

10. DRUG STRATEGY

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STANDARD: Staff in establishments work to ensure a continuing reduction in the availability of drugs through a range of supply reduction measures, identify prisoners who are drug misusers, provide them with the opportunity for treatment and support to help them avoid drugs and reduce the risk of them committing drug related crimes after their release.

PERFORMANCE INDICATORS:

- Audit compliance
- Number of prisoners entering a drug rehabilitation programme
- Number of prisoners entering detoxification
- Number of prisoners on a voluntary drug testing compact
- Number of prisoners undergoing a full Counselling, Assessment, Referral, Advice and Throughcare services (CARATs) assessment
- Rate of positive tests from random mandatory drug testing of prisoners

APPLICABILITY:

- Establishments

REQUIRED OUTCOMES

POLICIES AND PROCEDURES

All establishments develop and agree with area managers a drug strategy, consistent with the Prison Service national strategy, which aims to:

- restrict the availability of drugs in establishments
- identify prisoners who have been misusing drugs
- provide them with advice treatment and support of appropriate intensity
- prevent harm to the well-being of themselves and others.

KEY AUDIT BASELINES

1. An area drug co-ordinator is appointed by the Area Manager.
2. Each establishment has a written drug strategy, consistent with the area and national strategies, reviewed annually approved by the Area Manager and contains details of:
 - 2.1 procedures to prevent drugs entering the establishment
 - 2.2 drug testing arrangements and procedures which are displayed in the prisoners' library living accommodation and the testing areas
 - 2.3 a multi-disciplinary team led by a senior manager designated as the drugs co-ordinator
 - 2.4 an assessment of local needs and priorities, including training, taking into account statutory equal opportunities obligations
 - 2.5 arrangements to identify individuals with drug problems
 - 2.6 the provision of treatment, counselling and support, health promotion and harm minimisation
 - 2.7 clinical services provided by health care
 - 2.8 participation in multi agency partnerships to co-ordinate treatment, help and support for inmates when they re-enter the community
 - 2.9 working protocols between CARATs and health care
 - 2.10 staff training meeting requirements of national instructions.

DETOXIFICATION (CLINICAL MANAGEMENT OF WITHDRAWAL)

Clinical services for the assessment, treatment and care of substance misusers are provided in line with PSO 3550.

3. There is a written policy statement on the establishment's substance misuse service which includes:
 - 3.1 details of the clinical services provided by health care
 - 3.2 guidelines for opiate, alcohol and benzodiazepines detoxification
 - 3.3 guidance on assessment, treatment setting, essential observations and treatment of overdose, in line with Department of Health guidelines
 - 3.4 details of health care involvement with CARATs care plans
 - 3.5 details of NHS addiction specialist involvement in preparation of guidelines
 - 3.6 details of regular contact with NHS substance misuse specialist services
 - 3.7 procedures for taking urine samples, testing for opiates, stimulants and benzodiazepines prior to starting a detoxification programme, and placing test results in Inmate Medical Records (IMRs).
 - 3.8 guidelines for the management of pregnant women prepared jointly with NHS obstetrician and substance misuse specialist.

COUNSELLING, ASSESSMENT, REFERRAL, ADVICE AND THROUGH-CARE SERVICES (CARATs)

All establishments provide a CARATs as defined in PSO 3630.

4. Designated CARATs' workers are in post in all establishments.
5. CARATs are publicised and marketed within each establishment.
6. Prisoners who are identified as having drug related issues/problems by any member of staff are referred to the CARATs team for initial assessment.
7. Communication and linking is in operation between prison staff including personal officers, Healthcare, CARAT services, probation and community drug workers.
8. All prisoners referred from initial contact and/or detoxification are fully assessed within five working days (unless specified reasons make a shorter or longer period more appropriate). Completion of the initial assessment satisfies the requirements of the KPT.
9. Where the CARAT worker recommends a care plan assessment, it is conducted within ten days of the initial assessment.
10. Counselling or groupwork is provided within the CARATs framework for those assessed as needing these types of intervention.
11. All consenting prisoners have a release plan.

REHABILITATION PROGRAMMES AND THERAPEUTIC COMMUNITIES (TCs) FOR DRUG USERS¹

Rehabilitation programmes and therapeutic communities provide appropriate treatment for prisoners assessed by CARATs as requiring such intervention.

12. Rehabilitation programmes and TCs make provision in accordance with the minimum standards outlined in the provider contracts and the joint accreditation panel criteria.
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MANDATORY DRUG TESTING (MDT)

MDT is carried out in every establishment.

13. The MDT programme is performed in all establishments in accordance with national instructions.
 14. Establishments test the required sample population using only those prisoners listed randomly by Local Inmate Data System (LIDS) and have a system for selecting reserve prisoners as required.
 15. The number of prisoners testing positive for drugs under the random programme is monitored in line with PSO 7100.
 16. Each establishment has arrangements to allow targeted testing in line with PSO 3601.
 17. Prisoners found guilty on adjudication are identified to CARATs for assessment and, where appropriate, placed on a frequent testing programme according to national instructions.
 18. Arrangements are in place for prisoners to have a sample which tests positive under the MDT programme analysed by an independent laboratory before any related disciplinary proceedings are completed, in accordance with the Prison Discipline Manual and PSO 3605.
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VOLUNTARY DRUG TESTING (VDT)

Establishments provide VDT for all suitable prisoners.

19. VDT is undertaken in accordance with the operational framework set out in PSO 3620.
 20. Only testing kits approved by the Directorate of Resettlement are used for Voluntary Drug Testing.
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SUPPLY REDUCTION

Establishments have in operation effective security measures to restrict the smuggling of drugs:

SEARCHING

All establishments have in place a searching plan to find drugs and related paraphernalia.

21. A searching strategy for each establishment is agreed between the Governor and the Area Manager.
22. Establishments have access to and use at least one passive drug dog.
23. A process is in operation to monitor and control prisoners' communications and visits to prevent the supply of drugs into establishments.
24. Closed Circuit TV (CCTV) is available in the visits rooms of all closed prisons.

PRISONERS' COMMUNICATIONS AND VISITS

Prisoners' communications and visits are monitored and controlled to prevent them being used as an avenue for smuggling drugs.

¹ This section applies only to establishments with units providing these services for drug misusers.

POLICE LIAISON

Establishments liaise effectively with their local police to prevent drug trafficking and to prosecute offenders.

INTELLIGENCE

Establishments have effective arrangements for collating, evaluating, disseminating and acting on intelligence on drug related matters.

VISITOR BANS

All establishments have in place a visits ban initiative in line with PSO 3610.

MONITORING

Effective data collection arrangements are in place for monitoring the effectiveness of the strategy.

DRUG ACTION TEAMS (DATS)

There is effective liaison between establishments and local DATs.

25. Good practice arrangements exist for liaison with the police and are based upon the Combatting Drug Trafficking and Drug Misuse in prisons protocol.
26. Each establishment has in place procedures for collating, evaluating and disseminating and acting on intelligence on drug related matters.
27. Establishments impose visitor bans in accordance with national instructions.
28. Establishments provide monthly returns to the Drug Strategy Unit via area offices.
29. Area Managers have arrangements for monitoring the contracts with external drug agencies for the provision of CARATs, rehabilitation programmes and therapeutic communities.
30. Establishments send monthly data on performance targets to area office co-ordinators in line with PSO 7100.
31. Area Managers ensure there is Prison Service representation at all relevant local DAT meetings as defined by the area drug strategy.
32. Establishments provide data annually the DAT template. The Area Manager and Area Drug Co-ordinator agree liaison with all DATs in the area.

REFERENCES:

NATIONAL INSTRUCTIONS

PSO _____ Drug Action Teams (in preparation)
PSO _____ Performance and financial monitoring (in preparation)
PSO _____ Rehabilitation Programmes & Therapeutic Communities (in preparation)
PSO 0200 HM Prison Service standards manual
PSO 1000 Security manual
PSO 1050 Prison Service dogs, chapter one - standards
PSO 1050 Prison Service dogs, chapter two - training aids
PSO 2300 Resettlement
PSO 3550 Clinical services for substance misusers
PSO 3601 Mandatory drugs testing
PSO 3605 Procedures for the independent analysis of mandatory drug test samples
PSO 3610 Measures to deal with visitors and prisoners who smuggle drugs through visits
PSO 3620 Voluntary drug testing units and the framework for voluntary drug testing
PSO 3630 Counselling, assessment, referral, advice and throughcare services
PSO 4801 The management of mother and baby units and the application process
PSO 4950 Regimes for prisoners under 18 years old
PSO 4950 Regimes for women prisoners under 18 years old
PSO 7100 PUMIS sources and Guidance Notes 2000-2001

OTHER

Combatting Drug Trafficking and Drug Misuse in Prisons and Young Offenders' Institutions ACPO and HM Prison Service Protocols
Drug misuse in prison (1995)
Drugs manual (in preparation)
Mandatory drug testing for prisoners, manual of policy and procedures, version 5 (version 6 in preparation)
Memorandum of understanding - Association of Chief Police Officers and HM Prison Service
Prison discipline manual
Tackling drugs in prison (1998)
The joint prison & probation accreditation criteria
Voluntary drug testing manual of guidance (in preparation)