



LETTERS

NEW UK DRUG STRATEGY

Bleak outlook for community substance misuse services

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The UK government's drug strategy for 2017 effectively announces the end of community substance misuse services.¹ The grant from Public Health England to local authorities to commission these services is labelled as being "ring fenced." But when local authorities are not legally required to provide services, ring fencing seems to disappear, and funding cuts of a third or more are common. Some local authorities are considering not providing any local substance misuse services at all.

Public Health England has no power to direct local authorities how to spend its grants. Page 28 of the strategy says: "We have confirmed continuation of the ring fenced public health grant to local authorities until April 2019, which funds drug and alcohol services (treatment and prevention). During this period we will maintain the condition for local authorities to 'have regard to the need to improve the take up of, and outcomes from, drug and alcohol services.' Our consultation *Self sufficient local government: 100% business rates retention* set out proposals to fund public health responsibilities beyond this period through

retention of locally retained business rates." The clear implication is that after April 2019, local authorities will be expected to fund all substance misuse services themselves with no grant from Public Health England.

How will this turn out given their track record? We should lobby hard to make provision of these services a statutory responsibility. They should probably be back under the auspices of the NHS instead. Otherwise, anyone with a drug or alcohol problem—or seeking help for a relative or friend—will not be able to access any help at all. The implications for health, death rates, crime, and associated misery will inevitably follow.

Competing interests: None declared.

1 Limb M. Drug strategy will fail without new money, say critics. *BMJ* 2017;358:j3460. doi:10.1136/bmj.j346028716866

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