

Cross-Party Group on Drug and Alcohol Treatment and Harm Reduction



Chair: Lord David Ramsbotham

Secretary: Mike Wood MP

Vice Chairs: David Burrowes MP (Con); Paul Flynn MP (Lab); Paul Holmes MP (LD)

Parliamentary Digest

(May 2009 – July 2009)

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Executive Summary

The Cross-Party Group on Drug and Alcohol Treatment and Harm Reduction has around 40 members in Parliament (MPs and peers).

During this period, the Group met formally on 30th June 2009, the final meeting before the House goes into recess on 21st July 2009. In May the Group had written to Public Health Minister Rt Hon Dawn Primarolo MP to request a meeting regarding the commissioning of drug and alcohol treatment services. However in the ministerial reshuffle at the beginning of June, Dawn was replaced by Gillian Merron MP.

Gillian Merron agreed to attend the regular meeting of the group on 30th June, and Paul Hayes from the National Treatment Agency (NTA) also attended. There was a full and frank discussion about the commissioning process and the Group is now seeking to maintain a dialogue around this and other issues with both the Minister and Paul Hayes.

Our amendments regarding Section 9A of the Misuse of Drugs Act, tabled in the Commons to the Policing and Crime Bill, were unfortunately not selected for debate, due to the Government's constrained timetable for the Bill. However, the Group has continued to pursue the issue in correspondence with the Minister, Alan Campbell MP, who we met with in April 2009.

The June Group meeting also discussed a new briefing paper on 'Improving the Housing, Training and Employment prospects for Problematic Drug and Alcohol Users' which raised a number of questions which the Group will return to in the future.

In this period, briefing material has been distributed to MPs and peers on the following issues:

- Improving the Housing, Training and Employment prospects for Problematic Drug and Alcohol Users
- Commissioning of Drug and Alcohol Treatment services

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- Section 9A of the Misuse of Drugs Act 1971

The next group meeting will be held in the autumn once the House returns after the summer and party conference season recess on 12th October 2009.

Campaigning Issues

The Group is prioritising several issues for campaigns within Parliament, which relate to the Group's core objectives (see final page):

Commissioning of Drug and Alcohol Services

The commissioning process for drug and alcohol treatment services is a primary concern for many of the service provider agencies in the Conference Consortium. There is widespread concern about the current system – its effectiveness, the burden it places on providers and the costs.

The briefing paper distributed to the April Group meeting, *'The Commissioning Process: Developing and Maintaining the Level Playing Field'*, set out the views and concerns of commissioners and service delivery organisations on commissioning, purchasing and monitoring. Following the discussion, it was agreed to invite Health Minister Dawn Primarolo and the National Treatment Agency (NTA) to a future meeting to discuss commissioning.

In the post-election reshuffle, Dawn Primarolo was replaced by Gillian Merron as Public Health Minister. Gillian agreed to attend the Group meeting on 30th June, and was accompanied by Paul Hayes, NTA Chief Executive. An Executive Summary of the research briefing was circulated to Group members in advance of the meeting.

At the meeting the Group outlined its concerns to the Minister about the commissioning process and gave the Minister a copy of the briefing and research paper produced for the April Group meeting – to which the Minister agreed to formally respond. The Group also welcomed the additional funding over the last 10 years and the Minister's commitment to a 'more holistic approach' incorporating prison healthcare and housing. Following the meeting, the Group wrote to the Minister thanking her for her engagement.

The Group also suggested a more open forum between the NTA and treatment agencies to discuss concerns about the setting of top down targets, the central allocation of resources based upon performance against targets, and the development of a skilled workforce, all of which have direct bearing on effectiveness. It is also clear that there is a need to discuss access to residential treatment, which treatment agencies believe is a problem that has an impact on the whole treatment system.



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Section 9A of the Misuse of Drugs Act 1971

- **Background**

Section 9A of the Misuse of Drugs Act 1971 was intended to prevent the commercial sale of kits and equipment for the preparation and consumption of illicit drugs. Not only is it failing to achieve this aim, but it is also having unintended consequences by preventing health services providing interventions that have the potential to reduce blood borne virus transmission.

Since 1986, there have only been a handful of prosecutions and convictions for Section 9A offences, with many vendors claiming that their goods are ornaments or for 'novelty use only'. A number of high-profile cases have failed to result in prosecution due to the difficulties in proving that the items were knowingly sold for 'illegal' purposes, and most forces have since abandoned enforcement.

Although provisions were made for the supply of syringes, no such allowances were made for other items that are essential to the preparation of a drug for injection – including widely available items such as matches, filters and foil. Subsequently, several amendments have been made to Section 9A to incorporate newly developed interventions, each involving a lengthy process of campaigning and legislative change. However, there are still a number of commonly available items that could provide significant public health benefits, but whose supply is technically prohibited.

A number of products have been developed for needle exchanges – such as foil packs to discourage intravenous use – which have been shown to reduce harm, reduce injecting, improve client engagement (including the engagement of 'naïve treatment users'). Because these items are not explicitly mentioned in Section 9A, many needle exchanges are unable to purchase or supply them, or technically face prosecution if they do. Although there has never been a conviction of a needle exchange or pharmacy worker under Section 9A, this threat of prosecution is a barrier to the supply of these products. Even in areas where the police have provided letters to indicate that the provision of such items is not a policing priority, local fundholders have refused permission for budgets to be spent on "illegal" products.

The Group tabled amendments to the Policing and Crime Bill to amend Section 9A of the 1971 Misuse of Drugs Act. However, these were not debated at the Commons report stage of the Bill in May 2009.

New Clause 11 sought to delete Section 9A from the Act, while New Clause 12 amended the Act to allow *"any legitimate drug service may supply any items that it considers have the potential to reduce drug-related harms"*.

To highlight the issue more widely in the Commons, Mike Wood's EDM 1273 'Supply of Harm Reduction Products to Drug Users' has been supported by 32 MPs to date.

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As reported in the April Digest, the Group met with Home Office Minister Alan Campbell MP on 1st April 2009 to discuss our concerns on this issue. At that meeting he suggested that a recommendation from the Advisory Council on the Misuse of Drugs (ACMD) on the supply of foil was imminent. However, when the ACMD met it deferred the decision until its November meeting – highlighting the cumbersome and slow process that restricts the ability of treatment agencies to supply the necessary harm reduction products.

The Group wrote to the Minister again to press the case for changes to the existing system, based on either:

- An inversion of the current system so that there is a list of products which it is prohibited to supply; or
- To allow any legitimate drug service may supply any items that it considers have the potential to reduce drug-related harm

We are continuing to raise awareness of this issue within Parliament, and will seek meetings with peers about potential amendments to the Policing and Crime Bill at report stage in the House of Lords – which is likely to be in early November 2009.

Improving the Housing, Training and Employment prospects for Problematic Drug and Alcohol Users

In advance of the June meeting of the Group, a new briefing was prepared for MPs focusing on 'Improving the Housing, Training and Employment prospects for Problematic Drug and Alcohol Users' – building on the work of the Group in relation to the Welfare Reform Bill, to articulate a positive vision.

Treatment agencies are often frustrated that gains made through treatment are undermined by the inability of individuals to access secure accommodation and employment, education, training and volunteering opportunities. In 2004 the Audit Commission reported that "government guidance suggests that one in three drug users presenting for treatment is in housing need, and some local research has found even higher rates of need". It concluded that housing, social care and other services must provide users with support to maintain progress made during treatment and ultimately help them become employed, housed and more self-sufficient.

The European Monitoring Centre for Drugs and Drug Abuse (EMCDDA) has reported that there are over 400,000 problematic drug users in the UK. In 2006 the NTA said there were 7.1 million people drinking 'hazardously', with 1.1m dependent on alcohol.

The briefing was presented at the 30th June Group meeting prior to the Public Health Minister arriving. Upon arrival, the Minister said she was committed to a 'more holistic approach' working across Government departments to incorporate issues such as prison healthcare and housing.

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This is an area to which the Group will return in future meetings.

Other issues

The Group will continue to engage with the parliamentary process to further the aims. Other ideas for future campaigning issues include:

- alcohol and disorder (developing an alternative agenda to that set out in the Policing and Crime Bill – see above)
- looking at user involvement in service delivery (building on the work the Group is doing around commissioning); and
- looking at the role of Drug Courts, following the pilots into dedicated drug courts
- assessing the NOMS drug strategy



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Objectives of the Group

To inform and influence parliamentarians and the public on all issues relevant to the provision of drug and alcohol services to offenders, the law and its application and consequences:

- To promote best practice in the provision of drug and alcohol services, with the emphasis on quality rather than quantity;
- To promote strategies which would reduce dependency on drugs and alcohol and therefore crime and health budgets;
- To promote the influence of practitioners' views in the development of policy;
- To provide parliamentarians with briefings on all pertinent issues;
- To campaign to ensure that available resources for drug and alcohol resources meet need;
- The dissemination of information and research on good practice;
- To foster thinking and new ideas in the drug and alcohol fields.

About the Conference Consortium

The Conference Consortium was established in 2005 by a group of non-governmental organisations, trade unions, professional associations and national bodies. This unique collaboration, a private company operating as a social enterprise, is dedicated to organising conferences and other events, promoting the adoption of the most appropriate, relevant and effective policies and practice, in response to the problems presented by drug and alcohol use.

To this end it provides a forum for the dissemination of information on research and good practice and fosters thinking and new ideas.

The Consortium is entirely owned by its members who are each shareholders in the company. Operating as a social enterprise no dividends are paid to any of the shareholders, with any and all profits made being reinvested in the business. One outcome from this is that it is able to offer free and subsidised delegate places at all of its events to those who use drugs and service users of drug and alcohol services.

The Consortium has recently organised events in collaboration with other organisations such as the Home Office, the Probation Boards' Association, the International Harm Reduction Association, and DrugScope.

The Conference Consortium, and the new Group in Parliament, is also supported by the Police Federation.



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Parliamentary Interventions – Annex 1

Written Parliamentary Questions

- **Drug System Change Pilots**

Mike Wood: To ask the Secretary of State for the Home Department (1) what the budget is for each of the seven drug system change pilots for (a) 2009-10 and (b) 2010-11; (2) when he plans to publish details of the independent evaluation process for the seven drug system change pilots.

Alan Campbell: The Drug System Change Pilots programme is not a source of new money for service delivery. The aim of the programme is to improve outcomes for communities and individuals by encouraging partnerships to make better use of existing resources, align the efforts of all partners and key stakeholders, encourage innovation and share best practice, and to identify efficiencies that can come from the pooling of budgets, streamlined communication and information systems. Joint funding (£2 million from the Home Office and Department of Health) has been allocated to kick-start the pilots in 2009-10, and to help build capacity by funding the appointment of a project manager and administrative support in those pilot sites which require it. A tendering process for the independent evaluation of the programme is currently being undertaken, and it is hoped that this will be completed, and an independent contractor appointed, by September 2009. The intention is that, based on the reports from the contractor and the pilot sites, updates on progress from the Drug System Change Pilots will be made available on a quarterly basis.

- **Welfare Reform Bill / Employment prospects for Problematic Drug and Alcohol Users**

Mike Wood: To ask the Secretary of State for Work and Pensions how many individuals claiming (a) employment support allowance and (b) jobseeker's allowance who voluntarily disclosed the use of crack cocaine or heroin were referred to a drug treatment provider in each of the last two months for which figures are available.

Jim Knight: The information is not currently available broken down into benefit types. The available information is in the following table.

Total number of individuals who voluntarily disclosed the use of crack cocaine or heroin and who were referred to a drug treatment provider since 27 April 2009

| Month | Number of referrals made nationally |
|------------|-------------------------------------|
| April 2009 | 14 |
| May 2009 | 55 |



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Total number of individuals who voluntarily disclosed the use of crack cocaine or heroin and who were referred to a drug treatment provider since 27 April 2009

June 2009

85

Bob Spink: To ask the Secretary of State for Work and Pensions how many jobseekers did not remain in work or training for more than 13 weeks under the Progress2Work scheme since its inception.

Jim Knight: Between its inception in 2001 to 30 April 2009, progress2work has assisted 13,471 customers into employment and placed 18,832 onto a range of training courses. Of those customers who we know have found work, 8,243 did not remain in employment for longer than 13 weeks and of those customers who we know found training, 5,400 did not remain in it for more than 13 weeks.

Notes: "Figures for the number of customers leaving education courses is unobtainable, therefore the figure of 5,400 is for mainstream and specialist training only." Source:ORC International

Bob Spink: To ask the Secretary of State for Work and Pensions how many caseworkers in (a) England, (b) Essex and (c) Castle Point are offering support to jobseekers through the Progress2Work scheme.

Jim Knight: Information on the number of caseworkers in England offering support to jobseekers through the progress2work scheme is not collated centrally and would be available only at a disproportionate cost. This is because the size and volume of each progress2work contract varies substantially across each Jobcentre Plus District. However, we recommend that progress2work contractors employ one caseworker per 50 customers. Five caseworkers are offering support in Essex and one caseworker is offering support in Castle Point.

EDM 1273 Supply of Harm Reduction Products to Drug Users 32 signatures

That this House notes that section 9A of the Misuse of Drugs Act 1971 was intended to prevent the commercial sale of kits and equipment for the preparation and consumption of illicit drugs; further notes that there have only ever been a handful of prosecutions for the commercial sale of drug kits and paraphernalia since 1986 due to the ambiguous nature of section 9A, leading many police forces to abandon enforcement; further notes that on each of the two occasions that the Act has been amended since the insertion of section 9A in 1986 to incorporate newly-developed harm reduction interventions, each amendment has involved a lengthy process of campaigning and legislative change; is concerned that section 9A currently prevents legitimate harm reduction services from providing a number of otherwise innocuous products to their drug-using clients because these items are not explicitly permitted in the legislation; and therefore calls on the Government to consider either a

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general exemption for all harm reduction products supplied by drug treatment providers and healthcare professionals, or the repeal of section 9A.

Mike Wood

Abbott, Diane
Clapham, Michael
Cryer, Ann
Drew, David
Gerrard, Neil
Havard, Dai
Iddon, Brian
Morgan, Julie
Riordan, Linda
Turner, Desmond
Willott, Jenny

Bottomley, Peter
Cohen, Harry
Davies, Dai
Etherington, Bill
Hancock, Mike
Hemming, John
Jones, Lynne
Opik, Lembit
Sarwar, Mohammad
Vis, Rudi

Caton, Martin
Corbyn, Jeremy
Dobbin, Jim
Flynn, Paul
Harris, Evan
Hopkins, Kelvin
McDonnell, John
Rennie, Willie
Simpson, Alan
Wareing, Robert N

Of the 32 signatories, 23 are Labour, 6 are Liberal Democrats, 1 Conservative and 2 Independents.



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