



TRAINING GUIDE
ALCOHOL & DRUGS

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Introduction

Abuse of alcohol and drugs creates problems which affect many elements of today's society including the workplace environment.

Motorsport UK realises that these problems potentially have a huge impact on productivity, relationships at work and most importantly safety.

The company is fully committed to providing a healthy and safe environment for all its members and officials and understands the huge impact created by drug and alcohol abuse.

The topics covered within this guide include:

- The impact drugs and alcohol has on society and the workplace.
- Legal requirements relative to drugs and alcohol.
- Awareness of the psychological and physiological effects of drug and alcohol abuse.
- Understanding the drug and alcohol testing process, procedures and equipment used.
- Addressing managerial issues practically.

We hope you find the information beneficial and that it will help you feel more confident with dealing with this important workplace issue.

Simon Cady
Racoo Screening

Responsibilities

- All individuals are required to support the policy.
- All individuals should ensure that the policy is communicated effectively to the company's employees.
- All individuals should act consistently with policy requirements.
- All individuals should be fully aware of the signs and symptoms of alcohol and drug misuse and act in a manner to safeguard the health and safety of all staff.
- If concerned about an employee, all individuals should assist that employee with gaining support through one of the available structures.
- If any employee is found in possession of a suspicious substance; consider reporting to the Police.

Legislation

Under the Misuse of Drugs Act 1971, the term 'misuse' covers the supply, possession and use of illegal drugs and the misuse, whether deliberate or unintentional, of prescribed drugs and substances such as solvents. Supply or possession of an illegal drug is unlawful. It is an offence for an employer, an occupier of premises or persons concerned in the management of premises to allow the supply, use or production of drugs to take place on their premises. The penalties for offences involving controlled drugs depend on the classification of the drug.

The Psychoactive Substances Act 2016, will protect young people by banning any production, supply and importation or exportation for human consumption of these potentially dangerous drugs, linked to the deaths of 144 people in the UK in 2014 alone.

The act provides a range of criminal and civil sanctions including new powers for police and tough sentences of up to 7 years for offenders'.

The Health and Safety at Work Act 1974 places a duty on employers to ensure, as far as is reasonably practicable, the health, safety and welfare at work of staff, students and other users of its premises.

The Road Traffic Act 1988 states that a person is guilty of an offence if driving or attempting to drive a motor vehicle in a public place while unfit through drink or drugs.

Under licensing laws it is illegal to sell alcohol to someone who is inebriated.

The Misuse of Drugs Act 1971 divides drugs into three classes:

Class A Includes Ecstasy, Cocaine, Heroin, LSD, Methadone, Methamphetamine, Opium and any class B drug prepared for injection

Maximum penalties: seven years in prison and/or a fine for possession, life imprisonment and/or a fine for possession with intent to supply.

Class B Includes Amphetamines, Barbiturates, Cannabis, Entire 'family' of cathinone derivatives e.g. MCAT

Maximum penalties: five years in prison and/or a fine for possession, 14 years in prison and/or a fine for possession with intent to supply.

Class C Includes Benzodiazepines (eg Tamazepam), Ketamin, GHB

Maximum penalties: two years in prison and/or a fine for possession, five years prison and/or a fine for possession with intent to supply.

The manufacture and distribution of other harmful substances such as Amyl Nitrates (poppers) and Glues are covered under the Medicines Act of 1988.

The effects of drugs and alcohol

A policy on 'substance abuse' is concerned with the effects on individuals of alcohol, illegal drugs and medicines (both prescribed and over-the-counter). All these are classed as psychoactive drugs, and their effects can be divided into three broad categories:

1. Stimulants, which cause hyperactivity, over-confidence and then exhaustion. This category includes cocaine, amphetamine and ecstasy.
2. Depressants, which slow reaction times and make people lethargic and indifferent. This category includes alcohol, cannabis, tranquillisers, and heroin.
3. Psychotropic, e.g. LSD, which distort reality. This effect can occur in combination with either depressants (cannabis) or stimulants (ecstasy).

Because of their psychoactive properties these drugs can have an effect on the user's:

- Behaviour
- Performance
- Health

and these in turn affect other employees who carry the burden of an under performing colleague.

Drugs and Alcohol Facts

Alcohol Facts:

- 73% of men and 58% of women have at least one drink a week
- 27% men & 14% women drink more than recommended limits
- 1 in 6 A&E treatments are alcohol related
- 1 in 25 people in Britain are harmful or hazardous drinkers

Source: NHS Information Centre National Statistics

Report commissioned by Norwich Union Healthcare

- A third of employees admitted to having been to work with a hangover
- 15% reported having been drunk at work
- 1 in 10 reported hangovers at work once a month
- 1 in 20 reported hangovers at work once a week

Drug Facts:

40% of the workforce under 40 years of age have experimented with illicit drugs. (Source: Office for National Statistics)
8.2% of the working age population (16-59 years old) took illegal drugs in the past year. (Crime survey for England and Wales in 2012/2013)

At least 1 in 30 UK employees has drugs in their system at any point in time. (1m) (analysis of workplace drug testing results 2007- 2011)

43% increase in UK employees testing positive for drug use from 2007-2011.

An employee using drugs is more likely to be involved in accidents at work than a drug free employee.

True - 3.5 times more likely

(Source: Institute for a Drug Free Workplace)

Signs to look out for

An individual's behaviour can be affected:

- Short term i.e. whilst under the influence of the drug
- Medium term e.g. recovering from effects of short term use, or continuing impairment as a result of the initial use
- Long term build up of personal and health problems resulting from regular and/or excessive use

A persistent or heavy user of drugs or alcohol is liable to erratic mood patterns, which can disrupt working relationships and distract colleagues. These users risk lowered resistance to illness and the possibility of developing health problems ranging from vitamin deficiencies to cancers.

Physical signs may be apparent when the user is under the influence of a drug e.g. staring eyes, flushed face, and there may be a marked increase or decrease in the individual's usual level of attentiveness and talkativeness.

Post drug use physical signs could be lack of appetite, headaches, nausea, or even flu-like shivering and sweating.

Indicators of problem drug use may show up through changing patterns of:

- Absenteeism
- Accidents
- Performance
- Personality

These indicators are not exclusive to drug use. Each individual sign may have another explanation.

The most commonly used psychoactive drugs and their effects on the workplace

Alcohol

Alcohol "The risks of having an accident increase as Blood Alcohol levels rise. At 40µg/100ml the risk of an accident is multiplied by 1.5. At 80µg/100ml it is multiplied by 10."

Alcohol is a legal drug, subject to general restrictions e.g. Licensing Law, Road Traffic Act, and some restrictions specific to certain industries. Alcohol is a depressant, and at low levels of consumption starts to affect an individual's behaviour and ability to perform tasks. The current UK drink/drive limit is higher than that of other European countries.

Effects on the individual, relevant to work performance

The immediate impairment effects of alcohol are familiar, although many people fail to appreciate that one pint of beer can have a significant impact on performance. The 'hangover' effects of alcohol can damage health – one in five hospital admissions are alcohol related. Alcohol affects judgement, reaction times, hearing and sense of balance. Deterioration in these areas becomes measurable with a Blood Alcohol Concentration of 40mg/100ml.

Alcohol

Alcohol is seen by many as a socially acceptable drug, but that does not mean it is any less powerful than other drugs. Technically speaking, it's a nervous system depressant, which means it slows down your body's responses in all kinds of ways. Just enough can make you feel great - too much and you'll have a hangover the next day.

Alcohol will often exaggerate whatever mood you're in when you start drinking. It takes your body an hour to process one unit of alcohol.

Drinking large quantities of alcohol will lead to a variety of conditions including:

- High blood pressure and stroke
- Liver cirrhosis
- Hepatitis (inflammation of the liver) and Pancreatitis
- Poor skin condition and dehydration
- Depression
- Dependency issues
- Sexual problems e.g. loss of libido, erectile dysfunction
- Cancer of the mouth, throat and digestive tract
- Weight gain
- Anti-social and often high risk behaviour
- Increased likelihood of accidents (it's estimated that alcohol features in 20-30% of accidents).

Research carried out in 2014 shows that, in the U.K., there were 8,697 deaths directly related to alcohol. Of these, 5,687 deaths were among males (65% of the deaths) and 3,010 among females (35% of the deaths), the numbers have increased since 1994.

What is a unit?

For ease of comparison, alcohol is measured in units:

1 Unit = 1/2 pint of regular strength beer, lager or cider

1 Unit = 1 small glass of wine (9% strength by volume)

1 Unit = 1 small glass of sherry

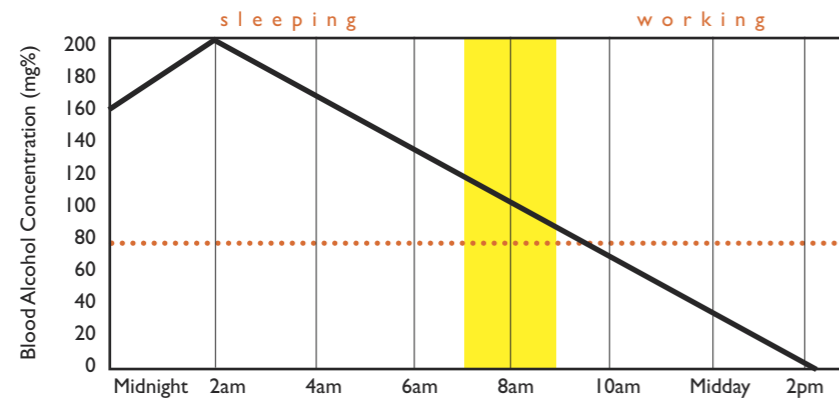
1 Unit = A single pub measure of spirits

Remember - home measures are usually more generous than pub measures.



It is estimated that 1 in 10 people (aged 16-64) are dependent on alcohol.

Alcohol



This graph shows that for the average person drinking 11 units in an evening and stopping drinking at midnight, is unsafe to drive until after 9am the following morning.

- Black coffee, cold showers and fresh air will not sober someone up - only time will
- If you are drinking late into the evening - make sure you allow time for alcohol to leave your system before driving the next day
- It takes your body at least 48 hours to recover after getting drunk

It is young men aged between 16-40 who are most at risk of becoming alcohol dependent.

The common substances of misuse

What is a substance of misuse?

It is any chemical substance that alters the way in which your body functions including your emotional state and your behaviour. Most drug misuse occurs because the drugs can produce an effect on the mind that some people find pleasant.

There are 3 groups of drugs:

- A psychotropic drug is one that affects the nervous system
- A depressant drug is one that slows down the mind and body
- A stimulant drug is one that speeds up body and brain functions

Who takes them?

- In 2014, 2.8 million people used drugs in the UK.
- 20% of 20-24 year olds used drugs in 2014.
- For 16-59 year olds, 3 in 10 people reported using Cannabis in their lifetime.

Drugs

Amphetamines

“You won’t sleep, you stay up, you keep moving about. You look at the telly but you want to listen to your music but at the same time you want to look out of the window, you want everything in one go... I couldn’t do it now with the job I’m doing because it’s too much. I wouldn’t even do it at the weekend.”



A group of synthetic drugs originally developed for medicinal use to treat depression, nasal congestion, and as an appetite suppressant. They act as a stimulant on the central nervous system. Although controlled under the Misuse of Drugs Act 1971, and only available on prescription in the UK, amphetamine based medicines can be purchased ‘over the counter’ in other countries.

Effects on the individual, relevant to work performance

- Short term - exaggerated increase in energy and alertness, and possible impatience with colleagues, liable to talk incessantly. No appetite.
- Medium term - exhaustion and inability to concentrate.
- Long term - anxiety, tension, sleeplessness, paranoia.

These indicators are not exclusive to drug use. Each individual sign may have another explanation.

Risks : Heart failure, insomnia, mood swings, irritability.

Benzodiazepines

“The withdrawal symptoms from prolonged prescription use are rather like the return of the symptoms the medication was originally prescribed for.”



Depressant drugs familiar as Valium, Mogadon, Temazepam. One in four adults in the UK uses benzodiazepines each year. The problems associated with dependence from legally prescribed benzodiazepines are recognised, and their inappropriate use, especially in association with alcohol, is probably more significant to the workplace than their illegal use. Temazepam is the most widely abused benzodiazepine.

Effects on the individual, relevant to work performance

- Short term - slowed reaction times, drowsiness, memory impairment, confusion, clumsiness.
- Medium term - the sedative effects of some long acting varieties e.g. Mogadon, can last for over 24 hours. Withdrawal symptoms can develop quickly, leading to anxiety, headaches and nausea. lethargy, disinterest in work and self e.g. personal appearance.

Long term lethargy, disinterest in work and self e.g. personal appearance.

Risks : Dependence and tolerance, overdose can lead to death, poor concentration, confusion.

Drugs

Cannabis

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.



The most widely used illegal drug in the UK, it is available in herbal or resin forms. The effects of cannabis are depressant and hallucinogenic, and are often very dependent on the user's mood and expectations. Cannabis and alcohol are often used at the same time.

Effects on the individual, relevant to work performance

- Short term - relaxed, laid-back attitudes; reduced concentration and impaired memory; reduced ability to process information and perform complicated activities. Studies show strong links between cannabis use and impaired driving ability – drivers are more cautious but not necessarily safer.
- Medium term - whilst the individual may feel 'normal', impairment to perception, memory functions and reaction times can remain for over 24 hours.
- Long term - irritability, short temper, depression and suspicion of others.

Risks : Impaired co-ordination and reaction time. Frequent respiratory infections. Poor concentration, anxiety and depression.

Cocaine

"Probably the most intense experience of my life. I thought I was invincible... you are the bees knees and it's very very scary. I wouldn't do it again because I would be frightened of losing control and letting the drug take over"



A stimulant drug, cocaine is a very seductive drug that is becoming increasingly widely used amongst employees. It requires minimal equipment and is unobtrusive to use. Medical evidence is highlighting an association between A&E admissions for heart failure and cocaine use.

Effects on the individual, relevant to work performance

- Short term - intense feelings of well-being, alertness, over-confidence. Often described as the 'superman syndrome' but research has shown that the user's problem solving abilities actually decrease.
- Medium term - exhaustion, inability to concentrate, mood swings, twitching and itching.
- Long term - nervousness, memory losses, sensitivity to noise, paranoia.

Risks : Dependence, paranoia and damage to nasal membranes, aggression as effects wear off.

Drugs

Ecstasy (MDMA, MDEA, MDA)

48% of respondents to a MIXMAG survey said their work performance had been impaired as a result of ecstasy use – the 'suicide Tuesday' effect.



Similar in effects to amphetamine, but with hallucinatory qualities too. Ecstasy is known as a 'dance' drug – surveys suggest that 90% of young people going to clubs take 'E'. The expressions 'mid week blues' and 'suicide Tuesday' give a clear indication of the post-use effects on the user.

Effects on the individual, relevant to work performance

- Short term - exaggerated increase in energy and alertness, feelings of extreme friendliness which may disconcert or irritate colleagues.
- Medium term - exhaustion and inability to concentrate. Difficulty in maintaining normal work routine. Weekend users may have a marked dip in performance midweek.
- Long term - anxiety, tension, sleeplessness, paranoia.

Risks : Overheating and dehydration, which can be fatal, nausea and panic. Long term memory loss. Birth defects.

Heroin

"...removes the user from reality – if problems come into the mind at all, they come with optimism and confidence that all will turn out well."



Heroin is an opiate. The opiates as a group are pain-killers, familiar as morphine and codeine, as well as heroin. Although heroin is associated with the stereotype, 'junkie' it is estimated that casual users outnumber addicts 4:1.

Methadone, a synthetic opiate (or opioid) is used in heroin reduction programmes, as is Buprenorphine. Both of these may be abused.

Effects on the individual, relevant to work performance

- Short term - relaxed detachment from immediate activities, although mental and physical functioning is relatively unimpaired.
- Medium term - drowsiness, and possible mild 'flu-like' withdrawal symptoms with associated irritability.
- Long term - most serious effects of long term use relate to injecting (infections and diseases) and lifestyle as the risk of dependency increases.

Risks : Physical dependence, tolerance, overdose can lead to death, sharing injecting equipment brings risks of HIV.

LSD and Magic Mushrooms

These are the most commonly used hallucinatory drugs in Europe. Their principal short term impact on the user is bizarre and unpredictable behaviour, with a greatly increased risk of accidents. The 'trip' wears off within about 12 hours, but the user may have unexpected and disconcerting 'flashbacks' at any time for some months afterwards, creating a totally unpredictable workplace hazard.



LSD. Risks : No way to stop a bad trip which may be very frightening. Increased risk of accidents. Persistent Perception Disorder (flashbacks). Mental illness.

Magic Mushrooms. Risks : As for LSD with additional risks of poisoning and sickness.



Do you know the signs of dependency?

Physical signs of drug misuse and dependency:

- Change in appetite, unexplained weight loss or gain
- Slowed pace or a staggering walk; reduced physical coordination
- Inability to sleep, awake at unusual times, unusual laziness
- Red, watery eyes; pupils larger or smaller than usual; blank stare
- Cold, sweaty palms; shaking hands
- Puffy face, blushing or paleness
- Smell of substance on breath, body or clothes
- Extreme hyperactivity; excessive talkativeness
- Runny nose; hacking cough
- Needle marks on lower arm, leg or bottom of feet
- Nausea, vomiting or excessive sweating
- Sexual dysfunction

Behavioural signs of drug misuse and dependency:

- Change in overall attitude/personality no other identifiable cause
- Changes in friends; new 'hang-outs'
- Change in activities or hobbies
- Reduction of performance at work and unreliable time keeping
- Change in habits at home, loss of interest in family/family activities
- Difficulty in paying attention; forgetfulness
- Lack of motivation, energy, self-esteem, 'I don't care' attitude
- Sudden over-sensitivity, temper tantrums, or resentful behaviour
- Unexplained need for money, stealing money or items
- Moodiness, irritability, or anxiety
- Silliness or giddiness; unpredictable
- Excessive need for privacy; unreachable
- Secretive or suspicious behaviour
- Change in personal grooming habits
- Possession of drug paraphernalia
- Paranoia
- Car accidents
- Dishonesty

Wellbeing and Help

Other help and advice:

1. Your General Practitioner
2. Alcoholics Anonymous 0800 9177 650
3. Samaritans 116 123
4. NHS 111 Services - If you urgently need medical help or advice but it's not a life-threatening situation
5. National Drugs Helpline 0800 776 600

Random Drug and Alcohol Testing

Alcohol Testing

Alcohol testing can involve two separate tests. A saliva sample will be used to indicate whether alcohol is present. If alcohol is detected in the saliva sample or the Collection Officer has cause for concern that alcohol is present, a breath sample(s) will be taken.

If necessary a calibrated breath alcohol testing instrument will be used. The Racoo Screening Collection Officer will use this instrument in conjunction with 'Chain of Custody' procedures which ensures the process is evidential and defensible in Court or Tribunal. The testing process is simplified as below:

- For safety reasons, the Donor is invited to wear a mask and gloves (provided). Hand sanitiser is also available.
- The Donor is invited to read the Donor Advice Sheet.
- The Donor assists the Collection Officer with the completion of a Test Form.
- The Donor selects a sealed saliva alcohol test strip, removes the strip and places the pad on their tongue.
- The Collection Officer interprets the saliva alcohol result.
- If required the Donor selects a sealed mouthpiece.
- The Donor is asked to provide a breath sample into the instrument.
- The instrument interprets the sample and displays a Test Result.
- If the test result is '0', then no further action is required.
- The results are printed and acknowledged by the Collection Officer and Donor.
- If a test result is anything but '0', a second test is conducted after 15/20 minutes.
- If the second test result is above the cut-off (currently 4µg/100ml) it is Positive.



Test strip



Intoximeter FST



Intoximeter AS V



Saliva/Oral Fluid Drug Test

A Saliva sample will be taken and screened instantly on site for drug detection. The sample is collected under 'Chain of Custody' conditions. If a non-negative result is obtained, two further samples will be sent to an accredited Laboratory for expert analysis. The sample collection includes barcoding and tamper proofing to ensure integrity throughout the process. Once at the Laboratory, the sample is tested for a panel of drug groups; including Amphetamines, Cannabis, Cocaine, Methamphetamines and others. Dependent on what is found, a Medical Review may be required. The Medical Review Officer (MRO) is a medical physician with responsibility for interpreting laboratory results together with a toxicologist. The interpretation is an essential part of the drug testing process and is the final review of analytical results. The MRO can issue a negative report for a positive analytical result if the test result is likely to be due to the use of declared medication, or a valid alternative medical explanation has been found. A definitive negative or positive result will be issued by The Laboratory.





Donor Advice Sheet

**Oral Fluid/Saliva samples for Screening and Confirmation.
Saliva and Breath Alcohol Analysis**



What will happen at the appointment?

For safety reasons, you will be provided with sanitiser, a face mask and gloves.

At this appointment you will be required to supply a oral fluid/saliva sample(s) and up to 3 samples of breath.

Sample Collection:

The sample will be collected under conditions that give you full aural and visual privacy. You will be able to observe all stages of the collection process and your saliva sample should always be within your sight.

Identification:

Our Sample Collector will ask to see proof of your identity, normally through a photo-ID:

- Driving License
- Passport
- Official work ID card

If you don't have one, a Motorsport UK representative must identify you or a photo will be taken and sent for future confirmation.

Oral Fluid/Saliva sample:

The drugs that you will be tested for will normally include but not limited to some of the following drugs / drug classes:

- Amphetamine
- Buprenorphine
- Cannabis (THC)
- Cocaine
- Ketamine
- K2
- Methadone
- Methamphetamine
- MDMA (Ecstasy)

Medication:

You will be asked for information about yourself to enable our Sample Collector to fill in essential paperwork. You will be asked for details of any medications you have taken over the last 14 days. The medication list must be accurate and complete. Include prescribed medicines and "over-the-counter" products (painkillers, cold cures etc.). Remember visits to doctors, dentists and hospital outpatient departments and injections and herbal/alternative remedies.

You will be asked to remove any loose items of outer clothing or hat. Then you will be invited to select a sealed collection kit.

Our Sample Collector will then open the collection kit and remove the collector swab and device from its wrapper; they will ask you to place the collection swab in your mouth. You will be asked to move the swab around your mouth and tongue. When enough sample has been collected, the indicator will show red. The more saliva available, the shorter the sample collection time. When enough sample has been collected, the Sample Collector will ask you to remove the swab and place it into the device. The swab will be locked into place. Your oral fluid/saliva will be analysed within the test device; the results can be interpreted when a control lines and test lines are available. You may be asked to give two further samples.

Laboratory Confirmation:

If required, your sample(s) will be sent for laboratory analysis; our Sample Collector will follow a procedure known as the Chain of Custody (C of C). The C of C ensures that the sample that you provide can be clearly identified as coming from you and no one else, and that it hasn't been tampered with in any way at any time.

Your sample(s) will be sent to an accredited laboratory for analysis. They will test your 'A' sample and your 'B' sample will remain unopened.

Saliva and Breath Alcohol Test:

If the saliva test device indicates the presence of alcohol, a breath sample will be taken. This breath sample will be analysed in order to detect and measure any alcohol in your system.

- A fully calibrated approved alcometer instrument.
- A new sealed mouthpiece.

Prior to providing your breath sample, at least 15 minutes must have passed since you consumed any food, alcohol, soft drinks, or used alcoholic mouth sprays or drops.

You must disclose to the sample collection officer if you have smoked, chewed gum, consumed food or used mouthwash.

Inaccuracies in the test can occur if disclosure of this information is withheld and/or the 15 minute time frame is not observed.

You will be asked to exhale into the mouthpiece for approx 5 seconds, the instrument will perform an immediate analysis. The unit of measurement used to report the presence of alcohol in your breath is Micrograms of alcohol per one hundred millilitres of breath, abbreviated as µg/100ml.

Details of the sample analysis may be printed, if so, you will be asked to sign each printout confirming the result as being correct in relation to the result displayed on the instrument.

A second and possibly third test may be required dependent on the result of the first test.

Unable to provide a saliva and/or breath sample:

A form will be completed if you unable to provide a sample.

Refusal to provide a sample:

If you refuse to provide a sample or provide consent, you will be required to complete a form and declaration which relates to this. You will be asked to leave the event.

Consent:

You will be required to sign for your informed consent during the collection of your oral fluid/saliva and breath samples.

By signing consent, you are acknowledging that Motorsport UK will be informed of the test outcome.

Medical Review Officer:

All positive drug results will be vetted by a qualified Medical Review Officer who has the authority to overturn positive results caused by you taking medication in the correct dosage. If the MRO contacts you to discuss a possible positive result with you, it is in your best interest to co-operate.

Confidentiality

The result will be conveyed to Motorsport UK in a confidential manner, either immediately following the test or normally within five working days if Laboratory analysis has been required. Motorsport UK will inform you of any Laboratory result.

If your 'A' sample tests 'negative' the laboratory will destroy both 'A' and 'B' samples. If it tests 'positive' your 'B' sample will be stored at the laboratory in secure, temperature-controlled conditions for 12 months, during which you may pay for the result to be checked at an accredited Laboratory.

Disclaimer: This printed information is intended for guidance only and is based on generic information and may not reflect the protocols for all tests conducted or for the client procuring the testing service.

Motorsport UK Drugs and Alcohol Policy

Motorsport UK is committed to achieving and maintaining an alcohol and drug free environment within Motorsport UK Permitted Events where the abuse of medications, use of illicit substances, solvents or alcohol does not endanger the health, safety and welfare of all persons involved in motorsport.

We recognise that the use of illegal drugs and excessive use of alcohol will have a physical and psychological effect on many areas of performance; we wish to ensure that all are aware of this and the hazards involved with use.

Motorsport UK aims to take positive action to prevent substance related problems affecting the sport where possible to help those affected, as far as this is reasonably practical. Any person reported for substance related problem will be dealt with sensitively and with dignity.

Covid-19 Information

COVID-19 (Coronavirus Disease) is the infectious disease caused by the recently discovered coronavirus SARS-CoV-2. This new virus was unknown before the disease outbreak in Wuhan, China, in December 2019. The most common symptoms of COVID-19 include (but not limited to) a high temperature, a new continuous cough and a loss of, or change to sense of smell or taste. Some patients may have myalgia, chills, nausea, nasal congestion and diarrhoea. These symptoms begin gradually and are mild in most of the cases. Some people become infected but do not develop any symptoms and do not feel unwell. Most people in the UK recover from the disease without special treatment. Approximately one in six people who get infected with COVID-19 becomes seriously ill and develops difficulty breathing. Elderly people, and those with pre-existing conditions, such as high blood pressure, heart problems or diabetes, are more likely to develop serious illness.

COVID-19 is transmitted via respiratory droplets that are exhaled by infected people via coughing, sneezing or talking. These droplets can be inhaled or ingested directly by other people or can contaminate surfaces, which can then be infectious for several days. Most estimates of the incubation period for COVID-19 range from 1 to 14 days, during which people might already be infectious without showing disease symptoms. As of the 28th June 2020, 311k people tested positive for Covid-19 and 126.5k people have been admitted for healthcare.

Motorsport UK are fully committed to providing a safe environment to protect competitors, members and officials from Covid-19 infection. As additional safety measures, we have included providing gloves, masks and hand sanitiser when being tested. The testing method enables safe social distancing to be adhered with no close contact between Sample Collector and Donor.

For more detailed information on all aspects of Coronavirus (Covid-19) please go to www.gov.uk/coronavirus.

Testing Process for Minors

Under the age of 18, you are considered a minor. You may not be aware, but you can still be tested. Much of the testing process is the same for adults, however modifications are made to ensure minors are safeguarded. It is important to remember that at any point in the testing process you can ask questions to ensure you feel confident and happy with the process.

The facts - what you need to know

When testing minors, here are the main modifications to the process you should be aware of:

- Minors will be notified for testing by a member of the Championship Personnel in the presence of an adult. This adult could be another member of the Championship Personnel or a NGB representative, coach, parent etc. If an adult is not present, notification will be paused until an adult can be present.
- Minors are encouraged to take a representative with them if they are notified for testing. This representative can be the same adult present during the notification or a different person. The minor will be chaperoned by the Championship Personnel and an adult to locate the representative.
- At no point will the Championship personnel or Sample Collector be left alone with an unaccompanied minor following notification.
- When the minor is ready to provide a sample, the Sample Collector taking the sample from minor must always have an observer watching them and their conduct.

Relevant Motorsport UK Regulations

Section H - Entrants

26.1.2. The Entrant is the legal entity who is responsible for all acts and/or omissions of the driver/co-driver and any Person connected with the entry. A Competitor must ensure that any Entrant is aware of this. Entrants must respect that Motorsport UK have the right to require alcohol and illicit drugs testing on any Person howsoever connected with any Entry operating within a Motorsport UK Permitted Event and shall at all times cooperate fully with the relevant procedures. These procedures are in addition to and not in substitution for any procedure undertaken by or at the instance of UK Anti-Doping (D.35.1.1.)

31.2.4. Entrants must respect that Motorsport UK have the right to require alcohol and illicit drugs testing on any Person howsoever connected with any Entry operating within a Motorsport UK Permitted Event and shall at all times cooperate fully with the relevant procedures. These procedures are in addition to and not in substitution for any procedure undertaken by or at the instance of UK Anti-Doping (D.35.1.1.)

Section H - Anti-Alcohol and Illicit Drugs Regulations

38.2. The Motorsport UK Anti-Alcohol policy and Illicit Drugs guidelines are published on the Motorsport UK website. It is the responsibility of each Licence holder to ensure that they are fully familiar with the Motorsport UK Anti-Alcohol and Illicit Drugs policies and guidelines. The FIA Regulations will apply in respect of any International event.

38.3. Entrants must respect that Motorsport UK have the right to require alcohol and illicit drugs testing on any Person howsoever connected with any Entry operating within a Motorsport UK Permitted Event and who shall at all times cooperate fully with the relevant procedures. These procedures are in addition to and not in substitution for any procedure undertaken by or at the instance of UK Anti-Doping (D.35.1.1.)

38.4. Any Person who fails prescribed limits or evades or refuses to comply with testing procedures for Anti-Alcohol Testing, Anti-Doping Testing or Illicit Drugs testing will have their Licence and/or all activities within Motorsport UK Permitted Events suspended pending further investigation and will be required to leave the Permitted Event Venue. (D25.1.14.)

Any person failing any alcohol or illicit drug test may be brought before the National Court for disciplinary procedures which may result in penalties including a fine up to a maximum of £58,195.00 or to international suspension from the sport.