



# All-Party Parliamentary Group for Prescribed Drug Dependence

Minutes 13<sup>th</sup> June 2019

**Present:**

Oliver Letwin MP (OL)	APPG Chair	
Earl of Sandwich (ES)	Co-chair	Lady Sandwich (CS)
Baroness Masham of Ilton (SM)	Co-chair	
Luke Montagu (LM)	Secretariat	James Davies (JD) Secretariat
Anne Guy (AG)	Secretariat	Peter Kinderman (PK) Secretariat

**Guests**

Rosanna O'Connor (RoC)	PHE Director, Alcohol, Drugs & Tobacco
Pete Burkinshaw (PB)	PHE Alcohol & Drug Treatment, Recovery Lead
Laurence Russell (LR)	BMA, BMA Policy Advice & Support Officer
George Roycroft (GR)	Head of Policy and Campaigns, RCPsych
Yasir Abbasi (YA)	Consultant Psychiatrist & Honorary Senior Lecturer, University of Liverpool
Sabrina Kamayah (SK)	British Psychological Society, Senior Policy Advisor

**Apologies**

Luciana Berger MP	Co-chair	Dan Poulter	MP
Norman Lamb MP	Co-chair	Harry Shapiro	Secretariat
Lucy Powell MP	Co-chair	Lord Crisp	

Item	Description	Who	By When
<b>1</b>	<b>Updates on APPG activity</b>		
<b>1.1</b>	<b>Secretariat update on PHE review</b> LM/JD sit on the Expert Reference Group (ERG) and are broadly pleased with PHE recommendations. For reasons of confidentiality nothing further can be said at this point. They have submitted feedback into the review group.		
<b>1.2</b>	<b>Engagement with the RCPsych</b> GR advised that the College's work (position statement on antidepressants and depression) had three objectives: <ul style="list-style-type: none"> <li>• To reframe the external facing position of the College on antidepressants</li> <li>• To allow the College to engage constructively with stakeholders</li> <li>• To effect policy change on antidepressants (in particular influence the on going PHE and NICE work)</li> </ul> Its next steps included updating two of its leaflets: <ol style="list-style-type: none"> <li>a) a general one on antidepressants, what they are, what they do</li> <li>b) coming off antidepressants</li> </ol> They will be engaging experts by experience in their development process.	GR	

1.3	<p><b>RCGP engagement</b> Following some discussion it was agreed that OL would seek a meeting with Helen Stokes-Lampard, the current Chair of the RCGP. LM to progress.</p>	LM	
1.4	<p><b>NICE</b> (i) <b>Guideline on Depression in Adults (CG90):</b> This is still in consultation and there have been some positive indications that the statement that withdrawal “symptoms are usually mild and self-limiting over about 1 week” will be changed to reflect more recent evidence (summarised in a letter to the BMJ [Davies et al, 20 May 2019]). As the guideline is now in consultation for a third time, might it be possible for NICE to issue an interim statement? LM/JD to raise. (ii) <b>Withdrawal commission</b> – this will hold it’s first scoping meeting in July. Discussions are on going concerning the importance of representation from all views on the guideline development group.</p>	LM/ JD	Aug / Sep
1.5	<p><b>Guidance for Psychological Therapists Project</b> AG updated the group on progress to date and confirmed readiness to launch after PHE has published. It was agreed to let GR have early sight of a copy with the aim of identifying any sensitivities. The guidance is not prescriptive and confirms the importance of the involvement of an informed prescriber in the withdrawal process. YA commented that therapists being able to discuss information with clients would help GPs. AG to liaise with TF re OL availability to identify launch date once PHE publication date is known.</p>	AG  AG	End Jul
2	<p><b>PHE review</b> PB reported that the review was in a good place and the team was starting to look at feedback from ERG members. The peer review process is also about to start. It was agreed that it would make sense for OL/PHE to seek a conversation with either the Secretary of State for Health or Simon Stevens, NHS E&amp;I Chief Executive, about implementation. PHE confirmed that detailed recommendations are in the broad areas of: (i) Improving accountability &amp; data transparency (ii) Clinical practice (iii) Support for patients experiencing dependency / withdrawal and with underlying / related conditions - alternatives and augmentation (iv) Shared decision making &amp; informed consent (v) More research and that the NHS, CCGs and primary care, rather than local authority commissioned substance misuse services, are key to implementation. PHE will confirm publication date when known.</p>	OL/ RoC  RoC/ PB	
4	<p><b>Next meeting</b> Date to be set after PHE publication date is known.</p>		