|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Theme Area : Comprehensive and evidenced based practices Principle 1: Base Drug Education on sound theory and current research and use evaluation to inform decisions  Principle 2: Embed drug education within a comprehensive whole school approach to promoting health and wellbeing  Principle 3: Establish drug education outcomes that are appropriate to the school context and contribute to the overall goal of minimising drug-related harm | | | | |
| *1*. *School practice based in evidence*Focus question: Is your drug education program based on sound theory and current research?  * Policies and practices are based on harm minimisation * Learning and teaching activities are monitored and evaluated * Resources are evidence based and rely on latest research eg REDI and DE&T resources * Programs are rigorously implemented to ensure fidelity * DEEM and other data is utilised to inform future planning * Programs and practices are informed by local needs and context.   *2. A whole school approach*  Focus question: Is drug education embedded within a comprehensive whole school approach to promoting health and wellbeing?   * Drug education policies and practices are based on harm minimisation and are applied in a consistent manner across school operations and includes curriculum, student wellbeing, incident management * Drug education is taught within a health context * Teachers utilise a range of learning and teaching activities * Partnerships with parents and the school community are seen as essential and are therefore encouraged * Partnerships are formed with local community health services/agencies in supporting a comprehensive whole school approach to drug education. | | | *Clear educational outcomes*Focus questions: Does your school establish drug education outcomes appropriate to the school context? **Do they contribute to the overall goal of minimising drug-related harm?**  Across all areas of the school there is a clear shared understanding of drug education outcomes:   * learning and teaching * student wellbeing * policies * parent engagement * community consultation and participation   **Useful resources and documents:**  PoLT – Principle 5  REDI resources : Whole school PD package  Drug Education and the Effective Schools Model  Outcomes of effective drug education teaching and learning  Get Wise  Smoke Free Schools  Australian Government drug education resources | |
|  | **Stage of implementation** | **Comments** | | **Recommendations for Action** |
| **1. School practice based in evidence** |  |  | |  |
| 2. A whole school approach |  |  | |  |
| **3. Clear educational outcomes** |  |  | |  |
| **Stage of implementation I=Implemented P= Partially implemented N= Needs attention** | | | | |

|  |  |
| --- | --- |
| Theme Area : Positive school climate and relationships Principle 4 : Promote a safe, supportive and inclusive school environment as part of seeking to prevent or reduce drug-related harm  Principle 5: Promote collaborative relationships between students, staff, families and the broader community in the planning and implementation of school drug education | |
| 4. *Safe and supportive environment*  Focus question: Does your school promote a safe, supportive and inclusive school environment as part of seeking to prevent or reduce drug-related harm?   * All students are provided with a safe supportive environment that fosters engagement and connectedness with access to teachers who know them well and care about them * Cooperation and mutual support is promoted throughout the school community to build resilience * Emotional intelligence is highly regarded and reflected in our programs and practice * Attitudes to school survey data, especially safety, and connectedness to school, teachers and peers, is used to revise and improve current practice * Students have access to specialised support services as needed. | 1. ***Positive and collaborative relationships***   **Focus question: Does your school promote collaborative relationships between students, staff, families and the broader community in the planning and implementation of school drug education?**   * Partnerships with parents and the school community is encouraged * Partnerships with local agencies is encouraged * Consultation occurs with all school community stakeholders in relation to the development and delivery of drug education * Access to drug education activities and information is regularly provided for parents * Referral processes and protocols are developed with community agencies and health services * Schools have a current and comprehensive list of drug related resources and agencies in the local area.   **Useful resources and documents:**  PoLT especially Principle 1  Framework for Student Support Services in Government Schools – Primary Prevention  Parent Involvement in Drug Education Guidelines  REDI resources – PD for School Communities  It’s Not OK to Be Away  Preventing Drug-related Harm: A guide for student welfare coordinators  School Retention…What Does It Take? – a guide to keeping young people connected to school.  Parent brochures from website  Celebrating Safely materials  Student Transition and Resilience Training (START) |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Stage of implementation** | **Comments** | **Recommendations for Action** |
| 4. Safe and supportive environment |  |  |  |
| 5. Positive and collaborative relationships |  |  |  |
| Stage of implementation I=Implemented P= Partially implemented N= Needs attention | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Theme Area : Targeted to needs and context Principle 6 : Provide culturally appropriate, targeted and responsive drug education that addresses local needs, values and priorities  Principle 7: Acknowledge that a range of risk and protective factors impact on health and education outcomes, and influence choices about drug use  Principle 8: Use consistent policy and practice to inform and manage responses to drug-related incidents and risks | | | | |
| 6. *Culturally appropriate and targeted drug education*Focus question: Does your school provide culturally appropriate, targeted and responsive drug education that addresses local needs, values and priorities?  * All students participate in relevant drug education * Drug education is provided in a manner that is sensitive to cultural and experiential background of students * Learning and teaching strategies are reviewed and modified to ensure that they are appropriate and inclusive for all students * Local data informs programs and practices * Drug education programs focus on the drugs that are most likely to cause the harm to the student population and local community * The *Framework for Student Support Services* is used to inform how schools work within the area of student intervention * In responding to drug related incidents the school takes a broad health approach and focuses primarily on the safety and wellbeing of those students directly and indirectly affected * Harm minimisation underpins the school’s response in relation to dealing with drug related incidents.   7. *Recognition of risk and protective factors*  Focus question: Does your drug education program acknowledge that a range of risk and protective factors impact on health and education outcomes and influences choices about drug use?   * School increases protective factors for all students and reduces risk factors * PD for staff on the complexity and interrelationship of risk and protective in the development of resilience * Understanding of the continuum of drug use and interventions for each level of use. | | | 8*. Consistent policy and practice* Focus question: Does your school use consistent policy and practice to inform and manage responses to drug-related incidents and risks?   * Clear procedures for responding to drug related incidents have been developed in consultation with students and parents. * Staff professional development on appropriate responses to drug related incidents is provided * Induction for new staff on policies and procedures and regular policy updates for all staff is provided * Processes to support students with a range of complex issues that may be impacting on their health and wellbeing are developed * Protocols are enacted with local agencies eg. Victoria Police and Department of Human Services * Relationships with local agencies are encouraged to enable staff to support vulnerable students.   **Useful resources:**  Retention and Reintegration: Recommendations and model of practice for schools/Family support resource  Framework for Student Support Services - Intervention  Innovation and Good Practice in Drug Education monographs  Translated drug information for parents on website  Get Wise  Smoke Free Schools  Volatile Solvents, a Resource for Schools  Responding to Cannabis video | |
|  | **Stage of implementation** | **Comments** | | **Recommendations for Action** |
| 6. Culturally appropriate and targeted drug education |  |  | |  |
| 7. Recognition of risk and protective factors |  |  | |  |
| 8. Consistent policy and practice |  |  | |  |
| Stage of implementation I=Implemented P= Partially implemented N= Needs attention | | | | |
| Theme Area : Effective pedagogy Principle 9: Locate programs within a curriculum framework, thus providing timely, developmentally appropriate and ongoing drug education  Principle 10: Ensure teachers are resourced and supported in their central role in delivering drug education programs  Principle 11: Use student-centred, interactive strategies to develop student’s knowledge, skills, attitudes and values  Principle 12: Provide accurate information and meaningful learning activities that dispel myths about drug use and focus on real life contexts and challenges. | | | | |
| 9*. Timely programs within a curriculum framework* **Focus question: Is your drug education program located within a curriculum framework? Does this framework provide timely, developmentally appropriate and ongoing drug education?** Drug education programs:  * + are based on accurate, age-appropriate information on licit and illicit drugs   + have a minimum of 10 hours per year of drug specific information   + are developmentally, culturally, and gender appropriate   + are taught within a framework of health promotion and wellbeing   + assist students in making healthy choices   + aims to prevent, postpone or reduce levels of harm   + recognise the critical importance of the timing of programs * before experimentation * before problematic behaviour patterns are established * at the developmental stage most likely to cause harm   10*. Programs delivered by teachers.*  Focus question: Does your school ensure that teachers are resourced and supported in their central role in delivering drug education programs?   * Training and professional learning activities are regularly provided for teachers * All teachers delivering drug education programs have participated in recent drug specific professional learning activities * Teachers have access to current evidenced based resources * Teachers have training in using interactive learning strategies * Teachers tailor programs to meet the local needs of students * Adequate time is allocated to fully implement programs to ensure fidelity * Time and resources are allocated to plan programs * Presentations by visiting speakers are a part of an ongoing integrated program and the materials presented are consistent with harm minimisation * If peer leaders are utilised to deliver programs they are adequately trained and supported. | | | 11. *Interactive strategies and skills development* **Focus question: Does your drug education program use student-centred, interactive strategies to develop students’ knowledge, skills, attitudes and values?**   * **Classroom teaching practice:**   + uses interactive strategies to engage all students   + builds a climate of respect and inclusivity   + is student centered and collaborative   + includes small group activities, discussions and role-plays   + develops critical thinking, problem solving, decision making, help seeking, and refusal skills   + has a focus on skill development   + protects the safety and privacy of all students   **12. *Credible and meaningful learning activities***  **Focus question: Does your drug education program provide accurate information and meaningful learning activities that dispel myths about drug use and focus on real life contexts and challenges?**   * **Students need:**   + Accurate information from reliable sources   + Information relevant to their needs   + Normative information   + The opportunity to debunk myths and discuss assumptions   + Information that is transferable   + Focussed on the drugs most likely to cause harm to their age group   + Information relevant to life experiences and of immediate and practical use   + Information and skills to keep themselves safe in drug using situations   + Learning activities that are conducted within a harm minimisation context   **Useful resources:**  Tips on using interactive and inclusive strategies in drug education. [www.redi.gov.au](http://www.redi.gov.au)  PoLT – Principle 5  VELS – Health & PE, Thinking processes, Civics and Citizenship Domains  In Tune, LEAD, Get Wise, Smoke Free Schools,  Commonwealth Resources | |
|  | **Stage of implementation** | **Comments** | | **Recommendations for Action** |
| 9. Timely programs within a curriculum framework |  |  | |  |
| **10. Programs delivered by teachers** |  |  | |  |
| 11. Interactive strategies and skills development |  |  | |  |
| **12. Credible and meaningful learning activities** |  |  | |  |
| **Stage of implementation I=Implemented P= Partially implemented N= Needs attention** | | | | |