

# ADVISORY COUNCIL ON MISUSE OF DRUGS

(85<sup>th</sup> Meeting)

Wednesday 7<sup>th</sup> October 2020 2.30pm MS Teams

## PART A

In attendance –

[REDACTED] Chief Probation Officer, and Chairperson  
[REDACTED], Consultant Psychiatrist HSS  
[REDACTED] – Medical Officer of Health  
[REDACTED], Director Alcohol and Drug Service  
[REDACTED], Legal Adviser  
[REDACTED], Chief Pharmacist  
[REDACTED], Director Customs and Immigration  
[REDACTED] – Official Analyst  
[REDACTED] - States of Jersey Police  
[REDACTED], Clerk

Note: The minutes of this meeting comprise of Part A and Part B

- Minutes.                    **A1.** The minutes of the meeting held on 11<sup>th</sup> June 2020 were accepted.
- Apologies.                **A2.** Apologies were received from the following, [REDACTED], [REDACTED], [REDACTED], [REDACTED].
- Matters Arising.        **A3.** [REDACTED] explained that in reply to [REDACTED]'s AOB item she had emailed the legal standpoint to the Chairman regarding the terms of reference which, in her view, remained fit for purpose. [REDACTED] agreed to circulate to all members.
- A4. Update on Alcohol and Drug Strategy**
- [REDACTED] explained that [REDACTED] was in discussion with SPPP to find someone to lead the strategy, and also to decide on which areas the strategy should cover. He was also going to consult more widely regarding the membership of the strategy group. The Council agreed that this group would report to the ACMD for comment and guidance, and act as a sub-group of the ACMD.
- B1. Importation of medicinal cannabis**
- [REDACTED] [REDACTED] expressed concerns regarding the importation of cannabis prescribed by UK agencies; there was some intelligence that this was being abused. There were 390 imports this year and the problem was compounded by the UK media stating that Jersey was a popular place to import medicinal cannabis.
- [REDACTED] stated that there were three main clinics in the UK prescribing to Jersey residents, and they were all subject to inspection by the CQC. On expressing our concerns to the UK clinics [REDACTED] stated they were very willing to assist, and suggested the way forward would be to allow local prescribers. Since the conversation [REDACTED] stated that there was a slight reduction in UK prescriptions. He also noted that there was a reluctance for local clinics to prescribe.

noted that this was an issue for his own team, and they were looking to set up a prescribing clinic to fill this void. They were in the process of setting up, but differential in pricing between the UK and Jersey had proved problematic. added that there was another clinic in Jersey looking to prescribe, and also a UK clinic looking to liaise with a Jersey clinic to do the same.

expressed concerns over policing the use of medicinal cannabis, but reassured the Council that anyone using medicinal cannabis should be able to produce an import licence and that any form of smoking remained illegal both here and in the UK.

The Council was unaware of any legislative changes required for local prescribing to take place.

#### **A5. Impact of Covid-19 restrictions – lessons going forward**

stated that he brought this agenda item forward following concerns expressed by a number of his clients who were worried about the possibility of a future lockdown and a consequential interruption of their drug supply. In the first lockdown a lack of cannabis meant that some users turned to alcohol and engaged in more reckless drug use.

agreed and evidenced this suggestion by the fact that his department had seen a doubling in referrals of alcohol clients during lockdown, and numbers had stabilised since the borders had reopened. He added that border opening had also seen an increase in benzodiazepine use along with high strength MDMA; cocaine and heroin had also made a resurgence. However, the main drug of use has been buprenorphine (subutex), and this was down to diversion by some of his clients and the ease of day-trippers obtaining supplies from France. There were also importations from Portugal. He noted that in a recent UK report there was a suggestion that the early closing of pubs had led to a change in drug use where people took larger amounts over a shorter period of time. He also noted that people were getting braver in terms of what they were willing to import. High quality/high strength drugs were being offered by dealers and the potential for overdose was high. He suggested that we need to start now with a public health message in order to get ahead of the game should further restrictions occur.

asked if there was any change to the demographics regarding those presenting with alcohol issues. confirmed that the demographic was indeed wider than usual, and included many of those working from home and were becoming dependent without realising it. He again suggested that we take advantage of alcohol awareness week to highlight the problem.

stated that this provided evidence of the theoretical damage that was predicted through Covid-19 was a sobering thought which needed to be highlighted.

#### **AOB**

reaffirmed that the alcohol strategy group would feedback to the ACMD for consideration.

**Next meeting:** thanked everyone, especially for stepping in for , and suggested a meeting in December a date to be confirmed.