



# Drugs

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# About Drugs

# The Law

# Misuse of Drugs Act 1971

This is the Act from which most of the legislation and some police powers are derived. Whilst other legislation exists to deal with other substances, the main drug related offences that are relevant to licensed premises are contained within this Act.

Offences under the Misuse of Drugs Act 1971

- Unlawful possession of a controlled drug
- Unlawful possession of a controlled drug with intent to supply

• Supplying or offering to supply a controlled drug or being concerned in the supply of a controlled drug

- Production or being concerned in the production of a controlled drug
- Cultivation of a cannabis plant

• Being the occupier, or concerned in the management of premises who knowingly permits or suffers any of the following activities to take place on those premises:

a) Producing or attempting to produce a controlled drug

b) Supplying or attempting to supply a controlled drug to another, or offering to supply a controlled drug

- c) Preparing opium for smoking
- d) Smoking cannabis, cannabis resin or prepared opium

Premises licence holders must be aware that offences under the Misuse of Drugs Act may result in the loss of their licence.



# Misuse of Drugs Act 1971 – controlled drugs

The drugs which come under the control of the Act, are split into three classes – class A, B, and C, in accordance with their toxic effect, frequency of misuse and the perception of their danger to society. In some cases a drug may fall into two classes, depending on how it is prepared for use. The class also determines the penalties for misuse offences. Class A attracts the highest penalties.

# The law explained

#### a) UNLAWFUL POSSESSION OF A CONTROLLED DRUG

This offence may apply where a controlled drug is found to be in the possession and control of a person. The drug's status does not need to be known by the person in possession of it.

# b) UNLAWFUL POSSESSION OF A CONTROLLED DRUG WITH INTENT TO SUPPLY

This offence may apply where a person is found with a large amount of a drug too large to be described as for 'personal' use. The circumstances in which the person was found, the actions prior to the find, and what that person may say will be important. A person found on licensed premises in possession of a number of tablets or a number of individual wraps of a drug may be liable to prosecution for this offence. There does not need to be any drugs recovered to render a person liable to a contravention of Section 4 (3) (b). Paraphernalia or associated documents indicative of dealing are sufficient.

# c) SUPPLYING OR OFFERING TO SUPPLY A CONTROLLED DRUG

Supplying means any of the following:

• Selling, giving or sharing, or offering to supply a control

• Actual drugs do not need to be recovered in order for a person to be liable for a contravention of Section 4 (3) (b). Paraphernalia or associated documents indicative of dealing are sufficient.

#### Police rights of entry

A police officer can enter and search any licensed premises at any time if they have reason to believe that an offence has been, is being or is about to be committed. No search warrant is required.



#### Police powers to close premises

The Anti-Social Behaviour Act gives the police the power to close premises for up to 24 hours where there is production and/or supply of class A drugs. This is in addition to the powers police have to close specific premises if they believe there is or is about to be disorder at the premises and closure is necessary in the interests of public safety.

#### Review of the premises licence

A review of the premises licence ensures that the licensing objectives are complied with and in particular that the community is protected from crime, disorder and nuisance. In simple terms, if there are problems arising from a particular premises, a review of the licence can be expected.

An application for a review of the premises licence can be made by the police, another authority or an 'interested party'. An interested party can be anyone who lives or works near the premises.

A review of the licence involves a formal hearing. As a result the licensing authority may take any of the following steps:

· Modify the conditions of the licence, for example, restrict the opening times

• Exclude a licensing activity, for example, not allow entertainment or the sale of alcohol

- Remove the designated premises supervisor (the person who is in day to day control of the premises)
- Suspend the licence for up to 3 months
- Revoke the licence.

#### Suspension of the personal licence

On conviction for a relevant offence, the courts may suspend a personal licence for up to 6 months.

#### Forfeiture of the personal licence

A conviction for a drugs offence could result in the forfeiture of the personal licence. A person who has had his personal licence taken away (forfeited) cannot



apply for a new licence for 5 years. That person may also be refused a personal licence even after 5 years if the conviction is not spent. Also note that a person who is nominated as designated premises supervisor and who then loses his personal licence, cannot continue to be the designated premises supervisor.

Note that the text above is taken from BIIAB's Level 2 Award in Drugs Awareness Workbook (8th Edition August 2010). For more information on this qualification either visit www.biiab.orgor contact BIIAB's qualification team at <u>qualifications@bii.org</u>.

# Signs of drug use

Controlled and illegal drugs

All prescription drugs are controlled. That is they can only be legally supplied and possessed under a prescription, so possession without a prescription (subject to certain conditions) is illegal. Other drugs, such as some 'recreational' drugs cannot be legally prescribed. Therefore their possession, whether for personal use or with the intent to supply will always be illegal.

# Why use illegal drugs?

Those who use 'recreational' drugs as part of a night out do so because they want to change the way they feel; change their perception of their surroundings or feel more energetic. It can also be cheaper to take illegal drugs than it is to drink alcohol.

# Types of premises

The location and type of licensed premises often determines the type of drug problems which could arise.

• A large proportion of drug users get their drugs on licensed premises, late night bar and club managers therefore need to be aware that their premises are likely to be used as a place of purchase

• The inner city or town centre large capacity public house, designed to attract young people, and a club premises which provides late night entertainment, will have a similar customer base. Generally, the pub will be used prior to the club. Customers using these premises will be more likely to use stimulants such as ecstasy, cocaine and amphetamines, rather than other illegal drugs

• Large numbers of customers attract dealers both inside and outside the premises. These premises are likely to have SIA licensed door staff, close internal customer



supervision and set procedures to deal with drug problems. They will also be subject to close attention by the regulatory authorities

• Smaller premises located in towns or on housing estates may also attract a young age group but the range of drugs will be wider. The designated premises supervisor or manager may not have as many staff pro-rata as larger premises and therefore the sole responsibility is upon him or her to oversee the conduct of the premises

• Increasingly customers tend to take illegal drugs while in the pub before they move on to a club. This is because clubs are likely to have stricter entry and search policies, and may have higher levels of surveillance.

# The need for zero tolerance

The law requires licensed premises to be conducted in a manner that supports the four licensing objectives of the Licensing Act 2003:

- The prevention of crime and disorder
- Public safety
- The prevention of public nuisance
- The protection of children from harm.

As allowing drugs misuse goes against all the licensing objectives, all licensed premises must adopt a zero tolerance policy towards it. It must also be clear to customers and staff that there is 'zero tolerance' to drugs and associated criminal acts on the premises and that any breaches will be dealt with firmly and immediately.

Zero tolerance applies to all parts of the licensed premises. It is therefore not acceptable to allow customers to go outside to, for example, smoke cannabis and then to come back inside.

• Licensed premises, which attract a clientele of drug misusers or dealers, will drive out any customers who are not part of the drug scene. This will clearly have a negative effect on your business

• If drug dealers and misusers are allowed to gain a foothold in licensed premises, other criminals such as dealers in stolen property, thieves or those involved in more serious crime will be attracted

• Drug dealers and their criminal associates can be manipulative and violent in pursuit of their activities.



Injury and damage may be the outcome if such activities are allowed to continue

• Drug dealers and users do not tend to spend much money on drinks or food while they use licensed premises. It is therefore a case of them using premises as a place for their business while not contributing to the licensed business.

Where drug dealing and drug misuse does occur on licensed premises, the premises may be closed, the licence reviewed or even revoked

#### Health risks of using drugs and mixing drugs and alcohol

Overdoses of all types of drugs are a risk because the strength or dosage of the drug is not known with illegally manufactured substances. It is not always known whether the drug is in its pure form or whether it has been mixed with other substances and exactly what those substances are. Chemical analysis has shown that in rare cases poisons have been used.

Drug misusers are likely to mix drugs with alcohol when they are in and around licensed premises. Taking some drugs with alcohol changes or heightens the effect of the drugs compared to if it were taken without alcohol.

Deaths resulting from taking ecstasy have been well documented in the media. The extent to which drinking alcohol with the drug has contributed to these deaths is not known. Drug users however, have died as a result of choking on their own vomit.

Mixing alcohol with drugs also increases the risk of damage to the major body organs. When cocaine and alcohol are used together, the liver combines the two substances and they remain in the body much longer than alcohol and cocaine when taken separately. Cocaine and alcohol is one of the most common combinations in the UK.

Recognising the signs of misuse and dealing – paraphernalia

Managers and staff need to know what evidence to look for and how to spot drug misuse and/or dealing.

It should be noted that drugs cannot be identified from their appearance only. It is only after scientific tests have been carried out that the true identity of substances can be confirmed. The table below shows signs of drug taking activities that are most likely to occur on licensed premises. The table below shows signs of drug taking activities that are most likely to occur on licensed premises.



MATERIALS OR	PURPOSE	ASSOCIATED DRUGS
Torn up beer mats/cigarette packets/bits of cardboard left on tables or in ashtrays	Used as 'roaches' -	Cannabis cigarettes
Hand rolled cigarettes which are very long	Smoking	Cannabis cigarettes
Brown stripes along cigarettes	Using cannabis oil	Cannabis oil
Small packets made of folded paper, card or foil	Known as 'wraps'- usually to wrap quantities of powdered drugs	Amphetamines, heroin, cocaine
Cling film, tin foil	Used to wrap quantities of solid drugs	Cannabis resin, tablets/pills
Empty sweet wrappings	Used to wrap quantities of drugs	Powdered drugs or cannabis resin
Tightly rolled banknotes or notes that have been tightly rolled	Used for snorting powdered drugs	Cocaine or amphetamines
Traces of blood or powder on banknotes	Used for snorting powdered drugs	Cocaine or amphetamines
Drinking straws found in toilets	Used for snorting powdered drugs	Cocaine or amphetamines
Traces of powder on toilet seats or other surfaces in toilet	Used for snorting powdered drugs	Cocaine or amphetamines
Discarded plastic cards in toilets	Used to prepare for snorting of powdered drugs	Cocaine or amphetamines
Empty plastic pots, capsules or small bottles	Used as packaging for colourless liquid	GHB(Gamma-hydroxybutyrate) or Rohypnol
Syringes	Injecting drugs	Heroin*
Spoons left in toilet	Heating or 'cooking' drugs	Heroin*
Pieces of burned tin foil	Heating or 'cooking' drugs	Heroin or occasionally cannabis oil
Drink tins with holes in the side or base and signs of heat/scorching	Used to support crack cocaine rocks whilst heat is applied. The user then draws the fumes via the pouring hole	Crack cocaine*
Quantities of disposable gas lighters or gas refills	Crack cocaine only burns with a constant heat source	Crack cocaine*

\*Heroin and crack cocaine are drugs that are less likely to be used in licensed premises

Recognising signs of misuse – customer appearance

#### Physical signs

One of the first signs of drug misuse on the premises will stem from the appearance of your customers. They may exhibit the following signs:

- Dilated pupils, pupils will appear very large and almost hide the eye colour
- Watery or bloodshot eyes and dazed appearance



- Pinpoint pupils, in the case of heroin users
- · Excessive sniffing, dripping nose, watering or red eyes
- Sudden severe cold symptoms following a trip to the toilet/garden/car park
- White marks/traces of powder around nostrils
- Nausea or vomiting
- Appearing drunk but without the characteristic smell of alcohol.

#### Behaviour

Customers misusing drugs may behave in the following ways:

- · Excessive giggling, laughing at nothing in particular, non-stop talking
- Unnaturally dopey, vacant staring, sleepy euphoria
- · Non-stop movement, jigging about, dancing
- · Gagging or retching actions
- Excessive consumption of soft drinks
- · Sudden, inexplicable tearfulness or fright
- Any marked alteration in behaviour following a trip to the toilet/garden/car park
- Confusion or memory loss.

Bear in mind that distress, dishevelled clothing or confusion and memory loss could be signs of drug assisted sexual assault. In such circumstances comfort and support should be given until help arrives. Exciting a person in this condition could place them at additional risk.

The above are common effects but drugs have different effects on individuals. Be aware that there also may be other reasons for unusual behaviour, such as use of alcohol, or a mixture of alcohol and drugs, or even illness.

#### Other signs of drug misuse could include:

• A distinctive aromatic smell, usually associated with cannabis smoking



• Sharing 'roll up type' cigarettes.

# Recognising signs of dealing

A combination of the following may be indications of a person or persons dealing on or near the premises:

- A person or group of persons making brief contact with numerous people
- Regular trips to the toilets or car park

• Customers staying for a short time, engaging in brief meetings and possibly not buying drinks

- Money or packages changing hands
- Furtive or conspiratorial conduct Information from staff or customers
- Conversation that includes frequent references to drugs (usually slang names)

• Deal lists – pieces of paper discarded with numbers and names, etc. (preserve the evidence)

• Use of telephones (mobile and on-site) to arrange immediate meetings

• Dealers might well be carrying larger quantities of drugs or drugs packed into small quantities for sale.

Your staff or customers may also recognise known users when they visit the premises. If door supervisors are used, they should refuse entry to such people.

Areas such as car parks, queuing areas, entrances, reception, bars, dance floors, passageways, toilets and restricted areas, such as cloakrooms, should be monitored on a regular basis to detect and deter any possible drug dealing or misuse.

Remember that dealers are both male and female. The Drugs Act 2005 allows a person who is found to be in possession of more than a prescribed quantity of a controlled drug to be charged with intent to supply.

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# Devise a drugs strategy

A problem solving approach to tackling drugs issues

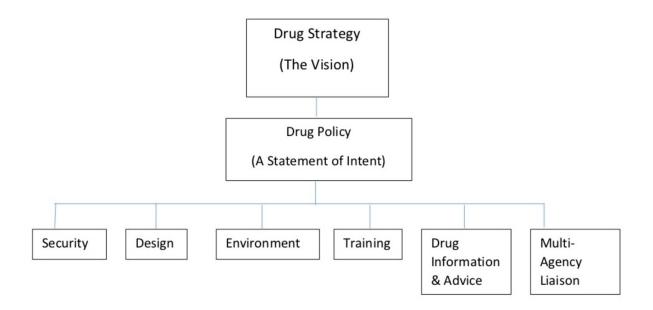
Before beginning to tackle drug misuse, it is important to be fully aware of existing problems on and around the premises. A problem solving approach is the best way to deal with the issues. Four basic steps are involved:

- A needs assessment
- Devising a drug strategy
- Implementing a drug strategy
- Monitoring, evaluation and reappraisal of the strategy.

A good strategy will take into account a needs assessment. It should be documented and developed in consultation with agencies such as the local police, the licensing authority, the Health & Safety Executive and drug support groups. It should be flexible and capable of review. It will provide a written record of policy, objectives and responsibilities for use by management, staff and visitors such as contractors and agency personnel.

# Components of a drug strategy and drug policy

Depending on the result of the needs assessment, options should include consideration of adopting the following components:



Key elements of a drug policy should include:



# Objectives

Objectives must be clear, realistic and achievable. For example:

- Preventing drugs entering the premises
- Detecting those supplying and misusing drugs
- Ensuring the safety of customers and staff

# Procedures

Methods of achieving objectives will vary according to company policy and policies adopted by agencies such as the police and the local authority. Agreement should be reached on procedures such as:

- Incident recording
- Arrests
- Searching
- · Seizing, storing and destroying/disposing of drugs
- Drug amnesties
- Refusing entry
- Evictions
- Door staff patrolling
- Overt and covert surveillance

• Exchanges of information with agencies such as the police, local authorities and drug support groups.

Advise staff of what they are expected to do if they suspect that drugs are being misused or if drug related crimes are being committed. Premises managers may want to take some of the following steps:

• Display 'zero tolerance' signs at the entrance and inside the premises

• Keep the premises tidy, clean tables and empty ashtrays frequently – a drug dealer is less likely to operate in well-run premises



• Staff frequently mingling with customers while collecting glasses are more likely to detect drug misuse.

# Implementing a drug strategy

It is important that appropriate details of the drug strategy are circulated to interested parties such as staff, visitors, and agencies such as the police and the local licensing authority. They cannot play their part if they are not aware of what is expected of them and others.

Having agreed the strategy, it is essential that it is implemented as a whole. Everyone must know what to do if they discover drugs or see drug misuse. Good training and firm, clear policies must be in place. Failure in this can result in systems breaking down and confusion for staff and outside agencies.

# The importance of sharing information

A premises manager or company should have policies which specify how drug misuse situations should be dealt with. It is important that all staff are aware of and are trained in the use of these policies.

Liaison and co-operation between premises managers and the licensing authority and police is the best approach to combat drug and criminal activity. The authorities should be aware of a premises' drug policy and be prepared to assist where necessary in support of it. The need for a two-way exchange of information and intelligence is important for the successful identification, exclusion and eradication of those using licensed premises for drug dealing/taking. There should be no reluctance to report or circulate information to the police, staff and fellow premises managers in the area. Premises managers are strongly advised to join a Pubwatch scheme in their area in order to share information. If there is no Pubwatch in the area, they are encouraged to contact fellow premises managers with a view to setting one up.

Premises licence holders and managers should develop a relationship with their local police licensing officer or other specified member of the local police force and report or discuss any problems with them. It is important to remember that information on misuse and dealing can be obtained from other sources, such as the Drug Enforcement Agency and drug support groups. Other sources include your staff and customers, media reports, as well as incidents, drug seizures and finds on the premises.

# Matters for local consultation

The following are some questions to be asked of the local police:



• What should be done if quantities of drugs are found on the premises without a person being in possession of them?

• What should be done if drugs are found on a person as a result of a search?

• Can the manager or members of staff detain a person found in possession of drugs? If so, will the police support this, or would the local police prefer that the information or CCTV evidence be passed on to them?

• Do the police have any guidelines as to quantities of confiscated drugs or policies on possession for own use, as opposed to possession with intent to deal?

# Staff responsibilities

It should be clear that all staff are responsible for implementing the drug policy. Staff with specific responsibilities such as searching customers, storing seized drugs and liaising with agencies such as the police, should be aware of their roles and be confident in carrying them out.

Training of staff should be regarded as a high priority. Irrespective of the size of the premises, it is important that all staff are aware of their responsibilities. All staff who come into contact with customers must know the policy in relation to drugs and what to do if a problem arises. It is recommended that all staff receive training to recognise the presence of drugs and how to deal with the consequences of misuse.

All staff should be briefed on a daily basis as to whom they should report to in the event of problems. This should include cleaning staff who are most likely to find drug 'litter', which may include dangerous items such as needles.

# Staff monitoring

Any drug policy should include strategies for dealing with employees as well as customers.

High standards of management will result in a successful, professional operation. This will be undermined if any staff are involved in drug related activity. Employees who misuse drugs whilst working in licensed premises are a danger to themselves, fellow workers and the interests of the organisation. Where a member of staff shows signs of being involved in drug dealing or drug abuse, careful consideration should be given to whether the symptoms might be due to other causes such as illness. It is essential that indications of illegal drug activity are identified and appropriate action taken as soon as possible.



Drug users do admit to obtaining their supplies from pub and club staff so managers must be vigilant in supervising staff activity to minimise this risk. Cleaning staff are particularly vulnerable to pressure as they are not normally screened, and can take drugs into a premises to be later located by the dealer having avoided passing through any search procedures on the door.

# Monitoring and evaluating a drug strategy

Monitoring and evaluation is an ongoing requirement and should not be treated as an annual event. Success should be measured by whether aims and objectives have been achieved. This may be indicated by:

- A reduction of drug related incidents
- Relaxed and happy customers and staff
- Positive reports from agencies such as the police.

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# Keeping drugs out of licenced premises

# Designing drugs out of premises

Drug misusers and dealers will try to avoid being noticed by management and staff. Due to the large numbers of people in some licensed premises, the environment is ideal in concealing illegal activities. In addition to the bar, isolated areas such as alcoves, passageways and toilets are also used for dealing and drug taking.

Reducing such opportunities should be the objective of the premises managers. This can be achieved by designing an environment that increases the possibility of detection of such illegal activities. A number of police forces employ architect liaison officers, who offer specialist advice in this area. New buildings and refurbishments should incorporate such design elements.

In many cases drug dealers will try to get their supplies into premises at times when there is less likelihood of being searched. The drugs are thus likely to be brought in during the daytime and then hidden in a huge variety of places inside and around the premises. Thorough pre-entry checks and cleaning regimes will help to deter this.



# Outside areas

Following a needs assessment, the following recommendations should be considered:

• Where possible, maximise visibility – ensure that plants and decorative features do not obstruct vision

- Gardens and patios should be as close to the main building as possible
- Avoid nooks and crannies that can provide opportunities for concealment
- Ensure a regular staff presence outside

• Ensure tables are regularly cleared of glasses, bottles and that ashtrays are emptied

- · Assess lighting levels for clear visibility
- Use sensors for lighting areas not in constant use
- Car parks should be regularly patrolled to ensure no illegal activity is taking place
- Assess the need for CCTV.

# Entrances

• Keep the number of entrances to a minimum. Alarm fire doors to prevent unauthorised access

- · Make sure entrances are clearly visible from inside the premises and are well lit
- Use trained door supervisors at busy times
- Ensure that any queuing areas are well lit and supervised
- Assess the need for CCTV.

Bars and serving areas

· Bars and serving areas should be raised to maximise visibility

• Avoid obstructions to visibility such as glass racks, low canopies, screens, vending machines and promotional material.



# Seating and standing areas

• Pay particular attention to areas such as alcoves that are not clearly visible from the bar

• Where alcoves are in use, consider seating at 90 degree angles to the bar to maximise visibility

- Consider the use of CCTV in rooms and areas not visible from the bar
- If screens are in use, transparent panels will improve visibility
- · Incorporate mirrors to improve visibility in awkward areas
- Avoid furniture that can be used to conceal objects
- Use lighting to improve visibility
- Consider the use of zone dimmers
- Make sure staff regularly check areas not visible from the bar
- Clear bottles and glasses regularly
- Monitor CCTV screens continuously, where possible.

# Passageways and toilet facilities

- · Use adequate lighting to improve dimly lit areas
- Toilet entrances should be clearly visible from the bar and away from main entrances

• Change areas where objects can be hidden, such as suspended ceilings or toilet cisterns. Fittings in toilet areas should be tamper-proof

- Ensure regular staff visits are made to such areas
- Put up notices in toilets to ensure customers know that random staff visits are made

• Pay particular attention to toilets for the disabled as these are particularly popular with drug users

· Consider the use of CCTV for passageways and toilet entrances



• Where there is a drug problem, consider removing toilet lids and boxing in cisterns.

# Patrolling and monitoring

In view of the risk that drugs will be hidden on the premises, it is wise to train staff to conduct a walk-around. A checklist showing areas to pay particular attention to, is very useful.

Closed circuit television (CCTV)

The use of CCTV can help premises licence holders and managers to:

• Prevent instances of drugs misuse and associated problems such as violence and intimidation

- Ensure customer and staff safety
- Reduce the fear of crime
- Increase public confidence
- Tackle unresolved incidents
- Deal with complaints
- Increase trade and profits
- Reduce insurance premiums
- Improve chances of a successful premises licence application or variation.

Whilst CCTV has been shown to be an effective deterrent, you should be aware that the Data Protection Act 1998 places obligations and responsibilities on people and organisations who operate CCTV systems. For example:

• Images must be obtained and processed fairly, lawfully and in accordance with provisions on privacy

- Cameras must only record images that are accurate, adequate and relevant
- Images must be clear
- Information must not be held for longer than is necessary



- Security measures must be in place to prevent unauthorised access to images
- Individuals have a right to have access to CCTV images of themselves.

It is, therefore, important to ensure that policies are in place to guarantee that the use of CCTV is effective and lawful. Premises managers are advised to contact police crime prevention officers for support and guidance.

#### Use of door supervisors

Door and floor supervisors may be used as a means of controlling who enters a premises and the behaviour of customers inside. Where door supervisors are used on licensed premises, they must wear their SIA licence where it can easily be seen. Premises managers should also train door supervisors in the details of the premises' drug and security policies, to supplement the training in drugs awareness door supervisors will have undertaken in order to gain their licence. The premises manager should supervise all door supervisors closely.

Special lighting, use of specialist drug detection dogs, and overt and covert surveillance, may also be used to increase security.

For larger premises, the use of a good two-way radio communication system between management, door and floor staff is useful so that staff may be directed to an area or an incident quickly.

#### Use of pre-entry searches

A licence may have a condition attached requiring pre-entry checks to be conducted at the premises. There is no legal requirement to carry out physical searches in the absence of a licence condition to that effect. Searches would only be made as a result of an incident or information, which would make it necessary to do so. If searches are carried out, the procedures in section 5.11 should be followed.

The premises licence holder and manager have total discretion over who is allowed to enter the premises, who is served and who is allowed to stay, as long as the laws on discrimination are not broken. There is also a positive duty to deny entry to a person who is drunk and or disorderly.

Bearing in mind that customers may have taken illegal drugs or a mixture of drugs and alcohol before they arrive at your premises, managers and door staff are advised to refuse entry to anyone who appears to be 'under the influence'.



The following guidelines are particularly suitable for premises where door supervisors are used:

• It is sensible to have both female and male door supervisors available to conduct searches

- Door staff should not search members of the opposite sex
- Searches should be conducted in good lighting and preferably in front of CCTV
- Pre-entry searches should be carried out by two people

• Pairings should be varied so that people do not always work together. This is advised to prevent any possible allegation of collusion or malpractice, and will prevent familiarity in searching procedures

• Ask permission from the person to search them – this is important, you cannot conduct a search without permission

- If a person gives permission to search, do so
- If permission is refused, you can refuse entry to the person
- If a person refuses to leave you should call the police for assistance
- Never ask a customer to remove clothing next to the skin
- It is advisable to ask the person to be searched if he is carrying any sharp objects

• If the person withdraws permission or asks you to stop searching at any point you must do so

• If suspected illegal drugs are found on the person they should be confiscated, although customers may have legitimate reasons for carrying suitable quantities of prescription drugs for medical reasons

• The person can either be evicted or detained until the police arrive (guidance on this decision can be obtained from the local police)

• Enter details of searches in the Duty Register or Security Incident Logbook

• Customers should be searched by persons of the same sex. In the case of transsexuals it is advisable to ask whether the person would prefer to be searched by a male or female.



Although those running licensed premises are not legally required to act as educators, it is responsible to make accurate and appropriate drugs advice and information available at pre-club licensed premises and dance events or similar. This may be in the form of posters, leaflets and information outlining:

- The law relating to drug misuse
- The physical risks
- Harm minimisation e.g. how to avoid dehydration
- Details of support agencies.

It is important that messages are as clear as possible without oversimplifying information. Drug information must not confuse or be forced on customers.

It is advisable to liaise directly with local drug advisory agencies, who can offer guidance and may be in a position to supply appropriate literature.

As drug misuse might occur before entering as well as while inside premises, it is important that customers know where rest areas are, where access to drinking water can be gained and where first aid or help and assistance is available.

Premises licence holders and managers should also note the importance of having female door supervisors. Not only can they conduct searches of women but they can also provide a sympathetic approach to allegations of sexual assault and/or date rape.

#### Managing staff

Staff may be involved in illegal drugs activity. In order to maintain zero tolerance, premises managers should consider stating in their terms and conditions of employment that any involvement in illegal drugs activity will be regarded as gross misconduct. Gross misconduct can result in instant dismissal

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# Public safety issues

# The premises licence holders' responsibilities

It is recognised that despite a premises manager's best efforts, drugs may find their way into premises. The health risks associated with drug misuse are not limited only to the user. Risks to the non-user, members of the public, employers and employees are equally relevant. Under the Health & Safety at Work Act 1974 an employer must ensure, as far as is reasonably practicable, that the health, safety and welfare of employees, is not at risk.

The safety and comfort of customers and staff cannot be overstressed. For example, consideration should be given to:

- First aid and medical emergencies
- · Prevention of overcrowding and overheating
- Handling of 'sharps' (syringes, needles) and suspect substances
- Provision of tap water for drinking and rest areas.

Seized drugs from customers – all types of premises

The Misuse of Drugs Act 1971 permits certain categories of persons to lawfully possess controlled drugs whilst acting in the course of their duties, e.g. police officers. A premises manager or member of staff is not authorised to possess controlled drugs. However, Section 5 (4) of the Misuse of Drugs Act 1971, provides a statutory defence for those who can show that they were only in possession of a drug for the purpose of destroying it or handing it to a person, such as a police officer, who is lawfully entitled to take custody of it. This covers the circumstances when a controlled drug is discovered in a search. To be fully covered by the defence it is necessary to show that action was reasonable and prompt.

Note: Safeguards have to be put in place so that all parties involved in the process of coming into possession of drugs are protected. There must be an agreed policy governing the procedures for dealing with drug finds and seizures. It is important that these policies should be developed in consultation with the local police.

The exact procedures in this situation should be discussed and agreed with the local police licensing officer.

Suspect substances must never be taken off the premises, by any member of staff, under any circumstances.



Drug seizure procedures should also be made clear to the customer.

The following are guidelines suggested for situations where drugs are found on customers:

• If the premises manager is not part of the pre-entry search team, staff should be instructed to call a member of management to the scene immediately if drugs or suspicious substances are found. Nothing should be moved and the management should be shown the find prior to its removal

• The drugs (if tablets) should be counted and placed in a plastic bag. As there is a risk of substances being absorbed through the skin, surgical gloves should, where possible, be worn when handling drugs. The person(s) who found the drugs and the premises manager should take them to a secure office

• The plastic bag should be sealed using a tamper-proof seal (preferably numbered), and a label attached indicating the contents, the date and a sequential production number. In some areas the police will provide these. Police may also provide safes, in which seized drugs can be placed until they are collected by the police

• If tags and seals are not available, an envelope should be used with the signatures of those involved in the find signed across the sealed flaps. The plastic bag or envelope should then be placed in a locked safe or other secure cabinet

• The Security Incident Logbook should be completed if applicable with the relevant details. Notes should be made and countersigned by the witnesses as above including any relevant conduct and conversation with the person searched

• The police should be called and the suspicious substances handed over against a receipt, unless your local police have advised you otherwise. (Check locally agreed procedures.) The integrity, continuity and chain of custody of seized items has to be able to withstand scrutiny at every stage of the process. There has to be protection for all parties involved to prevent any allegation that drugs went missing, or that the quantity involved was increased or switched.

# Disposal of found drugs

Similar procedures apply where suspicious substances not in the possession of a customer are found on the premises:

• Any found items should be within sight of all parties at all times, sealed in a plastic bag or envelope and handed over only to a police officer for a receipt

• Seized drugs should be handed over as soon as possible and never kept by the person who seized them



• Notes should be made as soon as possible after the event detailing how and where the substance was found

# Dealing with users or dealers

Premises managers must remember their liability under the Misuse of Drugs Act 1971. It is their duty not to knowingly allow drug use and dealing on their premises.

Remember to consider the safety of your customers, staff and yourself before deciding how to act.

The following are suggested guidelines on how to deal with customers suspected of using or dealing drugs on licensed premises:

• Allow the person to continue their suspect activities but keep them under discrete observation

- · Identify those suspected of these activities
- Inform the police immediately

• After identification of suspects, further information such as physical descriptions, relevant car registration numbers, customer intelligence or any suspicious patterns of behaviour which might be helpful to the police, should be noted down

• Any relevant CCTV footage should be identified and kept for the police

• If 'litter' has been discovered, make sure that special attention is paid to those areas in future, particularly in terms of keeping a vigilant eye on the area

• Do NOT use force under any circumstances.

Safe handling of 'sharps' and suspect substances

Risks associated with drugs include the handling of syringes, needles and anything contaminated with blood. Although rare in licensed premises, needle stick injuries from needles used for heroin can result in HIV, hepatitis B or C. Crack cocaine paraphernalia carries a risk of TB infection.

It is therefore vital that all staff concerned take extreme care when searching people or clothing as 'needles' or 'sharps' are often concealed. It is advisable to ask the person to be searched if he has any 'sharp' objects on their person, and to use needle proof gloves as a precaution in suspect cases. When searching customers it is therefore advisable to ask customers to empty pockets and bags themselves. This reduces the risk of needle prick injuries and of being accused of



assault. If any member of staff is accidentally 'pricked', immediate hospital advice should be sought.

Needle proof gloves should be available for the safe handling of these items. Syringes and needles can then be put in an empty glass bottle or jar with a screw lid, which will prevent any further harm, until arrangements can be made to dispose of them in a safe place, such as a 'sharps' box in a doctor's surgery or pharmacy. Any material such as blood stained paper tissues, toilet paper, for example, can be disposed of in the toilet or by incineration.

Be aware that insulin dependent diabetics need to inject themselves shortly before eating. Therefore, if you do witness a customer injecting him/her or find any evidence to suggest injection has taken place, remember that the customer may be diabetic. A standard hypodermic needle is not typically used, instead a pen type dispenser is common. These can come in a variety of colours and designs.

# Making notes and keeping records

As a matter of good practice, an incident record book should be kept. Trained door and floor supervisors should carry personal notebooks as well. As soon as possible after an event or incident, make sure that accurate notes are made in a notebook and Security Incident Log if door staff are used. If this facility is not available, notes of what was said and done; should still be made.

These notes will be required as evidence in support of any prosecution at any subsequent court proceedings, and will assist you or your staff in making any statement required to the police.

# Public safety issues

Safety is a key area and the potential for overcrowding, dehydration or risk of personal injuries to staff as a result of discarded needles and physical attacks must be treated as a priority. The following will help to minimise risks to public safety in all licensed premises regardless of whether a drugs problem is perceived or not.

# Drinks shelves

Premises licence holders or managers might also consider having drinks shelves. These can be monitored by staff, for customers to use when they need to leave their drinks in a safe place while they are visiting the toilets or on the dance floor. Drinks shelves can help to discourage drinks spiking and generally make customers feel safer.



# Prevention of overcrowding and overheating

One of the most common drugs found in clubs and similar premises is ecstasy. Deaths resulting from this drug have been well documented in the press and there have been over 200 reported deaths in the UK since 1993. The majority of deaths related to this drug have been caused by acute heat stroke. This heat stroke is caused not by ecstasy use alone but by a combination of factors:

• Ecstasy causes body temperature to rise

• Non-stop dancing also causes body temperature to rise. Inadequate ventilation or overly hot premises do not allow dancers to cool to safe temperature levels

• Inadequate intake of water or non-alcoholic drinks in this situation leads to dehydration and interferes with the body's ability to cool itself

• Ecstasy interferes with the body's ability to get rid of excess water and excessive consumption of water in treating the effects of ecstasy can be fatal.

In premises that are licensed for regulated entertainment, the maximum number of people allowed into the premises at any one time is likely to be stated as a condition on the premises licence. This number is known as the occupant capacity or maximum accommodation limit. Other premises may have maximum numbers set according to fire safety regulations or their operating schedule. This maximum number must never be exceeded. The penalties are high for a breach of this condition.

In addition to overall maximum numbers, care should be taken to ensure that no localised overcrowding takes place. Exit routes, particularly, should be kept clear at all times.

Ventilation must be appropriate to the type of premises and event. Use of air conditioning to control temperature and humidity is very important at dance events for the safety of customers. At all dance premises, it is strongly recommended that free cold drinking water should be available, on request, in a supervised area at all times. The provision of free water may, in any event, be a condition of the licence. Customers should be aware of the provision of water and know where to get it from.

Quieter rest areas may also be beneficial in dance premises, to allow clubbers to cool off.



Drugs affect everyone differently and sometimes people suffer a bad reaction. It is useful to know how to respond to certain situations. However, first aid treatment should only be administered by a qualified person and where there is any doubt, the emergency services should be called as soon as possible.

SYMPTOMS	RESPONSE	DRUG THAT MIGHT
Tense and panicking	<ul> <li>Calm and reassure the person</li> <li>Explain that the feelings will pass</li> <li>Steer the person clear of crowds, noisy music and bright lights</li> <li>If the person starts to breathe very quickly, calm him down and encourage him to take long, slow breaths</li> </ul>	Ecstasy, LSD, magic mushrooms and speed
Hot and dehydrated	<ul> <li>Move the person to a cooler ,quiet area (outside is often best)</li> <li>Remove excess clothing and try to cool the person down</li> <li>Encourage the person to sip non-alcoholic fluids such as fruit juice (about a pint every hour)</li> <li>If symptoms persist call an ambulance and make sure the person is not left alone</li> </ul>	• Ecstasy and speed affect the body's temperature control. If users dance energetically without taking breaks or keeping up fluids, there is a danger that the body will overheat and lose too much body fluids. Warning signs include: cramp, fainting, headache or sudden tiredness
Unconscious	<ul> <li>Call an ambulance</li> <li>The person should be place in the recovery position</li> <li>Keep the person warm but not too hot</li> <li>If the person is not breathing, a first aider will need to do mouth-to-mouth resuscitation</li> </ul>	<ul> <li>Alcohol, gases, glues and aerosols, heroin, poppers and tranquillisers</li> <li>A bad reaction to ecstasy</li> <li>Ecstasy user who has danced a lot but failed to drink enough fluids</li> </ul>
Really drowsy	<ul> <li>Calm and reassure the person</li> <li>NEVER give coffee to wake the person up</li> <li>If symptoms persist, the person should be put into the recovery position</li> <li>Call an ambulance if necessary</li> </ul>	Heroin, tranquillisers and misuse of gases, glues and aerosols

Dealing with first aid and medical emergencies

There will be occasions where a need for first aid treatment is required for a variety of illnesses or conditions.

In the event of a medical emergency, the best advice is to call 999 to reach the ambulance service. Trained operators will be able to give advice over the telephone prior to the arrival of paramedics.



In larger premises there should be a member or members of staff who are fully trained to administer first aid.

First aid training can be obtained through organisations such as:

- British Red Cross
- St John's Ambulance Association.

It is considered good practice for at least one member of staff on duty to have basic first aid training. A licence condition may impose further conditions.

If a person is showing the ill effects of drug misuse, he should on no account be evicted. A first-aider should be called until he can be handed over to medical supervision or the police. If a person has collapsed or seems unconscious, you must act at once by calling 999 for an ambulance. If it is suspected that the person has taken drugs, the operator should be told. If drugs are found, they should be kept safe and then passed onto the emergency services.

Note that the text above is taken from BIIAB's Level 2 Award in Drugs Awareness Workbook (8th Edition August 2010). For more information on this qualification either visit www.biiab.orgor contact BIIAB's qualification team at <u>qualifications@bii.org</u>.

