managers/administrators and the governing body.
Smoking	The fact of being in control or possession of an ignited tobacco product regardless of smoke being inhaled or exhaled actively.
Tobacco products	Means any tobacco-related product and paraphernalia including cigarettes, cigars and pipes and any other smoking related products such as nicotine substitutes and electronic cigarettes, <i>aka</i> , Vapers.
Urine Drug Screening	Urine drug screening, or toxicological screening, is a process of chemical analysis designed to test patients for drug abuse, or to insure that a patient is substance-free.
Vaping	The act of using an e-cigarette.
Work place	All places used by people during their employment or everyday work including all related or annexed places and vehicles that employees use in the performance of their work.
Written certification	Means a statement in a qualified student’s medical records or a statement signed by a qualified student’s certifying practitioner that, in the certifying practitioner’s professional opinion, the qualified student has a debilitating medical condition and the certifying practitioner believes that the potential health benefits of this medical use of cannabis would likely outweigh the health risks for the qualified student.
Written treatment plan	Means a document developed by the parent or primary caregiver in collaboration with the certifying practitioner that: <ul style="list-style-type: none"> describes the qualified student’s and the certifying practitioner’s diagnosis of a debilitating medical condition according to Colombian Law describes the plan for recommended treatment with medical cannabis, including:

	<ul style="list-style-type: none"> ○ the recommended dosage allotment; ○ the recommended frequency of administration of medical cannabis in a school setting; and ○ is signed by the primary caregiver and the certifying practitioner.
--	--

3. POLICY FRAMEWORK

Preventing alcohol, tobacco, and other harmful drug use among our students is one of the commitments of our community as part of our guiding statements. From a public health perspective, the most sensible approach to prevention is to avert or delay the onset of alcohol, tobacco, and other drug use as long as possible. It has been well established that early drug use impairs psychosocial and neurocognitive development and increases youngsters’ vulnerability to later use of licit and illicit substances, academic failure, high-risk sexual behaviour, and mental health problems.

Although there are examples of prevention approaches that have demonstrated success, the so-called Icelandic Model for Primary Prevention of Substance Use (IPM), is one with a proven record of success and the framework that would be used here in our approach to prevention (Kristjansson, A. L., *et al.*). The preventive cornerstone of the approach is to strengthen protective factors and mitigate risk factors at the school community level within each of the following domains:

- parents and family
- the peer group
- the school environment
- leisure time inside and outside of school.

3.1 Guiding principles

The prevention model to be adopted for the FEI institutions is built on a foundation of five guiding Principles as implemented in the IPM (Kristjansson, A. L., *et al.*):

- Apply a primary prevention approach that enhances the social environment of the School community.
- Emphasize community action (i.e., parents, teachers, students, etc.) and embrace the school as the natural hub to support child and adolescent health, learning, and life success.
- Engage and empower community members and decision makers in the school to make practical decisions using our own high quality, accessible data and diagnostics.
- Integrate all stakeholders in the community into a unified team dedicated to solve a complex real-world problem.

- Match the scope of the solution to the scope of the problem, including emphasizing long term nature of the intervention and efforts to secure adequate community resources.

Each principle is viewed as a unique feature of the overall approach that provides direction for how each step in the community intervention process should be implemented. Although different steps in the process may emphasize a given guiding principle in a more prominent way at any given time, every step of our prevention approach should include each of these principles.

3.1.1 Primary prevention approach

The IPM model focuses on preventing the initiation of substance use by altering the social environment in a manner that reduces the likelihood that young people will initiate substance use. A common feature with the “Consentidos” program, currently in use in MYP. This approach therefore addresses the underlying causes of substance use initiation. By working to increase social and environmental protective factors associated with preventing or delaying substance use and decreasing corresponding risk factors, the model prevents substance use by intervening on society itself and across a broad spectrum of opportunities for community intervention, including Schools. Within this principle, accessing and/or hiring appropriate personnel to guide local team-building and bridging the use of research evidence to practical implementation within the school is central. In this regard, the Head of School and the SELT will ensure that access to programs such as “Consentidos” or similar evidence-based approach to prevention should always be in place in the school.

3.1.2 Community action

The model’s primary unit of intervention is the School. The model uses an ecological approach that addresses family, school, peers, and community social influences and other opportunities within each school-wide community. Although schools are not primarily responsible for strengthening the neighbourhoods and areas they serve, they do represent an essential hub for activities designed to support the health, well-being, and success of children and adolescents. As a result, strengthening connections between families, schools, and the community-at-large, and unifying those groups into a cohesive team devoted to preventing substance use, represents a core strategy for our school. Securing the collaboration and commitment of parents and teachers for the collection of data to routinely monitor trends in both substances use and risk and protective factors is therefore essential.

3.1.3 Engagement and empowerment of School community members

School community members make all model-driven decisions based on hard data and school-specific diagnostics. The model thus relies on local school data to

- a. capture, focus, and sustain school community attention on local factors essential to preventing substance use,
- b. guide the selection of strategies and the development of school's community capacity necessary to address the complex problem of substance exposure and use.

To accomplish this, the model uses data that are specific to the school, high-quality, and made accessible through quick and efficient processing and dissemination. School data amplify community interest in what is happening with students at the school, as well as motivating community action to address identified problems.

High-quality data strengthen opportunities to accurately describe, diagnose, and inform community decision making. Accessible and current data promote meaningful participation from the whole school community by presenting information in a clear manner that is easily understood by most community members. Using specific, high-quality, and accessible data allows the school's prevention team (Psychology Team) to accurately describe how community characteristics relate to substance use, to identify possible priorities for intervention, and to support well-informed community members as they use data to choose strategies most likely to be successful in the school prevention program.

The school should make all the efforts to support the school's prevention team (Psychology Team) in collecting, processing and disseminating school data on Tobacco, Alcohol and drugs use as these tasks are essential for this principle and the success of the overall prevention approach.

3.1.4 Stakeholders Integration

In communities the connections between its different stakeholders are in many cases more theoretical than functional and/or practical and our school community is no exception. Although they may share the same goal, each group tends to function in isolation from the others and at varying proximities from the problem itself. The approach to prevention of tobacco, alcohol and drugs use requires to integrate all stakeholders in the school community into a team that works to solve a challenging real-world problem over a long period of time.

Clarifying and maintaining the importance of collaboration amongst different school's stakeholders is crucial to this principle.

3.1.5 Matching the scope of the solution to the scope of the problem

The model recognizes that the social conditions that promote substance use among young people emerge from multiple, complex sources over time. Since the model is based on an ongoing effort to alter society in a manner that protects young people from substance abuse, it must also prioritize creating the school community capacity and long-term commitments necessary to achieve this goal. Understanding and appreciating that primary prevention as seen through the lens of the IPM is a long-term strategy which will be necessary for our community to live up to this guiding principle and to maintain commitment to the prevention approach.

3.2 Implementation

3.2.1 Essential steps for implementation

Based on the five guiding principles described in the previous section, the adopted model of prevention is implemented using 10 fundamental steps. Steps 1 to 3 focus on building and maintaining community capacity for model implementation. Steps 4 to 9 focus on implementing a process designed to focus community attention and to maximize community engagement in creating a social environment in which students become progressively less likely to engage in substance use. Step 10 focuses on the iterative, repetitive, and long-term nature of the preventive approach.

STEP	DESCRIPTION	MAIN TASKS	RESPONSIBILITY
1	School coalition, Identification, Development and Capacity Building.	<p>Develop school prevention coalition including: Head of School, Faculty, Parents, School's Health and psychology Offices, TESPAS, PACTES and Board of Trustees</p> <p>Develop collective teamwork and capacity building to achieve goals of reducing substance use.</p> <p>Identify within the School the person that will support all the activities of the school coalition.</p>	Head of School SELT School's prevention team (Psychology team)
2	School funding and appropriation to support the initiative	Identify if existing funding is appropriate or if new resources are required.	Head of School School's prevention team (Counsellors team) Board of Trustees

		<p>Reorganize funding if required or make permanent structural changes that ensure ongoing funding.</p> <p>Secure funding on a yearly basis and get approval from the general assembly.</p>	
3	Pre-data collection planning and Community engagement	<p>Conduct school community meetings designed to prepare the community for participation.</p> <p>Describe de prevention approach and data collection procedures with emphasis on child protection and meaningful data collection.</p> <p>Answer School Community questions before each year's data collection begins.</p>	<p>Head of School School's prevention team (Counsellors team) with support of "Consentidos" program or similar. PACTES TESPAS</p>
4	Data collection and processing, data-driven diagnostics.	<p>Distribution of consent forms to parents.</p> <p>Prepare and review yearly version of the survey.</p> <p>Print or prepare online version of the survey.</p> <p>Collect data from students facilitated by "Consentidos" program or similar.</p> <p>Data consolidation and cleaning</p> <p>Descriptive data analysis</p> <p>Diagnosis based on data</p>	<p>School's prevention team (Counsellors team) with support of "Consentidos" program or similar</p>
5	Enhancing School Community participation and engagement	<p>Advertise School community meetings using the multiple media channels of the School.</p> <p>Ensure participation of key stakeholders and coalition "champions"</p>	<p>School's prevention team (Counsellors team)</p> <p>Communications Office</p> <p>Director of Administrative and Finance Affairs.</p>

		Reduce barriers to school community participation.	
6	Dissemination of Findings	<p>Preparation of reports</p> <p>Reports are printed and disseminated to the school community using the multiple media channels of the School.</p> <p>Reports are prepared with simple language and with simple and easy to interpret charts and graphs.</p> <p>School Community presentations are advertised and conducted.</p> <p>Reports and presentations include no identifying information of individuals and are of confidential ownership of the School Community.</p>	<p>School's prevention team (Counsellors Team)</p> <p>Communication Office</p> <p>Legal Office</p>
7	School Community goal settings and further responses to findings	<p>School coalition guide the School Community in goal-setting activities.</p> <p>Set on a yearly basis 3-4 specific goals related to relevant risk and protective factors.</p> <p>Plan strategies and /or actions based on selected goals</p> <p>Communicate to the school community using the multiple media channels of the School, the selected goals, actions and/or strategies to be implemented for each academic year.</p>	<p>Head of School SELT</p> <p>School's prevention team (Counsellors team)</p> <p>Communication Office</p> <p>PACTES</p> <p>TESPAS</p>
8	Policy and practice alignment	<p>On a yearly basis evaluate the policy and its effectiveness</p> <p>Identify ways to align the school's policies with the goals relevant to risk and protective</p>	<p>Head of School SELT</p> <p>School's prevention team (Counsellors team)</p> <p>Communications Office</p>

		<p>factors, selected by the school community.</p> <p>Identify and pursue necessary changes to the policy and school practices.</p> <p>Communicate to the school community using the multiple media channels of the School, any changes or amendments to the policy.</p>	
9	Students Immersion in Primary Prevention Environments, Activities, and Messages	<p>Strengthen parental groups of the school community.</p> <p>With support of parents and with the guidelines of the “Consentidos” program or similar, reduce late outside hours and unsupervised parties and gatherings.</p> <p>With support of parents and guidelines of the “Consentidos” program or similar, parents mutually agree to not allow tobacco, alcohol and other substances use by school students in their homes.</p> <p>Prevent/eliminate unsupervised time of students in the School.</p> <p>Increase the participation of students in organized recreational and extracurricular activities.</p>	<p>Head of School</p> <p>SELT</p> <p>School’s prevention team (Counsellors team)</p> <p>Communications Office</p> <p>Extracurricular Activities Office</p>
10	Repeat steps 1-9 annually	<p>Assess and evaluate opportunities for improving capacity and communication in steps 1-3 and repeat steps 4-9</p>	<p>Head of School</p> <p>SELT</p> <p>School’s prevention team (Counsellors team)</p> <p>Communications Office</p>

3.2.2 Goals and strategies

Based on the current status of our school regarding prevention of Tobacco, Alcohol and illegal drug use, the following are generic goals and strategies focused on reducing risk factors and strengthening protective factors for substance use initiation identified as being especially relevant to any School Community.

DOMAIN OF COMMUNITY RISK & PROTECTIVE FACTORS	GENERIC GOALS	STRATEGIES AND/OR ACTIONS
Family and parents	Improve parental knowledge and understanding of the impact of alcohol, tobacco and other drugs (ATOD) on their children	<p>Conduct parent meetings to demonstrate the preventive impact of family factors on ATOD use.</p> <p>Provide original parent educational programs related to the impacts of ATOD on adolescents. Connect families to existing educational resources in the school community, factually accurate websites, and documentaries.</p> <p>Initiate regular ongoing educational communications and reminders through social media, phone-based text messaging, and e-mail</p> <p>Ensure parents can identify community educational and treatment resources related to ATOD.</p> <p>Reduce student access to ATOD in the home.</p>
	Strengthen connections and Communications between adolescents and their families	<p>Increase the amount of time parents spend with children each week.</p> <p>Increase parental monitoring to ensure parents are consistently aware of where adolescents are, who they are with, and what they are doing.</p> <p>Increase adolescent perceptions of the quality and value of time spent with family members by setting aside routine daily or weekly family time.</p> <p>Use clear and consistent parental messages about expectations related to ATOD.</p> <p>Ensure all adolescent can identify at least one family member they can ask for help with issues related to ATOD.</p>
	Strengthen connections and	Increase social cohesion among families through shared activities and communications.



	collaboration between families in the School community	<p>Increase parental comonitoring/co-communication about their children’s activities and whereabouts.</p> <p>Use parental contracts to agree on common goals and behavioural limits for their children.</p> <p>Assemble a group of parents that engage in regular parental walks around the community.</p> <p>Develop parent agreements about consistent messages regarding ATOD.</p>
School	Strengthen parent appreciation of the benefits of positive student experiences in school and enhance commitments to the parent-school partnership	<p>Conduct parent and school personnel meetings using collected survey findings to demonstrate the preventive impact of school factors on ATOD use.</p> <p>Establish parent agreements to provide consistently supportive messages to their adolescents about the importance of school.</p> <p>Establish agreements from school personnel to provide consistently important messages about the value of family.</p> <p>Increase the number of positive communications between parents and school personnel, i.e., catching students doing something “right” or “positive”.</p> <p>Establish parent–school agreements to give each other the benefit of the doubt when communicating about student challenges.</p> <p>Conduct or enhance school-wide celebrations of student success.</p> <p>Strengthen existing parent organizations.</p> <p>Increase participation of parents as volunteers/co-monitors at school and school events.</p>
	Improve students wellbeing in the school and enhance the capacity of school to improve student health and wellbeing	<p>Establish multi-tiered systems of support for student mental and emotional health that include the following:</p> <p>Promoting a positive school climate for all students, including positive relationships with school personnel and classmates.</p> <p>Proactively identifying groups of vulnerable students and strive to provide prevention services and programs.</p> <p>Referring students in need of additional individual assistance to community-based or school-based clinical mental health providers.</p> <p>Adopt a “health in all policies” approach to all school policy development.</p>



	Strengthen students' connections to school and school-based messages related to ATOD	<p>Engage all school faculty and staff as advocates for ATOD prevention.</p> <p>Ensure that all school provide clear pathways to academic and life success.</p> <p>Ensure all students can identify at least one adult at school they can ask for help related to issues with ATOD.</p> <p>Set clear expectations and consequences regarding using and distributing ATOD use at school and during school activities, e.g., dances, athletic events, field trips, according with the current policy.</p> <p>Establish or strengthen student clubs or activities dedicated to ATOD prevention and creating an adolescent culture that supports delaying the use of ATOD.</p>
Peers	Improve adult and adolescent knowledge and understanding of the impact of peer influences on ATOD use	<p>Conduct parent meetings using collected survey findings to demonstrate the preventive impact of peer factors on ATOD use.</p> <p>Conduct parent meetings using collected survey findings to describe local peer norms related to ATOD among community adolescents.</p> <p>Provide student educational workshops focused on building positive peer relationships and peer support for positive ATOD-related decision making.</p>
	Improve parent knowledge of their children's friends/friends' families	<p>Increase number of parent-supervised activities that include adolescents' friends.</p> <p>Increase number of family-to-family activities that include adolescents' friends and their families.</p> <p>Increase rates of parents attending students' events featuring their children and their children's friends, e.g., athletic events, recitals, shows, exhibits.</p>
	Increase associations with prosocial peers and decrease associations with peers using ATOD	<p>Encourage adolescents' attendance at structured and supervised leisure time activities.</p> <p>Encourage adolescents' attendance in structured and supervised youth clubs.</p> <p>Provide adult role models demonstrating prosocial relationships at home, school and leisure time.</p>
	Decrease ATOD access through peers	<p>Organize a monitoring system for tobacco and alcohol outlets and appropriate sanctions for breaching.</p>



		Enforce legal limits to the sale of alcohol and tobacco to minors.
Leisure time	Improve adult knowledge and understanding of the impact of leisure time on ATOD use.	Conduct parent and other community member meetings that use collected survey findings to demonstrate the preventive impact of leisure time factors on ATOD use.
	Increase opportunities for structured and organized leisure time activities such as sports, drama clubs, dance, scouting programs, religious groups.	Raise funding for organized activities. Make organized leisure time activities accessible to all children and adolescents in the school. Increase the number and range of leisure time options i.e., extracurricular activities, to reflect a wide range of student interests.
	Ensure there are safe and healthy places for adolescents to spend time and engage with each other.	Open area-based youth clubs that are supervised by responsible adults where tobacco and alcohol use are strictly prohibited.
	Decrease the number of unstructured and unmonitored leisure time hours among adolescents.	Decrease rates of late outside hours (e.g., after midnight). Use parental school–community meetings to demonstrate the importance of reasonable limits to late outside hours.
	Reduce adolescent access to ATOD during leisure time.	Organize a monitoring system for tobacco and alcohol outlets and appropriate sanctions for breaching. Enforce legal limits to the sale of alcohol and tobacco to minors.

The central theme in the approach is community engagement and collaboration to foster an environment that is resistant to substance use, assuming that the risk of substance use initiation among children and adolescents grows out of the social environment. The adopted approach to prevention based on the IPM assumes that changing the environment will generate less risk-prone individuals in the long term.

3.2.3 On the use of external input and sources

Prevention Teams often find that visitors to the school might be a useful and informative part of Children and Adolescents risk learning on Tobacco, alcohol and Drugs use, but equally research suggests that for visits to be successful there should be a shared understanding about the nature and content of the session/s. The school should exercise caution with the use of visitors as there is some evidence that particular messages can have a detrimental impact on young people’s intentions to resist using drugs including alcohol. Particular caution should be used when visitors have had first-hand experience of problematic drug use.

The School's Prevention Team (Psychology Team) should ensure that visitors are appropriately qualified and trained to deliver work with children and adolescents in a school setting. They should also be aware of good practice that recommends the avoidance of shocking images and inappropriate descriptions of drug use, have a clear understanding of the aims and objectives of the session and have seen and understood this policy, particularly our primary prevention approach.

Visitors must be briefed on any particular sensitivities that there may be in the students group – these may include identified drug issues by particular pupils or their families – as well as any broader needs within the group. School Staff should negotiate the content of the session which shall be linked to the broader tobacco, alcohol and drug prevention program delivered by the school and relevant to the identified needs of the students. Visitors should be made aware by the teacher of the school's protocols for dealing with any disclosures or distress shown by pupils during the session.

Teachers and/or Staff should be present at all times when such a visitor is in the class, and be ready to be an active participant in these sessions. They should ensure that they reflect on the learning from particular sessions with students and visitors, assessing the learning, and building skills to support and enable pupils to make healthy choices and to avoid risk-taking behaviour. Teachers should follow-up any unresolved issues or concern not covered during the session/s and extend the learning initiated by the visitor.

4. MANAGING ALCOHOL, TOBACCO AND DRUGS RELATED INCIDENTS

One of the important actions required by the adopted approach described in the previous section is that of setting clear expectations and consequences regarding using and distributing Tobacco, Alcohol and other illegal drugs at school and /or during school activities, e.g., dances, athletic events, field trips, etc., therefore, this section of the policy sets the rules and procedures by which the school shall handle situations and incidents involving, Tobacco, Alcohol and Illegal Drugs use.

Every complaint, allegation or rumour or observation of student behaviour in relation to tobacco or alcohol or involvement with illegal drugs and substances or tobacco, alcohol or drug related paraphernalia will be followed up and investigated in accordance with this policy and the procedures set out in the School Policy Manual and Students' Bylaws.

4.1 Searches for tobacco, alcohol, drugs and substances

The FEI Board of Trustees has a strong and long-standing commitment to discouraging and preventing the use of tobacco, illegal drugs and alcohol and related paraphernalia among the students of its educational institutions. The Board recognizes that the problem of tobacco, and more recently vaping devices and related paraphernalia, illegal drugs and alcohol abuse presents a continuing challenge in the school, and a clear potential danger to

the safety and wellbeing of the school community. To meet this challenge, and to address these concerns, the Board authorizes the use of trained sniffing dogs by school officials when and at such intervals deemed appropriate, in the discretion of the Head of School or his/her designee.

The School may conduct at any moment a search of the buildings and grounds for drugs, by means of 'sniffer-dog' or equivalent means or devices. In such circumstances, a member of SELT may confiscate and search a bag, locker, container, case or car, provided:

- Another member of staff is present;
- The search is conducted by a member of SELT, minuted by the other member of staff; and
- There has been a clear indication of suspicion of this bag, container, locker or case.
- The student and parents/guardians are subsequently informed of the action taken, reasons, and consequences by the Head of Section of the relevant part of the School.

The Head of School and staff authorised by him/her have a statutory power to search students or their possessions without consent where they have reasonable grounds for suspecting that the pupil may have a prohibited item. Prohibited items include tobacco, heated tobacco products, electronic nicotine delivery systems, alcohol, drugs, illegal substances or drug related paraphernalia. Further procedures are detailed in Appendix 6.4.

4.1.1 Lockers

Student lockers are school property and remain at all times under the control of the FEI and its academic institutions. However, students shall assume full responsibility for the security of their lockers. Student lockers may not be used to store illegal, unauthorized, or illegal substances or materials.

The acceptance and use of locker facilities on school campus by any student shall constitute consent by the student to the search of such locker facilities by authorized school security personnel and/or police authorities if necessary.

If possible, the student should be present during any search of school property used to store his belongings. This will hopefully reduce the chances of an allegation that an item was planted. The use of video recording during searches shall be encouraged.

If the pupil is away and, as a result, it is not possible to seek his/her consent, the Staff member conducting the search should check with the Legal Office to make sure the search of school property may be carried out in the pupil's absence and consider whether the particular circumstances are serious enough to warrant the search.

Inspections of lockers may be conducted by school security personnel and/or police authorities though the use of trained dogs. These inspections shall not be arbitrary,

capricious, or discriminatory. Either all lockers must be inspected or the lockers to be inspected must be randomly selected.

4.1.2 Vehicles

Students with vehicles are permitted to park on school premises. However, any school ground utilized by any student contained therein or any other area that may be set aside for the personal use of the students remains under the exclusive control of the FEI and its academic institutions. As such, student vehicles may not be used to store illegal, unauthorized, or prohibited substances and/or materials.

The acceptance and use of the parking facilities for privately owned vehicles on school grounds by any student shall constitute consent by the student to the search of such vehicles by authorized school personnel and/or police authorities.

If possible, the student should be present during any search of his/her vehicle. This will hopefully reduce the chances of an allegation that an item was planted. The use of video recording during searches shall be encouraged.

TES retains the authority to patrol and inspect student parking lots at any time though the use of trained detection dogs. These inspections shall not be arbitrary, capricious, or discriminatory. Either all vehicles must be inspected or the vehicles to be inspected must be randomly selected.

4.2 Testing

A student suspected of unauthorized consumption of alcohol or involvement with drugs or illegal substances may be asked to give a biological sample. The reason for this policy is:

- to deter breaches of School Rules or School discipline
- to identify users
- to absolve those who have been wrongly suspected.

Reason to suspect alcohol consumption or use of drugs or substances may arise as a result of information or a complaint received or because of a pupil's behaviour or demeanour as determined by staff or teachers. The procedures for testing for alcohol, drugs or illegal substances shall be those developed and implemented by the Health Department of the School, following the following guidelines:

4.2.1 Testing for alcohol

- **Method of use:** Only members of staff who have received training will be authorised to administer a breath test or colorimetric test for screening. The Colorimetric method shall be used in lieu of the breath test. In general, they will be members of the Senior Management Team or Medical staff.

- **Refusal:** If a student refuses to provide a sample of breath the student may be asked to supply, under medical supervision, a further biological sample (i.e., saliva, hair or urine) for analysis in accordance with drug testing procedures (see 4.2.2.).
- **Record:** A written record will be kept when a student is asked to take a test and its outcome will be recorded.

Resolution 001844 of December 18, 2016 by “Instituto de Medicina Legal y Ciencias Forenses” provides the full protocol to be followed for testing for alcohol using a Breath Analyzer. Appendix 6.8 provides the pre-testing questionnaire for a student’s interview prior to testing.

4.2.2 Testing for Drugs

- **Biological sample:** If, there is reason to suspect that a student has been involved with drugs or substances, he / she may be asked to supply, under medical supervision, a biological sample (saliva, hair or urine) for analysis.
- **Medical supervision:** The biological sample will be taken under medical supervision. A member of the school staff will be present. All due care will be taken to respect the pupil's privacy and human rights.
- **Testing procedures:** These will be in accordance with standard good practice and following established sampling procedures for diagnostics:
 - care will be taken to make as certain as possible that the sample provided is genuine and uncontaminated
 - the student will be asked to sign various seals and documents which confirm that the specimens are his / hers
 - the student will also be asked to sign a form before the test result is established, which signifies that he / she has been satisfied with the collection procedure and gives consent for the results of the test being made available to the Head of Section and/or Head of School.

Any attempt at cheating during the course of a drug test is considered an admission of guilt.

- **Medical record:** The outcome of the test, whether positive or negative, will not form part of the students’ permanent medical record.
- **Method of use:** given the high cost of advanced testing for certain drugs and illegal substances, the test conducted in school premises under supervision of the medical staff would be of the screening type using standardized rapid screening tests using for example multidrug strips. If the result is positive, and the parents/guardians request a confirmatory analysis, the cost of the confirmatory test in a specialized laboratory would be assumed by the parents/guardians.
- **Outcome:** When the School receives or obtains the initial test result reasonable

- attempts will be made to notify a parent by telephone and to inform them that:
- if the result is negative, the second sample will be destroyed immediately.
 - if the result is positive, the second sample will be made available for independent laboratory analysis if this is requested by parents within three school days.

4.2.3 Consent

Reasonable endeavours will be made, before a biological sample is taken, to notify a parent, or guardian of the requirement for a biological sample and the reasons for that requirement, so that the appropriate authorisation can be issued.

If a pupil refuses to provide a biological sample, he / she will be asked to say why he / she has refused. The School will be entitled to draw inferences from his / her response and general demeanour. If a parent's consent is required and they refuse to consent to their child providing a biological sample, the School may draw inferences from the refusal and the pupil's general demeanour.

The School will treat a positive test taken in School premises under the supervision of the School's Medical Staff following the established protocols, although not infallible, as evidence that the pupil has consumed alcohol or been using drugs or illegal substances, as appropriate.

4.3 Procedures for identifying suspected alcohol and other drug use

School staff members are in a unique position to observe students in a variety of settings, and thus may notice behaviours that may indicate a problem related to the use of a controlled substance, alcohol, tobacco or other intoxicant. It is essential to the health and safety of the student that suspected or actual cases of tobacco, alcohol and other drug use be reported immediately to the School's Prevention Team (Psychology Team)

The classroom teacher generally has the most contact with a student and is, therefore, in the best position to observe any significant change in a student's behaviour. These behaviours may include, but will not necessarily be limited to, the following:

- Absenteeism.
- Tardiness.
- Diminishing quality of assigned school work.
- Trouble with peers.
- Hostility toward staff members.
- Changes in appearance.
- Changes in participation in extracurricular activities.
- Deteriorating health.
- Dramatic changes in mood.
- Drowsiness; attempts to sleep in class.

- Changes in demeanour.

Only simple identification of problem behaviours is required from teachers. There is no need for teachers to attempt to diagnose the causes of certain behaviours, although expressing personal concern regarding a decline in student performance may be helpful to the student.

Teachers or other staff members should immediately refer any cases of suspected tobacco, alcohol and other drug use to the Learning Support Coordinator of the appropriate School Programme, or other appropriate school official in accordance with the referral procedure established by the Head of School and in accordance with the recommendations and procedures established by the SED in the Directory of comprehensive care protocols for school conduct and the exercise of human, sexual and reproductive rights (See Appendix 6.6 for the suggested procedure for the suspected consumption of psychoactive substances).

The Head of School, or his / her designee, after interviewing the student and upon determining that there is sufficient reason to suspect tobacco, alcohol or other drug use, shall immediately notify the student's parent or guardian, and a meeting shall be arranged with the parent or guardian, the student, and a counsellor or the school medical staff.

4.4 Procedures for handling actual alcohol and other drug use violations

If it is determined that a student has engaged in any form of tobacco, alcohol and/or other prohibited drug use, the protocols to follow are those suggested by SED (see Appendix 6.6) and the adapted and extended protocol for the FEI institutions (see Appendix 6.7 and 6.8). The procedure shall be as follows:

4.4.1 Alcohol or Inhalants

For violations involving alcohol or inhalants, students may be referred to an alcohol and other drug (AOD) intervention and support program in lieu of, or in addition to, disciplinary action as indicated by Student's Bylaws. However, the AOD intervention and support program is not intended for a student who participated in that program previously or with repetitive offences.

If the student is suspected of being under the influence of alcohol or otherwise having violated the provisions of this policy, the Head of Programme shall notify the parent of the suspicion. The Head of School or the Head of Programme may immediately authorize the administration of a breath sample test, -- following the procedures for drug testing in Section 4.2.2., to determine any alcohol content or clear the student of any wrongdoing and/or recommend that the student do at least one of the following:

- Voluntarily attend an AOD intervention and support program
- Voluntarily participate in a substance abuse assessment with a private provider to determine the need for substance abuse treatment.

See Appendix 6.7 for the complete protocol to follow.

4.4.2 Marijuana, Imitation Marijuana, any Controlled Substance, Including Prescription Drugs, and Synthetic Marijuana, and Imitation Controlled Substances (collectively, Illegal Drugs), or Drug Paraphernalia

For violations related to illegal drugs or drug paraphernalia, students may be referred to an alcohol and other drug (AOD) intervention and support program in lieu of, or in addition to, disciplinary action as indicated by Student's Bylaws. However, the AOD intervention and support program is not intended for a student who participated in that program previously or with repetitive offences. The following violations will result in school-based disciplinary action following the procedures described in the Student's Bylaws.

- Arriving on school property or to a school-sponsored activity under the influence of marijuana, synthetic marijuana, or of any illegal or illegally used controlled substance (e.g., ecstasy, cocaine, or any prescription drug not prescribed to the student), or for possessing or distributing drug paraphernalia to peers or other members of the community.
- Use or possession of a controlled substance, marijuana, an imitation controlled substance, or imitation marijuana, while on school property or at a school-sponsored activity or when under care of the school.
- Distributing, facilitating the distribution of, or manufacturing a controlled substance (including anabolic steroids, or prescription drugs, or synthetic marijuana), an imitation controlled substance, marijuana, or imitation marijuana.
- Coercion of peers to consumption, manufacturing or distribution of controlled substances or drug related paraphernalia.
- Theft or attempted theft of a student's prescription drug.

In any case, the "Comité de Convivencia" may determine, based on the facts of each particular case, that special circumstances exist and that a disciplinary action other than expulsion is appropriate.

If the student is suspected of being under the influence of illegal drugs or any prescription drug not prescribed to the student or otherwise having violated the provisions of this subsection of the policy, the Head of Section shall notify the parent of the suspicion. The Head of School or the Head of Section may immediately authorize the administration of a drug test, -- following the procedures for drug testing in Section 4.2.2., to determine any

drug content or clear the student of any wrongdoing and/or recommend that the student do at least one of the following:

- Voluntarily attend an AOD intervention and support program
- Voluntarily participate in a substance abuse assessment with a private provider to determine the need for substance abuse treatment.

For suspicion of illegal drugs consumption see Appendix 6.8 for the complete protocol to follow.

4.5 Procedures for handling tobacco products use violations

For violations related to tobacco products or tobacco related paraphernalia, students may be referred to a support program in lieu of, or in addition to, disciplinary action as indicated by Student's Bylaws. The following violations will result in school-based disciplinary action following the procedures described in the Student's Bylaws.

- Possessing or using tobacco products, or smoking devices (to include nicotine vapor products, alternative nicotine products, electronic cigarettes and Hookah pens), all of which are collectively referred to herein as "tobacco products."
- Distributing, facilitating the distribution of, or manufacturing of tobacco products, or smoking devices (including nicotine vapour products, alternative nicotine products, electronic cigarettes, *aka.*, Vaping devices).
- Coercion of peers to consumption, manufacturing or distribution of tobacco, heated tobacco products, electronic nicotine delivery systems and related tobacco paraphernalia.

In the last two specific cases, the "Comité de Convivencia" may determine, based on the facts of each particular case, that special circumstances exist and that a disciplinary action other than expulsion is appropriate.

The Head of Program, together with designated staff members, the student, and his or her parent or guardian, shall monitor each case to ensure that an appropriate intervention and a follow-up response have been made.

4.6 On the use of Prescription Marijuana by students in School grounds

The licit use of cannabis has grown significantly in the world in the last decade. The reason is that more and more countries are interested in using the plant extracts in medical treatments and scientific research. Colombian legislation allows for the prescription of the

so – called “medications with special control” as regulated by Law 30, 1986 and resolution 1478, 2006. Such prescriptions can only be issued by a certifying practitioner.

Under certain circumstances where it is necessary for a student to take medical cannabis during school hours, the FEI institutions will cooperate with the certifying practitioner and the parents or legal guardian, to permit the primary caregiver to administer medical cannabis in a school building, if the following requirements are met:

- The primary caregiver or parent or legal guardian must provide the FEI and its academic institutions with a copy of the written certification from the Personal Medical Provider that the student is a qualified patient for medical cannabis use under Colombian Law.
- There must be written orders from an authorized certifying practitioner for use of medical cannabis, and such orders shall include dosage and time given as well as where and how medication can be administered
- Any order or plan for administering medical cannabis shall be only valid during the school year provided and while the student is enrolled.
- A written treatment plan for the administration of medical cannabis will be prepared in consultation with the primary caregiver, parent or legal guardian, and agreed to by the school administration, and revised annually in the student records.
- The primary caregiver and parent or guardian (if not the primary caregiver) must work with the schools health team to create an administration plan for administration in a school building. The administration plan outlines time, place, and manner of administration for the student. The site team shall include a SELT member or designee and a school nurse and must address off-site activities and extracurricular activities
- The primary caregiver must carry medical cannabis in a prescription container, or in the original authorized dispensary container, with all warnings and directions intact and with clearly labelled identifiers including the qualified student’s name, date of birth, and dosage allotment that matches the agreed written treatment plan.
- Medical cannabis is not to be stored at school.
- Students using medical cannabis at school buildings must not drive a personal vehicle or park a vehicle on school property.
- The primary caregiver must take the cannabis to the school and administer the medication in a designated area and in a way that does not create disruptions to the educational environment or cause other students to be exposed to medical cannabis.

The FEI Board of Trustees reserves the right, in accordance with procedures and policies to circumscribe or disallow the use or administration of any medication or medical cannabis on school premises if the threat of abuse or misuse of the medicine may pose a risk or harm to a member or members of the student population or school community.

4.6.1 Restrictions, Limitations, and Liability

Students are forbidden from possession, use, distribution, sale or being under the influence of a cannabis product in any manner that is inconsistent with the provisions of this policy for qualified use for medical cannabis. A student who makes a fraudulent representation to a school official or the police about the person's participation in a medical use of cannabis program may be denied permission for future access to medical cannabis in the Schools. Participation in the use of medical cannabis does not relieve the qualified student from disciplinary action for activities not authorized in the current policy.

The FEI and its academic institutions shall not require any employee to store or administer medical cannabis. School Doctors and nurses and health assistants may consult on site administration plans and shall be made aware of all qualified students with medical cannabis treatment and administration plans at the school but shall not be required to store or administer medical cannabis.

4.7 Sanctions

Where a student breaches any of the School rules set out in this policy, the Governing School Body has authorised the Head of School to apply any sanction which is appropriate and proportionate to the breach in accordance with School Policies and Student's Bylaws.

The following guidelines will apply:

- **Tobacco and alcohol:** Sanctions will be applied in accordance with the School's policies and following the procedures established in the Student's Bylaws. For a serious breach or persistent breaches, a student may be expelled or removed from the School even if he / she is about to sit for IB-MYP e-assessments, IB-DP examinations or Saber 11 test.
- **Drugs: Anyone producing or supplying drugs, illegal substances or drug related paraphernalia must expect to be expelled immediately even if he / she is about to sit for IB-MYP e-assessments, IB-DP examinations or Saber 11 test.** Anyone possessing or using drugs, whether at school or outside of school, during the school term or holidays, taking part in a School related activity, travelling to or from School or wearing School uniform must also expect to be expelled in accordance with the School's Policies and the Student's Bylaws. In exceptional cases, a supportive regime may be offered as an alternative to expulsion. The Head of School is not obliged to offer a supportive regime.

The following table summarizes expected actions to be taken according to the infringement:

	Intervention and Support program	Report to “Comité de Convivencia” for disciplinary actions	Testing	Recommendation for Immediate Expulsion or registration cancelation
Tobacco use Violations	X	X		
Selling, Distributing, facilitating the distribution of, or manufacturing of tobacco products, or smoking devices.		X		X
Distributing, facilitating the distribution of, or manufacturing of E-Cigarettes products, vaping devices or vaping related products.		X		X
Coercion of peers to consumption, selling, manufacturing or distribution of tobacco, heated tobacco products, electronic nicotine delivery systems and related tobacco paraphernalia.		X		X
Alcohol use Violations	X	X	X	
Distributing, facilitating the distribution or purchase of, manufacturing of alcohol products or mixtures.		X		X
Marijuana, Imitation Marijuana, any Controlled Substance, Including Prescription Drugs, and Synthetic Marijuana, and Imitation Controlled Substances use violations	X	X	X	
Selling, Distributing, facilitating the distribution of, or manufacturing of Marijuana related products, or related paraphernalia.		X		X
Coercion of peers to consumption, selling,		X		X

manufacturing or distribution of Alcohol related products				
Illegal Drug use Violations	X	X	X	
Distributing, facilitating the distribution of, or manufacturing of Illegal drug related products, or related paraphernalia.		X		X
Coercion of peers to consumption, selling, manufacturing or distribution of controlled substances or drug related paraphernalia.		X		X

4.8 Reporting to Police and Parents or Guardians of Certain Policy Violations

If during a search the School seizes a controlled drug, the drug may be destroyed if there is good reason to do so. Otherwise the School will deliver it to the police as soon as reasonably practicable.

In all other cases, the School may decide to request the involvement of the police from the outset. If the police suspect that a student or a staff member possesses or has stored drugs, substances or related paraphernalia, the police may elect to investigate using their own procedures or may pass the matter back to the School to investigate.

If the findings of the investigation support the allegation, complaint or rumour or observation of student behaviour, a disciplinary meeting will be held in accordance with the procedures set out in the Student’s Bylaws (Manual de Convivencia) following the guidelines in Section 4.6, if the individual involved is a staff member or employee, the disciplinary procedures will be those set by the Code of Conduct established by the Human Resources Office.

The FEI and its academic institutions cannot knowingly allow premises to be used for the production or supply of tobacco, alcohol or any controlled drug or substances use related paraphernalia. Where it is suspected that substances or paraphernalia are sold on the premises, details of those involved, together with as much information as possible, will be when dimmed necessary, passed to the police authorities.

5. RESPONSIBILITIES OF SCHOOL COMMUNITY MEMBERS

The School educates students to understand:

- The effect and risks associated with tobacco and alcohol in relation to their health

and well-being and the law and the use of illegal drugs is or may be a criminal offence and will be harmful to their health, integrity, independence, opportunities and careers and will damage their families and the society in which they live.

- The School educates students about these issues through its primary prevention program, as described in Section 3 of this policy, by example and by discussion.
- The School encourages students to discuss in confidence (subject only to the safeguarding responsibilities of the School, and all staff) any anxieties they may have about use of tobacco, alcohol or drugs and substance abuse with a member of staff or the School's Psychology Team.
- Matters brought into counselling by a student or his / her parents, in circumstances which are judged by the Head of School to be genuine, will be "ring-fenced" from disciplinary sanctions, but a student who contravenes this policy will face disciplinary action according to the procedures described in the Student's Bylaws (Manual de Convivencia). For example, a student who comes forward and voluntarily identifies him/herself as a drug user and asks for help may be given the opportunity to reform his/her behaviour with counselling and a supportive testing regime. Similarly, students who smoke may be given support in order to help them to give up.

All employees of the School shall use their best effort to develop sensitivity among students and peers to the importance of safety, knowledge of emergency procedures, and the key importance of responsible individual action particularly in the reporting of issues related to Tobacco, Alcohol and Illegal drugs so that the procedures and protocols contained in the present policy work smoothly.

The Head of School, guided by the overriding consideration for student safety and wellbeing, shall maintain appropriate regulations and updated procedures in so far as the nature of the issues covered in the present policy can be anticipated.

In preparing emergency action related to Tobacco, Alcohol and Illegal Drugs issues, the Head of School and his/her staff shall take into account the advice of civil authorities and requirements of Colombian law. Final responsibility rests with the Head of School for determining when the School shall take emergency action and what action the School shall take. The Head of School shall inform the Board of Trustees of such actions at his/her earliest convenience, but should not delay taking action to do so.

5.1 Students responsibilities

Students are forbidden from:

- Smoking or vaping inside or outside School premises, being in possession of tobacco, synthetic tobacco or tobacco-like substances while in the care of the School or supplying tobacco to other students or members of the community.

- Bringing alcohol onto School premises or being in unsupervised possession of alcohol or obtaining or supplying alcohol to another, or being impaired by alcohol while on School premises or in the care of the School.
- Possession, distribution or commercialization of any tobacco, alcohol or drug related paraphernalia.
- Any production, possession, use or supply of drugs and illegal substances.
- Coercing peers into use or supply of drugs and illegal substances or related paraphernalia.
- Bringing the School into disrepute for any reason associated with tobacco, alcohol or drugs and illegal substances, whether or not the student is in the care of the School at the time.

5.2 Staff and employees Conduct regarding, Tobacco, Alcohol and Drug Use

All staff are required to adhere to the Staff Code of Conduct. Staff are subject to the disciplinary and other HR procedures established by law should they breach this policy.

5.2.1 On the use of Tobacco on-site by Staff and Employees

Smoking is one of the most important public health problems in our country and throughout the world, especially when considering that the consumption of tobacco and its derivative products has increased considerably in recent years. (Observatorio de Drogas de Colombia, 2019; Informe sobre el consumo de drogas en las Américas, CICAD, 2019).

In adherence to the provisions of Law 1335 of 2009, Article 19, regarding places of prohibited tobacco consumption; bearing in mind that, as indicated in the Declaration of the Rights of the Child, to which the Schools subscribes as a CIS member candidate, "the child, by reason of his physical and mental immaturity, needs special safeguards and care, including appropriate legal protection, before as well as after birth", and considering that all actions concerning children under the safeguard of the FEI Schools, are taken in their best interests, the FEI Board of trustees declares the FEI institutional campuses as smoke-free environments.

Therefore, staff and employees are forbidden from:

- Smoking or vaping inside or outside School premises, being in possession of tobacco, synthetic tobacco or tobacco-like substances while in school premises or during transit to or from the School when using School's buses, supplying tobacco to students or other members of the community.
- The Head of School, or his / her designee, shall be responsible for the signals required by law (Resolution 1956 of 2008) that indicate to the public that the School campus is a smoke-free environment.

5.2.2 On the use of Alcohol and Illegal Drugs by Staff and Employees

In accordance with the provisions of Colombia's Comprehensive Policy for the Prevention and Care of Consumption of Psychoactive Substances (Resolution 00000089 of January 16, 2019) and complementary legislation and with the objective of promoting well-being, maintaining a healthy and safe environment for all our students and employees; bearing in mind that:

- Alcohol or drugs consumption by staff and employees affects all instances of the organization, the individual, the family and society and in particular may endanger the safety and wellbeing of children under the safeguard of the FEI educational institutions.
- Also considering the FEI's educational institutions commitment to the development of activities geared towards prevention and control of accidents at work, occupational related illnesses and in general minimizing all the factors that may affect the health of its staff and employees.
- The FEI Board of Trustees declares that for no reason shall any staff or employee be allowed to work within School premises under the influence of alcohol or any psycho-active substances.

Staff and employees are forbidden from:

- Consumption, possession, distribution, manufacturing and / or sale of alcohol, or psychoactive substances in all its different presentations, within the school premises, during working hours or with occasion of visits or trips in which the staff member or employee is representing the School.
- It is the direct responsibility of the staff member or employee to ensure their own well-being and to take care of their health.
- The FEI and its educational institutions, are committed to promoting campaigns of Healthy Lifestyles, informing staff and employees about the harmful health effects that arise from the consumption of these substances, including within their target population the family of each staff member or employee.
- The FEI and its educational institutions assume the obligation and responsibility of strengthening the Occupational Health program and ensuring the health and safety of employees in accordance with current legal regulations.
- All personnel both staff and employees shall comply with the safety regulations and Occupational Health activities that are implemented.

5.3 Parents / Guardians responsibilities

Considering the FEI's educational institutions commitment to the development of activities geared towards prevention and minimization of risk factors amongst our student's community and keeping in mind; the body of scientific research that underscores the

importance of the peer group and the organization of adolescent leisure activities in the formation of adolescent society and lifestyle and knowing that having friends or family members that smoke, drink alcohol and use drugs increases the likelihood of similar behaviours among adolescents, Parents/ Guardians have the statutory duty to:

- Avoid the hosting of parties or gatherings where Alcohol, Tobacco and /or Drugs are present.
- Avoid hosting unsupervised parties and gatherings
- Avoid offering alcohol to underage children
- Avoid the Coarsening of minors into the consumption of alcohol or Tobacco related products.
- Support the School's Prevention Team (Psychology Team) activities and programs to focus community attention and to maximize community engagement in creating a social environment in which students become progressively less likely to engage in substance use.

If parents / guardians attending School premises appear to be under the influence of drugs or substances or alcohol, they will be asked to leave and the member of staff making the request should refer the matter to the School's Security Office. The parent/guardian will be asked to make alternative arrangements and the child will be withheld to ensure their safety.

If a member of staff suspects that a parent has driven or will drive whilst under the influence of drugs or alcohol, the member of staff should report the matter to the School's Security Office who may telephone the police.

If a staff member reasonably believes that a child is at immediate risk of harm from a parent / guardian who is under the influence of alcohol or drugs, the child will not be released into the care of the parent and the School's Child Protection procedures will be followed and a notification to the local ICBF centre will be issued.

Where there are serious or ongoing concerns about the adult's presentation and drug use, the school may consider banning a parent/ guardian from entering the school site.

— **Sources:**

Kristjansson, A. L., *et al.* Development and Guiding Principles of the Icelandic Model for preventing Adolescent Substance Use. Health Promotion Practice 2019. DOI: <https://doi.org/10.1177/1524839919849032>.

Kristjansson, A. L., *et al.* Implementing the Icelandic Model for Preventing Adolescent Substance Use. Health Promotion Practice 2019. DOI: <https://doi.org/10.1177/1524839919849033>.

Informe sobre el consumo de drogas en las Américas, 2019

Comisión Interamericana para el Control del Abuso de Drogas (CICAD), de la Organización de los Estados Americanos (OEA)

<http://www.cicad.oas.org/>

Observatorio de Drogas de Colombia, 2019

<http://www.odc.gov.co/sidco/perfiles/estadisticas-nacionales>

WHO REPORT ON THE GLOBAL TOBACCO EPIDEMIC, 2019.
https://www.who.int/tobacco/global_report/en/

United Nations Office on Drugs and Crime (UNODC) and World Health Organization (WHO) (2018) International standards on drug use prevention. 2nd edn. Vienna: UNODC

— **Legal References:**

Law 1335, July 21 2009. Public policy on child protection and prevention to tobacco exposure, *aka* Anti-tobacco law.

Resolution 1841, 2013. Ten-Year Public Health Plan, 2012-2021, Health and Social Protection Ministry.

Guidelines for consumption prevention of alcohol and psychoactive substances, 2018. Health and Social Protection Ministry

Resolution 00000089, January 16 2019. Comprehensive Policy for the Prevention and Care of the Consumption of Psychoactive Substances.

Resolution 1844 of 2015-12-18 issued by the National Institute of Legal Medicine and Forensic Sciences “Guide for indirect measurement of alcohol through exhaled air”

Resolution 001478, May 10 2006. Rules for the control, monitoring and surveillance of importation, exportation, processing, synthesis, manufacturing, distribution, dispensation, purchase, sale, destruction and use of controlled substances, medications or any other product containing them and those that are monopoly of the State.

Directory of comprehensive care protocols for school conduct and the exercise of human, sexual and reproductive rights. Version 3. District Education Secretariat, Bogotá D.C., 2019



6. APPENDIX

6.1 Form for recording Tobacco, Alcohol and other Drugs related Incidents

Procedures

1. For Help and advice, telephone the Legal Office
2. Complete this form WITHOUT identifying the student involved
3. Copy the form
4. Send the copy within 24 hours of the incident to the legal office
5. KEEP the original, adding the pupil’s name on the form—store securely

Tick to indicate the category

Drug or paraphernalia found ON school premises <input type="checkbox"/>	Student disclosure of drug use <input type="checkbox"/>
Tobacco or nicotine related paraphernalia found on school premises <input type="checkbox"/>	Disclosure of parent/guardian drug misuse <input type="checkbox"/>
Emergency intoxication due to Alcohol <input type="checkbox"/>	Parent/guardian expresses concern <input type="checkbox"/>
Emergency intoxication due to drugs <input type="checkbox"/>	Incident occurring OFF school premises <input type="checkbox"/>
Student in possession of unauthorized drug <input type="checkbox"/>	Incident involves Staff or Employees <input type="checkbox"/>
Student supplying unauthorized drug on school premises <input type="checkbox"/>	

Name of student *:	Program:
Pupil’s form*: (*For school records only)	Time of incident: AM/PM
Age of student: MALE/FEMALE	Date of incident:
Tick box if second or subsequent incident involving the same student <input type="checkbox"/>	Report form completed by:

First aid given? YES NO Ambulance called? YES NO
 First aid given by: Called by: Time:



Drug or substance involved (if known): (e.g., Tobacco, alcohol, marijuana, Ecstasy)	Drug found/removed? YES / NO
	Where found/seized:
SELT members Involved:	Name and Signature of Witness:
	Disposal arranged with (police/parents/other):
	At time:
	If police was called, reference number:

Name of parent/guardian informed*: (*For school records only)	
Consent given for testing YES NO	
Informed by:	At time:

Brief description of the incident (include physical symptoms, if applicable):



Other actions taken (e.g., police consulted, police involvement, case open for “Comité de Convivencia”, search with sniffing dogs requested, sanctions imposed):

6.2 Supportive Regime Request form

Full Name of the Student	(*For school records only)
Date	
Current Age	
Date of Birth	
<ol style="list-style-type: none"> 1. [I have made a voluntary admission of having used a controlled drug or substance in breach of the School's policy and Students bylaws.] 2. As an alternative to expulsion, the Head of School/Rector has offered me a supportive regime under which for the remainder of this term and the next three school terms, without obligation on the part of the School, I may at any time be asked to provide a saliva / hair / urine sample under medical supervision for analysis in accordance with the procedures described in the attached policy which I have read and understood. 3. I understand that I may be asked to provide a saliva / hair / urine sample at any reasonable time even if no grounds exist at that time to suspect that I have been involved with drugs or illegal substances. 4. agree to be subject to this regime and to co-operate with the School in every respect. I understand that the School will take all reasonable care to preserve my confidentiality and human rights during the applicability of this regime. 5. I also understand that if without good reason I fail to co-operate with this regime or if a test proves positive I would almost certainly be required to leave the School. 	
Signed	

6.3 Declaration of Parents/Guardian for Supportive Regime

I / We the undersigned have read the School's Policy on Drugs and Substances, and this Appendix. For my / our part, I / we accept the Head of School's/Rector's offer of a supportive regime for the above-named pupil, as described above.



I / We undertake to co-operate with the regime in all respects and to pay the laboratory charges for each test which I / we understand to be up to COP\$ 50000 plus VAT per test.

Signed	
Full name	
Relationship to the student	
Date	

Signed	
Full name	
Relationship to the student	
Date	

6.4 Procedure for the use of sniffing dogs in School grounds

The Head of School and staff authorised by him/her have a statutory power to search students or their possessions without consent where they have reasonable grounds for suspecting that the pupil may have a prohibited item. Prohibited items include tobacco, heated tobacco products, electronic nicotine delivery systems, alcohol, drugs, illegal substances or drug related paraphernalia.

Procedures

1. Use of drug-sniffing dogs shall be approved and overseen by the Head of School or his/her designee.
2. Under normal circumstances, the use of the dogs shall be limited to sniffing school premises, students' lockers, possessions (such as backpacks or jackets, when removed) or cars in the parking lots of the school.
3. The Head of School or designee shall make arrangements to obtain the services of sniffing dogs.
4. Any drug-sniffing dogs utilized under this policy shall be determined and warranted by their handlers/trainers to be suitably trained to detect illegal drugs or substances

- by scent.
5. Dogs shall be used for sniffing drugs or substances only under the supervision, and at the behest, of the Head of School or his/her designee.
 6. Use of drug sniffing dogs is not intended to constitute a police search within the premises of the FEI educational institutions.
 7. Prior to any use of drug-sniffing dogs, a written copy of this Policy shall be distributed to all students and parents of the school.

The School may conduct at any moment a search of the buildings and grounds for drugs or substances, by means of 'sniffer-dogs' or equivalent means or devices. In such circumstances, a member of SELT may confiscate and search a bag, locker, container, case or car, provided:

- Another member of staff is present;
- The search is conducted by a member of SELT,
- minuted in the Form for recording Tobacco, Alcohol and Illegal Drugs related Incidents in the Appendix of this policy by the other member of staff; and
- There has been a clear indication of suspicion of this bag, container, locker, case or car.
- The student and parents/guardians are subsequently informed of the action taken, reasons, and consequences by the Head of Programme of the relevant part of the School.

If possible, the student should be present during any search of his/her locker, possessions or car. This will hopefully reduce the chances of an allegation that an item was planted. The use of video recording during searches shall be encouraged.

6.5 Procedure for dealing with confiscated drugs and paraphernalia

1. Disposal of a controlled drug or substance: The law permits school security staff to take temporary possession of a substance suspected of being a controlled drug. The drug should be placed in a sealed bag and then in a locked cupboard or Ziplock bag. This procedure should always be witnessed and supervised by a senior staff member of the school. Members of staff who may come into contact with any substance should always put on a pair of latex or nitrile gloves as some substances can be absorbed through the skin.

The head of security should be informed and he /she will collect the sealed bag at the earliest opportunity. Any medicines or prescription drugs should be returned to a pharmacy for disposal by school security staff.

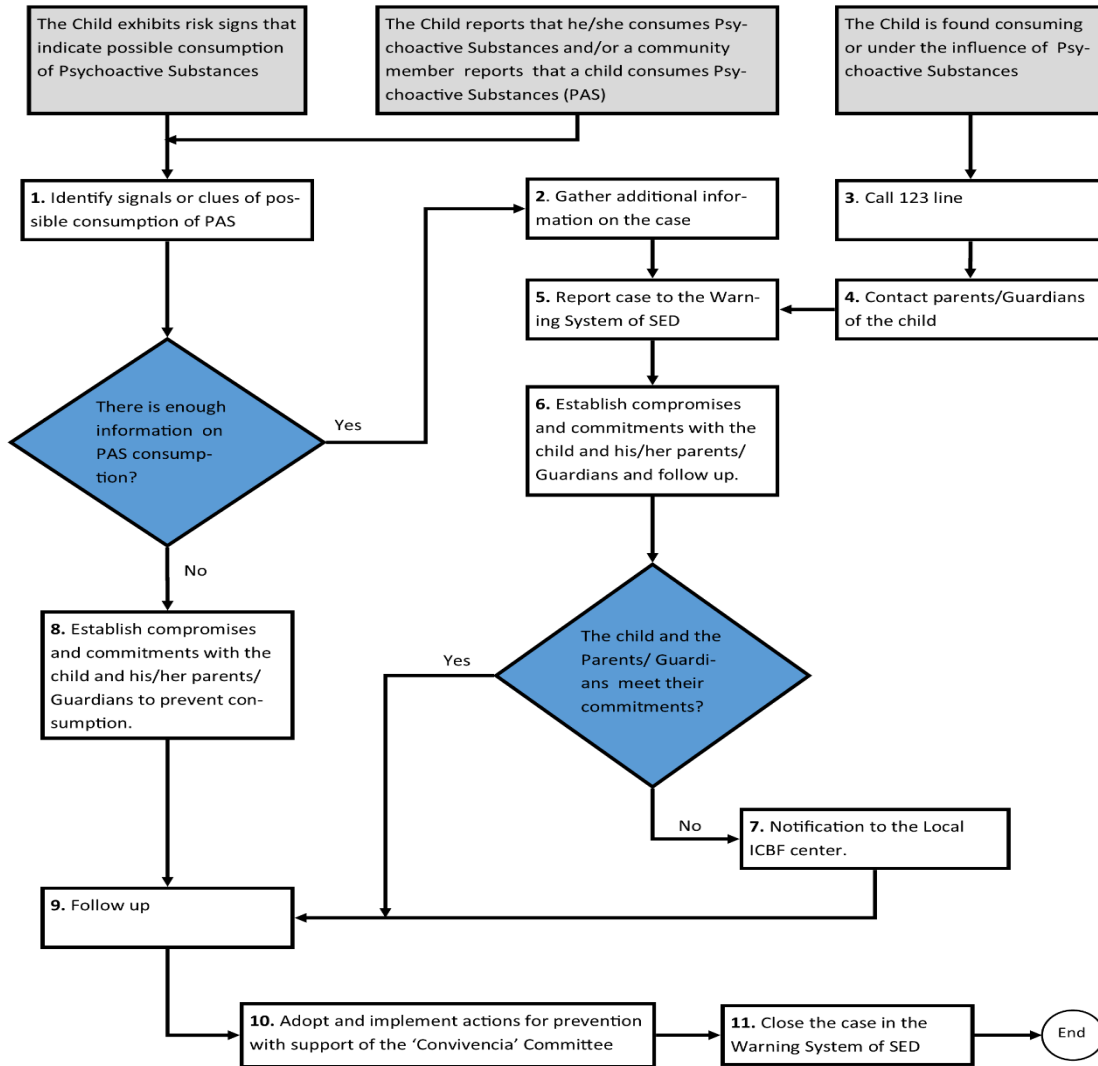
- Do not flush any drugs or substances down the drain, toilet or throw them in the bin.
- Always find a witness to assist. The use of video recordings is highly encouraged.
- Take possession of the substance without having skin contact.

- Store confiscated drugs and substances in a designated secure location.
- Inform the Head of School and attempt to identify the drug or substance. Advice can be obtained from the Local Police authorities.

2. The school has no legal obligation to disclose the identity of a student involved in a drug related offence. The school can choose to deal with the incident internally. However, police expect to be informed if a student or any other member of the community is found to be involved in supply for profit or if illegal drugs, or government-controlled substances are involved.

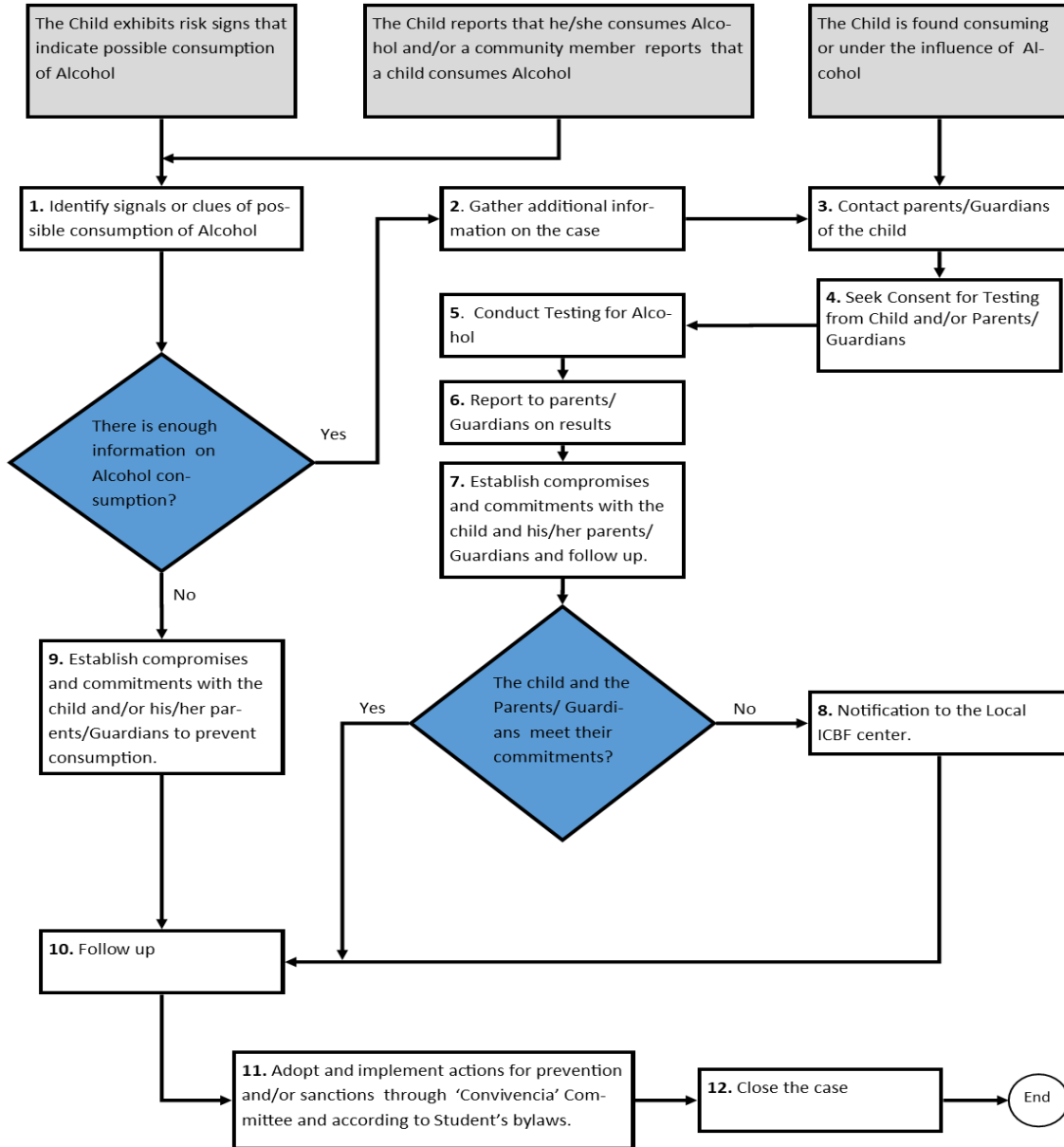
6.6 Attention protocol for suspected consumption of psychoactive substances by a Child following SED directives.

ATTENTION PROTOCOL FOR SUSPECTED CONSUMPTION OF PSYCHOACTIVE SUBSTANCES AS REQUIRED BY S.E.D.



6.7 FEI Attention protocol for suspected consumption of Alcohol.

FEI ATTENTION PROTOCOL FOR ISSUES INVOLVING ALCOHOL CONSUMPTION





6.8 Pre-testing questionnaire for suspected consumption of Alcohol

This interview has to be conducted prior to the testing using a breath analyser as required by Colombian Law, following the protocols in Resolution 001844, December 18 2015, Annex 5.

Full Name of the Student:			
Identification number:			
Place where the test is to be conducted:			Date:
Questions	Yes	No	Do not know/Do not answer
Have you drink alcoholic beverages in the last 15 minutes?			
Have you smoked in the last 15 minutes?			
Have you used buccal aerosols in the last 15 minutes?			
Do you have any object in your mouth (e.g., candy, shewing gum, etc.)?			
Have you eructed in the las 15 minutes?			
<p>The student has been informed in a precise and clear way: “(i) the nature and objective of the test, (ii) the type of tests available, the differences between them and the way that they can be controverted, (iii) the effects derived from its realization, (iv) the consequences that follow if consent is not given for the test, (v) the administrative procedure that must be followed after the practice of the test or the decision not to submit to it, (vi) the possibilities to participate and of defense in the possible “Convivencia” process that is to be open and all other circumstances that assure the student complete information before assuming responsibility for his/her conduct”.</p> <p>YES: NO: Do not apply:</p>			
Observations			



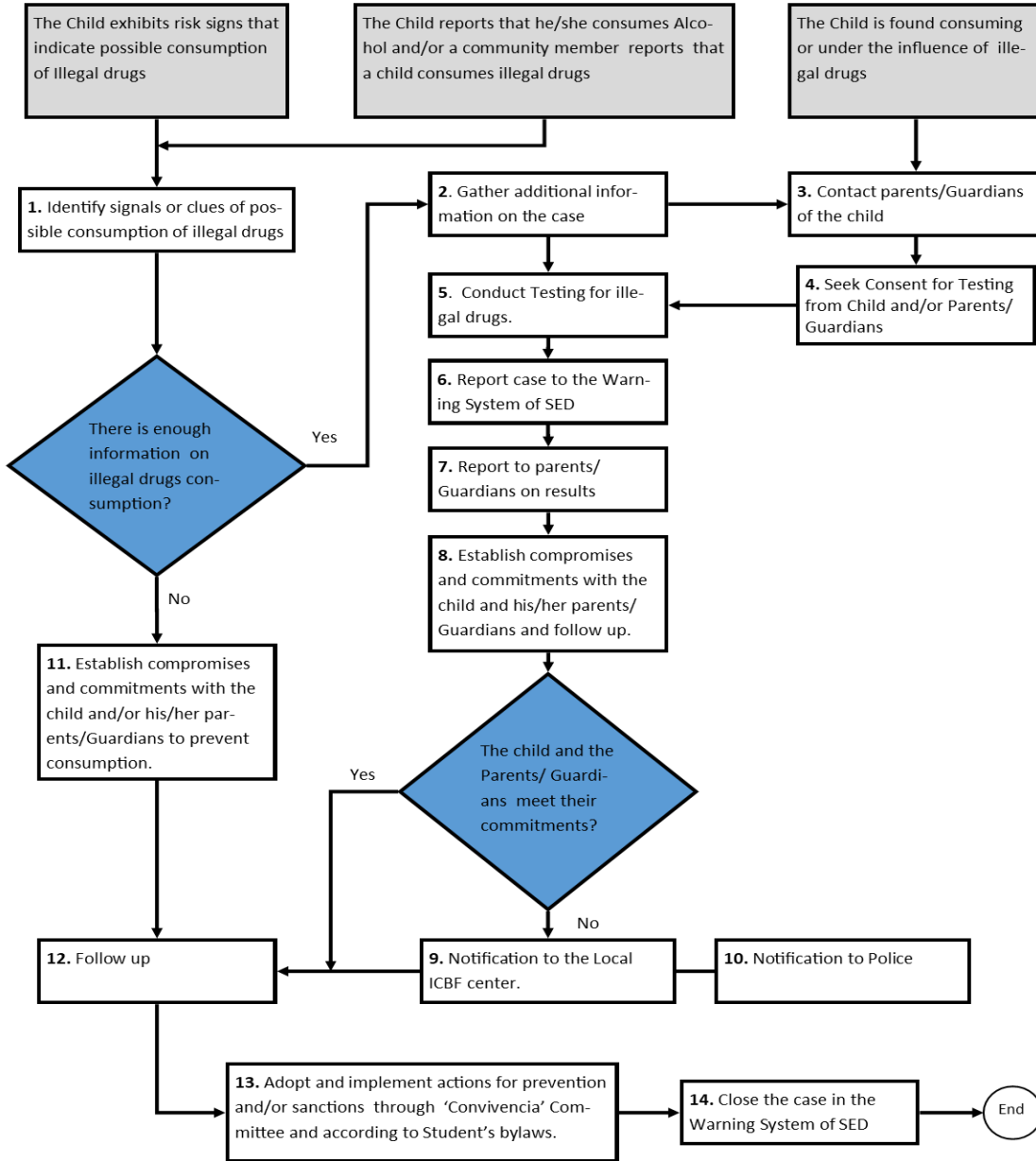
Breath Analyser	
Brand:	Model: Serial Number:
Measures	
Value of the first measure:	Value of the second measure:
Consecutive Number of the First Measure	Consecutive Number of the Second Measure
Conclusion on degree of drunkenness (according to Law 1696, 2013):	
Signature of the student	Fingerprint of the student

The Breathalyzer result presented was obtained by an operator that meets the competency requirements to carry out the indirect Breathalyzer determination; The alcohol sensor calibration is in effect at the time of the analysis; the procedures indicated in the "Guide for indirect measurement through exhaled air" were used (Resolution 1844 of 2015-12-18 issued by the National Institute of Legal Medicine and Forensic Sciences in compliance with the manufacturer's instructions for the use of the equipment.

Name of the Operator:	
Personal ID Number:	
Signature of the Operator:	

6.9 Attention protocol for suspected consumption of Illegal drugs or substances

FEI ATTENTION PROTOCOL FOR ISSUES INVOLVING CONSUMPTION OF ILLEGAL DRUGS AND SUBSTANCES



7. POLICIES AND RELATED PROCEDURES

- FEI Policy Manual
- Students Bylaws (Manual de Convivencia)
- Teachers Bylaws
- Board of Trustees Policy Development
- Staff and Employees Code of Conduct
- Child protection Policy (should be included)
- Safety and Wellbeing Policy

8. APPROVAL AND DETAILS FOR REVIEW

Approval and Amendment History	Details
Original Approval Authority and Date	Board of Directors / 26 th November 2021
Effective Date	26 th November 2021
Amendment authority and Date	Board of Directors / 26 th November 2021

Approval and Review	Details
Approval authority	Board of Directors
Committee or task force to approval authority	Governance
Administrator	Board of Directors /Head of School and Rector
Next Review Date	August 2022

9. EFFECTIVE DATE

This policy was approved by the Board of Directors on 26th November 2021 and is effective as of the date hereof.



Watson L. Vargas Escobar
President of the Board of Directors
Fundación Educativa de Inglaterra



Adam Bennett
Head of School and Rector
Colegio de Inglaterra - The English School



10. VERSION CONTROL

VERSION	DATE			CHANGE TRACEABILITY
1	15	10	2014	<ul style="list-style-type: none"> New policy
2	08	05	2019	<ul style="list-style-type: none"> Policy signatures updated Version control table included
3	06	12	2019	<ul style="list-style-type: none"> Resolution 2409 of 2019 included Law 2000 of 14 November 2019 included Administrative and Financial Director's name updated
4	30	04	2020	<ul style="list-style-type: none"> Policy objective updated Commitment was updated Article 2 of Law 2000 of 14 November 2019 was included The format was changed to APA Style Scope and application included
5	26	11	2021	<ul style="list-style-type: none"> Policy updated