

On-charge drug testing: evaluation of drug testing in the criminal justice system

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On-charge drug testing: evaluation of drug testing in the criminal justice system

Summary

This report highlights key benefits, challenges and best practice around the implementation and maintenance of drug testing offenders on charge. It is based on evidence drawn from the ongoing evaluation of the Drug Testing Pilots, which started in three sites in Autumn 2001 and were extended to a further six sites in Summer 2002.

Key issues

The evaluation identified the following key issues in enabling the successful implementation of on-charge drug testing.

Leadership and partnership working:

- The presence of a recognised leader across the whole partnership area, who recognises the impact the introduction of drug testing will have on a wide variety of stakeholders and has gained the ongoing commitment of these stakeholders.
- A lead project manager with enough time and the skills to build upon successful existing partnerships and other associated initiatives.

Stakeholder engagement:

- Clear consistent messages identifying the planned benefits from drug testing (resulting from clearly identifying the consequences of a positive test to the offender, the courts etc.).

Monitoring and improvement activity:

- There is a clear integrated plan across all agencies concerning the pre-launch preparation (communication, training, information flow, identification of standards), the launch of testing (publicity and leading by example) and monitoring and quality improvement. Responsibilities within agencies and across the partnership are identified.
- Commitment to quality improvement across the partnership so that monitoring mechanisms are implemented for all elements, and action is taken if agreed 'standards' are not achieved.
- The identification of accountability mechanisms, for example through the Drug Action Team (DAT) or the Local Strategic Partnership.
- Adopting a 'whole systems' approach concerning the flow of information and links between different organisations. There should be a joint understanding of roles.

Home Office Development and Practice Reports draw out from research the messages for practice development, implementation and operation. They are intended as guidance for practitioners in specific fields. The recommendations explain how and why changes could be made, based on the findings from research, which would lead to better practice.

Introduction

Aims and objectives of drug testing

The Criminal Justice and Court Services Act 2000¹ set out provisions for the use of drug testing for specified Class A drugs for individuals aged 18 and over who have been charged with, or convicted of, 'trigger offences' (these include property crime, robbery and specified Class A drug offences). Individuals charged with a trigger offence, or an offence where specified Class A drug misuse is suspected as a factor in the crime, can be tested after being charged by the police. Probation testing is undertaken for those who have received one of the following:

- a request to submit a pre-sentence test;
- a drug abstinence order (DAO);
- a drug abstinence requirement (DAR) attached to a Community Rehabilitation or Punishment Order; or
- as part of a condition of release from prison on licence, or young offenders (aged between 18 and 22) released under notice of supervision.

The objectives of the drug testing powers are to reduce drug misuse and offending while under criminal justice supervision by identifying offenders who should be receiving treatment and monitoring their progress. This is based on the assumption that drug testing will further encourage problematic drug users to enter treatment, thereby reducing their drug misuse and offending.

In Autumn 2001 these provisions began to be piloted in police stations and probation areas in three sites: Stafford and Cannock, Nottingham and Hackney. The provisions were extended in April 2002 and six additional sites began testing in Summer 2002: Bedford, Blackpool, Doncaster, Torquay, Wirral and Wrexham and Mold. The pilots will run until the end of March 2004.

Extension of on-charge testing

During the pilots, the Government launched a major initiative aimed at identifying problematic drug users at all stages of the criminal justice system and encouraging them into treatment. The Criminal Justice Interventions Programme (CJIP), launched in March 2003, builds upon the provisions of the Criminal Justice and Court Services Act 2000 and has included an extension of on-charge drug testing to 30 of the Basic Command Units (BCUs) with the highest levels of drug-related crime. Drug testing on charge has been introduced in all these areas as part of a variety of 'whole systems' initiatives associated with identifying drug-related offenders and supporting their access to treatment and rehabilitation as part of custodial and community criminal justice interventions. In November 2003 the Home Secretary

1. A copy of the Act can be found at <http://www.hms.gov.uk/acts/acts2000/20000043.htm>

announced that on-charge drug testing will be extended to a further 36 BCUs from April 2004.

Evaluation of drug testing

The information in this Development and Practice Report, which focuses specifically on police testing on charge, is derived from the ongoing evaluation of drug testing in the original nine pilot sites. The evaluation addresses the question 'Does drug testing successfully reduce crime and/or drug misuse (with or without treatment) and how could drug testing be implemented to achieve this, in the light of the costs and benefits?'. It does so through three main components:

1. An **outcome analysis** to establish whether drug testing results in:
 - a reduction in offending behaviour;
 - a reduction in drug consumption and hence offending behaviour; and
 - an increase in treatment take-up and hence a reduction in drug consumption and hence offending behaviour.
2. A **cost benefit analysis** to quantify the cost-effectiveness of the pilots.
3. A **process and structure audit** to examine the operational procedures and formal management arrangements operating in the pilot sites and to identify good practice.

Two Research Findings have already been published^{2,3}, and a final report of the evaluation, containing detailed outcome and cost benefit analysis will be available in Spring 2004. Much of the information contained within this Development and Practice Report is derived from the process and structure audit.

The purpose of this report

This report brings together the key messages from the drug testing pilot sites to highlight some of the key issues for consideration around the establishment and maintenance of drug testing on charge. In particular, it seeks to identify good practice and some of the benefits – and challenges – of drug testing to assist those BCUs that will be required to set up on-charge testing arrangements in their own areas as part of CJIP. It is not intended to be prescriptive about how to implement on-charge drug testing, as there are different organisational structures in each pilot site area, which may demand local solutions. However, it seeks to recognise where there are common areas of experience and learning across different sites which can be shared more widely.

2. Matrix MHA & NACRO (2003) *Evaluation of drug testing in the criminal justice system in nine pilot areas*, Home Office Research Findings 180, London: Home Office
3. Mallender, J, Roberts E & Seddon T (2002) *Evaluation of drug testing in the criminal justice system in three pilot areas*, Home Office Research Findings 176, London: Home Office

Implementing on-charge testing – key challenges identified and lessons learned from the pilot

Key challenges

The evaluation has highlighted a number of key challenges to the successful implementation of on-charge drug testing. These include:

- Sufficient preparation time and project management skills need to be available to support effective implementation.
- It is very important for the project steering group to work with and gain commitment to change from the crown prosecution service, the prisons, and the courts – magistrates, judges and court clerks.
- It is not uncommon for the drug test result information (DT1 and DT2 forms) to get lost within the various filing systems and therefore not be available to inform sentence planning, court decisions, and access to treatment. Strategies to tackle this need to be developed (for example, by ensuring the test result is shown on the case summary sheet).
- Whilst access to treatment and other support services is improving, many staff and offenders still believe that treatment services have long waiting lists. Arrest referral and testing staff require up-to-date information concerning service provision.
- The potential benefits of drug test information are not fully understood by all stakeholder organisations. For example, the information can be used strategically to inform treatment commissioning by the DAT. Other potential benefits for other stakeholders are highlighted on page six below.
- Detainees do not always understand the remit of the arrest referral worker. This may impact upon take-up rates for the arrest referral service.
- It is crucial for civilian and police testers to have sound drugs awareness and an understanding of what arrest referral can offer, as they have an important role in motivating offenders and providing help in accessing appropriate treatment services either in the custody suite or in the future.
- Offender confidence in, and understanding of, drug testing is crucial. Offenders have differing views on the impact of drug testing, but when it is explicitly stated that the drug test result will be considered by the court, offenders are more likely to believe that drug testing on charge will have an impact on their drug misuse or offending.

- The relatively high calibration of the screening tests (which therefore does not detect low levels of drugs) can lead to a perception amongst detainees that the tests are inaccurate. This perception needs to be challenged and the calibration explained.
- It is important to review what new information testing brings to all stakeholders and review the implementation of testing by developing monitoring processes and resultant action plans.

Best practice

The evaluation has also identified a number of areas of best practice that have enabled the successful implementation of the drug testing requirements:

Effective project management

A project management system should be adopted covering all of the issues associated with effective implementation, including: project planning; the identification of risks and costs; the development of a training strategy; appropriate partnership working and the development of a communication strategy focused on the general public and staff involved with testing. Tools to assist project planning may include the use of monitoring processes, Gantt charts, and PDSA (Plan, Do, See, Act) cycles. It is important to have in place a lead project manager with the time and skills to build upon successful existing partnerships and other associated initiatives (for example in the implementation of Drug Treatment and Testing Orders) and to set up systems to encourage continuous improvement (see below). The project manager should report to a project steering group, which should be a time-limited group, reporting to a standing group within the Local Strategic Partnership.

Taking a 'whole systems' approach

Drug testing on charge needs a 'whole systems' approach to implementation. It must be acknowledged that it is the consequence of the communicated on-charge test result which has the greatest impact. This initiative should be seen to be consistent and support the plans developed by the local strategic partnerships, the community safety partnerships and Drug Action Teams. As a result, process maps and systems should be developed by the partnership to support and understand the implications of implementing testing on charge.

Clear responsibility and accountability for implementation

Accountability mechanisms must be clearly identified. For example, a time-limited drug testing steering group with a clear remit may be accountable to the partnership responsible for local delivery of the drug strategy. Responsibility for implementation at a local level should

rest with the chair of the partnership, with the nominated responsible officer being the Commander of the Basic Command Unit. The responsible team at the Regional Government Office should ensure that routes of accountability for implementation are in place and being effectively monitored.

Leadership

The implementation of testing on charge needs to have a local champion and management at least three months prior to the launch of testing and for at least six months whilst the testing process is bedded down. The champion needs to have sufficient status to be able to discipline within the custody suite if necessary and a presence within the local partnership to ensure a whole systems approach is taken. The presence of a recognised and respected leader across the whole partnership area is essential.

Stakeholder engagement and partnership working

The leader must recognise that the introduction of drug testing will have an impact on a wide variety of stakeholders who all need to understand why it is happening, what the impact should be and how it will benefit their roles. It will be important to recognise this new initiative as a change management exercise. In order to win the hearts and minds of individuals, the benefits of changing individuals' roles needs to be understood by stakeholders. A local stakeholder analysis should be undertaken to establish who the key stakeholders are. The leader must gain the ongoing commitment of the leaders of stakeholder organisations, namely courts (especially the chair of the bench), the Crown Prosecution Service, probation, treatment providers, legal representatives, prisons and police.

Development and sharing of a local vision

Drug testing on charge is a beneficial process that complements the other elements of the custody charging process, and therefore should be strategically and operationally managed from within the custody suite. However the use of the information and potential benefits are predominantly outside the custody suite, therefore all stakeholders and the custody suite staff need to have a shared vision concerning the benefits of on-charge testing. This may involve the development of a presentation to be shared with all stakeholder staff. This should also involve key messages from the offender interviews that have been conducted as part of the evaluation. These interviews have yielded important information on the potential for on-charge drug testing to influence offender behaviour⁴.

Delivery of appropriate training

Appropriate training should be delivered to all stakeholders. Depending on the role of the different individuals this may involve: the benefits of testing; the legal context of testing; test equipment training (including sensitivity and equipment limitations); handling challenges from detainees; knowledge of different drugs and their impact; and the role of different stakeholders in the testing process. Drug awareness and understanding treatment and arrest referral services are essential expertise for civilian and police testers. Regular and targeted training can promote these.

Monitoring and improving standards

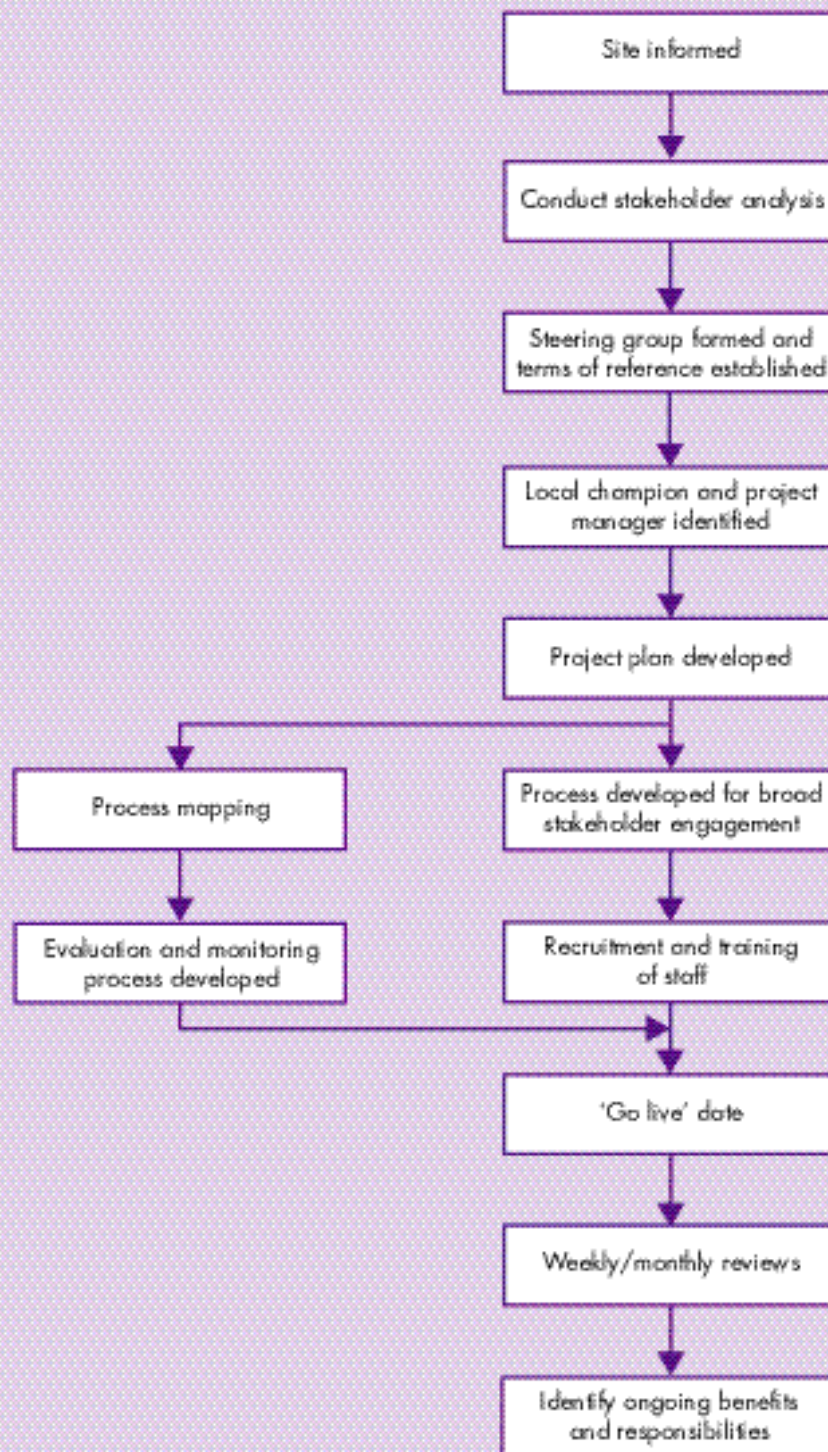
Monitoring processes should be implemented on a continuous or sampled basis. These processes would ensure compliance throughout the testing process and encourage the communication of results to the courts. Compliance with these requirements would in turn ensure that the potential benefits of testing are realised. Potential indicators include:

- number of people over 18 charged with a trigger offence versus numbers of actual tests;
- proportion of those testing positive who are offered arrest referral;
- proportion of test results on the CPS file; and
- proportion of test results read out in court versus number of tests undertaken.

Individuals implementing testing should be involved in the review process in order to learn and identify ways to improve implementation. This information needs to be reviewed and action taken where necessary by the accountable officers.

4. These findings will be discussed in more detail in the final evaluation report due to be published in Spring 2004.

Mapping the implementation process



Benefits of on-charge drug testing

The evaluation suggests that there can be benefits of on-charge testing for a variety of local stakeholder organisations; making these benefits clear could be an important means of developing partnership working and a shared vision for the delivery of drug testing. Organisations that may benefit from on-charge drug testing include:

- **Drug Action Teams and Primary Care Trusts** – to inform treatment plans, identify what drugs are being used and help identify treatment capacity.
- **Police** – to remove some of the doubt concerning whether some detainees have used drugs in the recent past.
- **Probation** – drug testing may enhance the assessment process for the pre-sentence report, and thus support more appropriate sentences for some offenders who would not otherwise discuss their drug use.
- **Sentencers** – identify more appropriate sentences to tackle drug misuse by supporting probation assessments.
- **Prison office sentence planners** – to inform sentence planning for offenders by identifying those who require drug treatment during their period in custody and any specific support they may require on release.
- **Arrest referral services** – drug testing enables a more targeted method of identifying those offenders for whom arrest referral services may be appropriate, who may not otherwise be identified.
- **Local partnerships** – some agencies have suggested that the implementation process of drug testing has helped forge effective partnership links and relationships.
- **Detainees** – for some detainees this may provide a route into treatment, which may not otherwise have been sought or accessed.

Case study – Doncaster

The Doncaster site project managed the implementation of drug testing in a very systematic way. This involved: identifying project managers within courts, police and probation at least two months before the drug testing start date; early identification of appropriate steering group membership; the development and delivery of a training package with consistent messages for all stakeholders; leading by example; and developing monitoring systems. Drug testing was also sold and communicated as being an exciting new development, which helped to generate enthusiasm with stakeholders. The table below sets out the stage-by-stage approach taken in Doncaster.

| | |
|--|---|
| 1. Recognition of the need for change | <p>Site stakeholders were informed that Doncaster would be a pilot site four months prior to the 'go live' date. Previous experience of implementing new policy initiatives by some stakeholders had demonstrated that they would fail if: the launch was not planned well; there was not enough time; staff groups were cynical; it was not clear who was responsible for delivering the change; and key performance areas were not monitored and/or key messages were not agreed and communicated to all stakeholders.</p> <p><i>Key success factors:</i> previous experience of implementing successful change projects.</p> |
| 2. Start of the change process | <p>The steering group agreed that the project needed managing across the whole site, and across all stakeholder organisations. A project manager was identified within each organisation with an agreed remit to manage the introduction of the new powers.</p> <p><i>Key success factors:</i> co-ordination of champions with clearly defined roles for implementing drug testing across all organisations.</p> |
| 3. Diagnosis | <p>Once in post and with the roles clarified, the project managers worked with the rest of the steering group and their organisations to identify the key areas of implementation. These included: working effectively together as a multi-agency team; identification and agreement of key messages; identifying and communicating benefits; training of all stakeholder staff including defence advocates, legal advisors, CPS and magistrates and judges; reviewing the processes and procedures; recruiting new staff; monitoring mechanisms; and awareness of the likely impact of drug testing across all organisations.</p> <p><i>Key success factors:</i> the key agencies worked as a team to tackle all of these areas.</p> |
| 4. Planning and preparing for implementation | <p>Project managers created project plans for their organisations covering the areas identified above. Individuals and small teams within the steering group took on roles to support the roll out. A series of training presentations were developed, which ensured that consistent messages were given to each staff group. A team including an Inspector, a Senior Probation Officer and the Clerk to the Justices jointly delivered the training. Separate training aims were developed for each staff group in order to foster ownership of the pilot. The aims of the training sessions delivered to magistrates were very clear: to prepare magistrates to deal judicially with cases involving the drug testing of defendants pursuant to the Criminal Justice and Court Services Act 2000.</p> <p><i>Key success factors:</i> development and communication of a vision. Adequate preparation time to develop a training package for staff groups.</p> |
| 5. Implement change | <p><i>Training:</i> Training sessions with police, probation and courts were planned covering: the gestation of the pilot; a review of the Theft Act 1968 and the Misuse of Drugs Act 1971; linked research; the project plan; benefits; experience from the initial sites; testing requirements for DAOs and DARs; links with the DAT; and an opportunity for questions. There were a number of training sessions with different stakeholders including three magistrates' events, one defence solicitor event, four probation events, one police event, and one crown court event for judges.</p> <p><i>Monitoring:</i> Monitoring arrangements were also identified, which reported back to the steering group in order to ensure compliance.</p> <p><i>Leading by example:</i> Early drug tests in the police station were taken by the project manager.</p> <p><i>Key success factors:</i> preparation for training, putting the training into context, reviewing progress with implementation at project steering group meetings. Commitment from the chair of the bench.</p> |

6. Review

Compliance: Doncaster custody suite has on average five to six on-charge tests per day and very few tests are missed because of the monitoring systems that have been established to ensure that this does not happen. Custody staff were well prepared for the on-charge testing and the project manager planned the 'go live' day so that he was available to conduct the first drug test.

Quick start: Ninety-four per cent of magistrates attended the training events and there were representatives from police, probation and courts available to discuss any queries in respect to the new legislation. At least one solicitor also attended from each law firm. Since the legislation was introduced, the magistrates have used the DAO/DAR sentencing options and started using them more quickly than some of the other pilot sites. The steering group have attributed this smooth start to the training sessions, which were well received by all who attended. The training was evaluated locally.

Effective partnership working: This has been recognised as having a major impact on the successful implementation of the pilot.

'So what have we done to make it successful? I do think we got a sense of a really good partnership in this project.' (Steering Group chair)

Key success factors: individual and team accountability, preparation, planning, time, individuals taking responsibility to introduce drug testing successfully.

Annex A – Monitoring Data

On-charge testing

Police monitoring data represents all recorded drug test results from the nine pilot sites, including trigger and non-trigger offences. By end October 2003 17,586 tests had been attempted⁵ on 11,846 individuals⁶. Approximately a fifth of detainees were tested more than once, though this varied across sites, depending on when the pilot commenced, the geographical mobility of the population being charged, and local policing initiatives.

Table 1 below shows:

- the vast majority of tests have been deemed as successful⁷;
- there is a substantial variation in the proportion of positive tests (from 36 per cent in Torquay, to 65 per cent in Hackney);
- there appear to be three clusters of site in terms of drug use. Mainly opiates, (Stafford and Cannock, Bedford, Blackpool, Doncaster, Torquay, Wrexham and Mold), medium opiates, medium cocaine and high mixed (Wirral, Nottingham); high cocaine, high mixed, low opiate (Hackney).

Table 1: Police drug testing monitoring data cumulative to 30 October 2003

| Pilot site | Attempted tests | Successful tests | Positive opiates | Positive cocaine | Positive opiates and cocaine | Total positive | Tests per day |
|----------------------|-----------------|------------------|------------------|------------------|------------------------------|----------------|---------------|
| | No. | % | % | % | % | % | No. |
| Stafford and Cannock | 1,918 | 99% | 22% | 7% | 15% | 43% | 2.3 |
| Hackney | 1,490 | 97% | 8% | 33% | 24% | 65% | 1.9 |
| Nottingham | 5,606 | 99% | 13% | 17% | 24% | 55% | 7.2 |
| Bedford | 871 | 99% | 31% | 9% | 15% | 55% | 1.9 |
| Blackpool | 1,674 | 99% | 31% | 6% | 13% | 50% | 3.2 |
| Doncaster | 2,687 | 99% | 45% | 3% | 10% | 58% | 5.5 |
| Torquay | 1,120 | 99% | 27% | 4% | 5% | 36% | 2.3 |
| Wirral | 902 | 98% | 12% | 14% | 23% | 49% | 2.1 |
| Wrexham and Mold | 1,318 | 99% | 37% | 4% | 12% | 53% | 2.8 |

The most common offence triggering a test was theft. It accounted for almost two-thirds of all tests, though there was wide variation between the pilot sites, from just 39 per cent in Hackney to 79 per cent in Bedford. The next most common offence triggering a test was burglary, accounting for 12 per cent of tests.

5. An attempted test is defined as a request by an officer to provide a sample.

6. These are provisional data and may be subject to change once final verification has been completed.

7. An unsuccessful test is defined as one where either the offender refused to take the test, the test was aborted due to equipment failure or because the offender was unable to provide a sample. It should be noted that refusal to provide a sample when requested constitutes an offence in itself for which the defendant can subsequently be charged.

Table 2: Police drug testing monitoring data cumulative to 30 October 2003: attempted tests by site and trigger offence

| Offence | Stafford and Cannock | Hackney | Nottingham | Bedford | Blackpool | Doncaster | Torquay | Wirral | Wrexham and Mold | Total Number |
|---------------------------------------|-------------------------|--------------|--------------|------------|--------------|--------------|--------------|------------|---------------------|-----------------|
| Theft | 1,278 | 587 | 4,056 | 685 | 999 | 1,662 | 653 | 527 | 867 | 11,314 |
| Robbery | 44 | 201 | 245 | 31 | 59 | 68 | 20 | 37 | 13 | 718 |
| Burglary | 240 | 250 | 537 | 56 | 246 | 402 | 135 | 116 | 174 | 2,156 |
| Aggravated burglary | 8 | 3 | 17 | 2 | 6 | 13 | 2 | 13 | 3 | 67 |
| Taking vehicle w/out owner's consent | 58 | 93 | 106 | 29 | 53 | 71 | 20 | 48 | 34 | 512 |
| Aggravated vehicle taking | 24 | 28 | 36 | 4 | 8 | 36 | 16 | 20 | 25 | 197 |
| Obtaining property by deception | 64 | 57 | 138 | 29 | 71 | 73 | 29 | 40 | 65 | 566 |
| Equipped to steal | 5 | 34 | 56 | 5 | 14 | 18 | 3 | 7 | 18 | 160 |
| Production/supply of controlled drugs | 19 | 17 | 21 | 1 | 2 | 3 | 5 | 19 | 1 | 88 |
| Supply of controlled drug | 9 | 9 | 139 | 2 | 32 | 45 | 30 | 28 | 5 | 299 |
| Possession of controlled drug | 92 | 118 | 147 | 14 | 111 | 181 | 158 | 25 | 79 | 925 |
| Possession with intent to supply | 65 | 60 | 70 | 5 | 51 | 67 | 43 | 16 | 20 | 397 |
| Non-trigger ⁸ | 12 | 33 | 38 | 8 | 22 | 48 | 6 | 6 | 14 | 187 |
| Total | 1,918 | 1,490 | 5,606 | 871 | 1,674 | 2,687 | 1,120 | 902 | 1,318 | 17,586 |
| | | | | | | | | | | Percentage |
| Theft | 66.6% | 39.4% | 72.4% | 78.6% | 59.7% | 61.9% | 58.3% | 58.4% | 65.8% | 64.3% |
| Robbery | 2.3% | 13.5% | 4.4% | 3.6% | 3.5% | 2.5% | 1.8% | 4.1% | 1.0% | 4.1% |
| Burglary | 12.5% | 16.8% | 9.6% | 6.4% | 14.7% | 15.0% | 12.1% | 12.9% | 13.2% | 12.3% |
| Aggravated burglary | 0.4% | 0.2% | 0.3% | 0.2% | 0.4% | 0.5% | 0.2% | 1.4% | 0.2% | 0.4% |
| Taking vehicle w/out owner's consent | 3.0% | 6.2% | 1.9% | 3.3% | 3.2% | 2.6% | 1.8% | 5.3% | 2.6% | 2.9% |
| Aggravated vehicle taking | 1.3% | 1.9% | 0.6% | 0.5% | 0.5% | 1.3% | 1.4% | 2.2% | 1.9% | 1.1% |
| Obtaining property by deception | 3.3% | 3.8% | 2.5% | 3.3% | 4.2% | 2.7% | 2.6% | 4.4% | 4.9% | 3.2% |
| Equipped to steal | 0.3% | 2.3% | 1.0% | 0.6% | 0.8% | 0.7% | 0.3% | 0.8% | 1.4% | 0.9% |
| Production/supply of controlled drugs | 1.0% | 1.1% | 0.4% | 0.1% | 0.1% | 0.1% | 0.4% | 2.1% | 0.1% | 0.5% |
| Supply of controlled drug | 0.5% | 0.6% | 2.5% | 0.2% | 1.9% | 1.7% | 2.7% | 3.1% | 0.4% | 1.7% |
| Possession of controlled drug | 4.8% | 7.9% | 2.6% | 1.6% | 6.6% | 6.7% | 14.1% | 2.8% | 6.0% | 5.3% |
| Possession with intent to supply | 3.4% | 4.0% | 1.2% | 0.6% | 3.0% | 2.5% | 3.8% | 1.8% | 1.5% | 2.3% |
| Non-trigger | 0.6% | 2.2% | 0.7% | 0.9% | 1.3% | 1.8% | 0.5% | 0.7% | 1.1% | 1.1% |

8. Under powers granted in the Criminal Justice and Court Services Act 2000, a small number of tests have been administered at an Inspector's discretion for those charged with a non-trigger offence but where Class A drug misuse is suspected as a factor in the crime.

Useful websites

Change leaders guide website (guidance on change management)

<http://www.modern.nhs.uk/improvementguides/>

Criminal Justice Interventions Programme

<http://www.drugs.gov.uk/NationalStrategy/CriminalJusticeInterventionsProgramme>

Criminal Justice Act 2003

<http://www.homeoffice.gov.uk/justice/sentencing/criminaljusticeact2003/>

This Development and Practice Report was prepared by Stuart Deaton of the Drugs and Alcohol Research Programme (RDS). It is based on evidence drawn from the evaluation of drug testing in the criminal justice system being conducted by Matrix MHA and NACRO. The final report on the evaluation will be available in Spring 2004.

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