

MISUSE OF DRUGS ADVISORY COUNCIL

(76th Meeting)

Friday 18th November 2016

PART A

In attendance –

[CHAIR] ██████████ Chief Probation Officer (Acting chairperson)
[A25] ██████████ Customs and Immigration.
[A25] ██████████ Consultant Psychiatrist, Health and Social Services
[A25] ██████████ States of Jersey Police.
[A25] ██████████ Director- A&DS.
[A25] ██████████ Official Analyst
[A25] ██████████ Medical Officer of Health
[A25] ██████████ Pharmacist
[A25] ██████████ Clerk

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

- Minutes. **A1.** The minutes of the meeting held on 27th May 2016 were accepted.
- Apologies. **A2.** Apologies were received from the following, [A25] ██████████
██
██
- Any other business **A3.** [A25] stated that, although the UK had not yet enacted generic synthetic cannabinoid legislation, they had now made a fourth amendment which Jersey would need to consider.
- Date of next meeting **A4.** The next meeting will be on Thursday 19th January at 2.30pm at Probation.

MISUSE OF DRUGS ADVISORY COUNCIL

(76th Meeting)

PART B

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

B1 .Matters arising from Part B:

The Council noted the following matters arising from its meeting held on 27th May 2016

B2. Medicinal Cannabis.

[A25] informed the Council that the Chief Minister had asked the Health Minister for advice on medicinal cannabis. [A25] in his absence, had provided the Council with his own views; research from Newcastle University (the Barnes Report); and an All-Party Parliamentary Group for Drug Policy Reform Inquiry Report. [A25] stated that the inquiry report was disingenuous in its approach, and cherry picked items from the Barnes report to promote the use smoking cannabis for medicinal purposes. The Council agreed that while there was a genuine requirement for developing the scope of cannabis use as a medicine, the unregulated use of cannabis could not be a recommendation which it would make. Specifically, it noted that the smoking of cannabis was not recommended under the Barnes Report.

The Council agreed to write to the Minister giving this preliminary advice, and would discuss the matter more fully at the next meeting when [A25] good give his own views more fully.

MISUSE OF DRUGS ADVISORY COUNCIL

(77th Meeting)

PART B

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

B1 .Matters arising from Part B:

B2. Medicinal Cannabis.

[CHAIR] stated that this meeting was primarily for the consideration of this issue, and the papers made available at the previous meeting:

- “Cannabis: The Evidence for Medical Use” by Professor Michael P Barnes MD FRCP
- “Access to medicinal cannabis: meeting patient needs” All-Party Parliamentary Group for Drug Policy Reform, Inquiry Report.

[A25] stated that the research appears to show that there is a wide range of conditions for which cannabis may be used, but these must be regulated medicinal products, and that a recommendation of rescheduling should be made in order to enable appropriate use and further research in such medicinal products. She added that the Barnes report refers to other medicinal products which should be researched. She added that while benefits of medicinal cannabis are being considered, it must also be remembered that it can be harmful.

[A25] stated that certain medicinal cannabis products are already available on private prescription only. He agreed that the Barnes report gave sound advice and suggested that cannabis should be moved to schedule 2 in the Misuse of Drugs (Jersey) Law 1978, but in order to do that the Council must be of the opinion that it does indeed have a medicinal use.

[A25] asked for a definition of medicinal cannabis because he felt there was confusion in the public’s perception as cannabis would still be controlled as a class B drug. [CHAIR] stated that the Council needed to be clear, and define the terms at the beginning of the written advice.

[A25] stated that two questions needed to be answered; was medicinal cannabis beneficial, and if it was, what controls would you wish to put in place? However, he suggested that another approach might be to leave cannabis in schedule 1, and identify specific medicinal products to be placed in schedule 4 e.g. Bedrocan. He added that it was not within the Council’s remit to give advice on whether it should go on the prescribing list, as this would require cost effective analysis which was not in the remit of the Council.

[A25] reminded the Council that while medicinal cannabis can be helpful, it can also be harmful, and therefore should only be available on prescription.

[A25] noted that the UK’s Medicines and Healthcare products Regulatory Agency (MHRA), was of the opinion that products containing cannabidiol (CBD) used for medical purposes were medicines.

[CHAIR] asked if [A25] and [A25] would draft the Minister's letter of advice; [A25] to introduce the Barnes report, and [A25] to formulate the report including definitions. The Council would later consider whether the Home Affairs Minister should be included in a joint briefing.

MISUSE OF DRUGS ADVISORY COUNCIL

(78th Meeting)

Thursday 21st March 2017

PART A

In attendance –

[CHAIR] Chief Probation Officer, and Chairperson
[A25], Customs and Immigration.
[A25], States of Jersey Police.
[A25] Official Analyst
[A25], Primary Medical Care Director
[A25] Medical Officer of Health
[A25], Solicitor General
[A25] Chief Pharmacist
[A25], Consultant Psychiatrist HSS
[A25], States Veterinarian
[A25], Pharmacist
[A25] Clerk

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

Minutes.

A1. The minutes of the meeting held on 19th January 2017 were accepted, with the following changes:

To B1 (e) [A25]'s title inserted "Primary Medical Care Director.", and

To B2 Medicinal Cannabis replacing the second paragraph with "[A25] stated that the research may show that there is a wide range of conditions for which cannabis may be used, but these must be regulated medicinal products, and that a recommendation of rescheduling should be made in order to enable appropriate use and further research into such medicinal products. While the benefits of medicinal cannabis are being considered, it must also be remembered that it can be harmful."

Apologies.

A2. Apologies were received from the following, [A25]

Matters Arising

A3a Part A/B changes: [CHAIR] suggested that everything should be in part A unless specified, due to open policy – presumption of open minutes. Reason for inclusion into part B would include commercial sensitivity and intelligence information; slightly controversial issues would not be a good reason. See below for [A25] comments.

[A25] arrives

[A25] arrives and, in relation to item A3a, added that there must be a proper basis for exemption under the FOI, but would be happy to look into it further.

B1 (a) (now A3b) Misuse of Drugs (Notification and Supply to Addicts) (Northern Ireland) Regulations 1973 – Addicts Index – still to be completed.

B1 (b) (now A3c) Sub-group report on the Psychoactive Substances Bill.

[A25], referring to the recent report on drug prevalence in Ireland, was of the opinion that it did not help as there was very little in the report on NPS.

B1 (c) (now A3d) Use and monitoring of controlled drugs in the Community.

The prescribing figures received from [A25] showed that benzodiazepines, pregabalin and zolpidem were higher in Jersey than the UK. [A25] suggested that home detox prescription of chlordiazepoxide might be responsible for higher figures – were GPs doing detox by themselves?

[A25] noted that the number of over prescribing GPs had remained at around 20, the same as the last time the Council reviewed the figures. She also noted that each GP has an annual appraisal and the third year figures would soon be available which might show a trend in prescribing.

[A25] said it was important not to merely look at the figures without knowing what the case mix was of a particular GP which could potentially skew the figures.

[A25] added that the Council should now consider the prescription of medicinal cannabis, although in talking to UK counterpart, they are not minded to do anything at present. [A25] suggested it might be worth setting out options by considering other jurisdictions, and consulting with ACMD, BIC, but noted that they were not determinative.

[A25] stated that she receives information regarding the selling of prescribed drugs which then goes to [A25]. The Council asked that [A25] provide trends for the last three years.

B1 (d) Drugs defence criteria warranting Centenier's warning. – Part B

B1 (e) 3-fluorophenmetrazine

To be controlled, and item removed from agenda.

B2. Medicinal Cannabis. - Part B

B3. Membership

[CHAIR] informed the Council that he had received a reply from the AG which officially appointed him as Chairman. However, with regard to the membership, the AG stated that he would advise after consultation with the Minister. [CHAIR] informed the Council that [A25] had informed him that it was always the intention that [A25] would replace [A25], and that he would provide strategic input, but [CHAIR] was unsure whether this meant that [A25] would necessarily be a member of the Council. [A25] stated that if she were to replace [A25], she would require more time and training. [CHAIR] added that the Council required someone with the appropriate knowledge to attend the ACMD.

Any other business A4. CHAIR noted that A25 and A25 had not attended the last few meetings, and they should be contacted to establish the reason.

A25 enquired about the role of the accountable officer, and CHAIR stated that the Council had come up with a proposal to establish a position; A25 to send report.

Date of next meeting A5. The next two meetings for 2017 to be arranged at a later date.

MISUSE OF DRUGS ADVISORY COUNCIL

(78th Meeting)

PART B

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

B1 .Matters arising from Part B:

B2. Medicinal Cannabis.

[CHAIR] stated that there was a meeting arranged (11/4/17) to advise the Minister on issue in accordance with the written advice already given. [A25] added that the Law Officers would also have to advise the Minister separately, as they did not want to influence the MDAC advice. [A25] reminded the Council that “medicinal purposes” is defined in the Medicines Law (Jersey).

MISUSE OF DRUGS ADVISORY COUNCIL

(79th Meeting)

Tuesday 4th July 2017 held at Probation

PART A

In attendance –

[CHAIR] [REDACTED] Chief Probation Officer, and Chairperson
[A25] [REDACTED], States of Jersey Police.
[A25] [REDACTED] Official Analyst
[A25] [REDACTED], Consultant Psychiatrist HSS
[A25] [REDACTED], States Veterinarian
[A25] [REDACTED], Pharmacist
[A25] [REDACTED], HSS Primary Care Manager
[A25] [REDACTED], Crown Advocate
[A25] [REDACTED] Clerk

Note: The minutes of this meeting comprise only of Part A

- Minutes. **A1.** The minutes of the meeting held on 21st March 2017 were accepted, with the following change: [A25] [REDACTED].
- Apologies. **A2.** Apologies were received from the following, [A25] [REDACTED] [A25] [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] stated that [A25] [REDACTED] would now be replaced by [A25] [REDACTED].
- Matters Arising. **A3c Sub-group report on the Psychoactive Substances Bill.**
[A25] [REDACTED] stated that he attended a UK conference designed to update one year on from the enactment of the PSA, and would provide a report for the next meeting. [A25] [REDACTED] added that the Council had been right to adopt a wait and see approach as most of the envisaged problems had indeed arisen.
- A3d Use and monitoring of controlled drugs in the Community.**
[A25] [REDACTED] informed the Council that, since the last meeting, [A25] [REDACTED] had been in discussion with [A25] [REDACTED] to look into preparing a quarterly report on prescribing figures with a short narrative on the trends. The format had yet to be agreed, but something would be available for the next meeting. [A25] [REDACTED] suggested that any specific drugs of request should be directed through [A25] [REDACTED]. [A25] [REDACTED] suggested that pregabalin and gabapentin were important to consider for the next meeting.

B2. Medicinal Cannabis. - Part B

CHAIR stated that he had met with the Minister and the advice was well received and acted upon.

A4 Membership

CHAIR to write to the Bailiff with suggested updates, and also to chase up the AG regarding the previous letter.

Any other business **A5.** **[A25]** asked if the Council if the use of antimicrobials might be an issue dealt with by this group. The Council felt that unless the drugs were in the Misuse of Drugs Law or could potentially be, then it was unlikely.

Date of next meeting **A6.** The next is on 3rd October 2017 at Probation