



Home Office

# **DRUG INTERVENTIONS PROGRAMME (DIP)**

## **INTRODUCING LOCALLY FUNDED DRUG TESTING ON ARREST (AND ASSOCIATED INTERVENTIONS)**

A GOOD PRACTICE GUIDE

April 2011



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# FOREWORD

Drug testing on arrest continues to be a highly successful tool for local areas to identify drug misusing offenders in order to address their behaviour and to reduce crime. Drug testing is now firmly embedded within police procedures in many areas across England & Wales, with around 230,000 tests being conducted each year.

Of course, the real added value of testing on arrest is the interventions that happen following a positive drug test result. It is testament to the benefits of Required Assessment, drug treatment and other support (aimed at getting drug-misusing offenders off drugs and out of crime) that new areas are continuing to fund drug testing from local resources – particularly given the present financial climate.

Not only have the existing five self-funded areas continued their commitment to fund testing but four new areas have also rolled out drug testing in March and April this year alone.

I hope that you and your partners will find this document useful in deciding whether or not to introduce drug testing on arrest in your area. Not only does it map out the practical considerations that areas will need to bear in mind, but it also sets out how new flexibilities can make it easier for new areas to make the move.

It is now simpler and less bureaucratic for new areas to introduce testing on arrest and there is also much greater freedom around how drug testing (and the related interventions) takes place, when it takes place, and how it is paid for. This puts you in the best position to make the right decision for your area.



**SALLY RICHARDS**

HEAD OF REDUCING REOFFENDING UNIT, HOME OFFICE

# 1. INTRODUCTION

From 1<sup>st</sup> April 2011 all police force areas in England & Wales are able to conduct Drug Testing on Arrest (DToA) and related interventions without any additional authorisation from the Home Office. This guide provides advice on how to make this happen should you and your local partners decide to do so.

## 2. WHAT IS DRUG TESTING ON ARREST?

### BACKGROUND TO DTOA

Drug testing was introduced in 2003 as one of a suite of tools and powers used as part of the Drug Interventions Programme (DIP) **to help tackle drug-related offending**. Drug testing (and its related interventions) is available to local areas in England & Wales and is currently operational in 23 police forces areas (of the 43 force areas in England & Wales). In those areas the police, under the Police and Criminal Evidence Act (1984), have the power to request a sample of oral fluid to test adults arrested (or charged) with any offence for the presence of the specified Class A drugs, heroin and or cocaine/ crack. Those testing positive are required by law to undergo an assessment of their drug misuse, leading to treatment and other support where appropriate. Failure to take a drug test (without good cause) is a criminal offence.

### THE DRUG TESTING PROCESS

The police can test those arrested (or charged) with a range of specific ‘trigger’ offences. The trigger offences are those that research has shown to have the clearest link with the use of heroin and cocaine / crack (a list of the trigger offences can be found at Annex A). The police can also test those arrested for or charged with any other (‘non-trigger’) offence, using ‘Inspector’s Authority’, when a police officer of at least Inspector rank authorises the taking of a sample on the basis of having reasonable grounds to suspect that misuse of any specified Class A drug caused or contributed to the offence.

The drug test is a screening tool only and the result cannot be used as evidence against the

detainee. The drug testing process involves the non-intimate collection of an oral fluid sample and an accurate reporting of the result within a short space of time. The result of the test can lead to referrals for treatment and can also be used to inform court decisions on bail and sentencing. Drug Testing on Arrest (or charge) must be conducted at police sites by police staff or staff employed by the police and trained in the use of the equipment. To ensure the standard application of drug testing a single supplier of accurate, ‘operator-friendly’ drug testing equipment (currently Concateno plc) has been procured by the Home Office – police forces can draw the necessary equipment and services from this contract.

### THE RESULT OF THE DRUG TEST

Those receiving a positive drug test result in police custody can dispute that result (including on the basis of the legitimate use of medication). This tends to be relatively infrequent. In such cases the remainder of the sample provided is sent to the supplier for confirmatory analysis, which will confirm beyond doubt the contents of the sample (and will either maintain or overturn the screening test result). The results of confirmatory analysis then inform the subsequent interventions.

Following a positive drug test, the person is legally required to attend and remain (and remain) at an assessment with someone from the local Criminal Justice Integrated Team (CJIT). The CJIT worker will help the drug user seek treatment and other support.

## NEW FREEDOMS AND FLEXIBILITIES

The authorisation for the police to conduct drug testing and related interventions is now in place throughout England & Wales. This enables local partners in all areas to decide whether or not to introduce drug testing, as a locally driven approach to reducing drug related offending. There is **reduced bureaucracy** for areas by enabling you to manage your operations across police sites without needing to arrange for specific site authorisations through the Home Office (as was previously required).

Also the police can now use **more discretion** in identifying which arrestees should be tested. This involves the police and other partners choosing to ‘screen out’ (i.e. not drug test) individuals where drug use is not considered to be driving their offending – rather than the previous practice of drug testing all individuals arrested for a ‘trigger’ offence.

**Further flexibilities** in relation to use of local funding are discussed in Section 7

## RELATED INTERVENTIONS

A positive test result enables other interventions to be imposed by the police (Required Assessment) and the Courts (Restriction on Bail). These interventions are not available to DIP areas where drug testing is not in place.

### REQUIRED ASSESSMENT:

Any individual who tests positive will be required by the police to attend an initial assessment and, if appropriate, a follow-up assessment. It is recommended wherever possible (and where this does not interfere with the investigatory process for the offence for which the individual has been arrested / charged) that the initial assessment should take place in the custody suite. This allows the drug worker to start to engage with the individual but also ensure that the individual attends and remains at the initial assessment; reducing the need for the police to take enforcement action against individuals who

fail to attend and remain where the initial assessment takes place in the community. It is good practice for any area introducing drug testing to consider what coverage of CJIT workers will be required to conduct assessments.

### RESTRICTION ON BAIL:

New drug testing areas will want to ensure that there are robust mechanisms in place to ensure that drug test results are communicated to courts and that the CPS, Court Legal Advisers and Magistrates/ Judges are aware of the Restriction on Bail conditions. Also, the local treatment (and other) services will need to be able to accommodate defendants on Restriction on Bail conditions. Restriction on Bail provisions have been more effective in areas where these issues have been addressed.

### FAILURE TO COMPLY:

Failure by an individual who has tested positive, including those whose positive result has been maintained by confirmatory testing, to attend and remain at a Required Assessment is a criminal offence. Many existing areas conducting testing on arrest have put mechanisms in place to manage breaches. These also include processes for enforcement action against those failing to comply with their Restriction on Bail conditions. These mechanisms can be informed by local data providing an estimate of anticipated breaches, and consideration of a handling strategy with key partners involved.

### CONDITIONAL CAUTION:

A DIP condition can be attached to a police caution as an alternative to prosecution. It is intended to be a swift and effective means of dealing with straightforward cases where the offender admits the offence and agrees to comply with specified conditions, a process covered by the Police and Criminal Evidence Act (PACE) 1984. The caution also provides an early opportunity to identify drug-misusing offenders and engage them in appropriate

treatment and support before their lifestyle spirals into a more serious cycle of drug misuse and crime. Where the condition is not met, the offender may be charged or prosecuted with the original offence.

### **RECOVERY AND REINTEGRATION**

Drug treatment is only one element of an offender's recovery. Dependent on individual need, CJITs offer or broker a range of additional reintegration services. These include support with housing, skills development and developing routes into employment. Local partners work together and use their resources, including DIP funding, to ensure that local services or pathways exist to support offender re-integration. To ensure that the transition for drug misusing offenders between prison and community based provision is seamless, guidance and ongoing support is provided to ensure continuity of care between CJITs and prison-based services.

### **INTEGRATED OFFENDER MANAGEMENT**

**DIP is a key element of wider Integrated Offender Management (IOM) approaches.** IOM provides an overarching framework for bringing together Criminal Justice System (CJS) and non-CJS agencies in local areas to prioritise interventions with offenders whose crime causes most damage in their locality (including Prolific and Other Priority Offenders (PPOs) and those identified through DIP); with the aim of tackling crime, reducing re-offending and protecting communities. IOM helps ensure that these offenders are managed in a co-ordinated way, bringing greater coherence to the delivery of relevant local programmes and approaches.



# WHY INTRODUCE DRUG TESTING ON ARREST?

## THE BENEFITS OF DRUG TESTING ON ARREST (DTOA)

Since the Drug Interventions Programme (DIP) began in 2003, the police have conducted well over one million drug tests nationally, and there is evidence to demonstrate the success of drug testing and its associated interventions in reducing drug-related offending.

- Since DIP began in 2003, recorded acquisitive crime – to which drug-related crime makes a substantial contribution – has fallen by 39% across England & Wales. During this period DToA has been in operation in the majority of the areas with the highest levels of recorded acquisitive crime.
- Research has found that the overall volume of offending of a cohort of 7,727 individuals was 26% lower following identification through positive DIP drug test in police custody. Around half the cohort showed a decline in offending of around 79% in the following six months.
- Since the approach started over 300,000 people have entered drug treatment through DIP (as at end of August 2010). DIP managed 58,339 adult Class A drug misusing offenders into drug treatment in 2009-10.
- Drug testing is a powerful tool for identifying drug-misusing offenders. In areas that operate drug testing on arrest, around two-thirds of those entering treatment are identified following a drug test.

While drug testing is already in operation in the majority of areas in England & Wales with the highest levels of drug-related offending, other areas which have lower levels of drug-related crime may also have a strong case for introducing drug testing. In deciding to introduce drug testing, existing self-funded areas have also taken into account the need to ensure continuity with neighbouring areas where drug testing is already in place,

the delivery of health and wellbeing related outcomes, and how drug testing complements drug enforcement operations.

Further advice to local partners on scoping the local case for introducing DToA and its associated interventions, and securing the necessary funding through the wider partners can be found in Sections 6 and 7.

## WHAT DO EXISTING 'SELF-FUNDED' AREAS THINK?

*"Support of all partners is absolutely imperative. By having four partners contributing financially to the Richmond scheme we feel we demonstrate that 'buy-in' and shared ownership."*

*"Drug service providers and service users were kept informed of every stage in the application process and were consulted on implications for them... This has ensured that all services are supportive of this development."*

*"The public launch is important and shouldn't be overlooked...it will raise confidence and explain why money is being spent on this against the current financial background."*

**ANNE LAWTEY, LONDON BOROUGH OF RICHMOND UPON THAMES**

*"Prior to the introduction of self-funded Drug Testing on Arrest to Central Bedfordshire... intelligence suggested that Central Bedfordshire had a high incidence of drug related offenders combined with poor access to drug treatment services."*

*"...agreement was reached and drug testing on arrest was introduced on the 1st April 2009, with one CJIT, utilizing a pooled budget, under the direction of one Drug Action Team. The Force took responsibility for funding..."*

*"...a consistent approach to drug using offenders who fund their drug use through crime has considerably eased the introduction of forcewide Integrated Offender Management..."*

**STEVE EASTON, BEDFORDSHIRE POLICE**

*"During the first 24 hours of Ystrad Mynach going live...two detainees were referred into the DIP following positive tests..."*

*"...both individuals were opiate dependent and had not been engaged in treatment (one had never accessed drug treatment services and was assessed as being of high risk...)"*

**LYN WEBBER, GWENT DRUG INTERVENTIONS PROGRAMME**

*"Across the three self-funded sites there are, on average...102 people per month diverted towards treatment which contributes to improving the lives of the individuals concerned..."*

*"By diverting people towards the treatment agencies a significant impact will be made towards crime reduction."*

*"St Helens currently has approximately 170 clients... Without drug testing a significant proportion of this group would remain in the destructive cycle of crime and drugs."*

*"Establishing the self-funded sites has seen partnership work develop ...Police, Probation and Treatment Agencies work together with the same clients to offer both support and advice but also enforcement when engagement fails."*

**CH SUPT STEVE MCNAUGHTON, MERSEYSIDE POLICE**

*“In response to community concern about drug use within Llanelli partners across Carmarthenshire looked to introduce new and innovative ways of reducing the harm caused by drugs.”*

*“Research commissioned by Dyfed-Powys Police into drug use trends in Llanelli showed that heroin and other drugs were readily available with established suppliers.”*

*“Early partnership involvement was key to the successful implementation of Testing on Arrest in Llanelli.”*

*“Training covering the processes and legalities of the programme was provided to Magistrates prior to implementation and the courts have been fully engaged with the scheme.”*

**SHARON RICHARDS, DYFED-POWYS DIP**

*“In April 2008 we introduced a self funded site for the north area of our county...we were having an increase in crime in that area as offenders arrested there were not being drug tested...this appeared to be common knowledge amongst our offending community and also cross border offenders...”*

*“As the infrastructure around testing and treatment services was already in place the process was relatively painless...”*

*“there has been a reduction in all acquisitive crime offences of between 5 and 21%...I would not be so bold as to suggest this was entirely due to drug testing on the north, however, I am sure that it has played a significant part...”*

**INSP DAVE BEAUMONT, LEICESTERSHIRE POLICE**

# WHO WOULD BE INVOLVED?

## POLICE

In order to maximise the important contribution the police make within DIP, forces might consider the important input from a senior strategic manager for the wider region. Any area introducing drug testing might want to appoint a strategic lead. In cases where drug testing is conducted elsewhere in the police force area, a police strategic lead may already be in place. The Strategic Lead will be able to take responsibility, with any necessary operational support, for:

- Overseeing and managing the successful 'roll-out' of drug testing and related interventions at the new site(s).
- Development of effective strategic partnerships and co-ordination between local agencies.
- Operational delivery - to ensure that the drug testing custody suite operates all aspects of the drug testing process effectively and to address day-to-day operational issues in the custody suites.
- The overall performance and accountability of the areas' drug testing and related DIP activities (including ensuring appropriate training requirements and equipment for drug testing sites is in place).
- Dissemination of best practice within force (and sharing this with other areas where relevant)

On a daily basis, police staff work closely with the CJIT. CJITs are based within the custody suite and conduct an initial assessment of the needs of offenders who test positive for the specified Class A drugs, heroin and or cocaine/ crack.

In many areas trained Detention Officers (DOs) are employed to drug test detainees in custody providing 24/7 coverage and avoiding police officer time being routinely used to conduct the tests. In existing testing areas a number of trained DOs are appointed as 'Cascade Trainers' - responsible for disseminating

training to other staff who will be conducting drug tests. A senior level presence at training is also helpful to develop knowledge of the DT process and ensure the strategic lead has sufficient knowledge of technical drug testing issues - putting them in a good position to address any local performance issues that arise.

It is also good practice for the police to have a number of other custody officers and staff in participating suites trained in order to understand and support the process in their dealings with detainees and to enable 24/7 testing, where required. It is important that the training requirements around drug testing are given due importance from an early stage. It is also helpful if all those involved with DIP have a good understanding of both the wider context of DIP and the drug testing procedure.

## CRIMINAL JUSTICE INTEGRATED TEAMS (CJITS)

Criminal Justice Integrated Teams (CJITs) are the key local delivery mechanism of the Drug Interventions Programme in the community. They are commissioned by the local partners as co-located, multi-agency partnerships, comprising members from a range of disciplines with a range of competencies and skills. A typical team might include; drug workers based in police custody suites and courts, case managers, those with specialist knowledge of housing issues, mental health, education, training and employment, family support, outreach workers working in the community and dedicated Prolific and other Priority Offender (PPO) case managers. This workforce manage initial and follow-up assessments for those testing positive on arrest, service the courts for restriction on bail to ensure maximum compliance with these legal requirements by individuals, and manage effective throughcare with the services in prison.

## **CPS AND COURTS/LOCAL CRIMINAL JUSTICE BOARDS**

The Police and CJITs will need to ensure that CPS Prosecutors and Clerks to the Courts / Magistrates are aware of the Restriction on Bail provision. In deciding upon the use of Restriction on Bail, the court should take into account any assessment and treatment that has been undertaken. To that end, processes need to be put in place to ensure that drug test results are communicated to the courts where an individual has been charged. CPS Prosecutors will need to be aware of the CPS Guidance on DIP which can be found at [www.cps.gov.uk/legal/section14/chapter\\_m.html](http://www.cps.gov.uk/legal/section14/chapter_m.html). It is advisable to fully engage local courts as part of the preparations for introducing testing, including as part of local training on DIP / drug testing processes.

# WHAT SHOULD AREAS DO TO BE READY TO DRUG TEST?

This section sets out the range of considerations that any local area may wish to consider – in deciding **whether** and **how** to introduce drug testing. Indicative timings have been set out, although the requirements of individual areas may differ.

## AT LEAST 3 MONTHS PRIOR TO ROLL-OUT OF DTOA

### DETAILED SCOPING:

Local partners will wish to carefully consider whether introducing drug testing and related interventions is an appropriate course of action for the area. **Detailed scoping of the implications of such a move at an early stage is recommended.** This will make clear the costs and benefits of introducing drug testing for the relevant partners and most importantly, for the local community.

Existing arrest figures can be used to provide an indication of the likely ‘throughput’ of individuals generated by drug testing; including the likely numbers of those arrested who will be tested; the proportion of those testing positive; required to attend initial and follow-up assessments; and eligible for Restriction on Bail. This analysis is invaluable in determining the input needed from all partners that would be involved in delivering drug testing and the related interventions. It can also provide an estimation of likely peak times (which will impact upon police custody and the requirements for drug services). These figures can also help partners to quantify the expected benefits, for example in terms of crime reduction, health and other social benefits.

The number of trigger offence arrests and an estimation of the likely volume of tests that will be conducted using ‘Inspector’s Authority’ following non-trigger arrests can be used as a basis for estimating the likely ‘throughput’. In making this calculation, partners may also wish to estimate the volume of those arrested for trigger offences who may not be tested, based upon police discretion – **there are no**

**national targets for how many arrestees should be tested.**

### AGREEMENT OF PARTNERS / FUNDING COMMITMENT:

An understanding of likely testing volumes will also enable an estimation of the likely financial resources required from local partners in order to introduce and deliver drug testing. A vital aspect of partners reaching agreement to introduce drug testing will be the commitment of relevant partners to contribute towards the necessary funding. (The costs associated with introducing drug testing are covered in Section 7.)

### LOCAL GOVERNANCE:

Partners will want to ensure that an appropriate governance structure is in place. In order to provide the strategic direction and high-level decision making, a local DIP steering group (or a suitable existing forum) could be used. Wider partners should also be engaged with the plans.

In order to ensure the smooth roll-out of drug testing in new areas local arrangements will need to ensure that all the necessary activities are co-ordinated between partners and completed in a timely manner. Areas may wish to establish an Implementation Group for that purpose.

## 1-3 MONTHS PRIOR TO ROLL-OUT OF DTOA

### LEAD CONTACTS IDENTIFIED/HOME OFFICE INFORMED:

Ideally, the decision to introduce DTOA and related interventions into a new area will have been made at least three months in advance of the planned date ‘go live’ date. Once this decision has been made, a number of practical arrangements will need to be considered, including the following information, which the Home Office need in order to help local partners with their implementation and operational delivery:

- The planned date for introducing drug testing and related interventions (to ensure we can 'go live' with the monthly information to help your operation).
- Confirmation of the police site(s) at which drug testing will be introduced, and the geographical areas involved including the Basic Command Unit (BCU), Drug & Alcohol Action Team (DAAT) or Substance Misuse Action Team (SMAT) area, and police force area.
- Contact details (including name, address, email address and telephone number) for the following contacts within the area in question:
  - A named contact or strategic police lead (in police areas where drug testing is already in place elsewhere within the force, a strategic lead may already be in place)
  - A lead police contact for data purposes (see Recording Information, below)
  - A contact point for receiving confirmatory test results. Once drug testing is operational, the nominated contact will receive from the supplier the results of confirmatory tests – it is recommended that this contact point should be from within the police force (a shared email account is often used for this purpose).
  - A point of contact for the processing of payments from the local partners to the drug testing supplier for the provision of drug testing equipment and services. This contact point can represent any of the local partners and is asked to provide any reference numbers that the supplier will need for invoicing purposes (such as a purchase order number).

### IDENTIFYING THE RIGHT FACILITIES:

As part of scoping the introduction of drug testing by potential new areas, a number of practical operational requirements should become clear. In order for drug testing to be introduced smoothly by the police, it will be important for appropriate facilities to be in place within police custody. It is advised that a dedicated drug testing room is set aside at each police site in which testing will take place, to enable drug tests to be conducted effectively. The partners are also advised to review whether the facilities for drug workers within custody are adequate, taking into account the likely increase in the number of individuals requiring assessments following a positive drug test.

### MENTOR SUPPORT:

New areas preparing for the roll-out of drug testing may wish to benefit from the guidance and support of other areas in England & Wales, whether it be established areas with years of experience of delivering drug testing or other areas that have introduced testing on a self-funded basis more recently. A network of Police Strategic Leads (PSLs) from existing drug testing areas exists and can provide support to new areas – details can be given upon request.

### FINAL MONTH PRIOR TO ROLL-OUT OF DTOA

#### GUIDANCE / LITERATURE:

At an operational level it is important that all partners involved with the delivery of drug testing are aware of the required processes and relevant legal considerations. Detailed guidance on the implementation on Testing on Arrest, Required Assessment (RA) and Restriction on Bail (RoB) provisions and an accompanying Frequently Asked Questions document can be obtained from the Home Office on request. New areas are advised to ensure that this guidance is available to all relevant staff on an ongoing basis. Further guidance (including on the drug testing

process itself) is available from the Home Office on request.

Partners (in particular the police) may also wish to ensure at this stage that relevant local protocols have been established, for example in relation to the use of ‘Inspector’s Authority’ to test those arrested for non-trigger offences, and breach protocols.

New testing areas may also wish to utilise the leaflet “Your drug test and what it means”, which provides a simple explanation of the drug test for individuals being tested – details are available from the Home Office on request.

Data issues related to Drug Testing on Arrest, Required Assessments and Restriction on Bail are discussed later in this Section. The police and local CJIT are advised to ensure that an adequate stock of copies of the relevant forms will be available once testing has been introduced.

#### **TRAINING AND EQUIPMENT:**

It is essential to the success of drug testing in a new area that those conducting drug tests are thoroughly trained in the use of the drug testing equipment. This will help to ensure that drug tests are conducted correctly and the potential for errors in the process can be averted. For this purpose, early arrangements should be made for the drug testing supplier (contact details will be provided by the Home Office) to conduct at least one training session in the case of new drug testing areas. Individuals trained directly by the supplier can then be considered as ‘cascade trainers’, responsible for passing on this training to other (police employed) staff conducting drug tests. In new drug testing areas where testing is conducted elsewhere within the police force, it may be possible to utilise existing cascade trainers to conduct this initial training.

In addition to the specific training by the supplier on the use of the equipment, wider training on Drug Testing on Arrest, Required Assessment and Restriction on Bail has proved invaluable to new drug testing sites. This training helps to ensure that staff involved with operational delivery fully understand the purpose of drug testing and its related interventions, their own role in the process and the identity and roles of partners they will be working with. One format for such training that has found success in recently established areas involves training sessions at which a ‘walk-through’ of the entire process (from arrest through to court) has been conducted. Further advice on the conducting of such local training can be sought from existing drug testing areas and from the Home Office.

Prior to commencing drug testing, new areas will want to ensure that sufficient equipment and consumable items have been received and are ready for use at relevant new police site(s).

#### **PUBLIC / MEDIA ENGAGEMENT:**

New drug testing areas will also want to consider how they wish to engage with the public – the introduction of drug testing is an opportunity to inform the local community about a positive set of interventions aimed at reducing drug-related offending. Existing self-funded areas have taken a variety of approaches; some have chosen to mark the roll-out with media and other ‘launch’ events, while others have timed publicity to take place at a later stage, once the some outcomes from the introduction of testing can be reported.

#### **RECORDING INFORMATION**

The drug test procedure is recorded to enable monitoring and analysis of the information at a local level and to help identify trends nationally. The DT1 and DT2 forms and the Drug Test Recorder (DTR) are available to police forces for this purpose. The DT1 records information including the individual’s consent to the test (a legal requirement), medication



taken and whether, following a positive test, an assessment is required. The DT1 can be amended to include extra information to suit the purposes of each individual police force, or a new form can be created, as long as it records all information required legally. The DT2 records basic details of the individual's drug test including a copy of the result and is submitted to court for the first hearing. It is recommended that this form is used in its current format and should not be amended.

Drug tests are recorded by the police on the DTR, an excel spreadsheet. Each month local partners email the data in and we use this and other data to produce a monthly Test on Arrest report and dashboards for local areas to utilise. The information is not excessive and the reports help you to organise coverage, for example by maintaining your busy periods, and to know your offending group. A DTR User Guide outlining this process is available on request.

All areas introducing drug testing will want to be aware of Restriction on Bail (RoB) provisions which can be applied by the court to individuals who test positive. RoB data is submitted by CJITs each month to the Home Office to contribute to the local and national dashboards, enabling local areas to monitor this aspect of the DIP process.

The forms completed by CJIT workers enable all local partners to monitor their clients and ensure continuity of care between CJITs and prisons. These forms are the Drug Intervention Record (DIR), Initial Contact (IC), Required Assessment (RA) and Activity Forms (AF) and are already widely used. Local partners are responsible for ordering these forms, which are available at no cost to you.

Information from these forms is inputted onto DIRWeb or a local case management system. DIRWeb, DTR and RoB data is used to produce monthly reports and dashboards that local partners can use to monitor DIP in their areas.

Local partners manage their own data and it is recommended that:

- Local arrangements are developed to share good practice, linking to other partners as appropriate.
- Considerations are made regarding collecting additional data locally, undertaking your own analysis as appropriate.

Detailed information on any aspect of data management is available from the Help pages on DIRWeb, or by sending an e-mail to [dipenquiries@homeoffice.gsi.gov.uk](mailto:dipenquiries@homeoffice.gsi.gov.uk). The above-mentioned forms and guidance on processes are available on request via this email address.

### **NON-ENGLISH LANGUAGE SPEAKERS**

Areas conducting DToA and Required Assessment will need to make arrangements for access to translation services for any individuals who cannot speak English, for example detainees in Welsh areas who speak Welsh only.

# HOW MUCH WILL IT COST TO INTRODUCE TESTING ON ARREST?

## INTRODUCTION

When making the decision about introducing drug testing and its associated interventions, areas will clearly need to consider the financial commitment involved. The cost will include a number of fixed and ongoing variable costs related to consumables and services delivered by the drug testing supplier (procured by the Home Office). Any further resources and facilities that are needed locally will also need to be factored in.

All areas that have introduced drug testing on a self-funded basis (since the first areas in 2006) have found success with this approach and (at the time of writing) were continuing to fund testing from local resources. **A number of these areas found the financial commitment to be less than originally anticipated.** In some cases, areas have been able to absorb some of the necessary costs into the normal course of business. New areas should consider drug testing a long-term commitment and make decisions on that basis.

Areas are required to draw the associated drug testing equipment and services from the Home Office procured supplier, currently Concateno plc. The Home Office is currently in the process of procuring the next contract for a drug testing supplier (for both drug testing screening and confirmatory services). That contract is expected to be in place by the end of 2011. Areas considering introducing drug testing will need to factor in the new contract as this may involve the introduction of new equipment and training in its use – once the new contract has been awarded it will become clear how these costs will be shared between police forces and the supplier. The value for money of the drug testing equipment and services offered by the next supplier is a priority for the current Home Office drug testing procurement exercise.

## MAKING THE CASE:

In making the case locally to introduce drug testing, it is important to **draw upon all available financial support from across the**

**local partners** - the successful delivery of drug testing will deliver outcomes that meet the objectives of a number of local partners. It is also advisable to consider the cost savings that may result from the associated reduction in crime and improvement of health outcomes. Furthermore, greater discretion at a local level around which arrestees should be tested means that the volume of drug tests conducted may be lower in some areas, making the associated costs more manageable for local partners.

Areas introducing drug testing can also consider how new flexibilities around the use of existing funding streams may help to meet the costs of Drug Testing on Arrest and its related interventions. At present, all areas in England & Wales receive funding from the Pooled Treatment Budget (PTB) and DIP Main Grant. The new funding flexibilities mean that areas have the freedom to pool these resources according to their local priorities.

## THE COSTS

### FIXED COSTS:

Any police site commencing drug testing will need **two drug testing devices** (presently the Cozart DDS) and will need to arrange (with the supplier) at least one **training session** in its use. Those trained should be used within force as 'Cascade Trainers' i.e. to be responsible for training other staff conducting drug tests. An indication of cost for these items can be obtained from the Home Office on request.

### VARIABLE COSTS:

A number of ongoing variable costs will need to be met by local areas – these **costs will depend upon the volume of drug testing conducted** in that area. These costs relate to drug testing consumable items and for confirmatory testing services provided by the Home Office contracted drug testing supplier.

The variable costs currently include; oral swab kits, printer paper, spare collection

pads, confirmatory analysis, postal boxes for confirmatory tests, postage costs and any top-up cascade training sessions. The nature of the drug testing consumables associated with the drug testing kit may change as part of the next contract, depending upon the nature of the chosen equipment.

Confirmatory testing refers to the further analysis of samples that must be conducted (by the supplier, in the laboratory) whenever a positive screening test result is disputed (including on the basis of recent use of medication). In addition, 2% of all samples are currently required to be sent by the police to the supplier for Quality Assurance (QA) analysis – this analysis helps to ensure that the accuracy of the drug testing device is being maintained. Taken together, areas need to allow for 10% of all drug tests conducted to be sent for confirmatory analysis. Areas need to budget for these costs, which are available on request.

Further detailed information on the cost of the specific items is available from the Home Office on request. As part of scoping the introduction of testing, local areas can calculate the likely variable costs on the basis of these costs and their anticipated testing volumes. It will be for local areas to agree invoicing arrangements directly with the supplier – payments are likely to be requested on a monthly basis.

At current prices, an area conducting 2,500 – 3,000 drug tests per annum (208-250 per month), could expect invoiced costs in the region of £30,500 - £36,600 p.a. (£2,540 - £3,050 per month) excluding VAT. This is an estimate and costs may vary.

#### FURTHER COSTS:

The actual costs of introducing drug testing extend to the financing of detention officers, CJIT workers and the downstream provision of treatment services. Areas will also need to consider any changes that will be necessary to make the custody suite(s) in which drug testing will be conducted fit for purpose,

such as the provision of rooms for drug testing and for conducting assessments. Areas considering the introduction of drug testing are strongly advised to consider these requirements, a number of which may already be covered.

## FURTHER INFORMATION

### HOME OFFICE CONTACT

Chris Witt  
Reducing Re-offending Unit  
4th Floor Fry Building  
2 Marsham Street  
London SW1P 4DF  
[christopher.witt@homeoffice.gsi.gov.uk](mailto:christopher.witt@homeoffice.gsi.gov.uk)  
Tel: 0207 035 0532  
Alternatively: [iom@homeoffice.gsi.gov.uk](mailto:iom@homeoffice.gsi.gov.uk)

### USEFUL DOCUMENTS

Guidance on the implementation of Testing on Arrest, Required Assessment and restriction on bail / Frequently Asked Questions

Integrated Offender Management: Key Principles

IOM and DIP self assessment tools

Drug Interventions Programme – Operational Handbook

Continuity of care guidance

Around Arrest Beyond Release

### HOME OFFICE WEBSITE

[www.homeoffice.gov.uk](http://www.homeoffice.gov.uk)

Further information on the Drug Interventions Programme will be available from the Home Office website by summer 2011. In meantime, all documentation referred to in this Good Practice Guide can be obtained on request.

# ANNEX A - LIST OF TRIGGER OFFENCES (WITH EFFECT FROM 1 AUGUST 2007)\*

\*Offences where Inspector's Authority is not required to carry out a drug screening test.

## 1. OFFENCES UNDER THE FOLLOWING PROVISIONS OF THE THEFT ACT 1968:

- section 1 (theft)
- section 8 (robbery)
- section 9 (burglary)
- section 10 (aggravated burglary)
- section 12 (taking motor vehicle or other conveyance without authority)
- section 12A (aggravated vehicle-taking)
- section 22 (handling stolen goods) \*
- section 25 (going equipped for stealing, etc.)

## 2. OFFENCES UNDER THE FOLLOWING PROVISIONS OF THE MISUSE OF DRUGS ACT 1971, ARE TRIGGER OFFENCES IF COMMITTED IN RESPECT OF A SPECIFIED CLASS A DRUG:

- section 4 (restriction on production and supply of controlled drugs)
- section 5(2) (possession of controlled drug)
- section 5(3) (possession of controlled drug with intent to supply)

## 3. OFFENCES UNDER THE FOLLOWING PROVISIONS OF THE FRAUD ACT 2006\*\*:

- section 1 (fraud)
- section 6 (possession etc. of articles for use in frauds)
- section 7 (making or supplying articles for use in frauds)

## 3A. AN OFFENCE UNDER SECTION 1(1) OF THE CRIMINAL ATTEMPTS ACT 1981 IS A TRIGGER OFFENCE, IF COMMITTED IN RESPECT OF AN OFFENCE UNDER –

(a) any of the following provisions of the Theft Act 1968\*:

- section 1 (theft)
- section 8 (robbery)

section 9 (burglary)

section 22 (handling stolen goods)

(b) section 1 of the Fraud Act 2006 (fraud) \*\*\*:

## 4. OFFENCES UNDER THE FOLLOWING PROVISIONS OF THE VAGRANCY ACT 1824 ARE TRIGGER OFFENCES: \*

section 3 (begging)

section 4 (persistent begging)

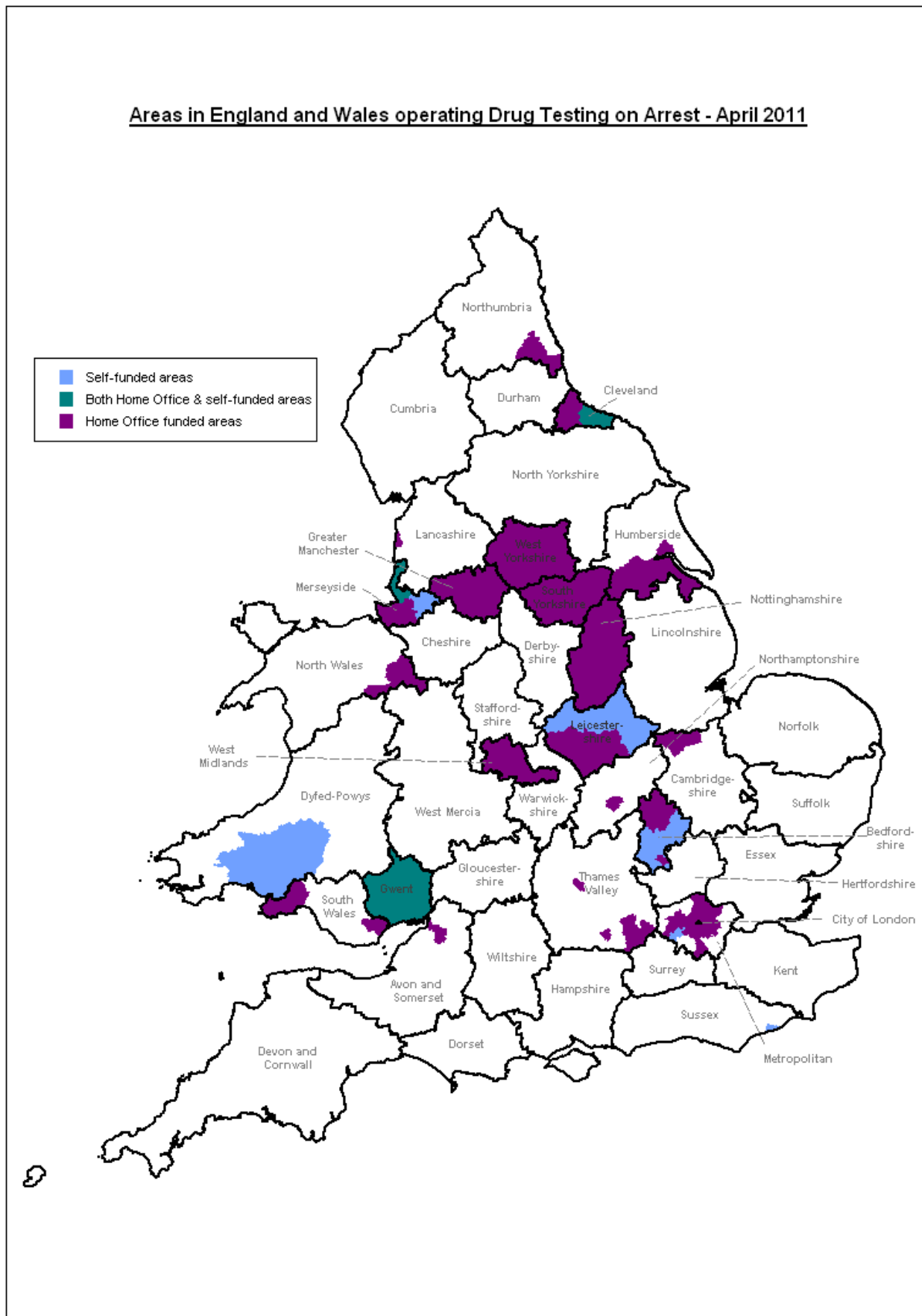
\* Offences added to the trigger offences in Schedule 6 to the Criminal Justice and Court Services Act 2000 by The Criminal Justice and Court Services Act 2000 (Amendment) Order 2004, (S.I. 2004/1892), which came into force on 27th July 2004.

\*\* Offences added by the Fraud Act 2006, which came into force on 15 January 2007

\*\*\* Offences added by the Criminal Justice and Court Services Act 2000 (Amendment) Order 2007 which came into force on 1 August 2007.

# ANNEX B

**Areas in England and Wales operating Drug Testing on Arrest - April 2011**



# ANNEX C

## CHECKLIST: SUGGESTED CONSIDERATIONS FOR AREAS INTRODUCING DRUG TESTING ON ARREST (DTOA) ON A SELF-FUNDED BASIS

<b>3 MONTHS +</b>	Detailed scoping carried out – impacts, volumes, costs etc.	
	Local DIP Steering Group (or other governance) in place	
	Local Drug Testing Implementation Group established	
	Agreement of relevant delivery partners confirmed	
	Partners’ commitment to funding received	
	Other affected partners informed	
	Home Office informed of intent to commence drug testing / roll-out date	
<b>1-3 MONTHS</b>	Drug Testing mentor support needed / identified?	
	Appropriate facilities in place for drug tests / assessments to be conducted	
	Engagement of local courts / magistrates	
	Confirmation to the Home Office of proposed new drug testing police site(s) and affected geographic area (which BCU, DAT / SMAT, police force areas?).	
	Home Office support on identifying contact details for:	
	<ul style="list-style-type: none"> <li>• Primary/strategic police lead</li> <li>• Lead data contact</li> <li>• Contact point for receiving confirmatory results</li> <li>• Payment/invoicing contact</li> </ul>	
<b>FINAL MONTH</b>	Relevant DIP/drug testing guidance in place	
	Relevant DIP/drug testing forms in place	
	Training (by the supplier) in use of the drug testing equipment conducted	
	Local training on DIP process conducted	
	Drug testing equipment received	
	Relevant DIP/drug testing literature in place	

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