

**REPLY BY THE PRESIDENT OF
THE COMMITTEE FOR HOME AFFAIRS
TO QUESTIONS ASKED PURSUANT TO RULE 14 OF THE
RULES OF PROCEDURE BY DEPUTY M LEADBEATER**

Question

The current Committee for Home Affairs has spent a considerable amount of time this term being concerned about the diversion of medicinal cannabis, a non-fatal medication which is available in the Bailiwick on private prescription. The diversion of ALL drugs is a concern for the current Committee for Health & Social Care, in particular, the diversion of prescription drugs that are proving to cause the most harm to society and must be the highest priority for policy change.

Public Health tell us that *'Between 2001 and 2022 there were 73 mentions of substances contributing to drug poisoning deaths. Where more than one drug was mentioned on the death certificate the death would be counted in more than one category since it is not possible to say which drug was primarily responsible for causing death. In 34% of cases an opioid analgesic was specifically mentioned and in 19% alcohol was mentioned. In 15% the category was 'unspecified prescribed drugs.' In all the remaining categories there were less than five cases. Specifically, there was not any death attributed directly to cannabis'.*

So, the statistics over a 20-year period tell us that the diversion of prescription opioids has been responsible for approximately 25 deaths by overdose, and over the same period, other 'unspecified' prescription drugs have caused a further 11 deaths.

Data from the Community Drug & Alcohol Team shows that its service users suffer addiction mainly to alcohol or opioids, or both. The Community Drug & Alcohol Team (CDAT) is a secondary care provider of drug and alcohol treatment services in the Bailiwick.

Data from the 2023 Combined Substance Use Strategy Annual Report

Number of referrals to CDAT, number accepted for assessment and number entered treatment 2023 (The Combined Substance Use Strategy Report for 2024 will be published shortly)

Referrals 240

Accepted for Assessment 125

Entered Treatment 99

Primary Substance Issue at Assessment

Opiates 30

Alcohol 86

Cannabis + Opiates 0

Opiate + non-opiate 0

Opiate + Alcohol <5

Clearly, the main substance misuse issues experienced within our community are caused by alcohol and opiates. Professionals within government and outside agree that the opioids in circulation within our community are predominately diverted prescription drugs – the service users under opioid addiction therapy have become addicted to diverted prescription opioids or diverted opioid replacement drugs such buprenorphine.

1. Considering that the diversion of prescription drugs is a criminal offence, and has been for decades, and is also the responsibility of the Committee for Home Affairs to police, what has the Committee and Bailiwick Law Enforcement done to investigate and apprehend offenders, seize these drugs and reduce the amount of prescription medication freely available on the black market in the Bailiwick, during the course of this political term?
2. How many people have been charged and prosecuted specifically for the diversion (not possession) of prescription drugs during the current political term?
3. Available evidence suggests that the current Committee for Home Affairs has spent a disproportionate amount of time being concerned about any potential diversion of medicinal cannabis, which is non-fatal, whilst at the same time, paying little or no attention to the much more important, current and historic diversion issue, that has caused so many unfortunate premature deaths in Guernsey, therefore allowing the continued proliferation of addictive, fatal opioids throughout our community. Does the Committee agree with this statement?
4. The Committee for Home Affairs has consistently probed the Committee for Health & Social Care about the current pathways in place for patients to access medicinal cannabis, raising concerns about the governance of these pathways, and raising concerns about the Exemptions in place in respect of the sale CBD products in the Bailiwick. The current HSC Committee has identified some changes it would like to implement to the existing medicinal cannabis pathway in order to make it safer, collect data and to provide better clinical oversight, and, HSC has also identified a glaring anomaly in the CBD exemptions whereby it is perfectly legal to sell narcotics (exempt CBD products containing THC, a psychoactive cannabinoid) to children, which it intends to address. So considering the above, does the Committee for Home Affairs believe that the previous HSC Committee, of which Deputy Prow was a member, and that introduced both the medicinal cannabis changes and the CBD exemptions, inadvertently created the opportunity for abuse by allowing the roll-out of a medicinal cannabis regime with insufficient clinical oversight, and, by not introducing age restrictions on the CBD exemptions, permitting the free supply of narcotics to children?

Answer to Question 1

Illegal drug activity causes harm to the community and Bailiwick Law Enforcement's efforts to tackle this issue is reported in the Service's annual reports published online at [Annual Reports - Guernsey Police](#) .

Responsibility for the Combined Drug and Alcohol Strategy was transferred from the Committee *for* Home Affairs (the Committee) to the Committee *for* Health & Social Care in 2017, this recognised that the use of drugs and alcohol were health issues and there was a move to treatment and rehabilitation as opposed to criminalising those who misused substances.

Drug misuse does not only have the potential to impact negatively on an individual's physical and mental wellbeing but can also impact on those around them and the community. Drug misuse may be a factor in violent and acquisitive crime, domestic abuse and may result in adverse childhood experiences. Prescription diversion offences are rarely

a primary charge but are discovered as part of a wider investigation or a charge that follows telephone examinations which have been undertaken in relation to other offences.

Home Affairs Services are committed to tackling illegal drug activity, however, the societal harms caused by drug misuse in all its forms is a matter that needs to be tackled across committees and the Committee has been pleased to be able to engage with the Committee *for* Health & Social Care on this subject during this term. The Committee would agree with the view held by the Committee *for* Health & Social Care that this is a social policy issue that must be prioritised next term.

Answer to Question 2

During this term Law Enforcement have made approximately 700 seizures of prescription only medicines – which span across controlled Drug Classes A-C. An investigation takes place as a result of every seizure to establish the reason the individual is either in possession of, or has imported the substance.

These figures are not limited to seizures as a result of diversion fraud. A manual review of the seizures which have occurred this term has identified 71 cases where the diversion of prescription medications was identified in an arrest. Ten individuals have been successfully prosecuted for the offence during this period.

Medicinal cannabis does not feature in the statistics relating to prescription fraud as it is not possible to establish whether the herbal cannabis that Bailiwick Law Enforcement come across has been sourced via diverted prescription medication or other illegal means.

Answer to Question 3

The Committee is of the view that it has not spent a disproportionate amount of time considering the diversion of medical cannabis. Rather it has worked in collaboration with the Committee *for* Health & Social Care to consider the issues raised by operational professionals working within both committees. The misuse of any drug can have fatal consequences and causes harm within our community.

Following consideration of a jointly commissioned report by the Misuse of Drugs Advisory Group, the purpose of which was to produce a “*high-level view of options available to reduce the diversion of Controlled Drugs*” the Committee took the opportunity to write to the Committee *for* Health & Social Care in support of the work done. As a member of that committee the questioner will be aware that the correspondence expressed its gratitude to the work undertaken by the Chief Pharmacist and noted:

“It is evident that the collaboration of professional subject matter experts has resulted in a balanced Report and recommendations, providing a comprehensive options appraisal, which clearly articulates the risks and benefits, resource implication, data protection and medical considerations of potential policy changes.

The Committee is unanimous in its support of the recommendations which it considers, if resourced, will assist in strengthening a collective response to tackling substance misuse and the illegal practice of diversion of prescription medication, a matter of concern for both of our committees and one of the main objectives behind the preparation of the Report.

Concern has specifically been expressed about how the move to prescribing unlicensed medical cannabis via private clinics has impacted on the community, these concerns are not limited to diversion fraud. The Committee would like to clarify that it is supportive of the prescribing of medicinal cannabis providing, as with all other prescription medications, there is the necessary governance, regulations and safeguards in place around that prescribing."

Answer to Question 4

The Committee is of the view that the decision of the previous Assembly in relation to the private prescribing of medical cannabis should be reviewed and it is within the gift of the Committee for Health & Social Care to pursue this policy change.

The Committee was fully supportive of the proposals in the report prepared by the Misuse of Drugs Advisory Group. This work acknowledged that an appropriate governance framework to support the prescribing of medicinal cannabis was currently absent and made recommendations, to which the questioner has made reference, which would introduce the necessary rigor around private prescribing practices and ensure that there is data and evidence to inform future policy development. The Committee has already expressed its full support to the Committee for Health & Social Care to progressing this work.