



The
St Gregory the Great
Catholic Academy Trust

'Where love exists, it does great things'

Policy

Alcohol and Drug Misuse

Reviewed and approved by: Trust Board

Approval date: Autumn Term 2023

Review due: Autumn Term 2025

Version: 1.0

The St Gregory the Great Catholic Academy Trust

Alcohol and Drug Misuse Policy

Within the St Gregory the Great Catholic Academy Trust, our academies are communities where our children and young people are given a clear vision for life, a vision which is rooted in the person and teachings of Jesus Christ and which is faithful to the mission of the Catholic Church.

Commitment to equality:

We are committed to providing a positive working environment which is free from prejudice and unlawful discrimination and any form of harassment, bullying or victimisation. We have developed a number of key policies to ensure that the principles of Catholic Social Teaching in relation to human dignity and dignity in work become embedded into every aspect of school life and these policies are reviewed regularly in this regard.

THIS POLICY DOES NOT CREATE CONTRACTUAL OBLIGATIONS ON THE ACADEMY TRUST

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1. Introduction

The St Gregory the Great Catholic Academy Trust is committed to providing a safe and productive work environment, and to promoting the health, safety and well-being of its members of staff. The Alcohol and Drug Misuse Policy is designed to ensure that staff are aware of the risks associated with alcohol and drug misuse and their consequences.

The inappropriate use of alcohol and drugs is becoming increasingly common in our society where stress levels are often high. In a child-centred environment it is essential that schools ensure that the highest standards of health and safety are adhered to. Alcohol and drug misuse affects individuals and organisations in terms of health and safety, efficiency, productivity and attendance. Alcohol and drug misuse can also have a detrimental effect on colleagues, pupils, parents, visitors, and on the reputation of the school and Trust.

The Trust provides services to the local community, and we must therefore have complete confidence in the ability of our staff to carry out their duties safely and responsibly and to ensure that the reputation of the school and Trust is maintained. As a caring and responsible employer, we recognise the need to provide support for staff but this will not preclude our addressing the misuse of alcohol and drugs by members of staff where necessary.

2. Purpose and Scope

The purpose of this policy is to: -

- Provide clear guidelines on the position of the Trust in relation to the misuse of alcohol and drugs
- Safeguard members of staff, pupils, parents, Trust Directors, Academy Council members and visitors
- Identify and consider support for those who are misusing alcohol and drugs
- Engender a pastoral climate that encourages openness and honesty in respect of alcohol and drug misuse (within the boundaries of confidentiality)
- Outline a procedure that gives members of staff, headteachers and governing bodies confidence in dealing with issues of alcohol and drug misuse
- Provide appropriate advice to headteachers and governing bodies on how best to deal with members of staff who are misusing alcohol and drugs

This policy applies to: -

- All members of staff at the school, whether they are at school site or at other work-related premises. Where the Headteacher is the subject of concern, it will be the responsibility of the Chair of The Academy Councils to ensure that the policy is followed.

3. Definitions

In relation to this policy the terms 'alcohol misuse' and 'drug misuse' will be used. These are defined as follows: -

Alcohol misuse – is the use of alcohol which affects a member of staff's ability to carry out their duties safely and effectively and/or conduct themselves appropriately.

Drug misuse – is the use of illicit drugs, the use of prescribed drugs not obtained from a medical practitioner, the use of prescription drugs not obtained from a medical practitioner for use by the named individual, the use of prescription drugs not being used for the purposes for which they have been prescribed or manufactured (e.g. taking a higher dose of drugs than that which has been prescribed by the medical practitioner), the use of over the counter drugs not being used as directed, psychoactive substances (previously called legal highs) or substances such as solvents, which affect an employee's ability to carry out their duties safely and effectively and/or conduct themselves appropriately.

Other terms used in the policy are defined as follows: -

Alcohol dependence – is alcohol abuse combined with tolerance, withdrawal, and an uncontrollable need to drink.

Drug dependence – is drug abuse combined with tolerance, withdrawal, and an uncontrollable need to take drugs.

Alcohol – is any beverage which contains ethyl alcohol, including beer, wine, liqueurs, and spirits.

Illicit drugs – are drugs which cannot be legally possessed under UK law, including a wide range of street drugs (e.g., cannabis, cocaine, LSD, heroin etc.).

Prescription drugs – are drugs which have been legally obtained from a medical practitioner and are being used by the named individual for the purposes for which they were prescribed or manufactured. This category is not included in the term 'drug misuse' as above.

Psychoactive substances - substances previously known as legal highs were outlawed by the Psychoactive Substances Act 2016.

Under the influence – this term refers to the impairment of physical and/or mental ability due to the influence of alcohol and/or drugs. (See Guidance for Headteachers). Where staff are driving a vehicle or operating machinery legal limits also apply.

4. Legal Position

All members of staff have a common law duty of care towards themselves and others in relation to the misuse of alcohol and drugs in the workplace. There are also a number of relevant pieces of legislation as follows: -

Health and Safety at Work Act 1974

Under the Act the Trust has a general duty to ensure, as far as is reasonably practicable, the health, safety and welfare of its members of staff and to ensure those not in their employ are not exposed to risks to their health and safety. If as an employer we knowingly allow a staff member under the influence of alcohol or drugs to continue working, and this places the employee or others at risk, we are at risk of prosecution. Similarly, staff have a duty to take reasonable care of their own and other people's health and safety and to co-operate with the school on health and safety matters. The Trust also has an additional duty **under the Management of Health and**

Safety at Work Regulations 1999 to assess appropriately the risks to health and safety of our staff and the people they work with.

Misuse of Drugs Act 1971

The term 'misuse' under the Act covers the supply, possession and use of illegal drugs, and the misuse, of prescribed drugs and substances such as solvents. Supply or possession of an illegal drug is unlawful. It is an offence for an employer, an occupier of premises or persons concerned in the management of premises to allow the supply, use or production of drugs to take place on their premises.

Road Traffic Act 1988

The Act states that drivers of road vehicles must not be under the influence of alcohol or drugs while driving, attempting to drive or when they are in charge of a vehicle.

5. Roles and Responsibilities

5.1 Headteacher

- 5.1.1 The Headteacher is responsible for ensuring that this policy is brought to the attention of staff, and that they have access to it.
- 5.1.2 If a member of staff reports for work, or is on the premises and is, or appears to be under the influence of alcohol or drugs, the Headteacher should follow the course of action outlined in Section 6. Procedure.
- 5.1.3 Once it has been brought to the attention of the Headteacher that a member of staff is, or appears to be, under the influence of alcohol or drugs the Headteacher is responsible for deciding, in line with Section 6, whether they are fit to start work, to continue at work or to remain on the school site.
- 5.1.4 The Headteacher should be alert to early indicators of a potential problem (see Guidance for Headteachers) and should offer support where appropriate in a professional and non-judgemental manner, and where necessary, refer employees to Occupational Health and/or the Employee Assistance Programme.

5.2 Members of Staff

- 5.2.1 Members of staff must at all times be capable of carrying out their duties in a safe and responsible manner. This is both a contractual duty of employment, and a legal requirement, as stated in the Health and Safety at Work Act 1974. Staff must not report for duty or be on the school site or work-related premises whilst under the influence of alcohol or drugs
- 5.2.2 Members of staff should not consume alcohol during the course of the working day (including during breaks, at lunchtime and between shifts) on the school premises, work-related premises or elsewhere, unless they have express permission to do so as part of a social event from the headteacher.
- 5.2.3 Members of staff are expected to ensure that their personal consumption of alcohol, or use of prescribed drugs, does not interfere with their ability to perform their duties safely and competently. Intoxicating substances may remain in the system for some time and even small amounts can impair performance and jeopardise safety. Staff are responsible for allowing sufficient time for intoxicants to leave their system before reporting for duty or

being on the school site or work-related premises. It is recommended that staff avoid drinking heavily the night before work in order to ensure they are not under the influence of alcohol or that the lingering smell of alcohol is apparent on their person. For the purposes of guidance, Occupational Health advice is that three large glasses of reasonable strength wine drunk after 9.00 pm may put an individual over the drink driving limit the following morning at 7.00 am.

- 5.2.4 Members of staff who suffer from a medical condition which they consider may result in the appearance of intoxication should inform the headteacher so an appropriate risk assessment can be made and in order that their behaviour cannot be misconstrued. The member of staff may be referred to occupational health who may request further information from their GP.
- 5.2.5 Members of staff who have been prescribed drugs such as opiate based painkillers, anti-epilepsy drugs or tranquillisers which may affect their ability to perform their duties safely and effectively and/or conduct themselves appropriately, should inform the headteacher so an appropriate risk assessment can be made and in order that their behaviour cannot be misconstrued. The member of staff may be referred to occupational health who may request further information from their GP.
- 5.2.6 Members of staff who are essential or casual car users, or whose work involves driving school vehicles must not be under the influence of alcohol or drugs while driving, attempting to drive or when they are in charge of a vehicle and should avoid drinking heavily the night before in line with 5.2.3. Where staff are driving a vehicle or operating machinery legal limits also apply.
- 5.2.7 It may be agreed, with the permission of the headteacher, as part of the usual risk assessment process, that an appropriate number of staff on residential trips are permitted to consume alcohol at particular times whilst on the trip, provided that this does not impact upon the supervision ratio of staff to students. It is essential there are a sufficient number of members of staff present at all times who have not consumed alcohol, in order to maintain appropriate supervision levels.
- 5.2.8 Members of staff who have an alcohol or drug related problem, or suspect that they may have, should seek assistance by approaching their Headteacher or a senior member of staff, who will consider appropriate support and a referral to Occupational Health. The help offered will be confidential and the situation should be handled in a sympathetic manner. To ignore a problem at an early stage may lead to greater problems in the future.
- 5.2.9 Members of staff who suspect that a colleague may be misusing alcohol or drugs should encourage that person to seek assistance. Ignoring a colleague's problem through a sense of personal loyalty is ultimately not in that person's best interests. In some cases, it may also jeopardise the safety of staff, pupils and the individual themselves.
- 5.2.10 Members of staff who suspect that a colleague at work is currently impaired by the misuse of alcohol or drugs have a duty to report this immediately to the Headteacher as a safeguarding issue.

5.3 Human Resources

- 5.3.1 Human Resources will provide guidance on the Alcohol and Drugs Misuse Policy to Headteachers (or their nominated representative).

5.4 Occupational Health

- 5.4.1 Managers may seek Occupational Health advice and guidance with regard to the medical aspects of this policy.
- 5.4.2 Occupational Health may seek information from the member of staff's GP, treatment centre, specialist practitioner etc. as necessary.

5.5 Health and Safety

5.5.1 Managers may seek advice and guidance from Health and Safety Advisers as required. This may include support with carrying out risk assessments and the provision of strategies for managing staff with alcohol and drug problems.

5.6 Trade Unions

5.6.1 Staff representatives will encourage employees to comply with this policy, and where necessary, to seek assistance and use the support available.

6. Procedure

6.1 Members of staff who are, or who appear to be, under the influence of alcohol or drugs whilst on the school site or work-related premises

- 6.1.1 Where it is suspected that the member of staff is under the influence of alcohol or drugs the headteacher should take the following action: -
Request an immediate meeting with the member of staff in a private setting. Ask them whether they are under the influence of alcohol or drugs. (It is recommended that another member of staff is present for example a senior staff member or a member of staff who will maintain confidentiality for example the School Business Manager).
- 6.1.2 Where it is suspected that the headteacher is under the influence of alcohol or drugs the next most senior member of staff should take action as outlined and the chair of the Academy Councils should be informed as soon as possible.
- 6.1.3 Where a member of staff admits they are under the influence of alcohol or drugs the headteacher should take the following action: -
- Send the member of staff home so that they and others are not at risk. (Consideration should be given as to whether they are able to return home safely, or whether they require assistance or transport by taxi).
 - Consider whether it is appropriate to contact the employee's next of kin or GP.
- 6.1.4 Where the member of staff does not admit they are under the influence of alcohol or drugs the headteacher should take the following action: -
- Consider the fitness of the member of staff for work by assessing whether they are exhibiting any of the following characteristics: -
 - Smell of alcohol
 - Slurred speech
 - Unsteady posture
 - Confusion/memory loss
 - Refer to Guidance for Headteachers for further guidance.

- Request verification from another staff member (for example a senior staff member or a member of staff who will maintain confidentiality for example a member of the School Leadership Team).

If following this assessment, the Headteacher considers that the member of staff is under the influence of alcohol or drugs they should send them home as outlined in 6.1.3. and this would be classed as authorised leave.

In both cases it is recommended that the Headteacher contacts Human Resources to discuss the appropriate action, and considers whether at an appropriate time a meeting should be arranged as in 6.2.

Where it is suspected that the Headteacher is under the influence of alcohol or drugs the next most senior member of staff should take action following the procedure as outlined in 6.1.3 and 6.1.4.

6.2 Members of staff who disclose that they have an alcohol or drug problem

Members of staff who disclose that they have an alcohol or drug related problem should be given the following assistance: -

- 6.2.1 The Headteacher should arrange a meeting to discuss their concerns with the member of staff. The employee may be accompanied by a union representative or a work colleague. A Human Resources representative may also attend the meeting.
- 6.2.2 The Headteacher should suggest to the member of staff that advice is sought by way of a referral to Occupational Health. The employee should be made aware that his/her co-operation is required during the referral process in order for Occupational Health to be able to provide appropriate advice. The member of staff should also be provided with the opportunity to contact the Employee Assistance Programme or to take up counselling if appropriate.
- 6.2.3 If the member of staff is undertaking treatment for an alcohol and/or drug dependency, they should provide medical evidence of this (e.g., certified evidence of appointment attendance from either their GP or specialist counselling agency).
- 6.2.4 If the member of staff is undertaking treatment for an alcohol or drug dependency reasonable time off should be granted for specific elements of this treatment over an agreed time period.
- 6.2.5 The member of staff should return, as far as possible, to their normal duties during and after treatment. This will depend on a workplace risk assessment as well as their ability to perform those duties.
- 6.2.6 Although it is accepted that staff should receive support if they admit they have an alcohol or drug problem, disclosure does not preclude the possibility of disciplinary action.
- 6.2.7 The following circumstances should be also taken into account when assessing whether a disciplinary or ill health capability route may be necessary: -
 - Where an employee has a drug or alcohol problem but they have refused to accept offers of support or treatment.
 - When the employee is not co-operating with, or following their treatment programme.
 - Where an employee discontinues a recovery programme before completion.

- Where after the successful completion of a recovery programme, the employee at any time reverts to an unsatisfactory level of conduct or work performance related to alcohol or drug misuse.

Where the headteacher discloses that they have an alcohol or drug problem the chair of the Academy Councils should follow the procedure as outlined in 6.2 with the support of Human Resources.

7. Disciplinary Action

The Trust will adopt a constructive and supportive approach when dealing with members of staff who are misusing alcohol or drugs and who have sought treatment for this.

However, in circumstances where there are breaches of this policy, whether the employee has sought help or not, these may be addressed under the Trust's Disciplinary Policy.

8. Guidance – Terms and Definitions

There are many different terms in use in relation to the misuse of alcohol and this can cause confusion. There are no agreed medico-legal terms in use worldwide. The information below lists some of the most commonly used terms but these are not exclusive or exhaustive. If you require further information contact Human Resources or Occupational Health.

The following are currently the most typically used terms: -

- **Alcohol Abuse**

(Equates to 'alcohol harmful use' (World Health Organisation))
The repeated use of alcohol despite adverse consequences.

- **Alcohol Dependence**

(Equates to 'alcohol dependency syndrome' (World Health Organisation)).
Alcohol abuse combined with tolerance, withdrawal, and an uncontrollable drive to drink.

- **Alcohol Dependence Syndrome**

A cluster of physiological, behavioural, and cognitive phenomena in which the use of alcohol takes on a much higher priority for a given individual than other behaviours that once had greater value. A central descriptive characteristic of the dependence syndrome is the desire (often strong, sometimes overpowering) to take alcohol. There may be evidence that return to alcohol use after a period of abstinence leads to a more rapid reappearance of other features of the syndrome than occurs with nondependent individuals.

9. Guidance – NHS Definitions

The NHS define three main types of alcohol misuse:-

- Hazardous drinking
- Harmful drinking
- Dependent drinking

Hazardous drinking

Hazardous drinking is defined as when a person drinks over the recommended weekly limit (21 units).

It is also possible to drink hazardously by binge drinking, even if you stick within your weekly limit. Binge drinking is when you drink an excessive amount of alcohol in a short space of time – eight units in a day for men, six units in a day for women. If you are drinking hazardously, you may not yet have any health problems directly related to alcohol, but you are increasing your risk of experiencing problems in the future.

Hazardous drinking, especially binge drinking, also carries additional risks such as: -

- Being involved in an accident
- Becoming involved in an argument or fight
- Taking part in risky or illegal behaviour when drunk – such as drink driving

Harmful drinking

Harmful drinking is defined as when a person drinks over the recommended weekly amount and has experienced health problems directly related to alcohol. In some cases, these problems may be obvious, such as: -

- Depression
- Alcohol-related accident
- Acute pancreatitis (inflammation of the pancreas)

Many of the health problems caused by harmful drinking do not cause any symptoms until they reach their most serious stages, such as: -

- High blood pressure
- Cirrhosis (scarring of the liver)
- Some types of cancer, such as mouth, liver, bowel and breast cancer
- Heart disease

So it can be easy to underestimate the levels of physical damage caused by harmful drinking. Harmful drinking can also cause related social problems such as: -

- Difficulties with your partner or spouse
- Difficulties with family and friends
- Problems at work or college

Dependent drinking

Alcohol is both physically and psychologically addictive and it is possible to become dependent on alcohol. Dependent means that a person feels that they are unable to function without alcohol and the consumption of alcohol becomes an important – or sometimes the most important – factor in their life.

Depending on the level of dependence, a person can experience withdrawal symptoms if their supply of alcohol is suddenly stopped. Withdrawal symptoms can be both physical and psychological.

Physical withdrawal symptoms include:

- Hand tremors ('the shakes')
- Sweating
- Nausea
- Visual hallucinations (seeing things that are not actually real), and, in the most Serious of cases
- Seizures (fits)

Psychological withdrawal symptoms include: -

- Depression
- Anxiety
- Irritability
- Restlessness
- insomnia

Moderately dependent drinkers do not usually experience withdrawal symptoms, or withdrawal symptoms are mild to moderate. Severely dependent drinkers do experience withdrawal symptoms, which are usually severe. Most severely dependent drinkers fall into a pattern of 'relief drinking', where they drink to avoid or counter withdrawal symptoms. Severely dependent drinkers usually have an extremely high tolerance to alcohol, and are able to drink amounts that would incapacitate or even kill most other people.

10 Guidance – Sources of Help and Advice

Alcoholics Anonymous

- Support group for people with alcohol problems



0845 769 7555

www.alcoholics-anonymous.org.uk

Alcohol Concern

- Organisation offering information on alcohol and problem drinking. Downloadable factsheets



0845 769755

www.alcoholconcern.org.uk

National Drugs Helpline

- National drugs helpline. Includes website and 24/7 helpline offering advice, information and support to anyone concerned about drug and solvent / volatile substance misuse. Offers support to family and friends as well as individuals seeking help.



0900 77 66 00

www.talktofrank.com

Mentor ADEPSIS

- Resources for Schools on alcohol and drugs

www.mentor-adepsis.org

Forward Leeds

- Drug and Alcohol Service in Leeds for adults, young people and families.

0113 8872477

www.forwardleeds.co.uk

11. Guidance - Advice for Headteachers

1. Signs of Alcohol and Drug Misuse at Work

Listed below are examples of the kind of symptoms which someone misusing alcohol or drugs may present with. Not all these symptoms will appear in every instance and it is possible that some of these symptoms may not be connected with alcohol or drugs. This is not a diagnostic tool and it is recommended that advice is requested from the Occupational Health Service if the concerns persist.

Absenteeism/Irregular attendance: -

- Multiple instances of unauthorised leave
- Frequent absences on Mondays or Fridays
- Unusually high absenteeism (e.g., for colds, flu, gastritis and general malaise)

Reporting for work: -

- Excessive lateness, for example on a Monday morning or returning from lunch
- Smelling of alcohol
- Unkempt appearance/lack of hygiene

Absenteeism whilst at work: -

- Repeated absences from the post, more often than necessary
- Frequent trips to the toilet
- Overlong tea/coffee breaks
- Leaving work early

Lack of concentration and confusion: -

- Work requires greater effort
- Jobs take an unreasonable time to complete
- Difficulty in recalling instructions and details
- Increasing difficulty in handling complex assignments
- Difficulty in recalling errors

Spasmodic work patterns and deteriorating performance: -

- Alternate periods of high and low productivity
- Increasing general unreliability and unpredictability
- Missed deadlines
- Mistakes due to inattentiveness or poor judgement
- Complaints from colleagues about behaviour
- Attempts to borrow money from colleagues
- Avoidance of manager or colleagues

2. Issues to Consider in Relation to Possible Alcohol or Drug Misuse

- **Prescription drugs**

Opiate based painkillers such as anti-epilepsy drugs and tranquillisers can, even when used as directed, result in the appearance of drunkenness. However, this is rare. It has also been claimed that anti-depressants can cause this effect; however, there is no reliable medical evidence to support this.

- **Diabetes**

It has been stated that on occasion diabetes sufferers can present with an 'alcohol-type smell' on the breath. However, diabetic ketoacidosis when it occurs is actually a fruity smell as the body releases ketones to rid itself of severely high blood sugar.

A person suffering from hyperglycaemia may have the appearance of being intoxicated by displaying symptoms such as confusion, weakness or lack of coordination

- **Mouthwash**

The use of mouthwash has been blamed for an alcohol type smell on the breath; however, few modern mouthwashes contain alcohol and even with those that do, the effects are not lasting and should not remain on the breath for any significant period of time.

- **Samples**

It has been claimed that samples of alcohol given for example in a supermarket, may cause an individual to appear to be under the influence of alcohol. However, a small sample should not cause any significant effect unless alcohol has already been consumed. Staff should not consume alcohol during the course of the working day (including breaks, lunchtimes and shifts) as outlined in 5.2.3 and it is advised that staff do not consume even small amount such as samples to avoid any issues arising.

- **Concussion**

It is possible that concussion could result in the appearance of being under the influence of alcohol or drugs.

- **Diet**

It has been claimed that a high-protein/low-carbohydrate diet can result in the smell of alcohol on the breath. This has also been claimed for heartburn or acid reflux (as they both cause alcohol and to travel from the stomach back to the throat and mouth). However, these cases have only been relevant in relation to breath tests where the machine is sensitive to particular chemicals. It is very unlikely that an alcohol smell detected by a human could be caused by diet.

- **Drinking the night before**

Drinking heavily the night before could result in staff being or appearing to be under the influence of alcohol. It is recommended in 5.2.3 that staff do not overindulge in alcohol the night before attending for work to ensure they are not under the influence of alcohol or that the lingering smell of alcohol is apparent on their person.

It should be noted that although it is possible that some of these explanations and others, could have a basis in fact, it is well-recognised that individuals suffering from an alcohol problem may provide a wide variety of explanations in order to cover up their dependence upon alcohol.

If further information is needed it is recommended that advice is taken from Occupational Health.

3. Strategies for Managing Staff with an Ongoing Alcohol or Drug Problem

- Agree who will be the Appointed Person with regards to ensuring the employee's fitness for work. (usually the headteacher or senior staff member).
- Undertake a Workplace Risk Assessment (consider taking advice from the Occupational Health Service and the Health, Safety and Wellbeing Team in completing this).
- Agree at what time/s of each working day that the employee will be required to report in to the Appointed Person (e.g., prior to the start of the working day, when returning to work after a shift break).
- Advise the employee that they may not undertake any duties prior to reporting in to the Appointed Person. Particular attention should be given to the following: -
 - Duties where there is a responsibility for children or children are present
 - High risk activities such as working at height, confined spaces, use of petrol driven machinery, use of chemicals
- The Appointed Person will assess the fitness of the employee for work at the agreed time by assessing whether they are exhibiting the following characteristics: -
 - Smell of alcohol
 - Slurred speech
 - Bloodshot eyes
 - Unsteady posture
 - Confusion/memory loss
 - Unkempt appearance/poor hygiene
- The Appointed Person may request verification from another staff member (e.g., a senior staff member or a member of staff who will maintain confidentiality for example a member of the Senior Leadership Team) if desired.
- If the member of staff is found to be under the influence of alcohol or drugs they should be sent home as outlined in 6.1.2.

It is recommended that advice is taken from Occupational Health when the school is managing a staff member with a long-term alcohol or drug problem.



The
St Gregory the Great
Catholic Academy Trust

'Where love exists, it does great things'

All policies are written in line with our Trust Mission Statement:

Within the St Gregory the Great Catholic Academy Trust, our academies are communities where our children and young people are given a clear vision for life, a vision which is rooted in the person and teachings of Jesus Christ, and which is faithful to the mission of the Catholic Church.

St Gregory the Great Catholic Academy Trust is a charity and a company limited by guarantee.

Registered in England and Wales.

Company number 10785982

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