
JAIL BULLETIN

NUMBER 30

JUNE, 1987

The Jail Bulletin is a monthly feature of the Crime Commission Update. The Bulletin may be used as a supplement to your jail in-service training program if officers study the material and complete the attached "open book" quiz. The Bulletin and quiz may be reproduced for use by your staff. We welcome any jail training materials you would like to contribute to the Bulletin.

This month's "Jail Bulletin" is reprinted from the spring issue of the American Jail Association's Newsletter. The author of the article, Officer Finkelberg, is the training officer in the Narcotic Branch of the Metropolitan Police Department in Washington, D.C. According to Sgt. Griess, of the Nebraska State Patrol, PCP is not seen very often in this state and is usually associated with hard core drug users and motorcycle gangs. The unpredictable and often violent behavior displayed by users of this drug requires jail officers to use extreme caution if they have a PCP user in jail.

DEALING WITH PCP USERS

Of the hallucinogens, the jail officer should be especially aware of the effects of phencyclidine (PCP), commonly known as "angel dust," "peace pills," or "wacky weed." Because the brain stores the drug, the PCP "trip" can last weeks. This drug, developed as an animal tranquilizer, can cause extreme slowness of thought, words, and actions almost as if the inmate is a record playing at too slow a speed. PCP also causes staggering and balance problems: speech is slow and strange but not quite like the slurred speech caused by drunkenness. There are some reports of users feeling such numbness that they can (and do) mutilate themselves without feeling pain.

The most common ways to administer PCP are either orally (capsules or pills) or by smoking it after it has been sprinkled on parsley or marijuana.

When PCP is produced in the laboratory, it is usually mixed with ether before it is spread on parsley or marijuana. PCP is also sold illegally in liquid form, powdered form, or crystal form.

Since PCP is usually sprayed or sprinkled on parsley or marijuana before it is sold "on the street" in small amounts, users who are arrested and brought to the jail may have a hand-rolled cigarette with the ends twisted in order to keep the parsley inside. Although PCP is sometimes sprayed on marijuana to introduce marijuana smokers to a bigger high, PCP is the dominant drug. Thus, if a jail officer twists open the end of a hand-rolled cigarette and parsley falls out, it is safe to assume that the cigarette is laced with PCP and that the person who owns the cigarette is a user.

The effects of PCP vary widely. While research is still being conducted on the long term effects which this drug has upon humans, it is known that PCP seriously affects the brain and the central nervous system. Most persons using PCP experience a confused state characterized by feelings of weightlessness, unreality, and hallucinations. Reports of difficulty in thinking, poor concentration, and preoccupation with death are frequent. Other effects include nausea, vomiting, profuse sweating, involuntary eye movement, double vision, and extreme restlessness.

If a person is incarcerated and it is suspected that he has used PCP, then very close attention should be given to him. The jail officer's primary concern, in addition to the danger of self-mutilation by the inmate, is that PCP users can be extremely paranoid, hostile, and violent. Because of their extreme fear caused by the drug, they might attack people who appear threatening to them. Whenever an inmate is a suspected user of PCP, the jail officer should request a medical and psychological evaluation and use extreme care in any contact with the inmate. The officer should not make any threatening or hostile gestures toward the inmate, nor should the officer remain alone with the inmate since several officers usually are needed to restrain a violent PCP user (people who take PCP seem to develop extraordinary strength when they become violent, as many police officers have learned while trying to arrest persons who are intoxicated on this drug.)

Officers should also be aware that hospital personnel may send an inmate who has used PCP back to jail and attempt to tell jail personnel that "nothing can be found wrong with the inmate." This problem occurs because PCP does not remain in a user's bloodstream - it goes directly to the brain and other fat tissues where it is stored. A practice of some medical professionals is to administer large doses of cranberry juice to known PCP users. The juice breaks up the acidic (PH Factor) in the fat tissues which then releases it into the urinary tract to be flushed from the system. This helps to rid the body of the PCP and prevents recurring reactions or trips. Thus, ordinary blood tests will not detect PCP in a human body. If the officer believes the inmate may have taken PCP, the officer should consider the inmate to be potentially dangerous, even though hospital personnel tell him they cannot find traces of the drug. There will be other signs which warn the officer that PCP may be causing erratic behavior and unprovoked violence in an inmate.

These signs include:

- o Direct admissions by the inmate that he has taken the drug.
- o Evidence obtained from the inmate's personal property when he was being admitted (parsley, hand-rolled cigarettes, empty cellophane bags with residues of a green leafy substance, a capsule containing an unknown liquid.)
- o The inmate's physical condition and behavioral symptoms when he was admitted to the jail.
- o Statements from other inmates, friends, relatives, or police officers that the inmate may have taken PCP.

- o The nature of the charge, which sometimes provides a clue that the inmate may have taken PCP (such as an unprovoked assault upon another person at a party; running nude down the middle of a street; or committing some other bizarre or seemingly unprovoked act.)

QUIZ

Nebraska Jail Standards require that jail staff receive eighteen (18) hours of in-service training each year. The Jail Bulletin may be used to supplement in-service training if an officer studies the Bulletin, completes the quiz, and this process is documented by the jail administrator for review during annual jail inspection.

SUBJECT: DEALING WITH PCP USERS

NAME _____

DATE _____

1. What are the three "common names" given for PCP?

2. List seven physical, mental, or behavioral characteristics a PCP user may display.

3. A PCP "trip" can last for

a. Hours b. Days c. Weeks

4. PCP can be easily detected in a user's bloodstream.

_____ TRUE _____ FALSE

5. Whenever an inmate is a suspected user of PCP, the jail officer should

CREDIT: 1/2 HOUR CREDIT FOR JAIL IN-SERVICE TRAINING REQUIREMENT.

ANSWER SHEET SHOULD BE RETAINED BY JAIL ADMINISTRATOR

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WACKY WEED

PEACE PILLS

2. List seven physical, mental, or behavioral characteristics a PCP user may display.

SLOWNESS OF THOUGHTS, WORDS, ACTIONS;

STAGGERING, BALANCE PROBLEMS; SELF MUTILATION;

SLOW, STRANGE SPEECH, NOT LIKE A DRUNK;

NUMBNESS; FEELING OF WEIGHTLESSNESS, UNREALITY, HALLUCINATIONS;

DIFFICULTY IN THINKING, POOR CONCENTRATION;

NAUSEA, VOMITING, PROFUSE SWEATING;

INVOLUNTARY EYE MOVEMENT, DOUBLE VISION;

EXTREME RESTLESSNESS;

BIZARRE BEHAVIOR; PARANOIA, HOSTILITY, VIOLENCE

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