



Misuse Of Drugs Act

Learners who have successfully completed this lesson will be able to:

1. Identify the different controlled drugs and categorise the drugs as Class A, Class B or Class C in accordance with the Misuse of Drugs Act.
2. Describe the points to prove for the offence of possession of a controlled drug (S5 Misuse of Drugs Act).
3. Explain the offence of Supply a Controlled Drug contrary to Section 4 Misuse of Drugs Act 1971.
4. Explain the disposal options for the for the possession of Cannabis
5. Apply knowledge of legislation to explain when a person has committed a drug related offence.

Misuse of Drugs

Controlled drugs are listed in the Misuse of Drugs Act 1971













































































































































































































































































































































































































































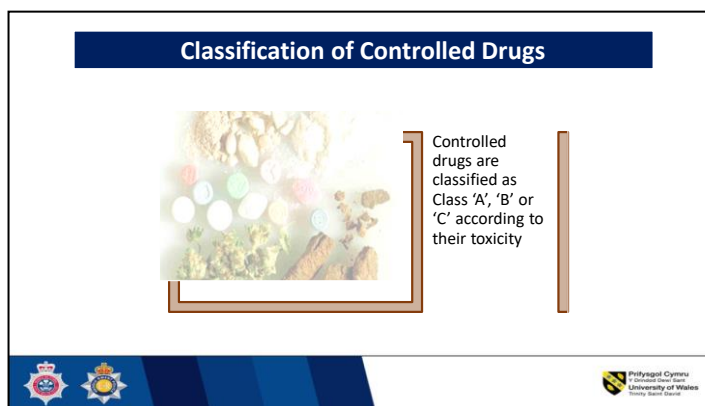










A drug is controlled because of the effect it has on the human body, and they are divided into 3 groups according to the potential harm they are thought to present

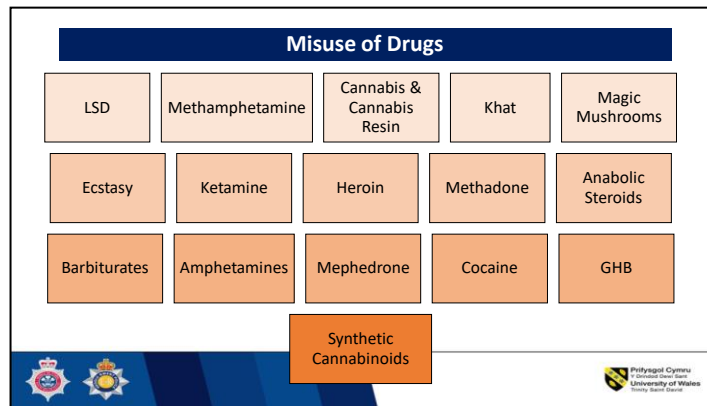
The controlled drugs are listed in the **Misuse of Drugs Act 1971 & Psychoactive Active Substances Act 2016**

However, the list can be altered when necessary by the issuing of new Regulations. Eg April 2010- Mephedrone- 'meow meow' added to list.

The Medicines Act 1968 controls the way medicines are made and supplied. Many controlled drugs are available as medicinal products. The Act divides them into prescription-only medicines (those which can only be supplied legally on a doctor's prescription), pharmacy medicines (those which must be sold or supplied at a registered pharmacy and under the supervision of a pharmacist) and those on the general sales list, usually the least harmful, which may be sold in small quantities by supermarkets and other stores.

Controlled drugs are classified as 'A', 'B' and 'C' group, according to their toxicity. Most of the common drugs fall into Classes 'A' and 'B', but many of them will be unfamiliar to student officers and they would not be permitted to identify categorically, even if they could recognise them.

All sections of the misuse of drugs act is triable either way – Power of arrest without warrant Constable / other persons.



Activity1 – Trainer to draw 3 columns on the board with the headings Class A, B & C and split the class into 3 groups. Trainer to bring up slide and ask students to categorise the different drugs into the appropriate category



Class A

Heroin – “Smack, Brown” light brown, white or off-white powder produced from the opium poppy. Can be injected, sniffed or heated and the resulting fumes inhaled
Symptoms: Relaxed euphoria. Drowsiness dehydration and lack of appetite. Runny nose. Contracted pupils, needle marks, weeping sores. Tremors, cramps & sweating

Cocaine “Coke, Charlie, C, Snow” fluffy white crystalline powder. May resemble snowflakes, camphor, sugar or epsom salts, taken by sniffing or injecting
Symptoms: Increased alertness, indifference to pain, illusion of strength, mood changes, anxiety, feelings of persecution, loss of appetite

Methadone “Meth” A prescription only medicine. A white scored tablet which is swallowed

Symptoms: Painkiller and depressant. May bring about breathing difficulties and constipation

Ecstasy – “E, Doves” off white or colored tablets, associated with the dance scene
Symptoms: stimulant, psychedelic effect, hallucinogenic

LSD – “Tabs, Flash, Acid” Often found printed onto paper with multiple designs e.g. cartoon characters or as tiny coloured tablets or gelatine squares. Usually taken orally.

Symptoms: Heightened awareness of colour and sound. Hallucination, disorientation, panic, persecution and conviction of invincibility, paranoia

Magic Mushrooms “Mushies” usually cooked and eaten.

Symptoms: Euphoria and Hallucinations, sleep often follows use. They can bring about heart failure long term

Methamphetamine “Meth, Ice” snorted, smoked or injected. A crystal powder

Symptoms: A strong and long lived stimulant giving a euphoric high. It may bring about sever weight loss, paranoia and severe depression



Class B

Cannabis “Skunk, blow, hash, dope” Found in leaves & flowers (not stem or branches) most common form Cannabis Resin which is small blocks/lumps of brown resinous material. Usually smoked in a cigarette (spliff) or eaten

Symptoms: Produces relaxation, talkativeness, sense of well being, lack of inhibitions, increased appetite, disorientated behaviour and irrelevant giggling.

Duration of effects. STARTS Smoked = less than 10 seconds Eaten = 20-40 minutes LASTS Up to 6 hours depending on THC level and the amount smoked

Amphetamine “Whizz, Speed” a powder sold in wraps, can be eaten, sniffed or injected

Symptoms: Stimulant , weight loss, insomnia

Mephedrone “Meow Meow, Mcat, Magic” Off white powder, cheap alternative to cocaine and ecstasy. Used by vets as a horse tranquilizer

Symptoms: produces euphoria, alertness and talkativeness

Ketamine “K, Special K” a white powder that is mainly snorted but can be smoked or injected.

Symptoms: Takes 30 seconds to take effect. Effects can be very dramatic, brings energy and confidence but with higher dosages can be disassociated with reality. Can cause long time bladder issues

Barbiturates “Angels, Chewies” tablets and capsules of various colours and forms, mostly available legally on prescription

Symptoms: They are depressants or downers. They decrease motor activities and produce drowsiness and slurred speech.

Synthetic Cannabinoids “Spice, Black Mamba, Pandora's Box, Legal Weed” Sold in the UK as a ‘legal alternative to cannabis. Previously purchased in shops and online prior to be made illegal. A steep rise in their use in prisons. The chemical mimics the effects the psychoactive element of cannabis and therefore cannot be detected on drug testing devices.

Symptoms: Potent trip, anxiety and depression. And of the drugs that fall under The **Psychoactive Substances Act 2016** e.g. Spice, will mean that none of these drugs are legal to produce, supply, or import (even for personal use) for human consumption. In 2014 alone, new psychoactive substances were involved in the deaths of 144 people in the UK, up from 31 deaths in 2010 and there have been a total of 444 deaths involving new psychoactive substances since 2010.

GHB “Liquid” taken orally. Colourless liquid in bottles

Symptoms: Produces a euphoric effect within 10 minutes and can last up to 24hrs. No evidence of any long term effects

- Valium is a brand (trade) name for diazepam, a medication that has anxiety-relieving, seizure-relieving, muscle relaxant, anticonvulsant, and amnestic effects.
- Valium (diazepam) is used for the short-term treatment of anxiety and seizure disorders. Diazepam is thought to work by enhancing the effects of GABA, which is an inhibitory neurotransmitter in the central nervous system.
- Valium belongs to the class of medicines known as benzodiazepines.



Class C

Khat “Chat, Khat” leaves can be chewed or infused in tea. Used predominantly among the Somali community and Ethiopian groups.

Symptoms: It’s a mild stimulant but has a calming effect. Excessive use can lead to psychosis and oral cancer

Anabolic Steroids “Iron Brew” used to increase body weight and build muscle. A prescription only medicine and taken via tablet or injection

Symptoms: User can become more aggressive, can bring about infertility and sex drive in men. Side effects are irreversible

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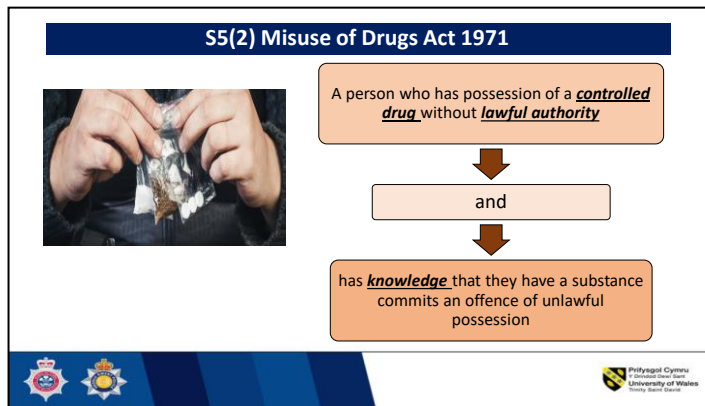
- Nitrous Oxide** - from 8th November 2023 Possess nitrous oxide for wrongful inhalation - class C drug

Possess with intent to supply nitrous oxide for wrongful inhalation - class C drug

Produce nitrous oxide for wrongful inhalation - class C drug

Supply a controlled drug of Class C for wrongful inhalation - nitrous oxide

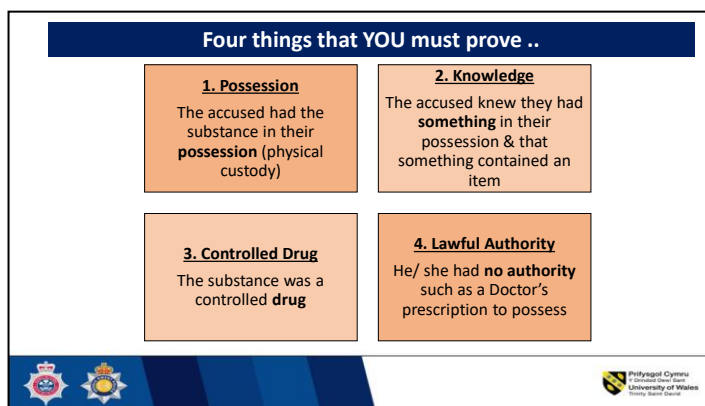
Activity 2 - Trainer to introduce the drugs box to students to discuss the drugs contained within.



Example:

A male is being searched under the misuse of drugs act 1971. A cigarette and aluminium foil with traces of brown powder on it are found in the mans pocket. After examination, the brown substance id proved to be heroin. To prove the offence of possession:

- The foil was in his pocket and he knew it was there
- He knew there was powder on the foil (it does not matter whether or not he knew the substance was a controlled drug)
- The powder was proved to be heroin
- He was not lawfully entitled to possess the drug



Activity 3 – Trainer to split class into 4 smaller groups and each to research one of the following points to prove from the definition to present back to the rest of the class – possession, knowledge, controlled drug, lawful authority

Possession

Proving that a person had possession of the substance could be established in many ways such as:

1. by admission and handing it to you
2. By finding it in a search of clothing or possessions, or by questioning and observation.
3. Evasive answers to questions, carrying tablets loose in a pocket or in a twist of paper will all help you to draw an inference that the person is not in lawful possession.

Where a person possesses a container that contains controlled drugs and knows that there is something in that container, the defendant is taken to be in possession of the contents of the container. Do not have to prove the knowledge the person knew them to be controlled drugs

It would include items the person has paid for by post but not yet had delivered or received

It would include where a person knows they have temporary or partial responsibility for an item with the owners consent/knowledge will be deemed as possession

A person cannot be said to be in possession of a substance inside a bag, unless they have custody or control of it. (this may be in a vehicle or house some distance away)

Knowledge

Common Law ‘possession’

The suspect must **know** or **suspect** the existence of **something** in their possession

The prosecution does not need to prove that the defendant knew the substance was a controlled drug.

It is sufficient that they knew that they possessed 'something'

Both possession and knowledge need to be present in order to prove the person had possession of the substance

A good question asked prior to a police search is "Do you have anything on your person that you are legally not allowed to carry?" This may bring about an admission prior to search

Controlled Drug

Controlled Drug as per the classifications A,B,C within the Misuse of Drugs Act 1971

To prove a substance is a controlled drug a forensic scientist would analyse it in a laboratory.

It is important that student officers know that they should **never** try to make their own identification by tasting a suspect substance; it is of no evidential value and is extremely dangerous.

Provided a drug is involved , it is not necessary to prove which controlled drug it was in order to obtain a conviction.

For example a dealer thought he was dealing in amphetamine when he was actually dealing in cocaine.

The defendant appealed against conviction that he had no intention to supply cocaine.

The appeal was dismissed as the type of drug did not matter (R v Leeson 1999)

Lawful Authority

Police Officers, Custom & Excise Officers, Health Professionals, Vets, Forensic Science Laboratory, person to whom it had been prescribed, person conveying the drug to person who may lawfully have it in their possession

If it is claimed that the drug was obtained on prescription, who was the doctor?

Where did the person get it dispensed?

What is written on the container?

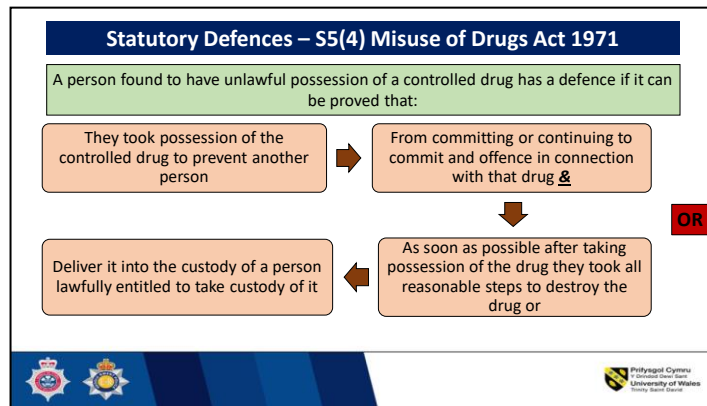
Does the name on the container correspond with that supplied to you by the person?

Note: Cannabis and LSD cannot be prescribed to any person.

When engaged in conveying the drug to a person who may lawfully have that drug in their possession (e.g. someone lawfully conveying the drugs to one of the above, for example someone finds some drugs on the street and is taking them to a police station)

Regulation 2 Misuse of Drugs Regulation Act 2001 provides an interpretation of the term lawful possession and a list of who and what group can lawfully possess illegal drugs.

Post Office Employees/ Private Couriers are not included in this list... however they will have a defence in court



There are two types of defences we shall look at:

Statutory Defence – A statutory defence can be raised in any instance in which a party cannot be shown to have acted purposely, knowingly, recklessly, or negligently as the law may require, with respect to each material element of the offense

General Defence – Not a recognised defence in law, the onus is on the defendant to prove in court

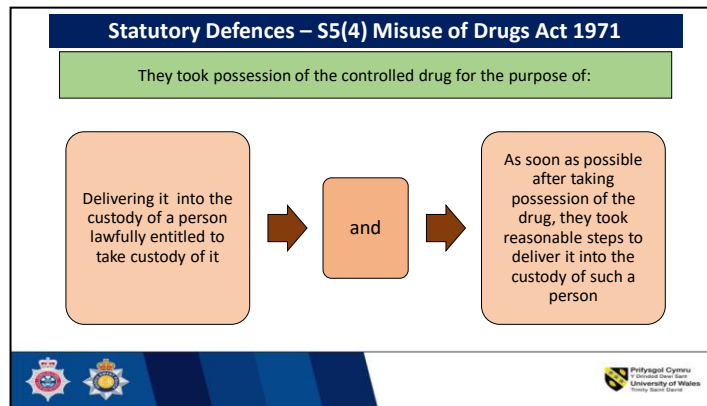
Section 5(4) Misuse of Drugs Act 1971 provides a specific defence to unlawful possession of a controlled drug.

Statutory Defence – in two circumstances on this slide and the next xt

Example

A father finds his son in possession of a controlled drug and takes it from him. He then immediately throws the drug into the fire, or he finds his son in possession of a controlled drug and takes it from him. He then immediately takes the drug to a local police station.

OR...



In both cases, the person taking possession of the drug knew or believed it was a controlled drug.

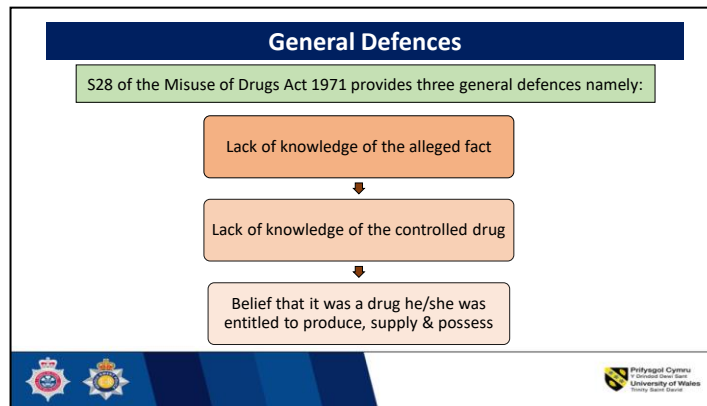
Example

A schoolteacher might come into possession of some cannabis abandoned by a pupil in panic during a spot check by staff.

The teacher is protected for the purposes of handing it to their local schools liaison officer **(provided this is done as soon as reasonably practicable)**.

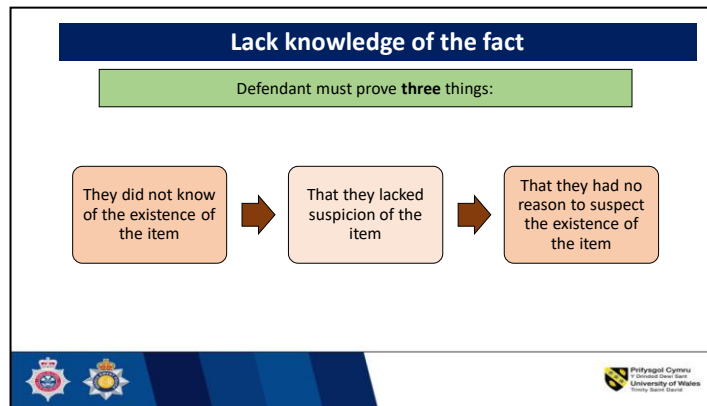
So, anyone who temporarily handles any controlled drug is acting in accordance with the law, as long as they act promptly and with the correct motives.

A decision would be made based on all the circumstances.



We'll look at these concepts individually...

The onus is on the defendant to prove in court the following....



The first defence is based upon a person's lack of knowledge of a fact, which the prosecution must prove to secure a conviction, e.g. unlawful possession.

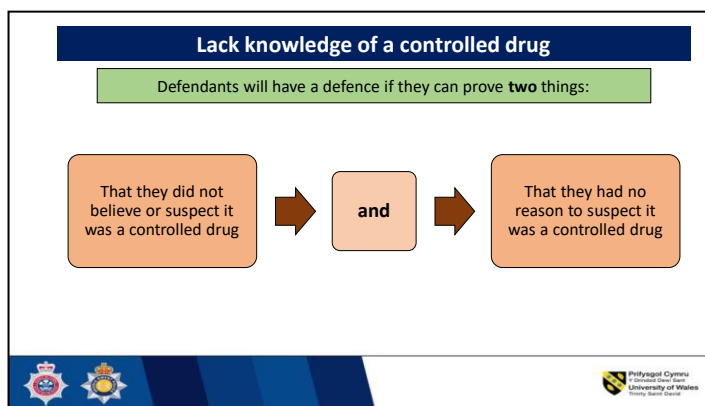
Example

Two men are walking together in the street when a police constable approaches them. One is carrying a small packet of cannabis and, to avoid being found in possession of it, he slips the packet into the other's pocket without his knowledge.

Would the other person be guilty?

'Knowledge' is a fact the prosecution have to prove for an offence of unlawful possession.

In this case the person **would not** be guilty.



This second defence prevents defendants from claiming a ‘defence’ when what they thought was one type of controlled drug was in fact another, different controlled drug.

Example

A man gives his employee a packet to deliver, informing her it contains tobacco.

The package is found to contain cannabis.

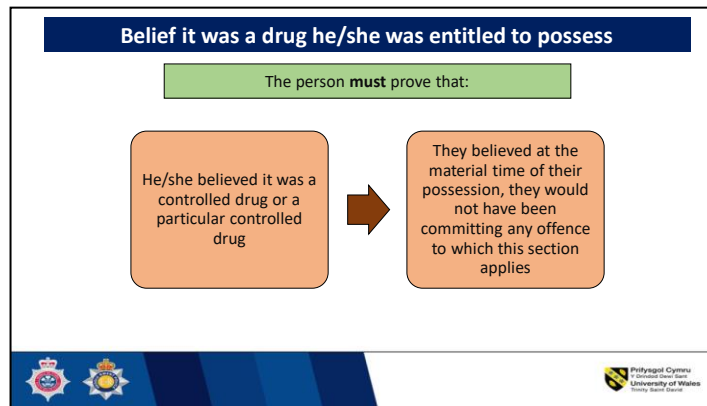
The employee did not know it was cannabis, did not suspect it was and had no reason to suspect it; therefore she would not be guilty.

If an offender purchased what she thought to be cocaine and forensic analysis revealed it to be heroin, would she be able to rely on this defence?

The answer is NO.

If she believed the substance to be a controlled drug, then it does not matter which type of controlled drug it turns out to be.

What is in the person’s mind is important here.



These circumstances would be quite unusual, but registered drug users have been known to claim ignorance when in possession of a drug other than that which they are lawfully permitted to possess.

A mistake by a dispensing chemist would be the only sort of example that might apply here,

Sentence			
	Class A	Class B	Class C
<u>Category of offence</u>	Either Way Offence	Either Way Offence	Either Way Offence
<u>Penalty in Crown Court</u>	7 years imprisonment and / or a fine	5 years imprisonment and / or a fine	2 years imprisonment and / or a fine
<u>Penalty in Magistrates Court</u>	6 months imprisonment and / or a fine	3 months imprisonment and / or a fine	3 months imprisonment and / or a fine

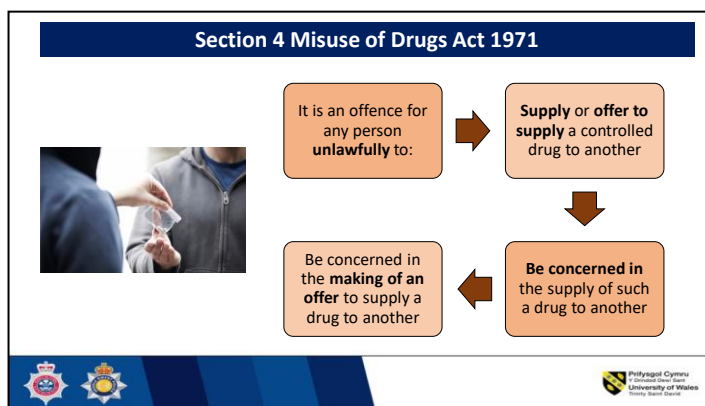


Misuse of Drugs Act



**Further Drug
Offences**





QTS – Who can lawfully supply controlled drugs?

QTS - What is meant by being concerned in the supply of a controlled drug?

QTS – what is meant by being concerned in making an offer to supply a controlled drug?

The only person who can lawfully supply controlled drugs i.e. morphine are doctors, vets and pharmacists under licence

Supplying or offering can mean more than merely transferring from one person to another by sale. It also includes distributing ie passing a joint to another person for a smoke

The offence is only committed if the substance is an actual drug (may not be established until the time of testing)

Being concerned in the supply includes others involved around the act of supplying ie the person who provides the means of transport or packages the drugs ready for supply

The drug must be a controlled drug, its not sufficient for this offence merely to believe it is a controlled drug

Making an offer – in contrast to the above a person can commit the offence of making an offer to supply when the substance is not a controlled drug. This is because people who are involved in the making of an offer may be people who are sent to find prospective buyers, and therefore these people can also be prosecuted.

This offence must be treated seriously if it was committed in the vicinity of a school, or a courier was used under the age of 18 years.

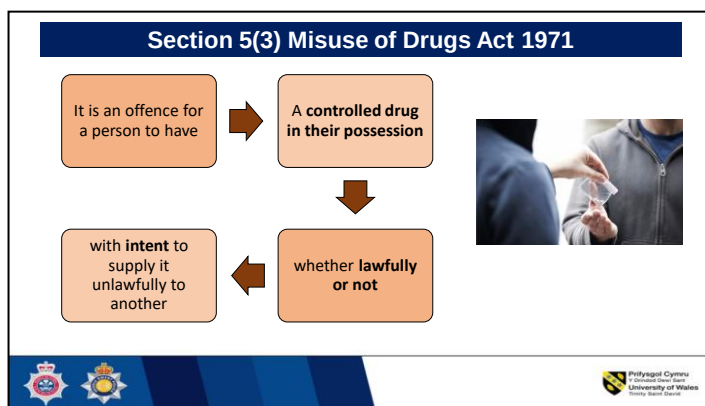
The differences explained:

Supply – Actually hand the drugs over

Offer to Supply – “Do you want to buy some drugs?”

Concerned in the supply – Could be just a “Look out” or a “Driver” for someone else

Concerned in the making of an offer to supply – “Make arrangements” – Don’t actually have to be there when the drugs are supplied



Triable either way – power of arrest without warrant – Constables/other persons

The offence is designed to bridge the gap between evidence of an actual supply and evidence of possession only.

The term ‘whether lawfully or not’ includes a person who has lawful possession, but intends to supply it unlawfully to another.

For example, a doctor or nurse who has lawful possession of morphine, but intends to supply it unlawfully to another.

Controlled drug in their possession – to be found guilty of this offence, a person must be in possession of a controlled drug (this may be established after the drug has been tested)

Lawfully or not – Lawfulness or otherwise of the possession is irrelevant. A person can lawfully possess a controlled drug

ie police officer, doctor, chemist, and still commit the offence when they intend to supply it to another who cannot lawfully possess it.

Intent – its not necessary to prove intent of a person to supply a controlled drug. i.e. a person who thought he was dealing heroin but was in fact in possession of dealing amphetamines is still guilty of the offence

Maximum Sentences		
Triable either way unless the defendant could receive the minimum sentence of seven years for a third drug trafficking offence under S110 Powers of Criminal Courts (Sentencing) Act 2000 in which case the offence is triable only on indictment.		
Class A - Maximum: Life imprisonment - Offence range: High level community order – 16 years custody	Class B - Maximum: 14 years custody &/or unlimited fine - Offence range: Band B fine – 10 years custody	Class C - Maximum: 14 years custody &/or unlimited fine - Offence range: Band A – 8 years custody

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Class A

Maximum: Life imprisonment

Offence range: High level community order – 16 years' custody

Class B

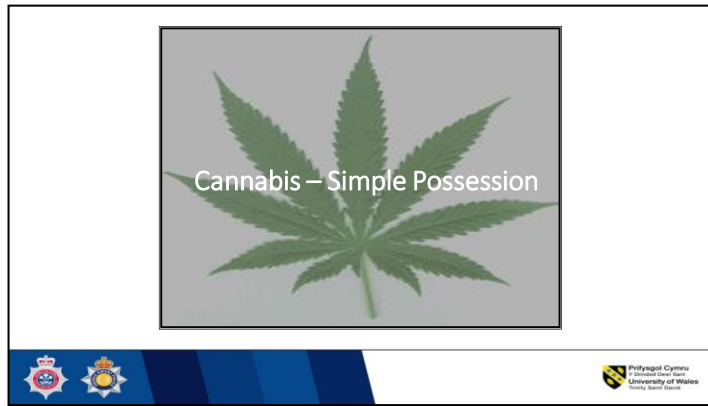
Maximum: 14 years' custody and/ or unlimited fine

Offence range: Band B fine – 10 years' custody

Class C

Maximum: 14 years' custody and/ or unlimited fine

Offence range: Band A – 8 years' custody



FACTS

The effects of cannabis vary from person to person:

- some people may feel chilled out, relaxed and happy
- others get the giggles or become more talkative
- hunger pangs are common – this is sometimes known as "getting the munchies"
- you may become more aware of your senses – colours may look more intense and music may sound better
- it's common to feel as though time is slowing down

Cannabis can have other effects too:

- it makes some people feel faint and/or sick – this is sometimes known as a "whitey"
- it can make you feel sleepy and lethargic
- some people find it affects their memory, making it harder to remember things
- it makes some people feel confused, anxious or paranoid, and some experience panic attacks and hallucinations. These effects are particularly common with stronger forms of cannabis, such as skunk and sinsemilla
- If you use cannabis regularly it can make you demotivated and uninterested in other things going on in your life, such as education or work. Long-term use can affect your ability to learn and to concentrate.

Duration of Effects

Smoked = less than 10 seconds

Eaten = 20-40 minutes

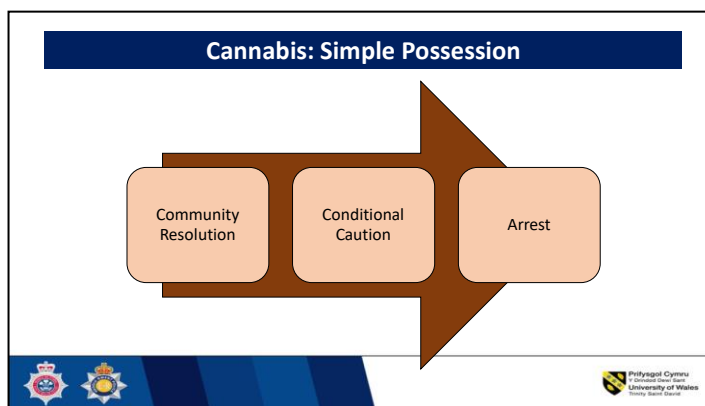
LASTS

Up to 6 hours depending on THC level and the amount smoked

NOTE Cannabis-based medicinal products

As of November 1st 2018 certain cannabis-based medicines are now available on prescription to patients in the UK suffering from certain medical conditions. Those who will come in to contact with cannabis-based product users must now know how

to spot legitimate medicinal products and prescriptions.



In 2004 cannabis was reclassified to Class C but in 2009 it was returned to **Class B**.

ACPO (Association of Chief of Police Officers) aimed to provide a consistent national approach on how to deal with a drug commonly used throughout the country.

Therefore guidance has been produced to deal with the intervention of unlawful possession of cannabis.

Cannabis, warnings, khat warnings and FPNs for all offences other than parking and traffic offences will cease to be available as disposals from 1st January 2023.

This is in line with the national 2-Tier OoCD Strategy.

Cannabis Warnings and PNDs are now replaced with a community resolution which involves:

- a referral to an appropriate intervention or education course in all cases
- an apology, preferably a letter of apology, where there is a victim.

The interventions we refer to are 18-25 or Women's Pathfinder and the education courses are the Drugs Education, Alcohol Education, Victim Awareness, Gambling Support, Parenting Support. All these are listed within the app to assist officers select the right option and the process is very straightforward.

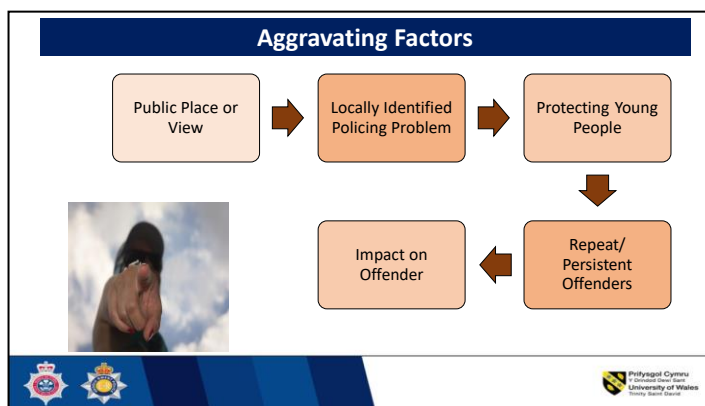
With the removal of cannabis warnings, those offenders will now receive a community resolution with a referral to the Drugs Education course using the CR2 process (for drugs cases) in the app.

Reminder ... a community resolution is not suitable for Class A drugs possession cases. If the arrest necessity under Code G is not applicable, these should be dealt with by way of an appointment with a VA sergeant for an OoCD which would be a conditional caution to attend a drugs course as a minimum.

Reminder ... Street RJ must not be used for drugs possession. That is a meaningless process and 2-Tier requires the majority of offenders to receive education and support wherever possible. These cases will all receive a community resolution or conditional caution with a drugs course from now on.

Reminder ... Street RJ is not a substitute where a community resolution with an intervention or course is available, eg shoplifting, public order etc for the reasons associated with 2-Tier as outlined above.

Community Resolutions & Conditional Cautions are only applicable when certain key factors are satisfied – must be a low level crime/offence, full admission by the offender with genuine remorse, full code test met & it's in the public interest to issue an OoCD, full victim involvement



Aggravating factors must be taken into consideration when deciding what option to take.

Public Place or View – smoking of cannabis in a public place or view risks undermining the illegal status of possession of a controlled drug. Examples of smoking in public view would include at a football match, on public transport, in a park, in the street, in or near a public house, club etc.

Locally Identified Policing Problem – there may be circumstances which are causing a local policing problem or community concern, such as the fear of anti-social behaviour associated with the use of cannabis, e.g. a disorder ‘hotspot’ that generates frequent calls for service to deal with anti-social behaviour.

Protecting Young People – where possession of cannabis by others may create a particular risk to young people. E.g. where a person is in possession of cannabis inside or in the vicinity of premises frequented by young people, such as youth clubs or play areas or schools.

Repeat or Persistent Offenders – the illegal status of cannabis would be undermined if a person who is known locally to continually commit offences and to have a complete disregard for the law, were to be issued a cannabis warning or PND

Impact on the Offender – other considerations would include:

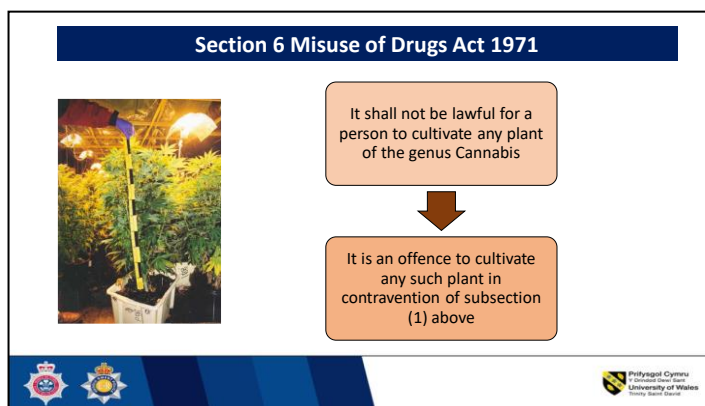
What impact a decision to issue a Cannabis Warning or PND may have on the offender?

Does the person understand the seriousness of the offence?

Will this person benefit from this course of action?

Will this person take heed of a cannabis warning or PND?

Is there evidence of previous convictions or offending behaviour?



Section 6 of the Misuse of Drugs Act 1971 provides restrictions on the cultivation of cannabis plants.

Cannabis (Genus *Cannabis*) means any part of any cannabis plant (but does not include cannabis resin, the mature stalk of the plant, fibre produced from the stalk or the seed of the plant)

Do not need to prove the defendant knew it was a cannabis plant. If any form of cultivation can be proved just need to show that the plant was of the genus cannabis.

Only lawful cultivation is under a licence granted by the Secretary of State.

Note: (i) [Home Office Circular 82/1980](#) recommends charging with production of a [controlled drug](#) under [section 4](#), rather than cultivation of Cannabis under this section, due to the wide interpretation of 'produce' in [section 37\(1\)](#).

'produce' where the reference is to producing a controlled drug, means producing it by manufacture, cultivation or any other method, and 'production' has a corresponding meaning.

Additionally, a principal difference between the two is that production falls under the lifestyle offences within [Schedule 2](#) of the Proceeds of Crime Act, allowing the courts to make wider confiscation orders where it is shown that the defendant has benefited from his criminal conduct.

Either-way Offence

Summary: Maximum six months imprisonment and/or a fine.

Indictment: Maximum fourteen years imprisonment and/or a fine.

Search & Seizure: Police Powers



Section 23 Misuse of Drugs Act 1971

If a **constable** has **reasonable grounds to suspect** that any person is in possession of a **controlled drug** in contravention of the Misuse of Drugs Act 1971 or of any regulations made under it the constable may:

 Search that person & detain them for the purposes of the search	 Search any vehicle or vessel in which the constable suspects that the drug may be found	 Seize & detain anything found which appears to be evidence of an offence under this Act
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You **MUST** be able to **justify your grounds for suspicion**.

- The officer must have formed a *genuine* suspicion in their own mind that they will find the object for which the search power being exercised allows them to search and the suspicion that the object will be found must be reasonable.
- This means that there must be an *objective* basis for that suspicion based on facts, information and/or intelligence which are relevant to the likelihood that the object in question will be found, so that a reasonable person would be entitled to reach the same conclusion based on the same facts and information and/or intelligence.
- Reasonable grounds for suspicion should be linked to **accurate and current** intelligence or information, relating to articles for which there is a power to stop and search, being carried by individuals or being in vehicles in any locality
- The suspicion must be objective and based on relevant facts, information and intelligence about the person concerned, or some aspect of his/her behaviour
- Officers must be able to explain the basis for their suspicion by reference to intelligence or information about, or some specific behaviour by, the person concerned
- A person cannot, in themselves, give grounds for suspicion.

The below do not constitute grounds for suspicion:

Their physical appearance

Apparent race

Ethnicity

Religion

Gender

Age

Social standing

Previous convictions or the fact they are 'known'

Presence in a 'high crime area'

Associates (even if there are reasonable grounds for searching one of them)

Furtive movements.

- there must be something about their manner, deportment, conversations and the

surrounding circumstances which afford that suspicion

The primary purpose of stop and search powers is to enable officers to allay or confirm suspicions about individuals without exercising their power of arrest. Officers may be required to justify the use or authorisation of such powers, in relation both to individual searches and the overall pattern of their activity in this regard, to their supervisory officers or in court. Any misuse of the powers is likely to be harmful to policing and lead to mistrust of the police. Officers must also be able to explain their actions to the member of the public searched. The misuse of these powers can lead to disciplinary action.

PACE Code A deals with the exercise by police officers of statutory powers to search a person or a vehicle without first making an arrest.

In law, the effect of '**detaining**' someone for one of these purposes is really to temporarily arrest them whilst the procedure takes place.

The main difference between the two is that a person being held for a procedure has not been 'arrested for an offence'.

VEHICLE means: - a conveyance, usually with wheels, for transporting people, goods, etc.;
- a car, cart, truck, carriage, sledge, etc.;
- any means of carriage or transport;

Vessel includes a hovercraft

Search any vehicle or vessel in which the constable suspects that the drug may be found **and, for that purpose, require the person in control of the vehicle or vessel to stop it.**

When searching a **vehicle** there are 5 distinct areas utilised for the purposes of searching:

interior
boot or cargo area
engine compartment
outside
underneath

Risk assessment should be conducted prior to the start of the search. Care must be taken when searching the engine compartment.

If the driver is non-compliant during the search, a further risk assessment needs to be made and assistance requested. If compliant, the owner should be allowed to observe the search, but not interfere.

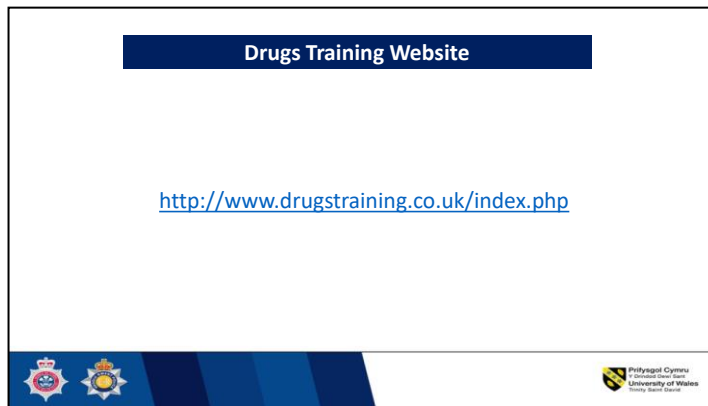
The vehicle should be searched systematically and it is recommended that more than one officer conducts the search, who should remain in constant communication.

Specialists may be called in to conduct the search, but this would depend on the urgency of the situation. Vehicles can be removed by police and securely stored before the start of a search.

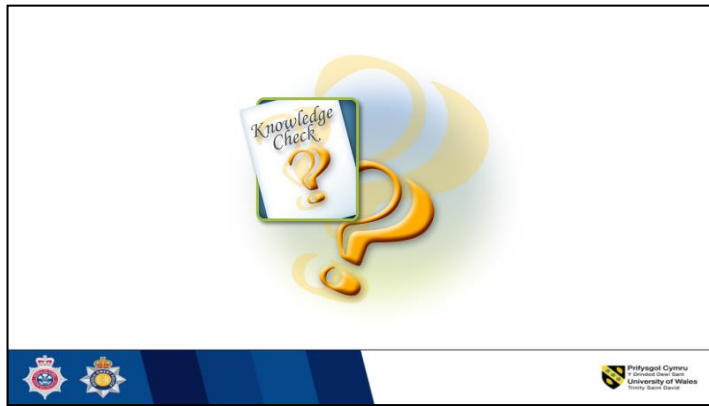
Seize any property found – document – exhibits.

Complete search record – document all decisions on the form, offer a copy to the person (may collect within 3 months)

Always leave a vehicle in the state it was found



If students wish to learn more about substance abuse, visit this website for updated information



Pens and books away – individually answer the questions below

Misuse of Drugs

Who, if anyone, in the following circumstances, is guilty of an offence of unlawful possession of a Controlled Drug, contrary to the Misuse of Drugs Act 1971?

(i) READER is smoking cannabis in the house of his friend TOMKINS. TOMKINS objects to this & takes all the cannabis in READER's possession from him & flushes it down the toilet.

(ii) CLARKE, a juvenile, is found in possession of cannabis resin whilst at school. His teacher JAMES, confiscates the drug & drops it into the local Police Station.

- (a) JAMES & TOMKINS
- (b) CLARKE & JAMES
- (c) CLARKE & READER
- (d) CLARKE, READER & TOMKINS



(c) CLARKE & READER

Misuse of Drugs

JOHNSON is addicted to heroin. To help feed his habit he buys a number of wraps, with the intention of using one himself & taking the rest to Sandford College to sell them to other students. He goes to the College & attempts to sell wraps to a number of students but is unsuccessful in making any sales. He becomes nervous & so he meets up with MARTIN and gives him the wraps free of charge to get rid of them.

At what point, if any, does JOHNSON commit an offence of unlawfully supplying a Controlled Drug contrary to Sec 4 of the Misuse of Drugs Act 1971?

- (a) When he buys the wraps
- (b) When he goes in to College
- (c) When he offers the wraps to students
- (d) When he gives the wraps to MARTIN



(c) When he offers the wraps to students

Misuse of Drugs

Which, if any, of the below constitutes an offence of supplying a controlled drug contrary to Sec 4(3) Misuse of Drugs Act 1971.

- (i) STEWART has a quantity of controlled drugs which he has bought. He then decides to give the drugs out to his friends for their own use.
- (ii) MASON doesn't want his mother to know he has some controlled drugs & so he gives them to a friend for safekeeping on the understanding that they will be returned to him when it is safe.

- A. (i) only
- B. (ii) only
- C. Both
- D. Neither



C. Both

Misuse of Drugs

ROPER is arrested in possession of a controlled drug. He has cannabis resin concealed in a compartment in a tobacco tin.

What do the prosecution have to show to prove possession?

- A. That ROPER knew that what he had in the tin was a controlled drug.
- B. That ROPER knew of the presence of a substance in the tin & that this transpired to be a controlled drug.
- C. That ROPER knew or suspected that what he had in the tin was a controlled drug & that it transpired to be one.
- D. Merely that ROPER had with him what transpired to be a controlled drug.



B. That ROPER knew of the presence of a substance in the tin and that this transpired to be a controlled drug.

Misuse of Drugs

Susan found a bag of white powder in her son's bedroom which she believed to be cocaine. Susan took the powder intending to hand it in to the police. However, as a leader of the local youth group, Susan decided to keep the drugs to show fellow youth workers, so they will be able to recognise the drugs should they find any.

Would Susan be able to claim a statutory defence to the offence of possession of a controlled drug, under s.5 (4) Misuse of Drugs Act 1971?

- A. Yes, providing it was her intent to destroy the drugs when she took possession of them to prevent her son from committing an offence.
- B. No, the defence would only apply if she took possession of the drugs & handed them into the police station the following week.
- C. Yes, the defence would apply if she took possession of the drugs & subsequently delivered them to a person lawfully entitled to possess them.
- D. No, the defence would only apply if she took possession of the drugs and either destroyed them immediately or delivered them to a person lawfully entitled to possess them.



D. No, the defence would only apply if she took possession of the drugs and either destroyed them immediately or delivered them to a person lawfully entitled to possess them.

Misuse of Drugs

TEAL, a nurse, is contacted by a friend MEDLAM who is suffering stress following a relationship break up. MEDLAM informs TEAL that he has run out of tranquilisers prescribed by his doctor.

MEDLAM also tells TEAL that he is not able to see his doctor until the following day and asked TEAL to provide a small quantity of the class C drugs to cover the time to the next appointment.

TEAL agrees to provide the drugs. She obtains the keys to the drugs cabinet & then removes the drugs. Later that day she hands the drugs over to MEDLAM.

What is the earliest point at which TEAL commits an offence contrary to Section 4 of the Misuse of Drugs Act 1971?

- A. When the provision of the drugs was agreed.
- B. When the drugs cabinet keys were obtained.
- C. When the drugs were removed from the cabinet.
- D. When the drugs were handed over.



A. When the provision of the drugs was agreed.



A. When the provision of the drugs was agreed.