

Private Protective Services

Title: Controlled Substances

Lesson Purpose: To develop the security guard's skills in identifying controlled substances.

Training Objectives: At the end of this block of instruction, the student will be able to achieve the following objectives in accordance with the information received during the instructional period.

1. Identify who regulates the classifications of controlled substances.
2. Given a list of commonly encountered controlled substances, identify the correct pharmacological classification.
3. Given a list of symptoms, identify the likely drug of abuse.

Hours: One (1)

Instructional Method: Lecture

References: California Department of Justice,
<http://www.stopdrugs.org/depressants.html>, Sacramento, CA. 2002

Farb, Robert L., North Carolina Crimes Fifth Edition.
Chapel Hill, NC: Institute of Government, 2000.

Heinz, Dan, "Controlled Substances," Basic Law Enforcement Training Manual, Salemburg, NC: North Carolina Justice Academy, 2000.

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I. Introduction

A. Opening Statement

Drug use and abuse is a well-documented problem in the American workplace. Annually, it costs businesses literally millions of dollars in prevention, treatment programs and healthcare costs. A security guard must be prepared to meet many challenges during their course of duties in this workplace.

One of the highest risks, both legally and physically, will be encounters with persons suspected of being under the influence of controlled substances. Usually when controlled substances are mentioned we are referring to drugs that either by their composition or method of delivery are illegal to possess and use. Many drugs are manufactured legally but obtained or sold illegally. Others have no medical value and by their very nature, being classified as contraband, cannot be legally possessed.

Another risk is when a guard interrupts the commission of a violation of the controlled substance act. The security professional may be called on to intervene, in instances of illegal drug use. It is imperative that when called on to assist, the security professional has a working knowledge of the different liabilities he is exposed to, not only for the person he is confronting, but his employer and most importantly himself.

B. Training Objectives

C. Reasons

With the magnitude of drug related problems in society today, it is not unlikely that a security guard will encounter someone who is in possession of or who is abusing some type of controlled substance. The guard must have some basic knowledge of the symptoms of controlled substance use as well as the ability to recognize them.

II. Body

A. Pharmacology

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1. North Carolina Drug Schedules

The authority to determine whether substances are to be controlled rests with the Commission for Mental Health, Mental Retardation, and Substance Abuse. Controlled substances are generally categorized into six areas called "Schedules". They are then rated on their potential for abuse, risk to public health and the potential for psychological or physiological dependency. The most serious is Schedule I and the most potentially addictive. Schedule VI is the least dangerous. Some examples of North Carolina controlled substances and the Schedule into which they fall are as follows.¹

Schedule I: High potential for abuse
No accepted medical use
Lack of safety for use under medical supervision

Examples: Heroin, LSD, MDMA (ecstasy),
MDPV (bath salts)

Schedule II: High potential for abuse
Restricted medical use
Severe psychological or physiological
dependency

Examples: Cocaine, Methamphetamine,
Oxycodone (Percocet),
Oxymorphone (Opana),
Hydromorphone (Dilaudid)

Schedule III: Potential for abuse is less than Schedule II
Current accepted medical value
Moderate to Low physiological dependency
High psychological dependency

Examples: Hydrocodone (Vicodin), Anabolic
Steroids

Schedule IV: Lower potential for abuse than Schedule III
Current accepted medical use
Limited physiological or psychological
dependency

Examples: Diazepam (Valium),
Alprazolam (Xanax)

Schedule V: Lower potential for abuse than Schedule IV
Current accepted medical uses
Limited physiological and psychological
dependency

Examples: Cough syrups with Codeine

Schedule VI: Relatively low potential for abuse
No current accepted medical use
Low potential for physiological and
psychological dependency

Examples: Marijuana, Hash, Synthetic
Cannabinoids (K-2 or Spice)

2. Controlled Substance Classificationsⁱⁱ

a. Narcotics

Narcotics are drugs that act on the central nervous system and produce a sleep like state. They are both physically and psychologically addictive. Some examples are heroin, opium, Dilaudid, and Demerol.

b. Stimulants

Stimulants also affect the central nervous system but create a feeling of excitement, alertness and more energy. Stimulants may or may not be both physically and psychologically additive. The most potent stimulant is cocaine. Other examples include amphetamines, often called “speed” and methamphetamines.

c. Depressants

Depressants are the complete opposite of stimulants in that they depress the central nervous system. The most widely

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used depressant is alcohol. Other examples are barbiturates and sedatives.

d. Hallucinogens

Hallucinogens have the ability to induce intense emotional feelings and cause hallucinations. Examples are LSD, mescaline or peyote, ecstasy, psilocybin mushrooms.

e. Phencyclidine (PCP)

PCP has been placed in its own category. Those using this drug may display reactions similar to the reactions of hallucinogens, depressants and stimulants.

f. Inhalants- "Huffing"

Three categories of inhalants are:

- (1) Volatile solvents such as paint, gasoline, model airplane glue.
- (2) Aerosols such as hair sprays, deodorants and spray paints.
- (3) Anesthetic gases that kill pain and used medically for that purpose such as chloroform or nitrous oxide (laughing gas).

g. Cannabis

Drugs derived from various species of the cannabis plants. The active ingredient in these drugs is Delta-9 THC. Marijuana is produced from the leaves and flowers of these plants. Hashish or hash oil is produced by boiling the leaves of the female cannabis plant and allowing them to dry into a semi-solid mass. Cannabis is one of the most widely used recreational drugs.

B. Drug User Recognitionⁱⁱⁱ

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1. Narcotics
 - pinpoint pupils
 - sleepiness
 - decreased appetite
 - needle marks
 - flushed complexion
 - scratching the face

2. Stimulants
 - dilated pupils
 - paranoia
 - talkativeness
 - quickened breathing
 - aggressiveness
 - loss of appetite, possibly thin

3. Depressants^{iv}
 - slurred speech
 - loss of motor skills or coordination
 - weak rapid pulse
 - cool, clammy skin
 - state of intoxication or inebriation

4. Hallucinogens
 - hallucinations
 - intensified mood
 - perspiring
 - nausea
 - dazed appearance
 - disoriented
 - distorted perceptions of time and distance
 - body tremors

5. PCP
 - perspiring, skin warm to touch

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- blank stare
- difficulty in speaking
- increased pain threshold
- confused, agitated, possibly violent or combative
- chemical odor on the breath

6. Inhalants

- slurred speech
- bloodshot watery eyes
- lack of muscle control
- flushed face
- may have residue of substance on hands, mouth, face, etc.
- nausea

7. Cannabis

- redness of eyes
- increased appetite
- relaxed inhibitions
- body and eyelid tremors
- odor of marijuana or marijuana debris in mouth

C. Common Violations

While it will be the duty of a law enforcement officer to make an arrest in these situations, the security guard should be aware of the possible violations that could be committed. Security guards should notify local law enforcement authorities in the event of these violations. Client related polices regarding controlled substance and alcohol consumption will also be issues that a security guard will have to deal with in coordination with the client.

1. Alcohol Related Offenses

a. Drunk and disruptive^v

It is illegal for any person in a public place to be intoxicated and disruptive by:

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- (1) Blocking or otherwise interfering with traffic on a highway or public vehicular area.
 - (2) Blocking or preventing or interfering with access across a sidewalk, or entrance to a building.
 - (3) Cursing or shouting or rudely insulting others.
 - (4) Begging for money or other property.
 - (5) Intoxication *must* be from alcohol, not drugs.
- b. Driving while impaired
 - c. Driving after consuming alcoholic beverages
 - d. Transporting open container of alcoholic beverages
 - e. Driving by person under 21 after consuming alcohol or drugs

Most incidences in the workplace do not involve a public display of disruptiveness as a first indication. The most frequent complaint will be the smell of alcohol followed by some impaired function or performance issue. Consider the safety of the abuser as well as others. Remove or insulate them from any hazards as the decision is being made on the best way to intervene.

2. Controlled Substances

- a. Possession of controlled substances

Regardless of the Schedule of the controlled substance, it is a violation of the law to possess it. (N.C.G.S. 90-95(a)(3))

- b. Selling controlled substances

Occasionally a guard may be present when an alleged drug sale takes place. It is important to refrain from tainting any verbal or physical evidence if there are indications of drug sale. If a guard does not interrupt a sale it is prudent to note the circumstances of the incident and notify law enforcement right away.

- c. Drug paraphernalia

90-113.21. General provisions.

(a) As used in this Article, "drug paraphernalia" means all equipment, products and materials of any kind that are used to facilitate, or intended or designed to facilitate, violations of the Controlled Substances Act, including planting, propagating, cultivating, growing, harvesting, manufacturing, compounding, converting, producing, processing, preparing, testing, analyzing, packaging, storing, containing, and concealing controlled substances and injecting, ingesting, inhaling, or otherwise introducing controlled substances into the human body.

90-113.22. Possession of drug paraphernalia.

(a) It is unlawful for any person to knowingly use, or to possess with intent to use, drug paraphernalia to plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, prepare, test, analyze, package, repackage, store, contain, or conceal a controlled substance which it would be unlawful to possess, or to inject, ingest, inhale, or otherwise introduce into the body a controlled substance which it would be unlawful to possess.

d. Prescription drug abuse

Prescription drug abuse is difficult to detect for several reasons. Two of the most common reasons are: (1) People can have a prescription for the medication they possess, even though they obtained the prescription illegally. Better known as "Doctor Shopping". (2) Federal Privacy Laws limit who has access to records that would prove that the prescription was obtained illegally. The policy of the client may also hinder in the detection of prescription drug abuse by restricting your investigation. Some clients have a Don't Ask-Don't Tell policy.

D. Hazards

1. Guard Safety

When handling drugs or controlled substance be aware of the risks to yourself. Always wear gloves when handling suspected Controlled Substances. **NEVER TASTE OR SMELL A SUBSTANCE TO DETERMINE WHAT IT MIGHT BE!**

Fentanyl and Carfentanil are synthetically produced Opioid pain killers that are commonly abused or mixed with Heroin. Fentanyl is 50-100 times stronger than Morphine. Carfentanil is 100 times stronger than Fentanyl. Both Fentanyl and Carfentanil are “transdermal” which means that both will absorb through your skin and into your bloodstream. For that reason, it is important to always wear protective gloves when handling unknown substances.

Be aware of injectable needles that can be hidden from view (in pockets or jackets) that could puncture your hand and cause infection problems.

Be cautious not to inhale any fumes or dust associated with controlled substances. You should wear some type of air purifying system when handling controlled substance.

In an abuse situation a person can overdose on a drug and be in a life threatening position. Summon emergency personnel immediately if this appears to be the case.

2. Legal Issues

a. Search and seizure

The laws governing search and seizure specific to drug transaction are complex. As noted earlier, leave drug investigation to law enforcement.

There are many constitutional and privacy issues involved with searching or seizing items in the workplace. The security guard should refer to the “Legal Issues” block of instruction.

b. Chain of custody

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Chain of custody issues arise when a guard takes possession of any evidence including controlled substances. Simply put, a chain of custody log records every person that takes possession of the evidence. The person taking possession of the evidence and the person relinquishing control should initial each transfer/entry. Drugs are evidence of a serious crime. **If it is not necessary, do not take possession of the drugs. Secure the scene and notify law enforcement.**

An issue that will have to be addressed if you take possession of any evidence is how it was packaged for court presentation and how it can be stored until the court presentation. **Turn all evidence over to law enforcement officials as soon as possible.**

Remember it may be a crime scene and there could be crowd control concerns. Law enforcement is an asset in this area. If you prudently have them involved early in an investigation they can seize, package, secure and safe keep the evidence for future retrieval.

Never store evidence in a locker, desk or personal container that may place you in jeopardy of losing the case (or the evidence) due to a faulty chain of custody. Again, immediately turn over controlled substances to local law enforcement authorities.

c. Interviewing

When questioning alleged drug abusers keep in mind that you are gathering verbal evidence and it should be documented as soon and as accurately as possible.

Make note of unsolicited comments or excuses uttered. Many times a statement will change many times during the course of an inquiry. The changes and conflicts will be important when a more structured interview is conducted.

III. Conclusion

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A. Summary

The public may be in danger of a person under the influence of controlled substances. There may be an implied if not legal obligation of public safety that overrides the need for the recovery of evidence in a criminal investigation.

- Remember your role in the organization.
- Read and understand the policy that dictates behavior in the location you are assigned.
- Call for assistance when it is appropriate.
- Don't take chances with your investigation, your responsibilities, or your health.

B. Question from Class

C. Closing Statement

The purpose of this material is not intended to make an expert of any security guard and it is not intended to serve as legal advice. The purpose of this lesson plan is to heighten the awareness of the security professional to the problems associated with controlled substances and the legal implications associated with these substances. The content is not enforcement oriented and is of such a general nature as to serve only as a foundation on the topic.

NOTES

i. Daniel D. Heinz, Controlled Substances, @ Basic Law Enforcement Training Manual (Salem, NC: North Carolina Justice Academy, 2001), p. 11-12.

ii. *Ibid.*, pp. 9-11.

iii. *Ibid.*, pp. 12-14.

iv. California Department of Justice, <http://www.stopdrugs.org/depressants.html>.

v. Robert L. Farb, North Carolina Crimes, Fifth Edition (Chapel Hill, NC: Institute of Government, 2000), p. 359.