

MAYOR OF LONDON

Krupesh Hirani AM

Chair of the London Assembly Health Committee
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Our ref: MGLA170322-7176

Date: 21 June 2022

Dear Krupesh,

Thank you for the London Assembly Health Committee's report, *Reducing Drug Deaths in London*. I share the Health Committee's strong commitment to reducing drug-related deaths across London.


As part of London's response to the government's new 10-year Drugs Strategy, I have committed in my new Police and Crime Plan to convene a new London Drugs Forum. This Forum will build a strong multi-agency partnership bringing together all relevant criminal justice and health agencies to develop an effective pan-London whole system response to drug-related harms and crimes. The Forum is committed to the vision that there will be a reduction in both drug-related crime and drug-related deaths in London in 2022 and in the years following.

As you are aware, I am also establishing a London Drugs Commission made up of independent experts in the fields of law, public health, criminal justice and community relations to examine the effectiveness of our drug laws, with a particular focus on cannabis. Work on establishing the Commission is well underway and the Commission's work will provide a robust evidence base to further inform policy development on reducing drug-related harms.

I am committed to working with partners to reduce the harms that drugs cause, including drug-related deaths, not just in London but elsewhere in regions where drugs are produced and transited. However, the budgets and responsibilities for drug treatment services rest with local authorities, and these budgets have seen significant reductions over the last decade. I welcome the new investment being made by the government under its Drugs Strategy, but it will take time to improve the treatment system, which Dame Carol Black assessed was broken and not fit for purpose.

Set out below are responses to each of the Committee's recommendations.

Yours sincerely,



Sadiq Khan

Mayor of London

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Recommendation 1

Drug checking services should be provided in London, including at clubs and music events. The Mayor should use his Drugs Commission to work with key delivery partners – including the Metropolitan Police Service, the Home Office, London boroughs and the Office for Health Improvement and Disparities – to understand how to implement drug checking services in London; and should then introduce these services.

The Mayor recognises the value of the work being done to test for drugs in the night-time economy, particularly the opportunities it provides for community engagement and public education. However, there are other ways of achieving our shared goal of reducing drug-related health harms; these include encouraging people to seek medical help without the fear of criminal repercussions for doing so, the availability of medical assistance in night-time venues, and staff training for those individuals working at clubs and music events. An example of good practice is the work of the Welfare and Vulnerability Engagement (WAVE) training for frontline venue staff to identify and support vulnerable customers in night-time venues. There has been good work in London to reduce drug-related harms in venues, including work between the Metropolitan Police Service (MPS) and health partners to achieve this, and officers from the Mayor's Office for Policing and Crime (MOPAC) continue to monitor good practice in this area and the experiences and activities of other Mayors and Police and Crime Commissioners across England. Furthermore, work to convene partners and share best practice will continue, and the Mayor is working with the Office for Health Improvement and Disparities to determine what more can be done to prevent drug-related deaths.

As the Mayor explained at the beginning of his letter, the focus of the London Drugs Commission is to examine the effectiveness of our drug laws, with a particular focus on cannabis. As such, it will not be part of the remit of the London Drugs Commission to consider drug checking services. However, these types of interventions and services will be considered as part of the multi-agency partnership work of the London Drugs Forum.

Recommendation 2

The Government should introduce a national naloxone programme in England to end the postcode lottery of provision, and to bring England in line with Northern Ireland, Scotland and Wales.

Recommendation 3

In the interim, the Mayor's Drugs Commission should work with partners and service providers to assess the availability of naloxone in relevant settings in London, as well as the education and training levels of staff; and identify barriers and solutions to ensure adequate and consistent access across the capital.

Recommendation 4

The Mayor should work with the Metropolitan Police Service so that officers routinely carry nasal naloxone spray.

The Mayor agrees with the Health Committee that there needs to be a properly supported national programme built around improved naloxone provision; but also addressing training needs around opiate overdoses has the potential to significantly improve joint working and could have a significant impact on reducing drug-related deaths. It is clear that naloxone accessibility varies widely between different services and areas, with provision often local authority led. However, it is also important to recognise that different services will have different impacts, and different areas will have varying levels of need. There is, therefore, a requirement to carefully consider which areas have the most urgent need and which settings could have the most impact in addressing that.

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Currently, naloxone is available in all custody suites for use by trained medical staff. MOPAC is already working with the MPS and partners to carefully consider whether frontline officers should be equipped with naloxone, and whether take-home kits could be made available to those testing positive for opiates in police custody.

MOPAC responded to the national consultation on expanding the provision of naloxone. The Mayor believes that allowing more settings and individuals to provide take-home naloxone would enable local areas and organisations to be more flexible and responsive to those local needs. But he is aware that as well as the naloxone itself, we need to ensure high-quality training is provided to anyone administering naloxone. He awaits the outcome of the national consultation.

As explained above, the focus of the London Drugs Commission is to examine the effectiveness of our drug laws, with a particular focus on cannabis. As such, questions around the provision of naloxone fall outside the scope of the Commission's remit. However, this will be an area of interest for the London Drugs Forum.

Recommendation 5

The Mayor should lead a public awareness campaign on naloxone and how it is used to save lives in the event of an overdose.

Recommendation 7

The Mayor should run a campaign with partners to educate Londoners about how to reduce drug harm and deaths.

There have been a number of campaigns around drug misuse/overdose in London, for example encouraging the public to dial 999 if they suspect an overdose, alongside more targeted information aimed at friends and family of opiate users. In order to run effective harm reduction campaigns, messages need to be targeted at specific groups depending, for example, on the substance of concern, the age of the user etc. There may be a role here for the new London Drugs Forum to share good practice on effective communication campaigns between boroughs. However, we know that helping people into effective drug treatment is one of the most significant protective factors against overdose and drug-related death.

Recommendation 6

The Mayor's Drugs Commission should work with partners including the Home Office to ensure London leads the way in reducing drug harm by piloting drug-consumption rooms. The pilots should determine the optimum location for the test sites by liaising with boroughs and local public health teams, who are best able to manage the relationship between these services and local communities.

There is currently no legal framework for the provision of drug consumption rooms and, as such, a range of offences would be committed in running drug consumption rooms. Whilst there is evidence that drug consumption rooms can be effective at reducing drug harm, they would be extremely challenging to deliver in the face of opposition from the Home Office.

Whilst this recommendation is outside the scope of the remit of the London Drugs Commission (see above), this will be an area of interest for the London Drugs Forum.

The Mayor is committed to making London a safer and healthier city for all Londoners and he will continue to work closely with partners across the capital to consider how best to address the impact of drugs on Londoners' health and wellbeing. He shares with the Committee the key objective of permanently reducing drug-related deaths in London.