

Police Reform and Social Responsibility Bill – Clause 153 – August 2011

Amendment to the Constitution of The Advisory Council on the Misuse of Drugs

What is the policy aim?

Clause 153 of the Police Reform and Social Responsibility Bill proposes to amend Schedule 1 of the Misuse of Drugs Act 1971 relating to the constitution of the Advisory Council on the Misuse of Drugs (ACMD). Schedule 1 provides that the Secretary of State must appoint to the ACMD at least one person with wide and recent experience in each of six specified scientific activities and persons with wide and recent experience of social problems connected with the misuse of drugs.

What are these six activities?

The six areas of scientific expertise which are currently set out in Schedule 1 to the Misuse of Drugs Act 1971 are the practices of medicine, dentistry, veterinary medicine, pharmacy, the pharmaceutical industry and chemistry. Statutory members have no greater status in the operation of the ACMD than other members, who include other experts from a range of fields including science, law enforcement, health and drug treatment, and social policy.

Why is this requirement being removed?

The proposed changes will enable the ACMD to better adapt its membership to the accelerating pace of change impacting on the drugs landscape, including scientific developments, such as the emerging threat from new psychoactive substances. They will also place all its members on an equal footing, in line with similar changes made in 2005 to the Medicines Act 1968 and the membership requirements of its advisory body.

Is there a need for scientists in the membership of the ACMD?

Yes. The Government is not intending to remove *any* members from the ACMD as a function of this provision, more particularly scientists. The draft Joint Working Protocol between the ACMD and Home Secretary reflects all 6 areas of expertise that both the Home Secretary and the ACMD consider at this time as likely relevant areas of expertise to draw its membership from.

The Government is committed to evidence-based policy-making and believes that high quality scientific advice in the complex field of drugs is of the utmost importance. For four decades the ACMD has provided successive governments with independent and expert advice and has helped to shape the UK's drugs policy.

Who was consulted on this proposal? What were their views?

The ACMD has been consulted and is supportive of the proposal. It acknowledges that it is questionable whether the statutory positions in the 1971 Act correlate with how the Council now operates. It considers that the proposed change is particularly important with the introduction of the temporary class drug orders and the need to provide advice within short time frames.

The Chief Scientific Adviser to the Home Office, Professor Silverman, consulted the wider science community, which has garnered broad support. The Science and Technology Committees of both the House of Lords and House of Commons were also consulted. The flexibility to bring different expertise to the ACMD as the drug landscape changes was welcomed. A number of the responses supported the suggestion by the Home Office that a non statutory schedule of specified activities should be published. This is now a substantive part of the draft Joint Working Protocol between the Home Secretary and the ACMD (see below).

Those consulted were the Academy of Medical Sciences, the British Academy, the British Society of Criminology, the Royal Pharmaceutical Society, the British Pharmacological Society, the Royal Society and the Royal Society of Medicine. Sir John Beddington, Government Chief Scientific Advisor (Government Office for Science), was also supportive.

What is this working protocol? When will it be available?

A copy of the draft Working Protocol is available in House Libraries.

The Joint Working Protocol is intended to refresh and expand on the joint working statement that the ACMD agreed with the previous administration. An advanced draft of the new working protocol has been developed with the ACMD as a joint exercise.

The protocol sets out how the ACMD and Government will engage with each other, on such matters as the provision and receipt of advice; it articulates the expertise requirements of the ACMD; and provides a framework to underpin the proposed temporary class drug orders, under which the Home Secretary is required to consult the ACMD. Once the Police Reform and Social Responsibility Bill receives Royal Assent, the working protocol will be finalised and the Government will put the final agreed version on a public and firm footing by placing copies in House Libraries.

In respect of expertise and membership, the Working Protocol makes very clear that:

- the ACMD will inform the Home Office of what expertise it requires;
- the Home Office will seek the views of the ACMD to inform any recruitment campaign;
- the Chief Scientific Adviser to the Home Office will advise the Home Secretary on the balance of membership requirements appropriate to available resource and the need for effective functioning; and
- the Chair of ACMD will sit in interview panels.

This is a comprehensive process that will secure the relevant expertise that the ACMD will require in the future.

What areas of scientific expertise does the Working Protocol provide for?

The relevant areas of expertise are likely to include:

- Chemistry:** such as, synthetic chemistry, natural product chemistry, toxicology, and forensic analysis of psychoactive substances.
- Education and information:** such as, the provision of education, advice and the communication of drug harms, in particular to young people.
- Enforcement:** such as, the criminal aspects of drug misuse, the illegal drugs trade, policing and borders issues including serious organised crime and anti-social behaviour.
- Law:** such as, criminal law and drug law.
- Medicine and related disciplines:** such as primary care, acute medicine, clinical toxicology, dentistry, veterinary medicine, and public health.
- Pharmacology:** such as, aspects relating to psychoactive drugs, the underlying causes of addiction, and the pharmaceutical industry.
- Pharmacy and those areas of expertise that involve the legitimate use and handling of controlled drugs for patient care.**
- Social sciences:** such as, aspects relevant to understanding of current patterns of psychoactive drug misuse, criminology, psychology, epidemiology, and social statistics.
- Treatment of addiction and other drug related issues:** such as in secure settings, treatment for young people, public, voluntary and private sectors.

It is anticipated that the ACMD's membership will be drawn predominantly from those with expertise as listed above. The list of likely relevant expertise will be kept under periodic review by the ACMD and the Home Office acting in concert.