PRELIMINARY TRAINING

FOR DRUG EVALUATION AND CLASSIFICATION

ADMINISTRATOR'S GUIDE

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A. Purpose of This Document

This Administrator's Guide provides an introduction to and an overview of the two-day course entitled "Preliminary Training for Drug Evaluation and Classification Program". This course is the first in a series of three training programs that, collectively, prepare police officers and other qualified persons to serve as Drug Recognition Experts (DREs). In some law enforcement agencies, these officers are known as Drug Recognition Technicians. The International Association of Chiefs of Police (IACP) has adopted "DRE" as the generic title for the persons who carry out this program.

A person who satisfactorily completes this Preliminary Training program is eligible for advancement to the second stage of DRE training, i.e., the seven-day classroom program in Drug Evaluation and Classification. The seven-day course commonly is called the "DRE School", to distinguish it from this two-day preliminary course (known as the "Pre-School"). Upon successful completion of the seven-day DRE School, the officer graduates to the final, or Certification Phase, of his or her training. The Certification Phase is conducted on-the-job: under the supervision of duly-authorized instructors, the DRE trainee conducts evaluations of persons suspected of drug impairment. The instructors evaluate the trainee's skill in conducting drug influence evaluations, and also evaluate his or her judgment in forming opinions as to the category or combination of categories of drugs causing the impairment evident in the subjects. And, the trainee's opinions are compared with the results of toxicological examinations, when they are available.

This Administrator's Guide is intended to facilitate planning and implementation of the Preliminary Training Program. The Guide overviews the two-day course of instruction.

B. Overview of the Course

1. For Whom Is The Training Intended?

   This course is designed for people who have been selected to serve as DREs. No one is permitted to enroll in the Pre-School unless he or she intends to proceed through the subsequent stages of training, and ultimately achieve certification as a DRE. The emphasis here should be kept on the concept of actual service as DREs. The skills that a DRE applies can be kept sharp only if they are frequently used.

   There is no point in offering this training to someone who will not routinely and regularly evaluate drug-impaired subjects, since that person would quickly lose whatever competence he or she gained through the training. The DRE's job is not like riding a bicycle: one can and will forget how to do it properly unless he or she does it frequently. Agencies interested in this training should take special note that it is not desirable to send full-time instructors to this course, with the intent

of having those instructors come home and teach others. Unless provisions are made to have those instructors actually work as DREs, their ability to serve competently as teachers of other DREs will vanish rapidly. It is far preferable to select trainees who will subsequently serve primarily as DRE practitioners, and who can be called upon part-time to serve as trainers.

Anyone selected as a DRE trainee must be fully competent with the Standardized Field Sobriety Tests (SFSTs), i.e., Horizontal Gaze Nystagmus, Walk and Turn, and One Leg Stand. No one can progress to the seven-day DRE School until he or she demonstrates proficiency with the three SFSTs.

2. What Is The Goal Of This Training?

The goal of this two-day Pre-School is succinct:

To prepare the student to participate successfully in his or her formal classroom training in the drug recognition process, i.e., the seven-day DRE School.

3. What Will The Students Get Out Of The Training?

As a result of successfully completing this Pre-School, the students will be better able to:

(1) Define the term "drug" and name the seven categories.

(2) Identify the twelve major components of the drug influence evaluation process.

(3) Administer and interpret the psychophysical tests used in the process.

(4) Conduct the eye examinations used in the process.

(5) Check the vital signs that are relevant to the process.

(6) List the major signs and symptoms associated with each drug category.

(7) Describe the history and physiology of alcohol as a drug.

These are a subset of the competencies expected of DRE trainees by the completion of the seven-day DRE School; the Pre-School gives them a "head start" toward achieving those skills.

4. What Subject Matter Does The Course Cover?

- A traffic safety-oriented definition of what constitutes a "drug" (i.e., any substance that, when taken into the human body can impair the ability of the

person to operate a vehicle safely).

- Enumeration of seven distinct categories of drugs; the drug influence evaluation process allows the DRE to identify which category or combination of categories is causing the impairment evident in a subject

- Demonstrations of and practice with four divided attention psychophysical tests that are used to assess impairment during a drug evaluation.

- Demonstration of and practice with the three eye examinations that provide cues of the possible presence of various drug categories.

- Demonstrations of and practice with checks of certain vital signs that point to the possible presence of various drug categories.

- A review of the major observable signs that distinguish the categories from each other.

5. What Activities Take Place During The Training?

   Although a certain minimal amount of formal lectures are required, the course consists primarily of hands-on practice. Students repeatedly drill in the divided attention tests, the eye examinations and in performing checks of the vital signs. A controlled drinking exercise (involving volunteers who are not members of the class) provides an opportunity to practice assessing impairment on the divided attention tests.

6. How Long Does The Training Take?

   The training encompasses approximately 13 and ½ hours of actual instruction. With breaks, this occupies two full training days.

C. Overview of the Curriculum Package

1. Instructor's Lesson Plans

   The Instructor's Lesson Plans are a complete and detailed outline of what is to be taught in the Pre-School (i.e. the subject matter) and also of how it is to be taught (i.e., the instructional methods). The lesson plans are organized into modules. Each module corresponds to one of the course's ten sessions.

   Each module consists of a cover page; an outline page; the lesson plans themselves; and copies of any visuals referenced in the lesson plans.

   The cover page presents the session's title and the total time required to conduct the session.

The outline page presents the training objectives for the session, i.e. exactly what the student will be able to do as a result of successfully completing the session. The outline page also lists the major content segments of the session, as well as the principal instructional activities that take place during the session.

The Instructor's Lesson Plans serve, first, to prepare the instructor to teach the course. He or she should review the entire set of plans, for all ten sessions, to become familiar with the content and learning activities and develop a clear understanding of how the course fits together. The instructor is expected to become thoroughly familiar with each lesson plan segment that he or she is assigned to teach; to assemble all "props" and materials needed to deliver the lesson; and, to augment the instructional notes, as necessary and appropriate, to ensure that his or her own style and experience are applied to teaching the lesson.

Subsequently, the Instructor's Lesson Plans serve as an in-class reference document for the instructor, to help him or her maintain the sequence and pace of training.

It is worth emphasizing that the lesson plans are not speeches. Although the outlines of content and instructional notes are fairly detailed, those outlines are not to be read verbatim to the students. This training is intended to be a dynamic and highly interactive learning experience. It must not be permitted to degenerate into a series of mere lectures.

2. Visual Aids

Four kinds of audio-visual aids are employed in the Pre-School:

- wall-charts
- Dry erase board/flip-chart presentations
- visuals, i.e. PowerPoint slides
- video/DVD

The wall-charts are permanently displayed items. They consist of brief captions, intended to depict major themes and segments of the course. The wall-charts should be positioned high on the far left and right sides of the classroom's front wall where they will be visible without occupying the center of attention.

The dry erase board/flip-chart presentations are outlined in the lesson plans, and are self-explanatory.

The visuals are simple graphic and/or narrative PowerPoint displays that emphasize key points and support the instructor's presentations.

The video/DVD is a portrayal of major components of the drug influence evaluation. This same video is used in the 7-day DRE School.

D. General Administrative Requirements

1. Facility Requirements

   The Pre-School requires a classroom with ample table/desk space for each student; an audio visual projector and screen; a video/DVD player and one or more monitors easily visible to all students; and, a dry-erase board and/or flip-chart. The classroom must have sufficient open space to permit instructors to give full and unimpeded demonstrations of the divided attention tests; the eye examinations; and the checks of vital signs. And, the arrangement of the classroom must permit the students to have full view of these demonstrations.

   Adequate space must be available to permit the students to practice the various tests and checks that the instructors demonstrate. The practice space may be a room separate from the classroom; a gymnasium often serves quite well for the practice segments.

   The Alcohol Workshop also requires a separate room where the volunteers can do their drinking. Breath testing instruments and operators must be available to monitor the volunteers' BACs.

2. Instructor Qualifications

   All faculty for the Pre-School must be duly certified DREs. The principal instructor, at least, must have completed DRE Instructor Training.

3. Class Size Considerations

   This course is a highly participative learning experience. A significant amount of hands-on practice requiring close supervision and coaching takes place. Because of the nature of this training, the recommended maximum class size is 25 students. A more nearly ideal range would be 15 to 20.

4. Requirements For The Controlled Drinking Practice Sessions

   Both the DRE Pre-School and DRE seven-day course require an alcohol workshop and the use of volunteer drinkers. The participation of volunteers who will consume carefully measured quantities of alcohol and submit to examinations administered by the students. Without these volunteers, students have no opportunity to practice administering the tests under reasonably realistic circumstances, or to practice interpreting test results.

   Drinking volunteers, then, are an essential resource for this training. But they can be a difficult, even unpleasant, resource with which to work. Careful steps must be taken to insure that the volunteers contribute to a worthwhile learning

experience, and suffer no harm themselves nor cause any harm to others. The following criteria define who can be considered as drinking volunteers.

- They cannot be members of the class.
- They must be at least 21 years old.
- They cannot have any history of alcoholism.
- They cannot be known to suffer from any medical condition that may be exacerbated by alcohol (such as hypertension or diabetes).
- They cannot be taking any medication (prescription or otherwise) that might interact with alcohol.
- They must be in good physical health, and have no impairments of vision or limbs that might affect their performance of the Standardized Field Sobriety Tests.
- They must be under 60 years of age, and less than 50 pounds overweight (conditions for which the standardized divided attention tests have not been validated).

Every volunteer drinker participating in the alcohol workshop must read and sign the "Statement of Informed Consent" before receiving any alcohol. The Course Administrator or a designated DRE Instructor will obtain the individual signatures from each of the volunteer drinkers prior to commencing the alcohol workshop.

Transportation must be provided for the volunteers to and from the training session. Under no circumstances may a volunteer be permitted to drive from the training session, regardless of his or her blood alcohol concentration at the time of departure. Volunteers should be released only into the custody of responsible, sober persons.

The practice sessions require a minimum of one drinking volunteer for every five students. A more desirable ratio is one volunteer for every three students. Thus, for a class of 25 students, at least 5 volunteers, and preferably 8 or 9 must participate in each session.

The effectiveness of the volunteers, as training resources, very much depends on their blood alcohol concentrations. If a volunteer's BAC is too low (i.e., below 0.06), he or she generally will provide a poor simulation of a typical DWI subject If the BAC is too high (i.e., above 0.15), the volunteer's state of inebriation usually will be evident without standardized sobriety testing, and the learning experience will not contribute as effectively as possible to sharpening the students' detection

skills.

Ideally, approximately half of the volunteers at any session should achieve peak BACs between 0.12 and 0.14 and the other half between 0.06 and 0.08. But this is very difficult to control. It is always preferable to err, if necessary, on the low side: it is better to fail to get volunteers as "high" as desired, rather than to get them too "high".

Volunteers should be instructed to refrain from eating two hours prior to their arrival at the training facility. Food in their stomachs may dramatically affect the absorption of alcohol into their bloodstreams, and significantly impede your ability to control the peak BACs they achieve.

Volunteers should be brought to the training facility at least two hours before the practice session is scheduled to begin. Each volunteer should be breath tested immediately upon arrival to verify that his or her BAC is zero.

The table on the next page indicates the ounces of 80-proof distilled alcoholic beverage that volunteers should consume, in relation to their weight and the "target" peak BAC, during a three (3) hour interval to reach a target BAC of 0.12-0.14 percent.

GUIDELINES FOR ACHIEVING TARGET BAC'S
DURING A THREE (3) HOUR INTERVAL

Ounces of 80-Proof Alcoholic Beverage to Reach a B.A.C. of 0.12.

Weight (Pounds)	MEN	WOMEN
110	5	4
120	6	5
130	6	5
140	7	5
150	7	6
160	8	6
170	8	7
180	9	7
190	9	7
200	10	8
210	10	8
220	10	8
230	11	9
240	11	9
250	12	10

It is recommended that volunteers consume half of the total allocated amount of alcoholic beverage during the first hour following their arrival at the testing facility. They should refrain from drinking or smoking prior to any breath test.

NOTE: A volunteer may cease drinking at any time.

NOTE: No weapons should be present in the vicinity of any drinking volunteer.

Volunteers must be kept under constant supervision from the time of their arrival at the training facility. At least one instructor's aide must be present for every four volunteers. The aids must monitor the volunteers, serve their drinks, make sure that they comply with the schedule, and in general keep them under close observation.

NOTE: For a more complete description of Alcohol Workshop procedures, refer to the latest edition of the Student-Instructor's Manual for the DRE Instructor Training School, and specifically Unit Nine, "Planning and Managing an Alcohol Workshop".

International Association of Chiefs of Police

Drug Evaluation and Classification Program

Drug Influence Evaluation Checklist

_____ 1. Breath alcohol test

_____ 2. Interview of arresting officer

_____ 3. Preliminary examination and first pulse
(Note: Gloves must be worn from this point on.)

_____ 4. Eye examinations

_____ 5. Divided attention tests:

- _____ Romberg balance
- _____ Walk and turn
- _____ One leg stand
- _____ Finger to nose

_____ 6. Vital signs and second pulse

_____ 7. Dark room examinations and ingestion examination

_____ 8. Check for muscle tone

_____ 9. Check for injection sites and third pulse

_____ 10. Interrogation, statements, and other observations

_____ 11. Opinion of evaluator

_____ 12. Toxicological examination