

ACMD

Advisory Council on the Misuse of Drugs

Annual Report

(January 2017 to December 2019 consolidated)

Any enquiries about this Annual Report or any aspect of the work of the Advisory Council on the Misuse of Drugs should be addressed to:

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Foreword by Professor Owen Bowden-Jones, Chair of the Advisory Council on the Misuse of Drugs (ACMD)


This consolidated annual report from the Advisory Council on the Misuse of Drugs (ACMD) provides an overview of our work from January 2017 to December 2019. During this period, the ACMD has continued to demonstrate its drive and commitment to providing government with evidence-based advice on a wider range of areas related to drug use in the UK.

As part of this commitment, the ACMD has reviewed how it can consistently and transparently collect, synthesise and draw conclusions from a broad range of evidence, leading to the development of health and social harms matrices. We have now published a [Standard Operating Procedure](#) summarising the Council's approach to both understanding evidence and making recommendations.

During the reporting period, the ACMD has provided high-quality advice on a range of high-profile issues. These include: the scheduling of cannabis-based products for medicinal use (CBPMs) under the Misuse of Drugs Regulations 2001; the ageing cohort of drug-users in the UK; Custody-community transitions, and; drug-related harms in homeless populations.

In addition to the expertise of Council members, evidence gathering events and the co-option of additional expertise were regularly utilised. The ACMD extends its gratitude to all past Council members and co-opted members who have contributed to the work of the ACMD, as well as to those who have submitted evidence.

Finally, I would like to thank ACMD Council members for their exceptional expertise, enthusiasm and commitment.



Professor Owen Bowden-Jones

(Chair of the ACMD)

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1. Introduction

The Advisory Council on the Misuse of Drugs (ACMD) is an advisory non-departmental public body (NDPB) sponsored by the Home Office, established under the Misuse of Drugs Act 1971.

It is the statutory duty of the ACMD under the Misuse of Drugs Act 1971 to keep the situation in the United Kingdom with respect to drugs which are being or appear to be likely to be misused and of which the misuse is having or appears to them capable of having harmful effects sufficient to constitute a social problem. The ACMD is also a statutory consultee under the Psychoactive Substances Act 2016.

The ACMD's full Terms of Reference can be found in Annex A.

1.1. Annual Report

The publication of this annual report is in accordance with the requirements for NDPB scientific advisory committees (such as the ACMD) as per the [Code of Practice for Scientific Advisory Committees 2011](#).

This report is a consolidation of the annual reports outlining the ACMD's work and advice given in the calendar years 2017 through to 2019. An appendix to government responses to ACMD publications and implementation of recommendations will be published in 2022.

1.2. Support to the ACMD

During this reporting period, secretariat support to the ACMD, its standing committees and working groups was provided by the Home Office, with support from Public Health England (PHE) for the Recovery Committee. The ACMD's secretariat is independent from the Government officials responsible for drugs policy.

The ACMD was also supported by an independent Press Officer provided by the Home Office.

1.3. Key sources of information for the ACMD

1.3.1. Code of Practice for the ACMD

The ACMD's governance standards are defined within the Council's [Code of Practice](#). This document covers the role and remit of the ACMD and sets out the code of conduct for ACMD members, the ACMD Chair and the ACMD Secretariat.

1.3.2. Working Protocol between the Home Secretary and the ACMD

Within this reporting period, the ACMD interacted with the Home Office and Home Office Ministers in accordance with the [Working Protocol between the Home Secretary and the ACMD](#).

This protocol sets out the principles of engagement between the ACMD and Government, supporting the respective roles and responsibilities of both parties. The protocol also supports the ACMD in discharging its duty under the Misuse of Drugs Act 1971 (the “1971 Act”) both to provide advice on matters referred to it by Ministers, and also to consider drug misuse issues of its own volition.

1.3.3. ACMD webpage

Past publications and recent reports can be found on the ACMD’s dedicated [webpage](#). Other key information relevant to the ACMD can also be found on this webpage including current ACMD membership, commissioning letters and the ACMD’s programme of work, and the ACMD’s terms of reference. A register of interests for ACMD members is also published on the ACMD’s website.

1.3.4. ACMD Standard Operating Procedure for using evidence in ACMD reports

During this reporting period, the ACMD developed a [Standard Operating Procedure](#) as a central governance document to allow the Council to follow a consistent mechanism to prepare evidence-based advice. This document describes the process by which the ACMD collects, analyses and presents different types of evidence in a consistent and transparent manner to lead to the formulation of recommendations.

1.3.5. Commissioning letter to the ACMD; work programme 2017 to 2019

The ACMD prioritises its programme of work in line with Government priorities, legislative timeframes and in response to emerging issues or substances of misuse.

The Government issued a commissioning letter to the ACMD in 2017 to inform a three-year rolling work programme. The Government also commissions the ACMD for advice on an ad hoc basis. The ACMD strikes a balance between the matters the Government requests advice on, and those matters that the Council chooses to undertake on its own volition.

The below table shows a breakdown of how the ACMD advice published in this reporting period had been commissioned.

Table 1: List of ACMD commissions and how they were commissioned

ACMD advice in response to a Government commission	Self-commissioned ACMD advice
Prescribing of controlled drugs by therapeutic radiographers	Commissioning impact on drug treatment
Legitimate use of controlled drugs: research and healthcare	Further advice on Methylphenidate-related NPS
Vulnerabilities and substance use	Methiopropamine: a review of the evidence of use and harm
Amending the Misuse of Drugs (Safe Custody) Regulations 1973	Review of Psychoactive Substances Act 2016: ACMD contribution
2,4-Dinitrophenol (DNP)	Custody-community transitions
Independent prescribing by paramedics	Ageing cohorts of drug users
Drug-related harms in homeless populations	
Future use and purpose of Temporary Class Drug Orders	
Scheduling of cannabis-derived medicinal products	
Further advice on scheduling cannabis-derived medicinal products (CDMPs)	
Impact assessment framework: rescheduling of cannabis-based products for medicinal use (CBPMs)	

2. Summary of ACMD advice (2017-2019)

2.1. Advice led by the ACMD's Recovery Committee

2.1.1. Commissioning impact on drug treatment (publication date: 06/09/2017)

In September 2017, the ACMD published its report about the extent to which commissioning structures, the financial environment and wider changes to health and social welfare impact on drug misuse treatment and recovery. The ACMD considered that drug and alcohol treatment was facing a disproportionate decrease in resources, which would have an adverse effect on these services. In addition, the ACMD considered that re-procurement of services caused an unnecessary 'churn' and disruption, resulting in poorer outcomes. The report emphasised that protecting investment and quality was necessary to maintain sufficient coverage and quality of services.

The ACMD's advice is available [here](#).

2.1.2. Vulnerabilities and substance use (publication date: 04/12/2018)

The 2017 Drug Strategy set out the government commitment to understanding more about the factors that put vulnerable populations at greater risk of developing drug misuse problems.

The then Home Secretary's 2017 commissioning letter to the ACMD sought advice on "what are the risks and factors which make people susceptible to substances misuse problems and harms?" The ACMD published its briefing on vulnerability and drug use in December 2018. The ACMD's advice is available [here](#).

2.1.3. Drug-related harms in homeless populations (publication date: 19/06/2019)

The then Home Secretary's 2017 commissioning letter to ACMD sought advice on the factors that make people who experience homelessness susceptible to drug-related use harms and how these harms could be reduced. The resulting ACMD report followed on from the 2018 ACMD report 'Vulnerabilities and substance use', which explored high priority groups most at risk from substance use and the related harms.

The report found that there was increased risk of problematic drug use, including a higher rate of drug-related deaths, infections among people who inject drugs, and multiple morbidities associated with people who experience homelessness. The ACMD made a number of recommendations to Government, including the enabling of local services to adopt a tailored approach to tackle the specific needs of homeless drug users in their area. The ACMD's advice is available [here](#).

2.2. Advice led by the ACMD's Technical Committee

2.2.1 Prescribing of controlled drugs by therapeutic radiographers (publication date: 19/01/2017)

The ACMD provided advice relating to the Department of Health and Social Care's (DHSC) proposals to permit therapeutic radiographers to prescribe from a restricted list of controlled substances. Having provided initial comments in 2016, the ACMD noted that DHSC had adequately addressed these comments in their revised proposal but still had some concerns, notably:

- The duration of therapeutic radiography treatment was 6 weeks, which in some instances, was long enough for drug dependency to develop.
- Sufficient training should be provided to therapeutic radiographers about how to treat the possible side effects, not just identifying them.
- Training should also include awareness about the risk of dependency.

The ACMD recommended that, subject to assurances of the above, the Misuse of Drugs Regulations 2001 should be amended to allow therapeutic radiographers to prescribe a total of six controlled drugs (excluding transdermal fentanyl).

In March 2018, the ACMD finalised its advice following further assurances from NHS-England on the comprehensiveness of the training required to be considered competent prescribers.

The ACMD's advice is available [here](#).

2.2.2. Legitimate use of controlled drugs: research and healthcare (publication date: 22/12/2017)

The ACMD was commissioned in July 2017 to provide advice to the Home Office on further actions that could be taken to facilitate research involving compounds which are in Schedule 1 of the Misuse of Drugs Regulations 2001 (MDR).

The ACMD undertook an initial consultation with research community representatives and relevant government departments, before providing its initial advice. This report proposed short-term and longer-term solutions for the Home Office to consider. The ACMD's initial advice is available [here](#).

2.2.3. Amending the Misuse of Drugs (Safe Custody) Regulations 1973 (publication date: 02/05/2018)

The Home Office requested a review of the current list of controlled drugs and listed exemptions from safe custody requirements. The ACMD advised that midazolam and methylamphetamine should be removed from the list of exempted substances, and that medical professionals should be the driver for suggesting additions to the list of exemptions. The ACMD's advice is available [here](#).

2.2.4. 2,4-Dinitrophenol (DNP) (publication date: 18/02/2019)

The then-Parliamentary Under Secretary of State for Crime, Safeguarding and Vulnerability wrote to the ACMD in January 2019 to seek the Council's views on the appropriate control mechanism for 2,4-Dinitrophenol (2,4-DNP).

In response, the ACMD concluded that it would not be appropriate to control 2,4-DNP under the Misuse of Drugs Act 1971, but that the different policy teams across government work together with poisons experts to find a collective solution. The ACMD's advice is available [here](#).

2.2.5. Independent prescribing by paramedics (publication date: 18/10/2019)

The ACMD recommended that the Misuse of Drugs Regulations 2001 be amended to allow paramedics to independently prescribe and administer five controlled drugs, following a presentation on this proposal from NHS-England. The five drugs were: morphine sulfate; midazolam; lorazepam; diazepam, and codeine phosphate. The ACMD's advice is available [here](#).

2.3. Advice led by the ACMD's Novel Psychoactive Substances (NPS) Committee

2.3.1. Further advice on Methylphenidate-related NPS (publication date: 10/03/2017 and 23/10/2017)

In 2015, the ACMD had recommended a Temporary Class Drug Order (TCDO) be invoked for seven methylphenidate-related Novel Psychoactive Substances (NPS), notably ethylphenidate, which had become a public health concern particularly in Scotland, owing to its intravenous administration. In 2016, the TCDO was re-laid on these substances for another year to allow the ACMD to obtain more evidence in relation to their harms.

In March 2017, the ACMD recommended that 12 substances (7 methylphenidate-related substances already under TCDO control as well as further 5 related substances) be controlled under the Misuse of Drugs Act 1971 as Class B drugs. The ACMD further advised that these substances be placed in Schedule 1 of the Misuse of Drugs Regulations 2001, as the ACMD was not aware of any legitimate uses for these substances. The ACMD's advice is available [here](#).

2.3.2. Methiopropamine: a review of the evidence of use and harm (publication date: 16/06/2017)

In 2016, the ACMD had advised that Methiopropamine (MPA) be placed under a TCDO. An increase in use, potentially as a result of displacement from ethylphenidate use, alerted the ACMD to the harms associated with MPA.

In June 2017, the ACMD recommended that MPA be controlled as a Class B substance under the Misuse of Drugs Act 1971 and placed in Schedule 1 of the Misuse of Drugs Regulations 2001.

The ACMD's advice is available [here](#).

2.4. Psychoactive Substances Act 2016

2.4.1. Misuse of Drugs Act 1971 and the Psychoactive Substances Act 2016 - Advice on the future use and purpose of Temporary Class Drug Orders (publication date: 18/10/2019)

Further to the ACMD's consideration in 2016 of the inter-relationship between the Misuse of Drugs Act 1971 and the Psychoactive Substances Act 2016, the ACMD published its final advice in October 2019 on the future use and purpose of TCDOs.

The ACMD concluded that TCDOs remained a highly useful tool that can enable immediate action on substances of severe harm, and that the mechanism (including the related offences) should remain unchanged at this time.

The ACMD's advice is available [here](#).

2.4.2. Misuse of Drugs Act 1971 and the Psychoactive Substances Act 2016 – Review of Psychoactive Substances Act 2016: ACMD contribution (publication date: 18/10/2019)

Further to the ACMD's consideration in 2016 of the inter-relationship between the Misuse of Drugs Act 1971 and the Psychoactive Substances Act 2016, in October 2019 the ACMD published a summary of the Council's contribution to the Psychoactive Substances Act 2016 Impact Review.

The ACMD had welcomed the opportunity to provide critical oversight and advice to the Home Office's 30-month review of the Psychoactive Substances

Act 2016. The key recommendations made by the ACMD which had been considered and reflected in the Impact Review were noted in this summary.

The ACMD's summary is available [here](#).

2.5. Advice led by ACMD's working groups

2.5.1. Scheduling of cannabis-derived medicinal products (publication date: 19/07/2018)

In June 2018, the then Home Secretary announced that the Government would be commissioning a two-part review of cannabis, and cannabis related products. Part one was led by the then Government Chief Medical Officer, and considered the evidence for therapeutic uses of cannabis and related products.

The ACMD was assigned [part two](#) of the commission, which considered the potential risk of harm and provide advice on whether cannabis products should be rescheduled. In July 2018, the ACMD published its initial advice on the scheduling of Cannabis-derived medicinal products (CDMPs). This advised that a clear definition of a CDMP should be developed, and that products meeting this definition should be moved into Schedule 2 of the MDR.

The ACMD's advice is available [here](#).

2.5.2. Further advice on scheduling cannabis-derived medicinal products (CDMPs) (publication date: 11/09/2018)

Following the ACMD's initial advice on CDMPs, the ACMD provided advice on the Government's proposed interim approach for the rescheduling of CDMPs which included three components, designed to work together: An interim definition of a CDMP; three access routes for prescribing CDMPs, and; guidance to support practitioners.

The ACMD provided advice on this interim approach, as well as a number of additional recommendations intended to strengthen the proposed approach.

The ACMD's advice is available [here](#).

2.5.3. Custody-Community Transitions (CCT) (publication date: 12/06/2019)

The ACMD developed a report issuing recommendations to reduce harms, and for systemic improvement for transitions between custody to community, following emerging evidence of the increasing drug-related harms in prisons and related to transitions through the criminal justice system.

Significant recommendations from this report included: reducing the use of short prison sentences of less than 12 months and the number of people who are recalled to prison; nominating one Minister who will have over-arching responsibility and accountability for the improvement of custody-community transitions for prisoners with complex health needs, including problems with drugs, and; minimising the release of prisoners with complex needs (including substance misuse) on Friday afternoons.

The ACMD's advice is available [here](#).

2.5.4. Ageing cohorts of drug users (publication date: 14/06/2019)

In response to statistics emerging over recent years showing a demonstrable shift in age profile of individuals accessing treatment for drug use in the UK, the ACMD undertook a self-commissioned report to review the evidence and assess the implications of an ageing cohort on specialist drug treatment services.

The ACMD concluded in this report that this ageing cohort of drug users (those over the age of 35 years) now accounted for a significant proportion of patients in specialist community drug treatment services – and predominant among these are those with problematic opiate/opioid use. Many substance misuse services in the UK do not adequately cater to the needs of this cohort (who have multiple additional risk factors) and services will need to adapt to engage and successfully treat this cohort. The ACMD issued a number of recommendations, such as the development of training for staff in the specific risks for older drug users, to address these concerns.

The ACMD's advice is available [here](#).

2.5.5. Impact assessment framework: rescheduling of cannabis-based products for medicinal use (CBPMs) (publication date: 23/12/2019)

In response to the then Home Secretary's commission to the ACMD to conduct a longer-term review of CBPMs, the ACMD provided an outline for an

assessment framework which set out how the ACMD would assess the various impacts of the rescheduling of CBPMs to Schedule 2 under the Misuse of Drugs Regulations 2001, and the data sources that will be used.

The ACMD's advice is available [here](#).

3. Forward Look

At the end of 2019, the ACMD set out its planned self-commissioned workstreams for the forthcoming year in a [letter to the Home Secretary](#).

Many of the ACMD's exciting upcoming projects were set out in this letter, with some of the highlights including: the development of a systematic mechanism to monitor emerging NPS; advice on substance use in the LGBT community (with a focus on 'chemsex'); advice on trends of substance use amongst young people (and the treatment services available to this group); and cognition enhancers.

Annex A: ACMD Terms of Reference

The ACMD's terms of reference are set out in Section 1 of the Misuse of Drugs Act 1971 (MDA) which states as follows:

“It shall be the duty of the Advisory Council to keep under review the situation in the United Kingdom with respect to drugs which are being or appear to them likely to be misused and of which the misuse is having or appears to them capable of having harmful effects sufficient to constitute a social problem, and to give to any one or more of the Ministers, where either Council consider it expedient to do so or they are consulted by the Minister or Ministers in question, advice on measures (whether or not involving alteration of the law) which in the opinion of the Council ought to be taken for preventing the misuse of such drugs or dealing with social problems connected with their misuse, and in particular on measures which in the opinion of the Council, ought to be taken:

- a) for restricting the availability of such drugs or supervising the arrangements for their supply;*
- b) for enabling persons affected by the misuse of such drugs to obtain proper advice, and for securing the provision of proper facilities and services for the treatment, rehabilitation and after-care of such persons;*
- c) for promoting co-operation between the various professional and community services which in the opinion of the Council have a part to play in dealing with social problems connected with the misuse of drugs;*
- d) for educating the public (and in particular the young) in the dangers of misusing such drugs and for giving publicity to those dangers; and*
- e) for promoting research into, or otherwise obtaining information about, any matter which in the opinion of the Council is of relevance for the purpose of preventing the misuse of such drugs or dealing with any social problem connected with their misuse”.*

A further duty is placed on the Council by the Act to consider any matter relating to drug dependence or the misuse of drugs which may be referred to them by any one of the Ministers concerned, and in particular to consider and advise the Home Secretary on any communication which he refers to the Council which relates to the control of a dangerous or otherwise harmful drug and which is made to Her Majesty's Government by any organisation or authority established by treaty, convention or other agreement or arrangement to which Her Majesty's Government is a party.

Annex B: ACMD membership (in December 2019)

Under the terms of the Misuse of Drugs Act 1971, members of the ACMD, of whom there should be not less than 20, are appointed by the Home Secretary.

Appointments to the ACMD are made in accordance with the [Governance Code on Public Appointments](#).

A list of ACMD members as of December 2019, together with a note of their professional background, is set out below. The ACMD website lists the current membership of the ACMD.

Professor Owen Bowden-Jones - Chair of ACMD, Consultant psychiatrist, Central North West London NHS Foundation Trust

Dr Kostas Agath - Consultant psychiatrist (addictions), CGL Southwark

Dr Anne Campbell - Senior lecturer in social work and co-director of the drug and alcohol research network at Queens University Belfast

Mohammed Fessal - Chief Pharmacist, Change, Grow, Live (CGL)

Dr Emily Finch - Clinical director of the Addictions Clinical Academic Group and a consultant psychiatrist for South London and Maudsley NHS Trust

Lawrence Gibbons - Head of drug threat; National Crime Agency (NCA), Intelligence Directorate, Commodities

Dr Hilary Hamnett - Senior lecturer in forensic science, University of Lincoln

Professor Graeme Henderson - Professor of pharmacology at the University of Bristol

Dr Carole Hunter – Lead pharmacist at the alcohol and drug recovery services at NHS Greater Glasgow and Clyde

Professor Roger Knaggs – Associate professor in clinical pharmacy practice at the University of Nottingham

Professor Tim Millar – Professor of substance use and addiction research strategy lead at the University of Manchester

Rob Phipps – Former head of health development policy branch, Department of Health, Social Services and Public Safety, Northern Ireland

Harry Shapiro – Director – DrugWise

Dr Richard Stevenson – Emergency medicine consultant, Glasgow Royal Infirmary

Dr Paul Stokes – Senior clinical lecturer in mood disorders, King’s College, London

Dr Ann Sullivan – Consultant physician in HIV and sexual health

Professor Matthew Sutton – Chair in health economics at the University of Manchester

Professor David Taylor – Professor of psychopharmacology, King’s College, London

Professor Simon Thomas – Consultant physician and clinical pharmacologist, Newcastle Hospitals NHS Foundation Trust and Professor of clinical pharmacology and therapeutics, Newcastle University

Dr Derek Tracy – Consultant psychiatrist and clinical director, Oxleas NHS Foundation Trust

Rosalie Weetman – Senior commissioning manager of substance misuse

The following experts demitted during the reporting period:

Annette Dale-Perera – Independent consultant

Gillian Arr-Jones – Pharmacist and expert reviewer and pharmacist consultant in health and social care

Fiona Bauermeister – Assistant Chief Officer with London Community Rehabilitation Company

Simon Bray – Commander in the Metropolitan Police, Specialist Operations

Dr Roger Brimblecombe – Pharmacologist

Professor Paul Dargan – Consultant physician and clinical toxicologist, clinical director, Guy’s and St Thomas’ NHS Foundation Trust, Professor of clinical toxicology, King’s College London

Professor Simon Gibbons – Professor of medicinal phytochemistry, Research Department of Pharmaceutical and Biological Chemistry, UCL School of Pharmacy

Sarah Graham – Director, Sarah Graham Solutions

Professor Raymond Hill – Neuropharmacologist and visiting professor of pharmacology, Imperial College London

Kyrie James – First Tier Tribunal (Immigration and Asylum Chambers)

David Liddell – Chief Executive Officer at the Scottish Drugs Forum

Professor Fiona Measham – Professor of criminology in the School of Applied Social Sciences, Durham University

Jo Melling – Head of performance and delivery, NHS England (Midlands)

Richard Phillips – Independent consultant in substance misuse

Dr Steve Pleasance – Analytical chemist and head of industry at the Royal Society of Chemistry

Professor Fabrizio Schifano – Consultant psychiatrist (addictions), CRI Hertfordshire drug and alcohol recovery services and Professor of clinical pharmacology and therapeutics, University of Hertfordshire

Professor Alex Stevens – Professor of criminal justice and deputy head of the School of Social Policy, Sociology and Social Research, University of Kent

Professor Harry Sumnall – Professor in substance use, Liverpool John Moores University

Professor Ben Whalley – Professor of neuropharmacology, University of Reading

Annex C: ACMD Recovery Committee membership, in December 2019

Dr Emily Finch – Recovery Committee Co-Chair, ACMD Member

Dr Anne Campbell – Recovery Committee Co-Chair, ACMD Member

Mohammed Fessal – ACMD Member

Dr Carole Hunter – ACMD Member

Professor Tim Millar – ACMD Member

Rob Phipps – ACMD Member

Rosalie Weetman – ACMD Member

Dr Kostas Agath – ACMD Member

Naomi Handley-Ward – Co-opted Member of the Recovery Committee’s ‘Young people’s drug use’ working group – NHS Rotherham, Doncaster and South Humber

Professor Eilish Gilvarry - Co-opted Member of the Recovery Committee’s ‘Young people’s drug use’ working group - Consultant psychiatrist in addictions, Honorary Professor of Addiction Psychiatry

Dr Deborah Judge - Co-opted Member of the Recovery Committee’s ‘Young people’s drug use’ working group – Child and adolescent psychiatry

Vivian Hughes - Co-opted Member of the Recovery Committee’s ‘Young people’s drug use’ working group

Joanne Smith - Co-opted Member of the Recovery Committee’s ‘Young people’s drug use’ working group

Dr Kathryn Higgins - Co-opted Member of the Recovery Committee’s ‘Young people’s drug use’ working group – reader, School of Social Science Education and Social Work, QUB

Professor Sir John Strang - Co-opted Member of the Recovery Committee’s ‘Naloxone’ working group – Head of Addictions Department, King’s College London

Kirsten Horsburgh - Co-opted Member of the Recovery Committee’s ‘Naloxone’ working group – Lead of Scottish Drugs Forum’s work on drug death prevention

Andy McAuley - Co-opted Member of the Recovery Committee's 'Naloxone' working group – Senior epidemiologist, Health Protection Scotland

Chris Rintoul - Co-opted Member of the Recovery Committee's 'Naloxone' working group – Drugs and alcohol consultant, Extern

Josie Smith - Co-opted Member of the Recovery Committee's 'Naloxone' working group – National lead for substance misuse (Harm Reduction), NHS Wales

Annex D: ACMD Technical Committee membership in December 2019

Professor Roger Knaggs – Technical Committee Chair, ACMD Member

Dr Ann Sullivan – ACMD Member

Dr Derek Tracy – ACMD Member

Professor Graeme Henderson – ACMD Member

Dr Hilary Hamnett – ACMD Member

Dr Kostas Agath – ACMD Member

Dr Paul Stokes – ACMD Member

Dr Richard Stevenson – ACMD Member

Professor Simon Thomas – ACMD Member

Dr Clare Gerada – Co-opted member of Technical Committee – General Practitioner, Former Chair of the Council of the Royal College of General Practitioners (RCGP)

David Wood – Co-opted member of Technical Committee – consultant physician and clinical toxicologist – Guy's and St Thomas', King's College London

Professor Fiona Measham – Co-opted member of Technical Committee – Professor of Criminology, University of Liverpool

Gillian Arr-Jones – Co-opted member of Technical Committee – Chief Pharmacist at the Care Quality Commission

Howard Roberts – Co-opted member of Technical Committee – retired Nottinghamshire Deputy Chief Constable

John Corkery – Co-opted member of Technical Committee - Research Lead, School of Pharmacy, University of Hertfordshire

John Farina – Co-opted member of Technical Committee

Julien Baker – Co-opted member of Technical Committee

Dr Mike White - Co-opted member of Technical Committee – former forensic intelligence adviser

Dr Prun Bijral - Co-opted member of Technical Committee – Consultant psychiatrist

Ric Treble - Co-opted member of Technical Committee – retired Laboratory of the Government Chemist (LGC) Expert

Annex E: ACMD Novel Psychoactive Substances (NPS) Committee membership, in December 2019

Professor Simon Thomas – NPS Committee Chair, ACMD Member

Dr Ann Sullivan – ACMD Member

Dr Anne Campbell – ACMD Member

David Wood – Co-opted member of NPS Committee – consultant physician and clinical toxicologist – Guy's and St Thomas', King's College London

Professor Fiona Measham – Co-opted member of NPS Committee – Professor of criminology, University of Liverpool

Professor Graeme Henderson – ACMD Member

Harry Shapiro – ACMD Member

Dr Hilary Hamnett – ACMD Member

John Corkery – Co-opted member of NPS Committee - Research Lead, School of Pharmacy, University of Hertfordshire

Dr Kostas Agath – ACMD Member

Lawrence Gibbons – ACMD Member

Dr Mike White – Co-opted member of NPS Committee – former forensic intelligence adviser

Paul Bunt– Co-opted member of NPS Committee – Serious and Organised Crime Group, Avon and Somerset Police

Ric Treble - Co-opted member of NPS Committee – retired Laboratory of the Government Chemist (LGC) Expert

Dr Richard Stevenson – ACMD Member

Professor Roger Knaggs – ACMD Member

Annex F: Expenditure

The ACMD is sponsored by the Home Office. The total expenditure in the financial years covered by this reporting period have been broken down annually below:

2017 - 18 - £26,264.00

2018 - 19 - £42,734.84

2019 - 20 - £46,067.34

These costs were associated with the provisions of facilities for meetings of the ACMD (and its committees and working groups), including expenses of members properly incurred. The ACMD generated no income of its own. Members of the ACMD are not remunerated.