

BILLET D'ÉTAT

X
2000

WEDNESDAY, 5th April, 2000

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B I L L E T D ' É T A T

TO THE MEMBERS OF THE STATES OF THE ISLAND OF GUERNSEY

I have the honour to inform you that a Meeting of the States of Deliberation will be held at **THE ROYAL COURT HOUSE**, on **WEDNESDAY**, the **5th April, 2000**, immediately after the Meeting already convened for that day.

**THE DRIVING TESTS AND DRIVING LICENCES (INCREASE OF FEES)
ORDINANCE, 2000**

The States are asked to decide:-

I.—Whether they are of opinion to approve the draft Ordinance entitled “The Driving Tests and Driving Licences (Increase of Fees) Ordinance, 2000”, and to direct that the same shall have effect as an Ordinance of the States.

STATES COMMITTEE FOR HOME AFFAIRS

PROPOSED BAILIWICK DRUG STRATEGY

The President,
States of Guernsey,
Royal Court House,
St. Peter Port,
Guernsey.

10th February, 2000.

Sir

On behalf of the Presidents' Drug Policy Group I have the honour to enclose a copy of the proposed Bailiwick Drug Strategy.

I have the honour to request that you will be good enough to lay this Report before the States, together with appropriate propositions.

I am, Sir,
Your obedient Servant,
M. W. TORODE,
President,
States Committee for Home Affairs.

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1. INTRODUCTION

- 1.1 In November 1991 the States of Guernsey considered the report of the Committee to Investigate Ways of Reducing Alcohol, Drugs and Solvent Abuse Related Offences. The States of Guernsey resolved inter alia:

“2.To direct the Board of Health to report to the States as soon as possible on the membership, activities and recommendations of the Advisory Committee¹ which was set up following consideration of the investigating committee’s report into alcohol abuse in 1985, in conjunction with other States and voluntary bodies.”

- 1.2 The Dependency Sub-Committee’s role was to co-ordinate services and initiatives between the Board of Health and representatives from a cross section of States committees and local organisations and groups concerned with substance misuse.

- 1.3 In July 1993 the States considered the Board of Health’s policy letter *Substance Misuse in Guernsey: Reducing Dependency upon Drugs, Tobacco, Alcohol and other Substances* (Billet XIV, 1993) and resolved inter alia:

“1.To affirm the commitment of the States of Guernsey to reducing the misuse of alcohol, drugs, tobacco and solvents, and reducing the number of offences related to substance misuse, through the adoption of policies which reflect those objectives.

3. To agree that the Board of Health should be authorised to review periodically the membership and scope of the Dependency Sub-Committee.

4. To authorise the Board of Health to make annual grants to the Drug Concern Group of such amount and on such terms and conditions as that Board may deem appropriate to fund the employment of a full-time drugs counsellor for young people.

5. To direct the Board of Administration to liaise with the Board of Health in reviewing the relevant illegal drug legislation and to report back to the States on the need for increased penalties and alternative sanctions for drug offenders.

6. To direct the Board of Administration and Committee for Home Affairs to review manpower and other resources with regard to combating the misuse of drugs.

7. To direct the Probation Service Committee to investigate the use of educational and rehabilitation programmes as an alternative, or addition, to other penalties when dealing with a person guilty of an offence involving substance misuse, and to report back to the States with their findings.

¹ The Advisory Committee on Alcohol Problems was subsequently renamed the Advisory Committee on Chemical Abuse, then became known as the Chemical Abuse Sub-Committee and since 1992 has been known as the Dependency Sub-Committee.

8. To direct the Education Council to liaise with the Board of Health in:
 - a. Reviewing the health education programmes for children and young adults in respect of smoking, alcohol, drugs and solvent abuse;
 - b. Monitoring their effectiveness.”
- 1.3 In May 1995 Britain published its anti-drugs strategy, *Tackling Drugs Together: A Strategy for England 1995-1998*. Following this publication Drug Action Teams were established across the UK bringing together senior personnel from all the agencies with drug-related responsibilities to better co-ordinate local action against drug misuse and its associated problems.
- 1.4 In October 1995 Jersey published the first stage of its anti-drugs strategy, *The Misuse of Drugs – A Combined Approach*, and this was followed by *Working Together against Drugs – A Strategy and Implementation Plan* in 1996.
- 1.5 Against this background, and on the advice of its Dependency Sub-Committee, in January 1997, the Board of Health invited representatives from Jersey’s Drug Strategy Group to address a meeting of members and senior officers of key States departments with drug-related responsibilities.
- 1.6 Following this meeting the **Presidents’ Drug Policy Group** was established, recognising responsibility for drug-related matters rested with several individual departments and the need to separate policy, strategy and operational issues.
- 1.7 Membership of the Presidents’ Drug Policy Group was drawn from the Presidents of the following States committees:
 - Board of Administration (Customs)
 - Committee for Home Affairs (Police and Prison)
 - Board of Health
 - Education Council
 - Children Board
 - Probation Service Committee
- 1.8 The Presidents’ Drug Policy Group agreed:

“To encourage and co-ordinate the production of a comprehensive draft of the Island’s Drug Strategy by a Group comprising of the Chief Officers of departments represented by the Presidents’ Group.

The Island’s Drug Strategy will address all aspects of tackling the drug problem including education, enforcement and health issues... will seek to promote the best use of the resources of the States departments and the private and voluntary sector. The development of an Island Drug Strategy will build on and develop the excellent work already undertaken by States departments and voluntary groups.

The Bailiwick does not currently suffer the problems arising from drug abuse experienced in the UK or other insular authorities. However, the potential for a deterioration in our position is recognised and determination is needed to prevent that happening.”

- 1.9 The Presidents' Group charged their Chief Officers to produce a comprehensive strategy reviewing current measures to combat drug misuse and its associated problems, and to advise on any new approaches that might be desirable.
- 1.10 Membership of the Chief Officers' Drug Strategy Group was drawn from the Chief Officers of the departments represented by the Presidents' Group, namely:
- Chief Officer, Customs and Excise Department
 - Chief Officer of Police
 - Prison Governor
 - Chief Executive, Board of Health
 - Director of Public Health
 - Director of Education
 - Director, Child Care Services
 - Chief Probation Officer
- 1.11 The Chief Officers' Group contracted an Executive Officer to undertake background research, to liaise with those working in drug-related areas, including States departments and voluntary and charitable bodies, and to assist them in preparing the Drug Strategy
- 1.12 The proposed Bailiwick Drug Strategy is contained in full in Appendix 1.
- 1.13 With the formation of the Chief Officers' Drug Strategy Group and on-going meetings of the Drug Concern Group, the Board of Health has not felt a need to convene a meeting of its Dependency Sub-Committee. This committee has not met in full since September 1996. Further, if the proposed Bailiwick Drug Strategy is accepted by the States of Guernsey, it is the intention of the Board of Health to stand down this committee formally.

2. **SCALE OF THE PROBLEM**

- 2.1 The Chief Officers' Drug Strategy Group recognised the need to estimate the prevalence of drug misuse in the Bailiwick and the scale of associated problems. However, drug misuse is an illegal activity and therefore difficult to estimate and figures are generally based on incomplete data.
- 2.2 Therefore, all evidence is based on a range of factors that are measurable. The following indicators can provide part of the picture of the prevalence of drug misuse within a community:
- a) Number of drug-related crimes
 - b) Number, size and type of drug seizures
 - c) Numbers contacting drug or drug and alcohol agencies
 - d) Findings from self-reported questionnaire surveys
 - e) Intelligence from Police and Customs.

- 2.3 During the 1990s in the UK, crimes where the offender was either seeking to fund their drug misuse from the proceeds of crime or was under the influence of drugs at the time of offending increased steeply. In Guernsey there is some evidence that a similar trend may be emerging.
- 2.4 The **Customs and Excise Department**, in conjunction with drug enforcement agencies in other jurisdictions, acts as the Bailiwick's first line of defence in reducing the supply of illegal drugs into the Islands.
- 2.5 In 1998 Guernsey Customs was involved in the seizure of illegal drugs worth in excess of £1,650,000 (based on local street prices) (Appendices 2 and 5). These seizures included £134,000 worth of illegal drugs intercepted in the Bailiwick and a further £1,500,000 worth intercepted en route to the Bailiwick. **The importance of the close working partnerships between Guernsey Customs and drug enforcement agencies in other jurisdictions is underlined by this latter figure.**
- 2.6 It is often difficult to identify detailed trends from annual Customs seizures as one large seizure will distort the overall figures for that year.
- 2.7 Recent seizures include significant quantities of MDMA (ecstasy) and amphetamines. These drugs are popularly viewed as less harmful than heroin or cocaine, and so regarded, by some, as more acceptable. This is despite media reports of the sudden deaths of a small but significant number of ecstasy users, which highlights the potential harm these drugs can cause.
- 2.8 The Bailiwick's Courts have maintained a firm sentencing policy in respect of drug offences, particularly by imposing significant custodial sentences for the importation of commercial amounts of drugs.

Table 1 - Annual breakdown of number of Court cases

Year	Seizures	Convictions	Number of Royal Court Defendants
1994	101	74	7
1995	107	88	18
1996	95	59	14
1997	85	51	8
1998	103	70	27
Total	491	342	74

Source: Guernsey Customs Department

- 2.9 The number of drug offenders who appeared before the Royal Court rose sharply in 1998. The majority were male, aged between 18 and 35 years. Approximately 70% of those convicted of drug trafficking offences were not local residents.
- 2.10 Guernsey and Alderney Year 8 and Year 10 pupils, with the exception of Elizabeth College pupils, completed the **1997 Health Behaviour Survey** (Appendix 3). The Schools Health Education Unit (formerly part of Exeter University) analysed the completed questionnaires and compared the findings with similar surveys from a sample of UK schools.

- 2.11 This survey provides valuable information about young people's drug use and, as it is conducted every five years, it also provides a picture of changing patterns of drug misuse over time amongst 12 to 15 year olds. Cannabis is most widely used in both age groups. **Drug misuse amongst Bailiwick 12 to 15 year olds may be less than in the UK, but the need to continue to develop cohesive drug education programmes remains strong.**
- 2.12 The street prices for illegal drugs can provide a barometer of the types and quantities available in the Bailiwick. It is possible to track changing patterns of drug misuse and drug preference from changing street prices. Guernsey street prices (Appendix 5) are considerably higher than in the UK, as a minimum three times the UK national average price.

3. THE COSTS OF DRUG MISUSE

- 3.1 Calculating drug-related costs is difficult because of the complexity of factors associated with drug misuse, both direct and indirect. The absence of accurate local drug misuse data makes it very difficult to estimate the Bailiwick's current spending on drug-related problems.
- 3.2 The UK estimates the costs of dealing with problems generated by dependent drug misusers alone are in the region of £3-4 billion annually. Since the introduction of its anti-drugs strategy, the UK Government has spent an additional £1.5 billion annually to implement the recommendations.
- 3.3 The criminal justice agencies are in part able to estimate the proportion of their spending that is specifically drug-related, namely:

	Percentage Spending (estimated)	Amount ²
Police	10%	£651,781
Customs	29%	£729,000
Prison	75%	£1,354,383
Probation	15%	£32,078
Courts	12%	£285,240
TOTAL		£3,052,482

- 3.4 These estimates are incomplete because:
- a) Drugs may not be identified as a contributory factor to the charge
 - b) No account is made for routine/core duties of all the agencies
 - c) Costs of legal representation are not included.
- 3.5 Within health services it is possible to calculate some direct drug-related spending, for example how much is spent on treating drug overdoses, illnesses contracted as a result of their drug misuse and detox or maintenance treatment related to drug misuse.

² Based on 1998 budget

- 3.6 Indirect health costs are difficult to calculate, particularly where parents, children or partners of drug users suffer the harm. It is equally difficult for Mental Health Services to calculate costs, as drug misuse is invariably one of a number of factors contributing to a patient's condition.
- 3.7 Health risks extend beyond those who misuse drugs. The partners of intravenous drug users are at high risk of contracting bloodborne diseases, especially hepatitis and HIV infections³.
- 3.8 **Education** costs relating to the provision of drug education programmes can be reasonably accurately calculated, as a percentage of Personal, Social and Health Education (PSHE) spending. Indirect drug-related costs for education include costs associated with truancy and anti-social behaviour in schools where drugs are a contributory factor.
- 3.9 **Societal costs** from drug misuse are the hardest to calculate. Drug misuse often results in premature death from an overdose or as a result of other health problems contracted as a result of drug use. **In the past five years four people in the Bailiwick, all aged under 30 years, have died from drug misuse-related overdoses.** How does society calculate the costs of such loss of life?
- 3.10 The harm associated with drug misuse affects the individual and community.

Nature of Harm	Individual Level	Community Level
Social	Failed relationships with family, friends and work colleagues <u>Arrest and imprisonment</u>	Increased levels of anti-social behaviour Increased incidence of drug-related crime
Economic	Loss of productivity Increased absenteeism Loss of employment	Increasing criminal justice and health service costs Increasing societal costs, e.g. higher <u>insurance premiums</u>
Health-related	Overdose Bloodborne diseases Premature death	Impact of sudden death on families and friends Increased risk from HIV infection

- 3.11 With the lack of complete and reliable local data, when attempting to determine the costs of drug misuse in Guernsey, it is necessary to draw on formulae developed in the UK. These formulae include estimates of a drug user's weekly spending on drugs and the costs that may be incurred by criminal justice, education and health agencies in addressing drug-related issues.
- 3.12 Using a Home Office formula, an opiate addict's spending can be estimated:
- Assume daily use at 0.25g of heroin per day
 - Local estimated street price for heroin is £200-£250 per g
 - At least £50 per day needed to maintain habit, or £18,250 per year
 - The "value" of stolen property is estimated at 1/3rd to 1/5th its retail value.

³ The costs of treating individuals infected with hepatitis or HIV+ through intravenous drug use are considerable. The annual costs for treating a HIV+ patient are between £10,000 and £20,000.

Thus an addict may require an annual income of between £54,750 and £91,250.

- 3.13 The above calculation focuses only on opiate addicts and is not readily adaptable to spending of the chaotic user⁴.
- 3.14 **When considering the funding requirements of the Bailiwick Drug Strategy, it is important to recognise that there are significant multiplier benefits for the community by reducing drug misuse.**

4. **DRUG CONCERN GROUP**

- 4.1 In 1991 Mrs (later Deputy) Judy Beugeard established Drug Concern in response to perceived rising drug misuse and its associated problems. The Group's aims were to estimate the extent of drug use in Guernsey and to raise public awareness of the harm represented by growing drug misuse.
- 4.2 Since 1994, following the direction of the States of Guernsey, the Board of Health has made an annual grant to Drug Concern⁵ to allow the appointment of a drug counsellor to work with young people. Mrs Maria Eggleston was appointed to this post in May 1994. Drug Concern has also received charitable funding enabling it to recruit two additional staff (one full-time and one part-time post).
- 4.3 Drug Concern provides a range of education, prevention and treatment services and continues to play an important role in the Bailiwick's efforts to reduce the demand for drugs.
- 4.4 Since it was established Drug Concern has had contact with an increasing number of individuals affected by drug misuse – users, partners, family and friends. In 1998 Drug Concern saw nearly two hundred individuals⁶ seeking information, help or advice in drug-related matters (Appendix 4). The following table details those who are in regular contact with Drug Concern for on-going therapeutic work.

Table 2 – Drug Concern contacts by age, location and type of contact

Age	Location or Type of Contact			Total
	Project	Prison	Syringe Exchange	
Under 17 years	2			2 (4%)
17 – 20 years	2	9		11 (23%)
21 – 30 years	7	10	10	27 (56%)
31 – 50 years	2	5		7 (15%)
Over 50 years		1		1 (2%)
Total	13 (27%)	25 (52%)	10 (21%)	48

⁴ Someone who uses a cocktail of substances - drugs, illegal and prescription, alcohol and solvents.

⁵ In 1999 the Board of Health grant to Drug Concern was for £27,160.

⁶ Drug Concern defines a contact as an enquiry or request for information, support, advice or treatment, excluding routine enquires regarding the day-to-day running of the project.

- 4.5 The age distribution of those in contact with Drug Concern reflects patterns identified in the UK. It also underlines the need for drug education and prevention programmes to extend beyond formal education.
- 4.6 A number of injecting drug misusers are in regular contact with Drug Concern through its needle and syringe exchange and are offered assessment, treatment and advice about safe injecting practice. Drug Concern monitors returned injecting equipment and returns exceed 90%.

5. GUERNSEY ALCOHOL AND DRUG ABUSE COUNCIL (GADAC)

- 5.1 GADAC is a charitable organisation principally focusing on alcohol-related problems, how they affect individuals, families and the community, and raising awareness about alcohol problems. GADAC also assists those who have both alcohol and drug-related problems, but will refer those whose problems are solely drug-related to Drug Concern. The services provided include individual and group counselling and temporary, "dry-house" accommodation.
- 5.2 GADAC receives an annual grant from the Board of Health⁷. The majority of GADAC's clients are referred because of alcohol-related problems. During 1998 GADAC saw some 105 clients⁸. Amongst this group 19 (18%) reported problems with both alcohol and illegal drugs and 31 (30%) problems with alcohol and prescription drugs⁹. The number of multiple substance misuse underlines the need for closer liaison between drug and alcohol workers.

6. CURRENT DRUG-RELATED WORKING PRACTICES AND PROJECTS

- 6.1 In preparing the Bailiwick Drug Strategy the importance of current drug-related initiatives by States departments with drug-related responsibilities and voluntary and charitable agencies, was recognised.
- 6.2 Each of the States departments represented by the Chief Officers' Group undertakes a range of drug-related work. This work includes:
 - i. **Customs** – the identification and targeting of those involved in drug trafficking; the disruption of drug supply routes, both locally and across other jurisdictions, through intelligence gathering; the seizure of drugs entering the Bailiwick, and the prosecution of offenders.
 - ii. **Police** – the prevention of proliferation, and where possible the reduction, of criminal activity associated with drug misuse by the identification of those misusing drugs and committing crimes to support their drug misuse, and the prosecution of offenders.

⁷ In 1999 the Board of Health grant to GADAC was for £41,150.

⁸ A client is defined as an individual who has been seen on more than two occasions by a counsellor.

⁹ The two groups are not mutual exclusive, as some clients reported problems with alcohol and illegal and prescription drugs

- iii. **Probation** – the preparation of Court reports; the identification of drug-related problems; assessment of risk and needs of offenders; making recommendations to the Courts regarding appropriate sentencing; developing of appropriate programmes for those under community supervision and in custody, to enable offenders to lead crime and drug-free lives.
 - iv. **Prison** – the identification and assessment of drug-related problems amongst prisoners; and the development and provision, through sentence planning, of appropriate treatment, education and prevention programmes to enable prisoners, on their release, to lead crime and drug-free lives.
 - v. **Board of Health** – the identification and assessment of the Bailiwick’s drug-related and associated health problem treatment needs; the provision of appropriate treatment services; the promotion of healthy and drug-free lifestyles for Bailiwick residents; the monitoring of prescribing practice; the annual grants made to GADAC, Drug Concern and the Sexual Health and HIV Clinic, and the provision of training for health professionals.
 - vi. **Education Council** – the development of comprehensive PSHE programmes to highlight the personal, health and social consequences associated with drug misuse in the Bailiwick’s schools and colleges, the Youth Service, particularly through detached youth programmes, and for Bailiwick students entering higher education, and the provision of training for teachers, lecturers and youth workers.
 - vii. **Children Board** – the identification of those young people and families most at risk from drug misuse; the provision of support, advice and assistance to enable them to lead drug-free lives; through the Youth Justice Plan the provision of appropriate programmes for young people who have offended and may be at greater risk than their peers of becoming involved in drug misuse, and the provision of outreach work through its Youth Justice and Fieldwork Teams and community-based family centres to contact hard-to-reach families and young people.
- 6.3 The **Royal Court** has maintained a consistent sentencing policy in respect of all drug offences. This policy has been especially firm for those convicted of importing commercial amounts of illegal drugs, imposing significant custodial offences on those so convicted. The Royal Court has made it clear that any large consignments of drugs will attract custodial sentences as the amounts imported may cause harm, by increasing the stock available within the Bailiwick, whether or not there is evidence that the amount seized constituted a commercial amount.
- 6.4 **The Bailiwick Drug Strategy does not advocate any weakening of the current sentencing policy in respect of those engaged in the importation and supply of illegal drugs.**
- 6.5 **The Bailiwick Drug Strategy supports the greater use, where appropriate, by the Royal, Magistrate’s and Juvenile Courts of conditions of sentencing and other opportunities to encourage offending drug users to reduce their drug use and offending.**

- 6.6 A more flexible approach to sentencing can ensure treatment opportunities are taken up and programmes completed, thus reducing the level of re-offending by this group of offenders.
- 6.7 In addition to the above core tasks, the individual States committees are working increasingly closely within a number of multi-agency partnerships to extend and develop their contribution to minimise the harm caused by drug misuse and its associated problems and to share knowledge and expertise.
- 6.8 This on-going work already includes aspects contained within the first three aims of the Bailiwick Drug Strategy (Appendix 1), namely:

Aim 1 - To reduce the supply of drugs, the incidence of drug-related crime, and re-offending by drug users

- i. The work of the joint Customs/Police Financial Investigation Unit and partnerships with drug enforcement agencies in other jurisdictions, as highlighted in the Edwards Report.
- ii. The effect of commercial drug seizures by Guernsey Customs and Police and the seizure of assets derived from drug trafficking.
- iii. The implementation of the Youth Justice Action Plan¹⁰, as a multi-agency partnership between Probation, Children Board, Police and Education.
- iv. The introduction of new regimes¹¹, and the emphasis placed on life skills-based education and training programmes in the States Prison.
- v. The introduction of mandatory drug testing in the States Prison.
- vi. The establishment of a pilot arrest referral scheme as a partnership between Drug Concern, the Police, Customs and Prison, aiming to identify and offer treatment to drug-using offenders as early as possible.

Aim 2 - To reduce the demand for, and acceptability of, drug misuse and increase understanding about drug misuse

- i. The Education Council's Personal, Social and Health Education (PSHE) programmes and the development of life-based skills within the Bailiwick schools, colleges and the Youth Service.
- ii. The role of outside agencies, including Police, Customs, Probation and Drug Concern, in supporting PSHE programmes to help deliver key messages about the health, personal and societal harms associated with drug misuse.
- iii. The diversity of the work undertaken by Drug Concern, particularly the partnerships with those most directly involved in drug-related work forged through the Drug Concern Group.
- iv. The development of community-based and mobile family centres by the Children Board to offer a "one-stop shop" for advice, information and support for all aspects of family life.

¹⁰ The Youth Justice Plan seeks to identify, assess and offer action plans for dealing with young people aged under 17 years who commit criminal offences.

¹¹ The new regimes involve requiring prisoners to observe rules of good order and discipline within the prison and offers additional privileges to those prisoners who do so.

Aim 3 - To improve the health of the community

- i. The drug-related support and treatment services provided by GPs, the Board of Health's Mental Health Services, Drug Concern and GADAC in the community and within the States Prison.
- ii. The introduction by the Board of Health, in partnership with the Social Security Authority, of a Prescribing Support Unit to provide advice and guidance to medical practitioners to foster best practice in prescribing.
- iii. The formation of a branch of Families Anonymous locally, offering confidential support for the family and friends of drug users.

6.9 **It is important to acknowledge the valuable contributions already being made in drug-related matters. The Strategy must build on these contributions by developing and extending the work and by monitoring and evaluating local outcomes.**

6.10 It is also essential to monitor and respond to changing patterns of drug misuse and to identify the "early warning" signs from other jurisdictions, particularly the UK and other Insular authorities.

7. PROPOSED DEVELOPMENTS IN DRUG-RELATED WORKING PARTNERSHIPS AND PROJECTS

7.1 The Bailiwick's current approach to anti-drugs measures places greatest emphasis on reducing the supply of drugs. The evidence from the UK, USA and other jurisdictions indicates that enforcement approaches alone will not prevent drug misuse and associated problems from increasing. **The Strategy recognises the importance of placing a similar emphasis on reducing demand for, and attractiveness of, drugs, treating the health consequences of drug misuse, and providing rehabilitation towards a drug-free lifestyle.**

7.2 The following proposals result from the identification of areas where existing work can to be developed and new initiatives introduced to provide a more cohesive approach, placing particular emphasis on reducing the demand for, attractiveness of, and harm resulting from drug misuse. **It is only when anti-drugs measures are addressed in the cross-committee way presented in the proposed Bailiwick Drug Strategy that the following recommendations become a top priority for the Bailiwick.**

7.3 The Presidents' Drug Policy Group recognises the importance of prioritising anti-drugs measures and each committee already prioritises measures to reduce drug misuse and the associated harm it causes. However, anti-drugs initiatives are one of a number of competing priorities for each committee and are not necessarily the top priority **but it is their belief that the following proposals for additional spending cannot be met from within the existing budgets of their individual committees.**

7.4 Further, each committee has carefully reviewed its current staff allocation and has been unable to identify any appropriate vacant posts that could be utilised for either of the two new FTE posts, namely the post of Drug Strategy Co-ordinator and of Community Psychiatric Nurse (Drugs) recommended below.

- 7.5 **If the requests for additional resources are not approved it is unlikely that committees represented by the Presidents' Group would be able to implement the Bailiwick Drug Strategy's proposals, other than to maintain their existing commitment to anti-drugs measures.**
- 7.6 It is anticipated that this additional funding will result in real future savings in terms of future drug-related spending, particularly for the criminal justice agencies and Board of Health.
- 7.7 The Drug Strategy is unable to set targets at this stage in respect of, for example reducing the number of drug-using offenders convicted of acquisitive crime associated with their drug use or reducing the number of drug users becoming infected with hepatitis C. However, the Strategy will seek to set such targets from January 2002 onwards, that is once a comprehensive local drug-related database has been established to provide the benchmarks against which these targets can be measured.
- 7.8 The Presidents' Group considers the following additional measures necessary to ensure all the Bailiwick Drug Strategy's aims are fulfilled.
- 7.9 **Aim 1 - To reduce the supply of drugs, the incidence of drug-related crime, and re-offending by drug users**
- i. Research evidence shows that early identification and targeting of those most at risk from drug misuse can prevent significant harm to the individual, their family and the community. When identified, an appropriate assessment of the needs is necessary, and treatment aimed at minimising future harm.
 - ii. The evaluation of outcomes from treatment and rehabilitation programmes in the UK and other jurisdictions indicates such programmes can significantly reduce future drug misuse and associated offending. Following arrest and during any subsequent criminal justice process, a drug-misusing offender is more likely to accept help with drug-related problems. Based on this evidence, the UK has introduced arrest and court referral schemes and community sentences linked to drug treatment.
 - iii. **It is now proposed to make an annual grant to an appropriate voluntary agency of such amount and on such terms and conditions as the Presidents' Group may deem appropriate to fund the employment of a criminal justice drug worker to work with criminal justice agencies to identify, assess the needs of, and offer treatment to, drug-using offenders¹², and to develop the local pilot arrest referral scheme.**
 - iv. The Strategy notes the Resolution of the States of 9 June 1999, inter alia:
 "2. That the Criminal Justice (Suspended Sentence Supervision Orders) (Bailiwick of Guernsey) Law, 1984, shall be amended to enable Supervision Orders to contain additional conditions as the Court may consider necessary for preventing the commission of other offences."

¹² It is not envisaged that the postholder would undertake the work already done by Drug Concern and GADAC in the Prison, but would liaise closely with both agencies.

- vi. The Strategy believes that these changes will enable the Courts to require drug-misusing offenders to undergo treatment while on community sentences of supervision, **supporting the Strategy's recommendations for developing of drug treatment and rehabilitation programmes.**
- vii. Following recent Royal Court trials, the Customs and Excise Department has been requested to endeavour to publicise, at the points of departure to the Bailiwick, the Royal Court's sentencing policy for those convicted of importing commercial amounts of drugs. During 1999 notices were placed in the in-flight magazines of all passenger carrying air and sea operators¹³.
- viii. **It is now proposed that the funding for these initiatives should be through the Bailiwick Drug Strategy as the benefits derived by deterring any potential drug importer are to the benefit of the Bailiwick as a whole and not confined solely to the work of Customs.**

7.10 **Aim 2 - To reduce the demand for, and acceptability of, drug misuse and increase understanding about drug misuse**

- i. UK research into the effectiveness of drug education programmes shows starting early and continuing beyond formal education can significantly reduce the numbers who experiment with drugs.
- ii. Although all young people are at risk from drug misuse, certain groups¹⁴ have been identified as being at a greater risk. It is essential to target these groups, but they are often amongst the hardest to reach.
- iii. Further, research has identified that those delivering such programmes must receive appropriate and up-to-date training in all aspects of drug education.
- iv. **It is now proposed that the Education Council should receive additional funding, through the Bailiwick Drug Strategy, to provide appropriate, on-going drug education training to enable its teachers, lecturers and youth workers to provide comprehensive and relevant drug education programmes for the Bailiwick's schools and colleges and Youth Service.**
- v. In attempting to reach as many Bailiwick residents with an anti-drug message and balanced information about drug misuse, its associated problems, and where to seek help and advice, the need to maximise the use of information technology has been recognised.
- vi. **It is now proposed to establish a Bailiwick Drug Strategy web-site and that the additional funding needed to set up and run the site should be made available through the Bailiwick Drug Strategy.**

¹³ This initiative was partly funded from Customs' existing budget and from the Seized Assets Fund.

¹⁴ Young people most at risk may include young offenders, those who start smoking tobacco products, sniffing solvents or drinking alcohol early and in significant quantities, come from families with multiple problems, have poor school attendance or performance records, experience difficulties in forming positive relationships within their social, family and peer groups (Goldberg, 1999).

- vii. Written policies to deal with drug-related incidents in schools are important and the Education Council has recently revised its policy. These policies are equally important in the workplace.
- viii. **It is now proposed, through the Bailiwick Drug Strategy, to encourage and support employers to develop such policies and that additional funding required to promote this proposal should be made available through the Bailiwick Drug Strategy.**

7.11 **Aim 3 – To improve the health of the community**

- i. Health service professionals have identified that a named specialist within a particular field improves the quality of service offered and enables those responsible for making referrals to do so with greater confidence.
- ii. In the UK increased numbers of criminal justice-linked drug referrals has shown that a successful outcome is significantly increased when the individual is able to enter a treatment programme as quickly as possible.
- iii. The Presidents' Group recognises that the available local data indicates that upwards of forty individuals are currently receiving treatment and support for drug-related problems¹⁵.
- iv. **It is now proposed that the Board of Health should receive additional funding, through the Bailiwick Drug Strategy, to allow for the appointment of an additional community psychiatric nurse to be employed within the Board's Adult Mental Health Services.**
- v. **Further, that agreement, in principle, should be given for the funding to allow similar provision to be made for Child and Adolescent Mental Health Services, subject to local evidence to support the need.**
- vi. Consideration was given to contracting out these appointments, recognising the requirement for additional establishment as well as funding. However, the Board of Health believes it is essential for these posts to be within existing mental health teams to facilitate development of appropriate, cohesive and comprehensive treatment and rehabilitation programmes based on a full assessment of both drug and other health-related needs. Drug misuse is often a symptom of underlying addiction or mental health problems and so should not be treated in isolation.

7.12 **Aim 4 – To build on current drug-related initiatives and partnerships, develop a drug database and monitor and evaluate the implementation of the Bailiwick Drug Strategy**

- i. As previously highlighted (see Para 2.1-2.3) there are significant difficulties in estimating the prevalence of drug misuse, associated health and societal harm and the incidence of drug-related offending in the Bailiwick.

¹⁵ This group is spread across a number of agencies, including GP practices, Mental Health Services, Drug Concern and GADAC.

- ii. The development of a centralised drug-related database is essential to identify and assess the need for drug-related services¹⁶. **A local drug database will ensure development of the Bailiwick Drug Strategy will be in response to identified changes in the patterns of drug misuse by providing local evidence-based information.**
- iii. The monitoring and evaluation of the effectiveness of drug-related services and programmes is equally important if they are to remain appropriate to address the Bailiwick's drug-related needs.
- iv. **It is now proposed that an additional Established post should be created for a Drug Strategy Co-ordinator to be responsible to the Chief Officers' Group for the delivery, monitoring, evaluation, and development of the Bailiwick Drug Strategy. The postholder would also be responsible for establishing a centralised Bailiwick drug database to record uniformly the data currently collected by individual States committees and voluntary agencies and for liaison between the Presidents' and Chief Officers' Groups and those working in drug-related areas.**
- v. Consideration was given to contracting out this appointment. However, to ensure accountability for the Bailiwick Drug Strategy through the Presidents' Group to the States of Guernsey, it was regarded as essential for the postholder to be a civil servant.

8. CONSULTATION

- 8.1 To facilitate the consultation process three **Key Stakeholder Groups** were established, providing a cross-agency forum in each of the following areas:
 - a) **Law Enforcement** – including representatives from Police, Customs, Prison, Probation, Youth Justice Team, Drug Concern and GADAC.
 - b) **Drug Education and Prevention** – including representatives from Bailiwick's primary and secondary schools and colleges, Youth Service, Youth Concern, Drug Concern, GADAC and Health Promotion Unit.
 - c) **Drug Treatment and Rehabilitation** – including representatives from Adult and Child and Adolescent Mental Health Services, Prison Medical Service, Community Sexual Health and HIV Services, GP practices, pharmacists, Drug Concern, GADAC and Probation.
- 8.2 The Chief Officers' Group has also liaised with the Bailiff, Law Officers of the Crown and Magistrate, with particular reference to proposals relating to criminal justice interventions and sentencing.
- 8.3 In addition the Executive Officer has worked closely with staff from the key voluntary, community and charitable agencies, General Practitioners, and personnel within those States departments, with drug-related responsibilities. Further, most members of the Chief Officers' Group are also members of the Drug Concern Group and/or the Executive Committee of GADAC.

¹⁶ Enforcement, educational, preventive, treatment and rehabilitation.

- 8.4 These partnerships aimed to seek the views and opinions from a wide cross-section of those working most closely in drug-related areas.
- 8.5 The *Draft Bailiwick Drug Strategy – Consultation Document* and the supporting *Research Report* were published in August 1999 and public meetings were held in Guernsey and Alderney. The Group also organised the distribution of a leaflet highlighting the key principles of the Bailiwick Drug Strategy to each household in the Bailiwick.
- 8.6 Following the publication of these documents feedback from across the Key Stakeholder Groups and the general public has been received. The feedback has fallen into the following areas:

- i. **Alcohol** – the prevalence of alcohol misuse and associated crime, health and societal problems compared with drug misuse was raised several times.

The Strategy recognises the significant problems alcohol misuse causes and the links between alcohol and drug misuse.

The misuse of alcohol in Guernsey was the subject of a special report to the States by the Medical Officer of Health in 1997. The Board of Health intends to report on further progress in another policy letter in the near future.

- ii. **Misuse of prescription drugs** – the feedback has identified significant concern about the apparent ease with which prescription-only drugs can be obtained without a prescription.

The Strategy recognises the importance of the establishment of the Board of Health and Social Security Authority's Prescribing Support Unit and will endeavour to work closely with this Unit to stem the misuse of prescription-only drugs, including any legislative changes that may be deemed necessary.

- iii. **Education and prevention** – support for the need to extend and develop the Bailiwick's existing drug education and prevention programmes has been strongly reflected in the feedback. The key points identified included that education is not the sole responsibility of schools and the need to develop a programme of life-long learning.

The Strategy will endeavour to develop opportunities to provide drug-related education through a range of contacts with Bailiwick residents of all ages and community groups and organisations.

- iv. **Multiple addiction and health problems** – a number of the health professionals identified the importance for any drug-related assessment to include other addictive behaviour and health (physical and mental) problems. A broad-based assessment is recognised as essential if the outcomes of treatment and rehabilitation programme are to be maximised.

The Strategy has included these comments in its proposals for the identification and assessment of drug misusers. In its recommendation for the development of drug-related treatment programmes (see Para 7.10.iv) the need for services to be within, or offer open referral to, existing mental health and other specialist health services is supported (see Para 7.10.v).

- v. **Sentencing** – the feedback on sentencing of drug misusers produced some of the most diverse views.

A small percentage expressed the view that the Bailiwick should increase the penalties, believing the likelihood of receiving an immediate custodial sentence for possession of a controlled drug would discourage young people from experimenting with illegal drugs.

A larger percentage supported the Strategy's view that sentencing of drug using offenders should be appropriate and make best use of the range of sentencing options available to the Courts.

It was also felt important to distinguish between the drug-using offender and those engaged in trafficking and supplying illegal drugs. The Strategy recognises the importance of maintaining a consistent approach to sentencing, but equally identifies the need for appropriateness and more flexibility in the sentencing of drug-using offenders.

The Strategy supports the proposals for additional means for sentencers to require offenders to undergo treatment as part of community sentences of supervision (Resolutions of Billet d'Etat XI, 1999) (see also Para 7.5.v-vi).

9. **DELIVERY OF THE BAILIWICK DRUG STRATEGY**

- 9.1 A number of options for the most appropriate "vehicle" to deliver the Bailiwick Drug Strategy were considered. The underlying aim was to identify a mechanism that was simple but provided a cross-committee approach and an identifiable chain of accountability back to the States of Guernsey.
- 9.2 Further, the Presidents' Group was mindful that, as far as possible, the "vehicle" should not be too readily identifiable as being linked to a particular lead, for example the Committee for Home Affairs, Board of Health, etc, as the underlying principle of the Strategy is for cross-committee, shared responsibility.
- 9.3 Following consultation with the Advisory and Finance Committee, it was agreed that the Presidents' Group should be responsible for overseeing the implementation of the Bailiwick Drug Strategy, the Group to be chaired, on a rotating basis, by the committees involved.
- 9.4 The Presidents' Group believes that it is essential for the Chief Officers' Group to retain responsibility for co-ordinating and developing the Bailiwick Drug Strategy. The Advisory and Finance Committee supports this view.

- 9.5 The Advisory and Finance Committee accepted that there was some benefit in Strategy funds being held by, and the proposed post of Drug Strategy Co-ordinator being part of the staff of, an “independent committee”, and is prepared to consider undertaking this role. Under such an agreement the Drug Strategy Co-ordinator would, in practice, work to the Chief Officers’ Group, and funds would be released on the authority of the Group. These arrangements would be acceptable to the Presidents’ Group.
- 9.6 Finally, the Presidents’ Group will, if the proposed Bailiwick Drug Strategy is approved, retain Key Stakeholder Groups, comprising senior staff representatives from those States committees and voluntary agencies with drug-related responsibilities. These groups would provide operational support and direction for the implementation and development of the Strategy.

10. ALDERNEY AND SARK

- 10.1 The initial focus was for the Chief Officers’ Group to develop an Island Drug Strategy, but the problems associated with drug misuse (economic, health and societal) are equally applicable throughout the Bailiwick.
- 10.2 The appropriate authorities in Alderney and Sark have been consulted and have expressed their support for the development of the Bailiwick Drug Strategy, recognising the potential impact on, and costs to, their communities of a growth in the prevalence of drug misuse and its associated problems.

11. CONCLUSIONS

- 11.1 As stated within the Strategy:

“Drug misuse will not disappear of its own accord. Drug traffickers will continue to attempt to import illegal drugs into the Bailiwick, as there are vast profits to be made from this ‘trade’.

Nevertheless, the Bailiwick cannot afford to place too great a reliance on enforcement strategies alone.

It is essential to seek to address the demand for, and attractiveness of, drugs if misuse is to be stemmed.”

- 11.2 The street prices in the Bailiwick are significantly higher than elsewhere (Para 2.13 and Appendix 5). Therefore profit margins are also higher and so the risk of detection and a custodial sentence must also be greater. The Strategy recognises that if the sentencing policy for those engaged in importing and supplying commercial amounts of drugs was the same in the Bailiwick as elsewhere, it could lead to significant increases in the amounts and types of illegal drugs being targeted towards the Islands.
- 11.3 **The Royal Court’s current sentencing policy, together with the work of Customs and Police drug enforcement teams, seeks to increase the risks taken by those attempting to import drugs into the Bailiwick.**

- 11.4 The Strategy recognises the importance of seeking to minimise the harm that drug misuse causes to all those affected – individual drug users, their family and friends, and society as a whole.
- 11.5 **The concept of harm minimisation does not represent a softening of resolve to reduce drug misuse but seeks to reduce the impact which drug misuse has on all those affected by it.**
- 11.6 The Strategy's recommendations are based on analysis of the evidence of drug-related approaches and interventions proven to be effective in other jurisdictions in reducing the prevalence of drug misuse, in reducing the incidence of significant medical problems or sudden drug-related death, and in enabling those already misusing drugs to reduce and stop and so lead drug-free lives.
- 11.7 **The Strategy seeks to offer a balanced and cohesive approach to the supply and demand elements of drug misuse.** Similar philosophies underpin both law enforcement that is the reduction of supply and education, prevention, treatment and rehabilitation, that is the reduction of demand, namely:
- a) **Identification** – including drug traffickers and misusers, supply routes, changing patterns and gaps in service provision and treatment and rehabilitation needs.
 - b) **Assessment** – including treatment and rehabilitation needs, health and societal consequences, links between drug misuse and offending, high-risk groups and education and prevention priorities.
 - c) **Action** – provision of appropriate and flexible enforcement, education, prevention, treatment and rehabilitation services.
- 11.8 Individuals, particularly young people, will continue to experiment with drugs, partly because of popular culture, and in the misconception that some drugs are “OK”, even “safe”, to use.
- 11.9 **The Bailiwick Drug Strategy marks a new phase in drug-related work by building on established foundations and taking a cross-committee perspective to minimise drug misuse and associated harm.** It seeks to provide a long-term plan addressing drug misuse through co-ordinated, cross-committee and cohesive action by:
- a) **Developing and extending existing working partnerships between those committees and agencies working in drug-related areas.**
 - b) **Utilising all contacts with drug users and their families and partners to minimise the supply of, and demand for, drugs.**
 - c) **Extending a cohesive response and shared ownership of objectives.**

12. **RECOMMENDATIONS**

- 12.1 The Presidents' Drug Policy Group and their individual committees have considered the Chief Officers' Drug Strategy Group's report. Taking into account the finance and staffing restrictions, the States are recommended:
- i. To affirm the commitment of the States of Guernsey to reducing the misuse of drugs, and reducing both the direct and indirect harm caused to Bailiwick residents as a result of the misuse of drugs, through the adoption of policies contained in the Bailiwick Drug Strategy which reflect those objectives.
 - ii. To endorse the aims of the Bailiwick Drug Strategy to:
 - a) reduce the supply of drugs, the incidence of drug related crime, and re-offending by drug users.
 - b) reduce the demand for, the acceptability of, and to increase the understanding of the community about, drug misuse.
 - c) improve the health of the community.
 - d) build on current drug-related initiatives and partnerships, develop a drug database, and monitor and evaluate the implementation of the Bailiwick Drug Strategy.
 - iii. To approve the objectives outlined in the Bailiwick Drug Strategy recognising that full consultation must take place with the Civil Service Board to secure the staff resources¹⁷ necessary to implement the Strategy acknowledging the possibility of an overall increase in States establishment¹⁸.
 - iv. To delegate responsibility for the implementation of the Bailiwick Drug Strategy to the Presidents of the Board of Administration, Committee for Home Affairs, Board of Health, Education Council, Children Board and Probation Services Committee as the Presidents' Drug Policy Group.
 - v. To direct the aforementioned Presidents to direct their respective Chief Officers (in the case of the Board of Administration the Chief Officer of Customs and Excise and in the case of the Committee for Home Affairs the Chief Officer of Police and the Prison Governor) to continue the work of the Chief Officers' Drug Strategy Group.
 - vi. To authorise the Presidents' Drug Policy Group to appoint an appropriate existing local voluntary agency to employ the Criminal Justice Drugs Worker, as set out in this report.

¹⁷ See paragraphs 7.10.vi. and v. and 7.11.iv

¹⁸ The Committees concerned in drawing up the Strategy, as at paragraph 1.7, have made it clear that they are not capable of finding the extra resources from their own establishment (see paragraphs 7.3 to 7.5).

- vii. To authorise the Advisory and Finance Committee, to make an annual grant to that agency when appointed.
- viii. That the amount of such grant be in such sum as the Advisory and Finance Committee may deem appropriate but not exceeding £18,000 for the year 2000.
- ix. To direct the Advisory and Finance Committee to increase its budget for 2000 by an amount not exceeding £18,000 under States financial procedures and also to direct the Committee to take into account the future provision of an annual grant to the appointed agency when recommending to the States non-formula led revenue allocations for the Committee in 2001 and subsequent years.
- x. To direct the Advisory and Finance Committee to increase its budget for 2000 by an amount not exceeding £141,744 (as laid out in Appendices 7, 8 and 9) under States financial procedures for the implementation of the Bailiwick Drug Strategy and also to direct the Committee to take account the future provision for the Bailiwick Drug Strategy when recommending to the States non-formula led revenue allocations for the Committee in 2001 and subsequent years.
- xi. To direct the Presidents' Drug Policy Group to report back to the States of Guernsey on the delivery, outcomes and development of the Bailiwick Drug Strategy by way of an Annual Report.

APPENDIX 1

BAILIWICK DRUG STRATEGY - EXECUTIVE SUMMARY

1. Nature of the Problem

Drug use is a serious problem which, despite the best efforts of the departments and agencies working to reduce availability and demand for drugs, has grown significantly over the past decade. The use of drugs may appear to some a safe or even desirable activity, providing enjoyment and a temporary escape from difficulties, but the enormous risks must be recognised.

The costs to the community from drug misuse are significant, including increased levels of crime and the fear of crime, greater costs to the criminal justice system and higher demand for health services. The Bailiwick may currently have few negative indicators most typically associated with drug misuse, but this is no reason for complacency. The Bailiwick cannot ignore increasing drug misuse locally and in the UK and other insular authorities.

2. Aims of the Bailiwick Drug Strategy

The Strategy acknowledges that a drug-free society, however desirable, is unlikely to be achievable. Nevertheless, this should not weaken the resolve to minimise the harm that drug misuse causes. This harm minimisation philosophy permeates the aims of the Strategy, namely:

- To reduce the supply of drugs, the incidence of drug-related crime, and re-offending by drug users.
- To reduce the demand for drugs and the acceptability of drug misuse, and increase the understanding of the community about drug misuse.
- To improve the health of the community.
- To build on current drug-related initiatives and partnerships, develop a drug database, and monitor and evaluate the implementation of the Strategy.

The Bailiwick Drug Strategy does not advocate any weakening of the vigilance or resolve of Police and Customs to intercept and cause maximum disruption to the supply of illegal drugs. Rather, drug misuse will only be effectively reduced when the supply of and demand for drugs is addressed with equal commitment.

The Strategy aims to provide a cohesive approach, responsive to changing patterns of drug misuse and based on a harm minimisation approach, that is:

- The **identification** of the nature and consequences of drug misuse;
- Careful **assessment** of the needs of those affected; and
- Provision of appropriate **action**, including treatment and rehabilitation services, to enable those affected by drug misuse to lead drug-free lives.

3. Method of Working

In preparing a draft Bailiwick Drug Strategy, the work already being undertaken in drug-related areas was recognised, including:

- a. Community supervision of drug misusing offenders by the Probation Service.
- b. Unique working partnership between Police and Customs through the Police and Customs Intelligence Units and the Joint Financial Investigation Unit.
- c. Proactive approaches of Guernsey Customs' drug enforcement teams in gathering intelligence and targeting key individuals.
- d. Working partnerships between local Police and Customs drug enforcement and financial investigation teams with similar teams in other jurisdictions.
- e. Emphasis placed on drug education within the schools, where Personal, Social and Health Education (PSHE) is part of the core curriculum.
- f. Contribution of outside agencies to drug education in schools and the community.
- g. Annual grants made by the Board of Health to Drug Concern and GADAC.
- h. Development of community-based family centres by the Children Board to offer a 'one-stop shop' for advice and support in all aspects of family life.
- i. Range of drug-related information, advice, treatment and rehabilitation services offered by Drug Concern both in the community and States Prison.
- j. Development of multi-agency partnerships, particularly through Drug Concern.
- k. Provision of money from the Seized Assets Fund (Appendix 6) for anti-drug initiatives.

Drug misuse will not disappear of its own accord.

Traffickers will continue to target the Bailiwick, as there are vast profits to be made from this trade in illegal drugs.

The Bailiwick cannot afford to place reliance on enforcement strategies alone. It is essential to address demand for, and attractiveness of, drugs if misuse is to be stemmed.

For the Bailiwick Drug Strategy to succeed, it is essential that the whole community shares the responsibility to act against drug misuse and to act in partnership with those working most directly with drug misusers or to reduce the supply of illegal drugs. The emphasis within the Strategy should be equally distributed between law enforcement and reduction of supply issues and education, prevention, treatment, and rehabilitation and reduction of demand issues.

The Drug Strategy seeks to provide a long-term plan to address these issues through co-ordinated, cross-committee and cohesive action against drug misuse including:

- formulation of a clear policy.
- development of a clear strategic approach.
- review of operational approaches and priorities
- collection and collation of good quality information.
- best practice and rigorous monitoring and evaluation of results
- development of new initiatives and approaches based on sound evidence.
- co-operation and commitment from all, not just a 'concerned few'.

The Bailiwick Drug Strategy marks a new phase in drug-related work by building on the well-established foundations and taking a broader and longer-term perspective on minimising drug misuse and the associated harm. The eradication of drug misuse may not be possible. However the provision of adequate resources to deliver the Strategy's recommendations and the community's commitment to share its aims can minimise the harm that drugs can cause.

4. Scale of the Problem

The availability of comprehensive data about the scale of drug use in the Bailiwick is limited. However, it is possible to gain a general perspective of the extent of the problem from those agencies involved in drug-related work. Local drug information shows that drugs are readily available in the Bailiwick and an increasing number of individuals now misuse drugs regularly.

5. Resourcing the Bailiwick Drug Strategy

The Bailiwick Drug Strategy seeks to secure dedicated resources to address the consequences of drug misuse and provide a positive investment in prevention. These resources will be prioritised and targeted towards those most at risk from drug misuse, particularly young people.

6. Research and Data Collection

Research and data collection will be central to the development of the Bailiwick Drug Strategy. The extent and nature of drug misuse varies between jurisdictions and, by combining a broad base of research with locally collected evidence, it should be possible to develop responses which are tailored to the Bailiwick's drug-related needs and are also effective and cost-efficient.

7. Monitoring and Evaluation

An objective approach to monitoring and evaluating the impact of the Bailiwick Drug Strategy is important to ensure the Strategy's results can be measured and, where necessary, adjusted in response to changing trends. It is also vital to develop best practice and, by building on the outcome, the effectiveness of the Strategy in tackling drug misuse will be maximised.

8. Conclusions

Drug prevention strategies are the concern and responsibility all. The Strategy must provide balanced and systematic approaches, addressing the central objectives and responding to changing patterns.

The Bailiwick Drug Strategy acknowledges the existing work by departments and agencies with a specific drug focus and aims to build on these approaches.

Cross-agency and community responses are central and to succeed initiatives must be tailored to local needs and results measured.

The Bailiwick Drug Strategy must build on existing partnerships and must address changing trends and new challenges through a proactive strategic approach aimed at minimising harm.

Aim 1. To reduce the supply of drugs, incidence of drug-related crime and re-offending by drug users

The Bailiwick's drug enforcement teams are a key element in reducing the supply of drugs. Their principal roles are to prevent the importation of illegal drugs, disrupt the routes through which these drugs are bought and sold and identify those dealing in drugs.

Research in the UK has identified significant links between drug use and crime, but many individuals involved in crime do not use drugs and similarly many drug users are not involved in any criminal activity aside from the illegality of their drug use.

However, a growing number of those coming into contact with the criminal justice system are misusing drugs and it is important to identify them, assess their needs and offer appropriate treatment or other support services.

There is an increasing evidence-base suggesting a comprehensive approach to drug-related interventions by the criminal justice system can result in marked reductions in the amount of crime associated with drug use and the level of re-offending by drug-using offenders. This protects the community from anti-social and criminal behaviour and enables individuals with drug problems to overcome them and live drug and crime-free lives.

Each stage of the criminal justice system provides the potential for intervention and diversion from future offending:

- **Police and Customs** – usually on arrest.
- **Court** – either at remand or sentence hearing.
- **Probation** – during the preparation of a pre-sentence report, as part of a community-based sentence or during post-release supervision.
- **Prison** – whilst on remand, during a custodial sentence or prior to release.

These opportunities to identify, assess and address drug use equally apply to young people and youth justice projects have highlighted the following:

- i. drug use may be one of a matrix of problems;
- ii. drug use may exacerbate other problems;
- iii. different problems are often addressed individually by different agencies;

The criminal justice system must work collaboratively to reduce the incidence of drug-related crime and re-offending by drug-users. The need for proper assessment is critical to identify the most appropriate approaches to address an individual's drug use and offending. Any court sentence should seek to prevent re-offending and protect the community. These programmes are not easy options, but can produce significant savings and long-term reductions in drug-use, drug-related offending and other anti-social problems.

Key points

The Bailiwick currently has few negative indicators typically linked to drug use.

The scale of drug use in neighbouring jurisdictions should be seen as a warning of how close the Bailiwick is to substantial drug-related problems.

An increasing amount of crime in the Bailiwick is drug-related.

The costs to the criminal justice system from drug misuse are substantial and for the Bailiwick were estimated to be in the region of £3million for 1998.

The criminal justice system can act as an effective intervention point to attempt to break offending behaviour patterns associated with problematic drug misuse.

Initiatives must target drug-misusing offenders and develop partnerships between all agencies within drug and criminal justice fields, through:

- provision of adequate resources to support programmes;
- effective integration of partnerships within the criminal justice system;
- development of a shared responsibility to intervene;
- development of effective consultation and communications between the individual agencies.

The work of Customs and Police is having a deterrent effect in the Bailiwick as drug traffickers increasingly recognise there is a strong likelihood of being caught and receiving a substantial custodial sentence.

The introduction of Caution Plus¹⁷ for juveniles has shown some marked early successes and should be considered in some drug-related cases.

Probation officers develop and encourage the offender's motivation to change, while under supervision and in custody, and collaborate with specialist agencies to provide help and treatment.

Evidence from UK-based initiatives shows that targeted programmes are particularly successful in reducing drug use and associated crime levels.

The Strategy's success can be enhanced through the development of shared partnerships between the criminal justice systems, drug agencies and community groups, including crime prevention panels.

The Probation Service has a key role in assessing the relationship between an offender's drug use and offending and affords opportunities for drug offenders to take responsibility for their behaviour and future.

ACTION PLAN - Objectives

1. Continue support and funding for Police and Customs drug enforcement teams to ensure they remain highly trained and professional drug enforcement bodies.
2. Continue support for the development of the unique working partnership between Police and Customs in respect of drug-related investigations and endorse the Memorandum of Understanding between the two departments.
3. Continue to maintain support for consistent but appropriate sentencing for drug offenders.
4. Develop a collaborative approach to target drug users within the criminal justice system and enable them to live drug and crime-free lives.
5. Develop a philosophy of shared responsibility to intervene and offer treatment opportunities for drug-using offenders through the criminal justice system and to be continued on release from custody.
6. Support the Youth Justice Plan, particularly the introduction of Caution Plus, and for sentencing options available to the Courts to be applied, where appropriate, to drug offenders in line with other criminal offences.

7. Develop a single assessment for criminal justice interventions, with emphasis on both substance abuse and offending behaviour.
8. Support legislation providing sentencers with additional means to require drug-misusing offenders to undergo treatment under community supervision sentences.
9. Monitor and evaluate all criminal justice drug-related interventions, for adult and juvenile offenders both in the Bailiwick and in other jurisdictions.
10. Publicise the Bailiwick Court's firm sentencing policy for drug traffickers and the proactive approach of Guernsey Customs, particularly around UK points of departure.

Aim 2. To reduce demand for, and acceptability of, drug misuse, and to increase understanding about drug misuse

Drug education programmes address the 'demand' side of the drug supply and demand equation. *Tackling Drugs to Build a Better Britain* identifies as a key aim to help young people resist drug use and achieve their full potential in society:

“Young people and those responsible for them need to be prepared both to resist drugs and... to handle drug-related problems... Prevention should start early... and build appropriate programmes for young people as they grow via youth work, peer approaches and wider community support.”

In the last decade UK and USA-based research into drug misuse among young people has identified the following key points:

- most common in late teen years and early twenties.
- the average age of first use/experimentation is dropping.
- there are strong links between drug use, school exclusion and offending.
- approximately 50% of young people will take an illegal drug at some stage, but only about 20% will misuse drugs regularly and very few on a daily basis.
- young people who use tobacco, alcohol and solvents at an early age are more likely to misuse drugs.
- most young people start using drugs out of curiosity, boredom or peer pressure.
- the role of the family is crucial in helping to form young people's opinions.

¹⁷ Caution Plus is an extension of Police cautions and involves Police, Probation, Children Board and Education staff in working with the young person to identify why he/she has offended and to prevent him/her from re-offending.

The following are central to any drug education and prevention strategy:

- easy access to information to enable young people to make informed choices about the risks and consequences of drug misuse, and education for families and others to assist young people to these choices
- approaches that seek to make drug misuse less 'acceptable'
- promotion of self-esteem and development of life skills to resist peer pressure
- targeting programmes towards high-risk groups
- making information accessible to young people
- provision of confidential and non-judgemental access to treatment programmes for young people who have become involved in drug misuse

Drug education should ensure that young people understand the health, social and legal risks of substance use and community wellbeing. The programmes should start early, be integrated into the Personal, Social and Health Education syllabus and continue beyond formal schooling, as this will increase their relevance and generate a greater sense of self-responsibility among young people.

The youth service is well placed to play a key prevention role, particularly through detached workers who are more able to contact young people most at risk from drug misuse and who are among the hardest group to reach. The Internet can play an important role in disseminating information to all members of the community.

Key points

Drug prevention strategies must reflect the nature of drug use within the community and should not ignore the use of prescription drugs, other substances and the use of drugs in sport.

Research shows early tobacco, alcohol and solvent use can act as predictors of later drug use.

Awareness, knowledge and beliefs govern the choices we make about drugs.

The media and the Internet play an important role in informing and educating the community about all issues associated with drug use.

Drug prevention initiatives should target places where young people gather.

Drug education should not be confined to the health consequences, but include wider social issues and the effects on education and employment opportunities.

Drug education should not be confined to illegal drugs but should also seek to minimise the harm caused by other substances.

Educational messages should reflect general value systems of the target group.

Schools should have a written policy on drugs and teachers and youth workers should be trained to deal with drug-related incidents.

The Youth Service plays an important role in drug prevention and education, particularly through detached youth workers.

Employers should have a written policy on drugs.

ACTION PLAN - Objectives

1. Provide adequate funding for drug education programmes within the Bailiwick's schools and colleges to remain relevant, credible and informative.
2. Support the Island Youth Service to develop its contribution to drug prevention, particularly targeted at those at greatest risk from drug misuse but among the hardest to reach.
3. Develop drug education programmes that target the problems faced by Bailiwick students entering higher education.
4. Develop drug education programmes that promote life skills and ensure that links with areas of the PHSE syllabus, particularly in respect of alcohol, tobacco and solvents are made where appropriate.
5. Monitor and evaluate the results of drug education and prevention programmes, in parallel with the evaluation of the Bailiwick's anti-smoking initiatives.
6. Include the community in drug education programmes, by developing, co-ordinating and evaluating initiatives to ensure the objectives of the Strategy are presented to as wide an audience as possible and that opinion is sought as to future developments.
7. Utilise community centres, including the Children Board's community family centre, as 'satellite' sites for drug prevention outreach work.
8. Establish a web-site to publicise the Strategy's aims and an anti-smuggling message.
9. Proactively engage the media to ensure the aims of the Strategy are accurately reported and to encourage them to play a key role in delivering anti-drug messages.
10. Encourage the development of school and workplace drug policies.

Aim 3. To improve the health of the community

Different drugs are used in different ways, by different people and with different levels of risk. Whilst there is increasing evidence that a significant number of under-35s will misuse drugs at some stage – experimentally, occasionally or recreationally - only a very small minority of these will become drug dependent.

The effects of drugs are difficult to predict. There are no simple cause-and-effect statements about drug use. There is little evidence to support the hypothesis of 'gateway drugs', e.g. whether smoking cannabis can lead to more serious drug misuse. Similarly, a relationship between recreational use and later dependency remains unproven.

A clear definition of drug misuse is essential to identify the need for multi-disciplinary and collaborative working when providing drug services and the need for all agencies to share responsibility for service provision and initiating interventions, for example:

“A misuser is a person who experiences, or may experience, social, psychological, physical or legal problems relating to intoxication, or the regular excessive consumption or dependence as a result of their use of drugs and/or alcohol.”

The Bailiwick Drug Strategy recognises the need to reach young people, as they are a high risk group, tending to be less discriminating when misusing a range of drugs (illegal and prescription) and being more influenced by availability, price, recommendations from their peers and then the effects of the substance. The emerging lessons from UK research indicate early intervention has the most successful long-term outcomes. The needs of young people should be prioritised in two distinct areas:

- i. **discouraging young people from misusing substances** – including education, prevention and a shared responsibility to discourage drug misuse
- ii. **access to drug misuse services** – services should address the local nature and scale of drug misuse and be part of a multi-disciplinary approach.

The provision of drug treatment services may not be regarded as so rewarding as the provision of other health services. However, it is important to balance this view against the potential costs that this relatively small group can generate. UK drug treatment programmes indicate that they are in effect self-financing, as potential savings to society are greater than expenditure on services.

It is difficult to predict whether a similar equation would apply for Guernsey. Nevertheless, the evidence suggests that treatment can work and, more importantly, be cost effective:

“... For every extra £1 spent on drug use treatment, there is a return of more than £3 in terms of costs savings associated with lower levels of victim costs of crime, and reduced demands upon the criminal justice system.” (Gossop *et al*, 1998)

Key points

There is a need to assess accurately the number of drug users who may require treatment, through a single system for recording contacts.

Professionals who work in family situations with children vulnerable to drug use should receive appropriate training.

Drug treatment and rehabilitation services should be targeted at those most at risk.

Outcomes from targeted drug treatment services indicate that treatment works, reducing drug misuse and associated harm to health and society.

There is a need to provide confidential and non-judgemental treatment programmes for all those who are affected by drug misuse.

Treatment services should include clear guidelines about service delivery and outcome evaluation

Since its establishment in 1991 Drug Concern has contributed to the reduction of harm drug misuse causes drug users, their families and the community.

GADAC's work focuses on alcohol and drug-related problems and how they affect individuals, families, and the community and also aims to raise public awareness about alcohol and drug problems.

Self-help and support groups, including Narcotics Anonymous and Families Anonymous, play a valuable role.

ACTION PLAN - Objectives

1. Develop specialist treatment and rehabilitation services that address all of a drug user's health needs and provide assessments, treatment and prescribing services for both adult and young drug users.
2. Provide integrated and targeted interventions to reduce an individual's drug misuse, minimise the associated risks and enable drug misusers to stop and live healthy and drug-free lives.
3. Develop a philosophy of shared responsibility to intervene and offer treatment opportunities for all drug users who make contact with health-related agencies.
4. Support the Child and Adolescent Mental Health Services in the development of targeted interventions for young people and families who may be most at risk from drug misuse and in the development of a collaborative multi-agency approach.

5. Develop a confidentiality protocol for the sharing of information between agencies and a cohesive approach to treatment services, as outcomes are improved where the causal links for an individual's drug use are addressed.
6. Monitor and evaluate existing drug-related services and ensure that data is uniformly recorded so that comparisons can be made.
7. Establish protocols between the Social Security Authority and Board of Health and doctors to minimise the misuse of prescribed drugs.
8. Provide support and training for those working with drug users and their families.
9. Support and encourage the development of self-help and support groups for drug users, their families and friends.

Aim 4. To build on current drug-related partnerships, develop a drug database and monitor and evaluate the implementation of the Strategy

The Bailiwick Drug Strategy provides an important opportunity to change the way the islands address drug-related matters. It can make a positive impact on drug use if implemented by and for the community. While some may regard the need for such a Strategy as regrettable, it is important to focus on the positive contributions already being made, including initiatives begun in 1999, namely:

- a. the establishment by Drug Concern of a pilot arrest referral scheme, through a partnership between Police, Customs and the Prison
- b. the formation of a local branch of Families Anonymous
- c. the development by the Children Board of community-based family centres which offer a 'one-stop shop' for advice and support relating to all aspects of family life
- d. the introduction of mandatory drug testing within the States Prison.

The Bailiwick Drug Strategy must seek to develop, extend and improve existing initiatives, more rigorously monitor and evaluate the local situation and respond to changing patterns of drug misuse by identifying 'early warning' signs from the experience of the UK and other insular authorities.

The following are central to the delivery, development and monitoring of the Strategy:

- i. to retain the Presidents' Policy Group to provide:
 - policy formulation
 - public accountability

- ii. to retain the Chief Officers' Group to provide:
 - strategic direction
 - executive responsibility
 - management of resources and allocation of funding for projects
 - monitoring cost-effectiveness and best practice for service delivery
- iii. to establish a post as Drug Strategy Co-ordinator to:
 - co-ordinate and develop the Strategy
 - monitor and evaluate the implementation of the Strategy
 - establish a Bailiwick Drug Misuse Database
- iv. to retain the Key Stakeholder Groups to:
 - deliver the Strategy
 - provide operational direction
 - identify changes in the nature or scale of drug misuse in the Bailiwick
 - facilitate the implementation of the Bailiwick Drug Strategy.

The costs to society from drug misuse are considerable, albeit extremely difficult to calculate accurately. These costs fall into two broad categories:

- **direct costs** – society's spending on drug-related services and initiatives, including criminal justice costs from drug-related cases, drug education and prevention programmes and drug-related treatment and rehabilitation services
- **indirect costs** – the costs incurred from the harm resulting from drug misuse, including loss of employment or productivity from the effects of drug use, higher insurance premiums from increased levels of criminality and those associated with the breakdown in relationships

The Bailiwick Drug Strategy cannot be successfully implemented without additional spending. The demand for drugs is increasing in Guernsey, albeit not at the level recorded in other jurisdictions.

Nevertheless, there is growing evidence locally that drug misuse is becoming an increasingly significant factor in criminal activity and anti-social behaviour. The additional expenditure must be regarded as preventing future escalating costs that will result from increased drug misuse.

The Strategy must provide a balance of approaches that seek to address with equal vigour both sides of the drug equation, namely the supply of and demand for drugs.

In addressing the complex issues relating to drug misuse, it is important that Guernsey seeks to learn from the experience of other jurisdictions and aims to target those most at risk from drug misuse. Early intervention, particularly among young people, is significantly more effective and cost-efficient than action later on.

The Presidents' Group believes the resources required to implement the Bailiwick Drug Strategy should be provided centrally, thus emphasising that drug misuse is not the remit of a single committee and nor can it be successfully addressed through a single approach.

The Strategy recognises the need for shared responsibility to address all aspects of drug misuse and recommends funding should equally reflect this shared, cross-committee response. Such funding would facilitate better multi-agency co-operation and cohesion and ensure the monitoring and evaluation of the services reflect the aims of the Strategy as a whole, rather than becoming focused within the mandate of one committee.

The Bailiwick Drug Strategy's outcomes will be monitored and audited to ensure best use of resources for its implementation is made and the results from programmes implemented under the Strategy will be monitored and evaluated.

ACTION PLAN - Objectives

1. Develop and extend existing working partnerships between those agencies working in drug-related areas.
2. Utilise all contacts with drug users and their families and partners to minimise the supply of and demand for drugs.
3. Develop and extend a collaborative approach to tackling drug misuse and its associated problems through the shared ownership of agreed objectives.
4. Establish a Bailiwick database to collect and collate drug-related data.
5. Retain the Presidents', Chief Officers' and Key Stakeholder Groups to provide policy, strategic and operational direction.
6. Provide dedicated resources to facilitate the implementation of the Strategy.
7. Establish a new post as Drug Strategy Co-ordinator.

APPENDIX 2 ~ GUERNSEY CUSTOMS AND EXCISE DEPARTMENT DRUG SEIZURES

Table 1 – Guernsey Customs drug seizures, 1994-1998

Weight and Value of Drugs	1998	1997	1996	1995	1994
Cannabis resin (g)	1,764.4 £12,350	5,958.8 £41,712	1,026.6 £7,186	3,790.5 £26,533	13,502 £94,514
Herbal cannabis (g)	39 £195	3,063 £15,315	754 £3,770	299 £1,493	118.5 £592
Cannabis oil (g)				4.1 £205	
Heroin (g)	20.3 £2,430		3 £360	1.7 £200	
Cocaine (g)	19.7 £2,163	8.8 £968	2.16 £237		9.2 £1,014
Amphetamine (g & tabs)	123 + 4,056 £83,580	0.2 + 2 £50	82.5 £1,650	1.7 + 1 £53	95.5g + 7 £2,050
MDMA (Ecstasy) (g & tabs)	1112 £33,360	344 £10,320	0.3 + 12 £380	289 £8,670	7.71 + 39 £1,362
LSD (tabs)	20 £140	1 £7	4 £28		263 £1,841
Methadone (tabs & mls)		35 £30	37 + 269 £1,271		23 £575
Other (nos. of other seizures)	6		3	3	
Total value of seizures	£134,218	£68,402	£14,882	£37,154	£101,948

Table 2 - Other drug seizures, including seizures outside the Bailiwick

Year	Value
1996	£ 152,000
1997	£ 15,000
1998	£1,518,000

Source: Guernsey Customs Department

APPENDIX 3 ~ 1997 HEALTH RELATED BEHAVIOUR SURVEY

Table 1 – *Have you ever taken any of these drugs?*

	Year 8 (12 – 13 year olds)				Year 10 (14 – 15 year olds)			
	UK		Gsy		UK		Gsy	
	B	G	B	G	B	G	B	G
Amphetamines	1.6	1.2	0.4	0.3	8.9	9.8	0.9	0.6
Cannabis resin or oil	4.2	2.6	0.8	0.7	20.9	15.5	10.6	6.8
Herbal cannabis	5.9	3.7	2.8	3.5	26.2	24.0	19.8	16.2
MDMA (Ecstasy)	0.8	0.5	0.4	--	3.8	2.9	0.9	1.3
Cocaine	0.5	0.3	0.4	--	1.1	1.2	0.9	1.0
Crack	0.4	0.4	0.4	--	1.1	0.8	0.5	0.6
Natural hallucinogens	1.0	0.6	0.4	--	5.7	3.5	1.8	0.6
Synthetic hallucinogens	1.0	0.7	0.4	--	6.1	5.6	1.8	1.3
Heroin	0.3	0.2	0.8	0.3	0.8	0.4	0.9	0.6
Solvents (used as drugs)	1.2	1.6	0.8	3.1	5.0	5.7	5.1	3.2
Tranquillisers	0.5	0.3	--	--	2.0	2.7	1.4	--
None of the above	90.8	92.7	96.0	93.1	66.6	68.7	73.7	79.0
Number in sample	5288	5240	248	288	4446	4374	217	309

Note: Figures are percentage of responds

Table 2 – *Has anybody ever offered or encouraged you to try any of these drugs?*

	Year 8 (12 – 13 year olds)				Year 10 (14 – 15 year olds)			
	UK		Gsy		UK		Gsy	
	B	G	B	G	B	G	B	G
Amphetamines	3.3	3.0	1.6	0.7	14.8	19.3	2.8	3.6
Cannabis resin or oil	6.4	3.9	2.0	0.7	25.0	20.4	11.5	10.0
Herbal cannabis	8.4	5.9	3.2	4.2	32.3	30.5	24.0	21.0
MDMA (Ecstasy)	2.0	2.0	0.8	0.7	9.1	10.4	1.8	4.5
Cocaine	0.9	0.8	0.4	0.7	2.6	3.1	1.8	2.9
Crack	0.9	0.7	0.4	--	2.3	2.1	0.5	1.0
Natural hallucinogens	1.6	1.3	0.4	0.7	8.4	7.1	4.6	2.3
Synthetic hallucinogens	1.9	1.7	1.2	--	10.1	10.8	3.2	5.2
Heroin	0.6	0.6	1.2	0.7	2.0	1.5	1.4	1.3
Solvents (used as drugs)	1.8	2.2	1.6	2.4	6.9	8.2	4.6	5.5
Tranquillisers	0.7	0.5	--	0.7	3.2	4.4	1.8	1.6
None of the above	85.9	88.4	93.5	92.0	58.3	58.1	68.2	72.5
Number in sample	5288	5240	248	288	4446	4374	217	309

Note: Figures are percentage of responds

Table 3 – *Do you know anyone personally who you think takes any of these drugs?*

	Year 8 (12 – 13 year olds)				Year 10 (14 – 15 year olds)			
	UK		Gsy		UK		Gsy	
	B	G	B	G	B	G	B	G
No	49.8	47.3	67.5	66.2	20.5	17.2	33.6	29.8
Not sure	16.2	18.6	12.9	15.1	11.2	11.8	17.1	16.1
Fairly sure	11.2	13.7	7.1	6.3	14.9	16.5	14.7	13.8
Certain	22.8	20.4	12.5	12.3	53.5	54.5	34.6	40.3
Number of responses	5083	5125	240	284	4309	4310	217	305

Note: Figures are percentage of responds

In cases where less than 1% of a Year group is reporting use of or the offer of a particular drug the actual number of pupils involved is 1 or 2. Statistically, small numbers present a number of difficulties.

The validation process attempts to identify questionnaires where the respondent makes false responses. However, this process is not foolproof and it is possible that one or two children making a false response will distort the figures for a particular category.

Further, when looking at knowledge of drug use by others it is possible that a group of children are responding about the same individual (Table 3).

APPENDIX 4 ~ DRUG CONCERN

Table 1 – Number of Contacts received by Drug Concern, 1994 – 1998

Year	1994 (1)	1995	1996 (2)	1997 (2)	1998
Number of Contacts	355	606	1221	1131	975

(1) Based on 7 months data

(2) During 1996 and 1997 Drug Concern provided a community methadone programme in partnership with the Board of Health which resulted in a significant rise in the number of contacts

The number of contacts recorded in 1996 and 1997 includes those attending the community methadone programme that operated under a partnership agreement between Drug Concern and the Board of Health. The attendance through the community methadone programme means that the number of recorded contacts for these two years is not directly comparable with those for 1995 or 1998. Between 1995 and 1996 the number of contacts made by Drug Concern increased by 37%.

Table 2 - Age range of contacts with Drug Concern, 1998

<16 years	17 – 20 years	21 – 30 years	31 – 50 years	> 50 years
11	311	381	157	15

Table 3 - Substance use reported by Drug Concern, 1997-1998

		Cannabis	Amphet	MDMA (Ecstasy)	LSD	Solvents	Opiates	Pharm	Cocaine
1998	Number	95	34	52	6	49	382	248	56
	%	9.5	3.4	5.2	0.6	4.9	38.0	24.7	5.6
1997	Number	13	13	10	4	3	47	202	0
	%	3.9	3.9	3.0	1.2	0.9	14.2	60.8	--

When interpreting Table 3 it is important to recognise that the substance misuse relates to a contact's rather than an individual's drug use. Therefore two or three cocaine users in regular contact with Drug Concern could be responsible for the recorded contacts.

The rise in reported opiate use between 1997 and 1998 may, in part, be attributable to the closure of the community methadone programme. The programme aimed to manage and reduce the amounts of opiates, including heroin that was being misused by a small group of individuals. Some of the clients who were previously part of the community methadone programme have maintained their contact with Drug Concern and continue to misuse opiates. Drug Concern estimates that approximately 95% of those reporting opiate misuse involves opiate-based prescription medicines.

APPENDIX 5 ~ STREET PRICES OF CONTROLLED AND PRESCRIPTION DRUGS

DRUG TYPE	STREET PRICE
Cannabis resin	£180-£200 per oz
Herbal cannabis	£180-£220 per oz
Amphetamine tablets	£25-£30 per tablet
MDMA (Ecstasy)	£25-£35 per tablet ⁽¹⁾
LSD	£6-£10 per tab
Heroin	£200-£250 per g ^{(2) (5)}
Cocaine	£155-£230 per g ^{(3) (6)}
Temgesic	£2.50-£5 per tablet
Diconal	£10
Methadone	£1 per ml ⁽⁴⁾
Benzodiazepines	Up to £5 per tablet

Source: Guernsey Police and Customs Drugs Intelligence Units

Notes

1. Significant amount of drugs sold locally as ecstasy is an Ephedrine/Ketamine mix. Neither substance is currently controlled
2. Average purity by weight is approximately 45%
3. Little available - prices based on recent Royal Court case where seizure was approx. 40% pure
4. Very little available on the streets
5. Between 1996 and 1998 the street price of heroin in South London has decreased from around £100 per gram to around £30 per gram¹⁸
6. Between 1996 and 1998 the street price of crack cocaine in South London has decreased from around £75 per gram to around £35 per gram¹⁹

¹⁸ Source – Home Office Drug Prevention Advisory Service, 1999

¹⁹ Source – Home Office Drug Prevention Advisory Service, 1999

APPENDIX 6 ~ SEIZED ASSETS FUND

Under the provisions of the *Drug Trafficking Offences (Bailiwick of Guernsey) Law, 1988 (as amended)* the Bailiwick, like many other jurisdictions, may seize the assets which represent the profits of drug trafficking which can, after due legal process, be confiscated by the court in the jurisdiction in which they are located. These are paid to the General Revenue account of the States of Guernsey.

Larger scale drug-related criminal activity is, by its very nature, international. Some governments, particularly the United States, promote the sharing of confiscated assets between the jurisdictions that have co-operated in the apprehension or conviction of drug traffickers to increase international co-operation and thus the effectiveness of the fight against drugs. The United States requires that shared assets be used for anti-drugs purposes. Assets are received from the United States under shared arrangements are paid to HM Receiver General in Guernsey (currently HM Procureur).

The receipt of shared confiscations and their use for anti-drugs purposes provides much needed additional resources in the Bailiwick's fight against drug misuse, but the receipt of such payments is unpredictable both in time and amount.

A Fund has been created known as the Seized Assets Fund. Decisions in relation to payments out of that Fund are made solely by HM Receiver General, but he receives advice from a consultative committee of which he is a member.

There can be no commitment that the Bailiwick Drug Strategy will receive any further money from the Fund. Much will depend on the size of the Fund and the priority calls upon it.

APPENDIX 7 ~ ACTION PLAN – PART 1

AIMS	KEY OBJECTIVES	WHO?	TIMING	EVALUATION and MONITORING ²⁰
To reduce the supply of illegal drugs To reduce the incidence of drug-related crime and To reduce the incidence of re-offending by drug users	1) Continue support and funding for the drug enforcement teams established by Police and Customs to ensure they remain highly trained and professional drug enforcement bodies.	Police and Customs	Ongoing	Police and Customs DSC
	2) Continue to support the development of the unique working partnership between Police and Customs in respect of drug-related investigations and endorse the Memorandum of Understanding between the two departments.	Police and Customs	Ongoing	Police and Customs DSC
	3) Support consistent but appropriate sentencing for drug offenders.	Royal Court	Ongoing	DSC
	4) Develop a collaborative approach to target drug users effectively within the criminal justice system, to protect the community from drug-related anti-social and criminal behaviour and to enable people with drug problems to live drug and crime-free lives.	All Criminal Justice agencies, GADAC and Drug Concern	Ongoing	DSC
	5) Develop a philosophy of shared responsibility to intervene and offer treatment opportunities for drug-using offenders through the criminal justice system.	All Criminal Justice agencies, Drug Concern and GADAC	September 2000	DSC with individual agencies
	6) Support the Youth Justice Plan, particularly the introduction of Caution Plus.	Youth Justice Team	Ongoing	Youth Justice Team and DSC

²⁰ DSC will be involved in monitoring the overall effects of the drug-related work and related partnership approaches across States departments and wherever possible within voluntary and charitable organisations, as part of the Drug Strategy as a whole, but will have no involvement in day-to-day operational arrangements.

APPENDIX 7 ~ ACTION PLAN – PART 1

AIMS	KEY OBJECTIVES	WHO?	TIMING	EVALUATION and MONITORING
To reduce the supply of illegal drugs	7) Develop an assessment for criminal justice interventions, with emphasis on substance abuse and other risk factors.	All CJ agencies, Drug Concern and GADAC	June 2000	DSC
To reduce the incidence of drug-related crime and	8) Support new legislation to provide additional means for sentencers to require drug-misusing offenders to undergo treatment as part of a community sentence of supervision.	Probation, Courts and treatment services	Ongoing, in line with legislation changes June 2000	DSC and Probation Service
To reduce the incidence of re-offending by drug users	9) Monitor and evaluate all criminal justice drug-related intervention, for both adult and juvenile offenders.	DSC with all CJ agencies, Drug Concern and GADAC	Ongoing	DSC
	10) Publicise the Bailiwick Courts' firm sentencing policy for drug traffickers and the proactive approach of Guernsey Customs, particularly around UK points of departure.	Customs and CODSG	Ongoing	Customs and DSC

APPENDIX 7 ~ ACTION PLAN – PART 2

AIMS	KEY OBJECTIVES	WHO?	TIMING	EVALUATION and MONITORING
To reduce the demand for drug To reduce the acceptability of drugs and To improve understanding by the community about drugs	1) Provide adequate funding for drug education programmes within the Bailiwick's schools and colleges to ensure they remain relevant, credible and informative.	Education, CODSG, HPU, Drug Concern and CJ agencies ²¹	Ongoing	DSC
	2) Support the Island Youth Service to develop its contribution to drug prevention, particularly those at greatest risk from drug misuse but amongst the hardest to reach.	Education – Youth Service, CODSG, HPU, Drug Concern and CJ agencies	Ongoing	DSC
	3) Develop drug education programmes that target the particular problems faced by Bailiwick students entering higher education.	Education, CODSG, HPU, Drug Concern and CJ agencies	Ongoing	DSC
	4) Develop drug education programmes that promote life skills and ensure that links with areas of the PSHE syllabus - particularly alcohol, tobacco and solvents - are made.	Education, HPU, GASP, GADAC and Drug Concern	Ongoing	DSC
	5) Monitor and evaluate the outcomes from drug education and prevention programmes, in line with the evaluation of the Bailiwick's anti-smoking initiatives.	DSC with HPU and GASP	June 2000	As part of Health-related Behaviour Survey and DSC

²¹ CJ agencies include the Police, Customs, Probation and Prison services

APPENDIX 7 ~ ACTION PLAN – PART 2

AIMS	KEY OBJECTIVES	WHO?	TIMING	EVALUATION and MONITORING
<p>To reduce the demand for drug</p> <p>To reduce the acceptability of drugs</p> <p>and</p> <p>To improve understanding by the community about drugs</p>	6) Include the community in drug education programmes, by developing existing initiatives to ensure the objectives of the Strategy are presented to as wide an audience as possible.	DSC with Drug Concern and CJ agencies	Ongoing	DSC
	7) Utilise community centres, including the Children Board's family centres, as 'satellite' sites for drug-related outreach work.	Children Board, CJ agencies and Drug Concern	October 2000	Children Board with DSC
	8) To establish a web-site to publicise the aims of the Strategy.	CODSG through DSC	July 2000	DSC
	9) To engage the media actively to ensure the aims of the Strategy are accurately reported and to encourage them to play an active role in delivering an anti-drug message.	CODSG through DSC, local media	Ongoing	DSC
	10) To encourage the development of workplace drug policies.	CODSG through DSC, businesses, etc	November 2000	DSC

APPENDIX 7 ~ ACTION PLAN – PART 3

AIMS	KEY OBJECTIVES	WHO?	TIMING	EVALUATION and MONITORING
To improve the health of the community	1) Target drug users and develop specialist treatment and rehabilitation services that address all of a drug user's health needs.	Board of Health and all health and drug agencies	Ongoing	Board of Health and DSC
	2) Provide integrated interventions to reduce an individual's drug use, minimise the risks associated with drug use and enable drug users to stop and live healthy and drug-free lives.	Board of Health and all health and drug agencies	January 2001	Board of Health and DSC
	3) Develop a philosophy of shared responsibility to intervene and offer treatment opportunities for drug users at all contacts with health-related agencies.	Board of Health and all health and drug agencies	October 2000	Board of Health and DSC
	4) Support the Child and Adolescent Mental Health Services to target interventions for young people and families who may be most at risk from drug misuse and to continue to develop a collaborative/cohesive multi-agency approach.	C&AMHS and all drug or health agencies working with families and young people	October 2000	C&AMHS and DSC
	5) Develop a protocol of confidentiality for the sharing of information between agencies, so as to minimise risks and maximise treatment outcomes.	Board of Health and DSC with drug and health agencies	September 2000	Board of Health and DSC

APPENDIX 7 ~ ACTION PLAN – PART 3

AIMS	KEY OBJECTIVES	WHO?	TIMING	EVALUATION and MONITORING
To improve the health of the community	6) Develop comprehensive approach to drug-related treatment services, as outcomes are improved where the causal links for an individual's drug use are addressed.	Board of Health and DSC with drug and health agencies	November 2000	DSC and Board of Health
	7) Monitor and evaluate existing drug-related services and to ensure that this data is uniformly recorded so that comparisons can be made.	Board of Health, DSC	September 2000	DSC and all service providers
	8) Establish a specialist drug treatment and rehabilitation service to provide assessments, treatment and prescribing services for both adult and young drug users.	Board of Health and DSC with drug and health agencies	January 2001	DSC and all service providers
	9) Establish strategies between the Social Security Authority and Board of Health and doctors to reduce the misuse of prescribed drugs.	Board of Health, Social Security Authority and GPs	Ongoing	Prescribing Support Unit and DSC
	10) Provide support and training for those working with drug users and their families.	Board of Health, drug and health agencies	Ongoing	DSC
	11) Support development of self-help groups for drug users, their families and friends	CODSG and individual groups	Ongoing	DSC and individual groups

APPENDIX 7 ~ ACTION PLAN – PART 4

AIMS	KEY OBJECTIVES	WHO?	TIMING	EVALUATION and MONITORING
To build on current drug-related partnerships To develop a local drug database and To monitor and evaluate the implementation of the Strategy	1) Develop and extend existing working partnerships between those agencies working in drug-related areas.	All drug-related agencies and departments	Ongoing	DSC
	2) Utilise all contacts with drug users and their families and partners to minimise the supply of and demand for drugs.	All drug-related agencies and departments	Ongoing	DSC
	3) Develop and extend a collaborative approach to tackling drug misuse and its associated problems through the shared ownership of agreed objectives.	All drug-related agencies and departments	Ongoing	DSC
	4) Establish a Bailiwick database to collect and collate drug-related data.	DSC	September 2000	DSC with annual report to States
	5) Retain the Presidents' Policy, Chief Officers' Strategy and Key Stakeholder Groups to provide policy, strategic and operational direction.	Presidents', Chief Officers' and Key Stakeholder Group	Ongoing	Annual report to States through Presidents' Group
	6) Establish post as Drug Strategy Co-ordinator.	CODSG	May 2000	CODSG
	7) Provide dedicated resources to for the Strategy.	States of Guernsey		

APPENDIX 8 ~ RESOURCE REQUIREMENTS – Parts 1 and 2

Part 1 To reduce the supply of illegal drugs, incidence of drug-related crime and incidence of re-offending by drug users							
REF²²	ACTIVITY	2000	2001	2002	2003	TOTAL	NOTES
1:4	Criminal Justice Drugs Worker to identify, assess and access treatment for drug-using offenders	£ 9,000 (½ year)	£18,900	£19,800	£20,750	£68,450	See 1:5 ²³ , 1:6, 1:7, 1:8, 1:9, 3:8, 4:1, 4:2 & 4:3. Post holder to develop community based drug treatment programmes, to include arrest, court & probation referrals & post-sentence supervision.
1:10	Advertising and printing costs to publicise sentencing policy for drug traffickers and the Drug Detection Line	£20,000	£22,000	£24,500	£26,700	£93,200	This figure does not include the cost of renting advertising space at points of departure to the Bailiwick, so could increase if sea or air ports charge for space.
Projected Total Spending for Part 1 of Action Plan		£29,000	£40,900	£44,300	£47,450	£161,650	

Part 2 To reduce the demand for drugs, acceptability of drugs and improve understanding by the community about drugs							
REF	ACTIVITY	2000	2001	2002	2003	TOTAL	NOTES
2:1 2:3 2:4	Funding for drug education programmes in Bailiwick schools and colleges	£12,000	£7,000	£8,000	£9,000	£36,000	Costs include training for teachers & purchase of resource material.
2:2	Funding for Youth Service to develop its contribution to drug prevention	£3,000	£3,500	£4,000	£4,500	£15,000	Costs include training for youth workers (paid & voluntary) & purchase of resource material.
2:8	Drug Strategy web-site Set-up costs On-going costs	£1,500	£750	£800	£850	£1,500 £2,400	
2:10	Encourage the development of workplace drug strategies	£3,000	£3,500	£4,000	£4,000	£14,500	Sponsorship from employer & employee organisations & businesses should be sought where possible.
Projected Total Spending for Part 2 of Action Plan		£19,500	£14,750	£16,800	£18,350	£69,400	

²² and ²³ References relate to sections of Action Plan contained in Appendix 7

APPENDIX 8 ~ RESOURCE REQUIREMENTS – Parts 3 and 4

Part 3 To improve the health of the community							
REF	ACTIVITY	2000	2001	2002	2003	TOTAL	NOTES
3:1 3:2 3:3 3:4 3:8	Establishing specialist drug treatment services, community and prison based	£30,000	£45,000	£50,000	£65,000	£190,000	Specialist services would be developed in response to identification of client numbers & treatment needs, but initially would involve the recruitment of an additional CPN.
3:10	Training for those working with drug users and their families	£ 7,000	£10,500	£14,000	£17,500	£49,000	Includes local & off-Island short courses/seminars & provision for locum cover to enable staff to take necessary study leave.
Projected Total Spending for Part 3 of Action Plan		£37,000	£55,500	£64,000	£82,500	£238,000	

Part 4 To build on current partnerships, develop a local drug database and monitor and evaluate the implementation of the Strategy							
REF	ACTIVITY	2000	2001	2002	2003	TOTAL	NOTES
4:7	Drug Strategy Co-ordinator	£28,744	£31,000	£33,800	£36,800	£130,344	
	Set-up costs	£7,000				£7,000	
	Stationary, printing, books, postage, telephone, etc	£2,500	£3,000	£3,500	£4,000	£13,000	
	Conferences	£1,000	£1,250	£1,500	£1,750	£5,500	
4:4	Establish a Drug Database						Software costs are based on prices for databases used by UK drug agencies and include licence fees.
	<i>Set-up costs:</i>						
	Hardware	£5,000				£5,000	
	Software	£25,000				£25,000	
	Installation	£5,000				£5,000	
	<i>On-going costs:</i>						
	Hardware		£1,000	£1,500	£2,000	£4,500	
	Software		£4,500	£5,000	£5,500	£15,000	
	Training	£1,000	£1,000	£1,500	£1,500	£5,000	
Projected Total Spending for Part 4 of Action Plan		£75,244	£41,750	£46,800	£51,550	£215,344	

APPENDIX 9 ~ PROJECTED FINANCIAL REQUIREMENTS 2000 to 2003

	2000	2001	2002	2003	TOTAL
Part 1 of Action Plan	£29,000	£40,900	£44,300	£47,450	£161,650
Part 2 of Action Plan	£19,500	£14,750	£16,800	£18,350	£69,400
Part 3 of Action Plan	£37,000	£55,500	£64,000	£82,500	£238,000
Part 4 of Action Plan	£75,244	£41,750	£46,800	£51,550	£215,344
ANNUAL TOTALS	£159,744	£151,900	£170,900	£198,850	£685,394

The President,
States of Guernsey,
Royal Court House,
St. Peter Port,
Guernsey.

24th February, 2000.

Sir

I have the honour to refer to the letter dated 9 February 2000 from the President of the Committee for Home Affairs, on behalf of the Presidents' Drug Policy Group, concerning the proposed Bailiwick Drug Strategy.

The Advisory and Finance Committee recognises the significant harm that drug misuse causes to individuals, their families and the community as a whole and the potential costs that can result from drug misuse and its associated problems. The Committee also endorses the considerable efforts being made by those States committees with drug-related responsibilities and voluntary agencies in Guernsey to reduce the prevalence of drug misuse and associated harm.

Further, the Committee acknowledges the work undertaken by the Presidents' Drug Policy Group and the Chief Officers' Drug Strategy Group in researching and preparing the Bailiwick Drug Strategy.

The Advisory and Finance Committee supports the propositions to affirm the commitment of the States of Guernsey to reduce the misuse of drugs and the harm associated with drug misuse. Further, it endorses the aims and objectives of the proposed Bailiwick Drug Strategy.

As regards the request for additional financial resources, the Advisory and Finance Committee believes that given the recognition by the Presidents' Drug Policy Group of the importance of anti-drugs measures ideally their committees should find the resources from within their existing budgets and rearrange other priorities accordingly.

However, being realistic, the Committee imagines that the States, if it supports the Bailiwick Drug Strategy in general, would be unlikely to jeopardise its effectiveness by voting against propositions 9 and 10. In that case the Committee would emphasise that the States should be aware, due to the increasing demands on those committees fulfilling a social role, projected spending in 2000 is already expected to represent an increase in the order of 3% in real terms. This can only be exacerbated by any further calls that the States makes of General Revenue Expenditure outside of the normal resource allocation process.

As regards to the request for additional staff resources, the Civil Service Board has been consulted and has indicated its full support for the Bailiwick Drug Strategy and the recommendations contained therein. The Advisory and Finance Committee's above comments in respect of requests for additional financial resources outside the normal allocation process similarly apply.

I am, Sir,
Your obedient Servant,
L. C. MORGAN,
President,
States Advisory and Finance Committee.

The States are asked to decide:—

II.— Whether, after consideration of the Report dated the 10th February, 2000, of the States Committee for Home Affairs, they are of opinion:—

1. To affirm the commitment of the States of Guernsey to reducing the misuse of drugs, and reducing both the direct and indirect harm caused to Bailiwick residents as a result of the misuse of drugs, through the adoption of policies contained in the Bailiwick Drug Strategy which reflect those objectives.
2. To endorse the aims of the Bailiwick Drug Strategy to:
 - (a) reduce the supply of drugs, the incidence of drug related crime, and re-offending by drug users;
 - (b) reduce the demand for, the acceptability of, and to increase the understanding of the community about, drug misuse;
 - (c) improve the health of the community;
 - (d) build on current drug-related initiatives and partnerships, develop a drug database, and monitor and evaluate the implementation of the Bailiwick Drug Strategy.
3. To approve the objectives outlined in the Bailiwick Drug Strategy recognising that full consultation must take place with the States Civil Service Board to secure the staff resources necessary to implement that Strategy acknowledging the possibility of an overall increase in States establishment.
4. To delegate responsibility for the implementation of the Bailiwick Drug Strategy to the Presidents of the States Board of Administration, States Committee for Home Affairs, States Board of Health, States Education Council, States Children Board and States Probation Services Committee as the Presidents' Drug Policy Group.
5. To direct the aforementioned Presidents to direct their respective Chief Officers (in the case of the States Board of Administration the Chief Officer of Customs and Excise and in the case of the States Committee for Home Affairs the Chief Officer of Police and the Prison Governor) to continue the work of the Chief Officers' Drug Strategy Group.
6. To authorise the Presidents' Drug Policy Group to appoint an appropriate existing local voluntary agency to employ the Criminal Justice Drugs Worker, as set out in that Report.
7. To authorise the States Advisory and Finance Committee, to make an annual grant to that agency when appointed.
8. That the amount of such grant be in such sum as the States Advisory and Finance Committee may deem appropriate but not exceeding £18,000 per annum for the year 2000.

9. To direct the States Advisory and Finance Committee to increase its budget for 2000 by an amount not exceeding £18,000 under States financial procedures and also to direct that Committee to take into account the future provision of an annual grant to the appointed agency when recommending to the States non-formula led revenue allocations for that Committee in 2001 and subsequent years.
10. To direct the States Advisory and Finance Committee to increase its budget for 2000 by an amount not exceeding £141,744 (as set out in Appendices 7, 8 and 9 of that Report) under States financial procedures for the implementation of the Bailiwick Drug Strategy and also to direct that Committee to take account the future provision for the Bailiwick Drug Strategy when recommending to the States non-formula led revenue allocations for that Committee in 2001 and subsequent years.
11. To direct the Presidents' Drug Policy Group to report back to the States of Guernsey on the delivery, outcomes and development of the Bailiwick Drug Strategy by way of an Annual Report.

STATES BOARD OF HEALTH**PRINCESS ELIZABETH HOSPITAL – OXYGEN CONCENTRATOR**

The President,
States of Guernsey,
Royal Court House,
St. Peter Port,
Guernsey.

3rd March, 2000.

Sir,

Princess Elizabeth Hospital - Oxygen Concentrator

Introduction

1. Piped oxygen used for patient care at the Princess Elizabeth Hospital is currently fed via medical gas pipelines from oxygen cylinders located in the manifold room near the loading bay. This room contains two banks of eight cylinders with automatic changeover facilities to ensure a constant supply. The oxygen cylinders used for this purpose are bulky and heavy and have to be changed by the hospital portering staff when empty.
2. All oxygen cylinders are supplied on a rental basis by the British Oxygen Company Limited, which involves transportation from the UK on a frequent basis.
3. In recent years, the demand for oxygen within the Princess Elizabeth Hospital has increased significantly due to changes in medical care. During periods of high levels of oxygen usage, a bank of oxygen cylinders is now only lasting approximately seven hours. This is putting increasing pressure on the limited number of staff available. If the trend continues, there would come a time when continuity of supply could not be guaranteed. In fact, the existing system would not be able to support any further medical development involving the use of oxygen.
4. This clearly demonstrates the need for a new approach to supplying this essential medical gas and the Board has undertaken an option appraisal on the way forward for meeting this increased demand.

Options

5. There are four options available to the Board for the continued supply of oxygen at the Princess Elizabeth Hospital, namely:
 - continue with the present arrangements of using oxygen cylinders;
 - installation of a bulk liquid oxygen system;
 - use of liquid oxygen cylinders;
 - installation of an oxygen concentrator system.

6. The first option is to continue with the present arrangements of using oxygen cylinders for the supply of oxygen for patient care. However, this would inevitably increase the number of oxygen cylinders required for the service and could potentially put patients at risk. The estimated cost of this option is £66,000 per annum.

7. The second option is to install a bulk liquid oxygen system. The maximum storage period of the bulk vessel is ten days and it is designed to work in conjunction with an automatic standby supply in the event of failure. The advantages of such a system are high level of storage and low operating costs but it has the disadvantage of high transportation costs for offshore sites like Guernsey. The estimated cost of this option is £31,000 capital investment and £80,700 per annum.

8. The third option is to use liquid oxygen cylinders. This system has the advantages of increased handling efficiency with associated labour savings, improved safety, greater security of supply/stock holding and reduced manifold/cylinder space requirements. However, the estimated cost of this option is high at £13,750 capital investment and £105,000 per annum.

9. The fourth option is to install an oxygen concentrator system. This involves the absorption of air from the atmosphere and filtering to remove the waste product Nitrogen which is discharged back to the atmosphere. The system is technically sophisticated and is capable of producing oxygen with a concentration of 95%. If the purity of the oxygen falls below 94%, the reserve manifold will operate automatically by supplying oxygen from conventional oxygen cylinders. An oxygen concentrator is well suited for offshore use and remote sites where transportation is difficult and costs are high. The estimated cost of this option shows a saving of £57,000 per annum from an initial capital investment of approximately £156,000.

Preferred Option

10. The Board's preferred option is the installation of an oxygen concentrator system as described in paragraph 9 above. This will meet demand for the foreseeable future and has the dual benefits of ensuring a reliable oxygen supply for patient care and ongoing revenue savings. This proposal has been discussed with the Board's existing supplier of oxygen cylinders, British Oxygen Company Ltd, who fully support this development, although they declined to tender for the provision of a concentrator.
11. The Board has consulted with appropriate medical staff on this proposal, especially as there will be a reduction in the level of oxygen concentration from 99.9 % to 94 % under the new system. The response has been one of total support for a system that will ensure the continuity of supply of piped medical oxygen and the level of reduction in oxygen concentration is confirmed as acceptable. Pure oxygen is required very infrequently in the Princess Elizabeth Hospital and portable cylinders will continue to be used on these rare occasions.
12. The siting requirements for the new plant can be met in the existing medical gas manifold room near the hospital loading bay, where its installation will comply with relevant Health Technical Memoranda, which are produced by the NHS in the UK to ensure compliance with acceptable standards in health service buildings and engineering plant.

Description of Works and Tendering Process

13. The project is divided into four elements as follows:
 - i. manufacture, supply, installation and commissioning of the oxygen concentrator;
 - ii. building and structural work in the gas manifold room for installation of the oxygen concentrator;
 - iii. connection of the oxygen concentrator to the existing medical gas pipeline;
 - iv. verification of purity of the gas produced by the oxygen concentrator.

14. The Board sought tenders from three suppliers known to specialise in this type of plant. Two tenders were received as follows:

	£
Medical and Industrial Manufacturing Company Limited	137,965
Air Products Limited	186,017

The tenders were evaluated and it is recommended that the plant be purchased from Medical and Industrial Manufacturing Company Limited (MIM Ltd.) in the sum of £137,965.

15. The second element of the project involves building and structural work, which will be undertaken in-house by the Board's directly employed staff. It is recommended that an allocation of £5,250 be made for this work.
16. The remaining elements of this work need to be undertaken in order to comply with Health Technical Memorandum 2022. This involves the appointment of a specialist contractor to connect the oxygen concentrator to the existing medical gas pipeline and the appointment of a quality controller to verify purity of the gas. It is recommended that an allocation of £5,000 be made for this work.

Summary of Costs

17. The total cost, if the lowest tender is accepted, will be £155,615, made up as follows:

	£
Oxygen Concentrator (MIM Ltd.)	137,965
Building/Structural Works	5,250
Connection/purity verification	5,000
Contingencies (5%)	<u>7,400</u>
	<u>155,615</u>

Recommendations

18. The Board of Health requests the States:
- to authorise the provision of the oxygen concentrator, as set out in this report, at a total cost not exceeding £155,615;
 - to authorise the Board to accept the tender in the sum of £137,965 submitted by Medical and Industrial Manufacturing Company Limited for this plant;

- iii. to authorise the Board to undertake the building/structural work in-house at a cost of £5,250;
- iv. to authorise the Board to appoint specialist contractors for connection work and quality control for purity verification work at a cost of £5,000;
- v. to vote the Board of Health a credit of £155,615 to cover the cost of the above, which sum to be taken from the Board of Health's allocation for capital expenditure.

I have the honour to request that you will be good enough to lay this matter before the States with appropriate propositions.

I am, Sir,
Your obedient Servant,
B. RUSSELL,
President,
States Board of Health.

[N.B. The States Advisory and Finance Committee supports the proposals.]

The States are asked to decide:—

- III.— Whether after consideration of the Report dated the 3rd March, 2000, of the States Board of Health, they are of opinion:—
- 1. To authorise the provision of an oxygen concentrator at the Princess Elizabeth Hospital, as set out in that Report, at a total cost not exceeding £155,615.00.
 - 2. To authorise the States Board of Health to accept the tender in the sum of £137,965.00 submitted by Medical and Industrial Manufacturing Company Limited for this plant.
 - 3. To authorise the States Board of Health to undertake the building/structural work in-house at a cost of £5,250.00.
 - 4. To authorise the States Board of Health to appoint specialist contractors for connection work and quality control for purity verification work at a cost of £5,000.00.
 - 5. To vote the States Board of Health a credit of £155,615.00 to cover the cost of the above, which sum shall be taken from the States Board of Health's allocation for capital expenditure.

STATES PUBLIC THOROUGHFARES COMMITTEE**ST. SAMPSON'S HARBOUR PUMPING STATION AND NORTH SIDE FIREMAIN EXTENSION**

The President,
States of Guernsey,
Royal Court House,
St. Peter Port,
Guernsey.

29th February, 2000.

Sir

**ST SAMPSON'S HARBOUR PUMPING STATION AND
NORTH SIDE FIREMAIN EXTENSION**

At their meeting on 27 February 1997 after consideration of a Report dated 24 January from the Public Thoroughfares Committee, the States resolved inter alia:

“To approve in principle the Long Term measures set out in that Report and to require the Public Thoroughfares Committee to submit tenders to the States in due course.”

The Long Term measures referred to in the above-mentioned resolution were the construction of a new pumping station at St Sampson's Harbour which would be accessible at all states of the tide.

The existing pumping station at St Sampson's, constructed in 1977, is a key installation in conveying wastewater flows from the north of the Island to Belle Greve Treatment Works. It receives flows from the industrial and commercial areas of St Sampson's and Vale, and from the surrounding residential areas. The gravity sewers draining to the station also receive flows which have been pumped from La Moye, Les Landes, La Manche Estate and Lowlands pumping stations. In addition, there is a major sewage tanker emptying point on North Side at Griffiths Yard.

The existing pumping station is situated beneath the sea bed to the seaward side of the South Arm of St Sampson's Harbour. The location of the station and the increasing maintenance requirement gives rise to a number of operational problems principally relating to access. The pumping station is submerged except at low water on spring tides. This means that access for maintenance or repairs is restricted to a maximum of four hours during low spring tides. Consequently when a problem occurs nothing can be done until the next low water spring tide.

It is therefore proposed that a new pumping station be constructed on the South Side of the Harbour adjacent to Mont Crevelt as shown on Drawing No 6978/53 a copy of which has been deposited at the Greffe for the information of States Members. The proposed work would also include the construction of a new gravity sewer across the Harbour mouth from North Side and a new gravity sewer from South Side, together with the replacement of 80 metres of rising main at Mont Crevelt.

The design consists of a new 4 metre diameter pumping station served by 500 mm diameter sewers from North Side and South Side. The pumping station would contain three submersible pumps for duty, assist and standby roles respectively.

Because the Committee's proposed work involves construction work across the Harbour mouth the opportunity has been taken to consult with the Public Utility Companies and the Committee for Home Affairs with a view to incorporating any new services they may require.

The Committee for Home Affairs has advised that it wished to utilise the proposed works to take the opportunity to extend the existing firemain on South Side across the harbour to North Side to provide fire fighting facilities for the North Quay and to protect the fuel tanks. In addition the proposed work will also include ducts for electricity cables for Guernsey Electricity.

The firemain work will involve a 400 mm diameter pipeline extending from a junction on the existing firemain near Mont Crevelt across the Harbour mouth to North Side. A 300 mm diameter ring main would be constructed along the North Pier and around Griffiths Yard. A four way hydrant would be installed at the south west corner of Griffiths Yard for fire fighting on the quay together with two monitors which could be activated from a control cabinet. Four way hydrants would be provided near the north

western and north eastern corners of Griffiths Yard to provide fire fighting protection for the Total fuel tanks. As with the existing firemain, the North Side extension would be maintained under pressure and the fire pumps would be automatically activated when a hydrant or monitor is operated anywhere in the system.

Comprehensive site investigation work has been carried out which indicates relatively shallow beach deposits of sand, gravel and boulders over gabbro bedrock in the cross harbour section of the works and general fill material over bedrock on the North Side.

In view of the scale of the work and the need to work in tidal conditions a select list of tenderers was drawn up and the tenders received make provision for dealing with the conditions.

The following tenders were received:-

Contractor	Tender Price £	Contract Period
T J Brent (Guernsey) Ltd	1,998,902.00	38 weeks
Geomarine Ltd	2,069,600.00	40 weeks
Miller & Baird (CI) Ltd	2,209,944.19	52 weeks
P Trant (Guernsey) Ltd - alternative design	2,343,135.00	46 weeks
P Trant (Guernsey) Ltd	2,789,643.75	52 weeks
Barhale Ltd	2,848,010.86	52 weeks

The lowest tender was that received from T J Brent (Guernsey) Ltd in the sum of £1,998,902.00 which includes an amount of £300,000 for contingencies. To this figure must be added the sum of £77,761.81 for site investigation work and consultancy costs and £100,000 to cover the cost of reconstructing and resurfacing the roads on completion of the work.

The total credit required for the scheme is, therefore, £2,176,663.81.

The cost of the proposals should be met from the capital allocation of the Public Thoroughfares Committee and by a contribution of £600,000 from the capital allocation of the Committee for Home Affairs, together with a contribution of £30,000 from Guernsey Electricity.

The Committee, therefore, recommends the States:

- (a) To approve the scheme for the construction of a new pumping station at St Sampson's Harbour, the construction of gravity sewers from North Side and South Side, the replacement of 80 metre length of rising main at Mont Crevelt and the construction of a firemain on North Side as shown on Drawing No 6978/53 at a total cost inclusive of site investigation work, consultancy fees, contingencies, road reconstruction and resurfacing, not exceeding £2,176,663.81.
- (b) To authorise the Committee to accept the tender for the works which was submitted by T J Brent (Guernsey) Ltd in the sum of £1,998,902.00.
- (c) To authorise the sum of £77,761.81 for site investigation work and consultancy fees and the sum of £100,000 to cover the cost of reconstructing and resurfacing the road on completion of the work.
- (d) To vote the Public Thoroughfares Committee a total credit of £2,176,663.81 to cover the cost of the above scheme, of which £600,000 shall be contributed from the capital allocation of the Committee for Home Affairs, £30,000 from Guernsey Electricity and the balance of £1,546,663.81 shall be taken from the Committee's allocation for capital expenditure.

I have the honour to request that you will be good enough to lay this matter before the States together with the appropriate propositions.

I am, Sir,
 Your obedient Servant,
 P. N. BOUGOURD,
 President,
 States Public Thoroughfares Committee.

[N.B. The States Advisory and Finance Committee supports the proposals.]

The States are asked to decide:—

IV.— Whether after consideration of the Report dated the 29th February, 2000, of the States Public Thoroughfares Committee, they are of opinion:—

1. To approve the scheme for the construction of a new pumping station at St. Sampson's Harbour, the construction of gravity sewers from North Side and South Side, the replacement of 80 metre length of rising main at Mont Crevelt and the construction of a firemain on North Side as shown on Drawing No. 6978/53 at a total cost, inclusive of the sum of £77,761.81 for site investigation work and £100,000.00 to cover the cost of reconstructing and resurfacing the road on completion of the work, not exceeding £2,176,663.81.
2. To authorise the States Public Thoroughfares Committee to accept the tender in the sum of £1,998,902.00 submitted by T. J. Brent (Guernsey) Ltd for the above scheme.
3. To vote the States Public Thoroughfares Committee a total credit of £2,176,663.81 to cover the cost of the above scheme, of which £600,000 shall be contributed from the capital allocation of the States Committee for Home Affairs, £30,000 from States Electricity Board and the balance of £1,546,663.81 shall be taken from the States Public Thoroughfares Committee's allocation for capital expenditure.

DE V. G. CAREY
Bailiff and President of the States

The Royal Court House,
Guernsey.
The 17th March, 2000.

APPENDIX I

STATES ADVISORY AND FINANCE COMMITTEE

CONFIDENTIAL SERVICE FOR COMPLAINTS OF DISCRIMINATION AGAINST WOMEN

The President,
States of Guernsey,
Royal Court House,
St. Peter Port,
Guernsey.

16th February, 2000.

Sir,

CONFIDENTIAL SERVICE FOR COMPLAINTS OF DISCRIMINATION AGAINST WOMEN

On the 28th November 1996 the States resolved, inter alia:

"To direct the States Advisory and Finance Committee to implement a confidential service to record complaints by, and provide advice to, women who claim to have been discriminated against, and report back to the States annually (by means of an Appendix to a Billet d'Etat) with appropriate details of such service."

On the 14th April 1998 the Advisory and Finance Committee was pleased to announce that the Guernsey Citizens' Advice Bureau had agreed to extend its service to record complaints by women who claim to have been discriminated against and to advise them accordingly.

The Bureau Manager has reported in the following terms in respect of the year ended 31st December 1999:

"The Bureau dealt with 5 complaints of this nature during the year and all were under the category of Employment.

3 were discriminated against by Employers on learning of their pregnancies, one through sexual harassment and one through her alleged sexual proclivities.

In all instances the clients were referred to the States Board of Industry for whatever help may be afforded them under the terms of the Employment Protection (Guernsey) Law 1998."

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I have the honour to request that you be good enough to publish this letter as an Appendix to an appropriate Billet d'Etat.

I am, Sir,
Your obedient Servant,
J. E. LANGLOIS,
Vice-President,
States Advisory and Finance Committee.

APPENDIX II

STATES ADVISORY AND FINANCE COMMITTEE

STATES AUDIT COMMISSION: RISK MANAGEMENT AND INSURANCE

The President,
States of Guernsey,
Royal Court House,
St. Peter Port,
Guernsey.

24th February, 2000.

Sir,

States Audit Commission: Risk Management and Insurance

The Advisory and Finance Committee has received a report from the States Audit Commission entitled "Risk Management and Insurance".

The Commission has (in accordance with the provisions of the States Audit Commission (Guernsey) Law, 1997) requested the Committee to submit a copy of the report to the Bailiff for inclusion as an Appendix to a Billet d'Etat.

The Board of Administration is presently responsible for the administration of States insurance matters and accordingly the Committee has asked the Board for its comments on the Commission's report which are as follows:

"The Board feels that the submission of the following comments is important in assisting in the interpretation and understanding of the Commission's report:

1. The Board endorses the emphasis that the report places on risk management and the need to develop this important area within the States. Indeed, in doing so the report is both endorsing the Board's current initiatives together with providing it with opportunities for further development.
2. The report is proposing a fundamental redefinition of the States committee's central role and function (currently performed by the Board of Administration as facilitator of States insurance), with a shifting in priorities from insurance administration to corporate risk management. The Board considers that it is important that this proposed shift in emphasis is properly understood, and that it is in no way a reflection on the Board's current execution of its traditional insurance and risk management role as defined by the States.

3. The Board remains totally confident that it achieves extremely good value for money from its relationship with its professional advisor, and that it has done so for many years. The report's recommendation to recruit high-value specialist skills will directly cost the States significantly, more than the Board (States) has ever expended in this area. Consequently, the Board is anxious to ensure that the long-term economic justifications for such a proposal are particularly sound.
4. The Board's professional advisor provides the Board (the States) with an important continual interface with the national and global insurance markets as well as external risk management sectors. The ease, level and cost of access to that interface enjoyed by the Board and the quality of advice that often ensues cannot, the Board feels, be over emphasised.
5. It is the Board's understanding that the Commission's recommendation to increase the level and skill of resource prescribed to the Insurance and Risk Management area, and its recommendation to transfer the responsibility for this area of work into Advisory and Finance are totally independent of each other. The Board would wish to emphasise this fact.
6. Whilst the Board appreciates the reasons behind the report's recommendation for dissemination between low-value claims administration work and the core risk management function, it approaches it with a degree of caution.

Yesterday's low-value claims can quickly combine to become today's high-value incident, bringing with it many serious inherent risk management issues. The Board is therefore aware that to enforce too great a level of independence between these two roles through outsourcing initiatives etc. could potentially be to the detriment of the States.
7. The Board has no strong opinion as to which committee is best placed to manage the States Insurance and Risk Management services. However, the Board does have difficulty in deducing from within the main body of the Commission's report, a strong case to support the Commission's firm recommendation that the Advisory and Finance Committee, rather than the Board of Administration, should become directly responsible for States Insurance and Risk Management business.

8. Assuming that the Commission's recommendation on transfer of responsibility were to be adopted, the Board would still be required to retain a significant percentage of its current Insurance and Risk Management manpower resource complement in order to maintain general administrative duties currently performed by its Insurance section. For that reason the staffing, costs are likely to be higher if the function is transferred to the Advisory and Finance Committee unless the latter Committee can absorb the increase in workload within its existing staff, which the Board doubts.

In either event the Board strongly recommends that if the States agree to the proposals for additional staff, including short term contract staff, to boost the States risk management and insurance function, whether it be under the jurisdiction of the Advisory and Finance Committee or the Board of Administration, then the States of Deliberation should also instruct the Advisory and Finance Committee to increase the budget of the Committee concerned accordingly and should also instruct the Civil Service Board to make the required number of staff posts available."

The Advisory and Finance Committee is generally supportive of the Commission's report and is pleased to note that the current States insurance programme "has successfully delivered some broad insurance policy terms and conditions at cost effective rates". However, the Commission's report also highlights a number of areas where further improvements are required.

The Committee recognises that the Commission's recommendation that responsibility for insurance and risk management should be transferred from the Board of Administration to the Committee has merit. The Committee is aware that in many other public sector organisations it is usual for insurance and finance to be administered by the same department. However, as highlighted by the Board, careful consideration will need to be given to the cost implications of such a transfer.

The Committee will be working with the Board, and where appropriate with other committees, to determine how best the Commission's recommendations can be addressed including resource implications and, if appropriate, will include recommendations in this year's Policy and Resource Planning Report.

I am, Sir,
Your obedient Servant,
L. C. MORGAN,
President,
States Advisory and Finance Committee.



STATES AUDIT COMMISSION

RISK MANAGEMENT & INSURANCE

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1 INTRODUCTION

1.1 Background

The States Audit Commission has a mandate to assist Committees in ensuring the effective, efficient and economical management of States' assets and finances.

A key element facing Committees in the management and safeguard of assets and finances is the management of business risk. Effective risk management is a vital component of good corporate governance, as the risks inherent in the operations of a large organisation such as the States can be substantial.

The States Audit Commission appointed external consultants, Deloitte & Touche, to perform a review of the management of risk within the States, with a particular remit to assess and report on the adequacy of insurance policies and procedures.

The resultant report by Deloitte & Touche was presented to the Commission during August 1999. Their report, by nature, contains commercially sensitive information and so has not been reproduced in full.

However, certain key themes arose from the report which, in the opinion of the Commission, would be in the public interest to disclose. These key themes were summarised in Deloitte & Touche's Executive Summary to their report, which we quote in section 3 below, with the full approval of Deloitte & Touche.

1.2 Terms of Reference

The Terms of Reference for this review are detailed at **Appendix I**. It should be noted that the report was not able to provide definitive statements on whether the policies offered value for money. Insurance cover was provided on the basis of assets "as declared to insurers" and not on the risk profile of the States (which is not yet fully determined). Consequently, accurate benchmarking was not possible.

Furthermore, the report was not able to determine the optimum insurance programme structure, since many risks remain undefined. The report did comment favourably on the Insurance Deductible Fund, which provides a measure of self-insurance for the States.

The work carried out by Deloitte & Touche, its report, work product and advice was carried out and produced subject to the terms and conditions agreed with the States of Guernsey and is solely for the use of the States Audit Commission in assisting its review of the States Insurance and Risk Management practices. It may not be relied on for any other purpose or by any third party. Deloitte & Touche shall have no liability to any third party in respect of its work, report or advice.

1.3 Current States Initiatives

This report is intended to identify areas of potential exposure for the States in its current insurance and risk management programme, and to provide workable solutions to mitigating any such exposure.

The review revealed a number of current initiatives being undertaken by the Board of Administration, (which currently manages the States' insurance & risk management programme) and demonstrates that the Board is taking a very positive approach to risk management. The Board of Administration has initiated the following:

- Preparation of a business plan for the development of a new service area – Insurance and Risk Management
- Revision of the accounting reporting system to highlight risk management issues
- Development of a technical risk related staff training programme
- Preparation of an insurance and risk management handbook aimed at providing the Committees with information and guidance on key insurance topics: and
- Invitation to, and visit of, leading international underwriters to key States Committees as part of the Year 2000 initiative.

1.4 Deloitte & Touche Recommendations

Deloitte & Touche disclosed a number of findings and recommendations which arose from their review. Those that they consider key are summarised in their executive summary in section 3 below.

The full list of detailed recommendations provided by Deloitte & Touche is reproduced in section 4 below.

1.5 Audit Commission Recommendations

In addition to the recommendations raised by Deloitte & Touche, which the Audit Commission endorses in full, the Commission raised its own findings and comments. These are detailed in section 2 below, with the resultant recommendations included in section 4 below.

2. AUDIT COMMISSION FINDINGS

2.1 Risk Management Concept

The Commission believes that risk management is crucial to enable the Committees of the States to achieve their objectives.

One definition that has been used is:

$$\text{“ Risk – Management Controls = Exposure ”}$$

The aim is to reduce the exposure to a level the business is prepared to accept. The larger element of risk that can be managed in house, the less the exposure. This is done by implementing risk management controls.

Traditionally, Risk Management was considered to be about identifying and placing insurance risks. More recently, businesses have realised that insurance is simply an important sub-set of the risk management process, and just one of a number of tools for dealing with the financial aspects of risk management.

Insurance itself is simply a means of smoothing financial risk from year to year and, in certain circumstances, providing contingency cover for risks which are remote and yet very expensive should they materialise. However, insurance itself may be an inadequate solution for the following reasons:

- some risks are uninsurable
- some risks are overpriced
- risks of ‘high volume’ type may be uneconomical to insure

Accordingly, insurance is not a primary tool to better management and resources, but risk management is. Indeed, the whole process works the other way – better risk management controls leads to lower premiums when insurance solutions are used.

2.2 Risk Identification

The first stage to successful risk management is to identify the risks that the business faces. The risks that face the various Committees within the States are many and varied, and might include for example:

- A major fraud
- Fire destroys a school building and children are injured or killed
- Salmonella poisoning at a public event
- Injury or death to public at sports event or concert
- Harbour or airport disaster
- Major medical negligence or malpractice
- Legionnaires Disease spread through Care Home
- Prison Riot
- Water Contamination
- Telecommunications systems breakdown

The potential cost of such a catastrophic event can be phenomenal. The Hillsborough tragedy, for example, has resulted in estimated damages between £30m - £50m. A salmonella poisoning incident in Minnesota, USA affected many hundreds of people and the average cost per claim was approximately £50,000, excluding those which resulted in pregnancy complications, permanent injury or death which were negotiated separately for significantly higher amounts.

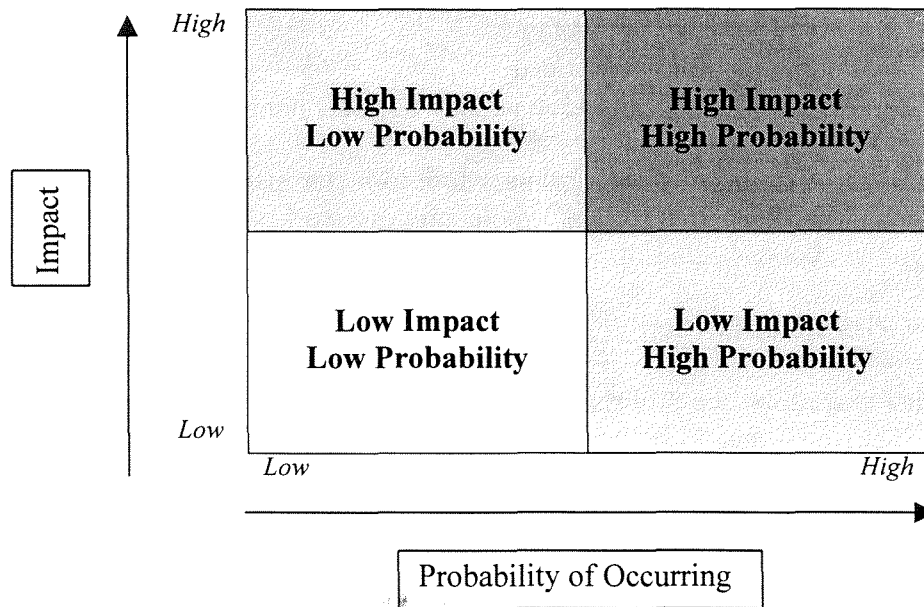
Although the UK is far short of the United States in terms of awards for damages, there is an ever increasing trend. Even on a smaller, local scale, these awards could be massive, and the knock-on effects on tourism etc. will be less readily quantifiable.

The other risks that face a Committee will be less catastrophic, but possibly more numerous.

2.3 Risk Framework

Once identified, risks should then be analysed into a Risk Framework. This seeks to rank individual risks in terms of two factors; the probability of the risk materialising, and the estimated impact (in terms of cost, reputation damage, inability to achieve objectives etc.) should that event materialise.

A Risk Framework may be represented pictorially as follows:



Those risks which are analysed as high probability and high impact are the most crucial to manage and/or insure against. Thereafter, management should address those which are high probability / low impact, or low probability / high impact. Finally, those risks which are low probability / low impact may either be managed or accepted as a comfortable level of exposure. Some risks may be transferred by insurance. Such risks are typically in the low probability / high impact area.

2.4 Risk Management & Corporate Governance

What can be seen from the above, is that Risk Management is a multifaceted programme essential to proper Corporate Governance. A Risk Management programme should cover aspects such as identification and analysis of risks, financial and operational controls, early warning mechanisms, communications, staff resources, decision-making processes, organisational culture, post-event learning and dissemination, as well as internal and external audit reviews.

2.5 Insurance and Risk Management within the States of Guernsey

The Insurance & Risk Management function is currently managed within the Board of Administration. The rationale for having insurance managed by the Board of Administration is based historically on the fact that the Board was originally the provider of central services, and that it maintains responsibility for the majority of the States' owned properties, which represent the largest insurance risk to the States in terms of asset value.

However, insurance and risk management now covers a much wider (and constantly changing) remit. The Commission feels that it would be more appropriate for Advisory & Finance Committee to take on the role of Risk Management & Insurance on behalf of all States Committees.

Furthermore, the Commission feels that, moving the Insurance & Risk Management function within Advisory & Finance, would enable a more global approach to be taken with the greater involvement and co-operation of each individual Committee. Each Committee must recognise its responsibility to identify, analyse and manage its own set of business risks.

The current in-house establishment of the Insurance & Risk Management section consists of two staff, one manager (EGV) and one assistant (AA2). However, these staff members work only partially on Insurance & Risk Management, as they also have other roles to fulfil. It is our opinion that this represents inadequate resources to address an issue as crucial and as complex as Risk Management for the States globally.

3. DELOITTE & TOUCHE EXECUTIVE SUMMARY

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“The aim of this report is to enable the States Audit Commission to understand the effectiveness of the existing insurance and risk management procedures and practices. In undertaking this review we used an interview and desktop review approach which utilised sample interviews as the forum for gathering information as opposed to workshops which encourage interaction between participants.

The States current insurance programme has its origins in a programme established over 15 years ago and has successfully delivered some broad insurance policy terms and conditions at cost effective rates.

Our main findings suggest building on the past results to position the States to face the challenges of the new millennium. Trends in governance, litigation and increasing accountability are changing the risk landscape. Guernsey is an important international financial centre and is ultimately affected by these global trends. It is in light of this and of current best practice that we raise our concerns.

Formal policy statements, procedures and documentation are lacking throughout the insurance and risk management arena within the States, resulting in an ‘ad hoc’, uncoordinated approach to risk management and inconsistent levels of risk awareness. However, we did find evidence of a positive attitude to risk with many welcoming formal guidelines from the Board of Administration.

At present, decision making on insurance appears to be largely taken independently of the Committees, with little risk profile information available at the centre or provided to insurers. This raises four key issues:

- If States ever had to or wished to move insurers they would need accurate risk data in order to negotiate a fair deal.
- Until such times as the States are fully aware of the risks that they face and the corresponding controls (including insurance cover) in place we have to question the effectiveness of existing protection.
- This lack of risk profile data also leads us to question the integrity of the existing cover. The basis of the cover refers to assets “as declared to insurers”. It is unclear whether the extent and nature of the information declared reflects the risk profile.

- The lack of profile data means that insurance premiums are a function of the historic claims experience rather than the risk profile. This includes a clause, which empowers insurers to cancel the policy once claims incurred over a three year period have exceeded 125% of premium. This could potentially leave the States without property or liability cover.

Value opportunities exist in refocusing the direction of internal and external resources from insurance administration to risk management. Attention should also be given to the low level recurring claims, which currently account for approximately 80% of the total cost of claims.

Our report contains a number of recommendations (see section 4), which can be categorised according to the action required and urgency. Each will need to be discussed and then prioritised with an accompanying action plan.

The following recommendations are picked out as particularly significant as they set the foundations for the future: -

- Agree and issue a strategy or policy statement to provide guidance to the committees on how the States wishes to balance risk and control through its operations.
- Agree and issue procedure manuals relating to areas such as claims handling and reporting, risk data collation and details of the insurance cover in operation.
- Undertake a comprehensive risk profile to prioritise the risks faced and to highlight the optimum controls available (including insurance cover required) both at centre and at committee level. This will ensure that the assets and potential liabilities of the States will be adequately protected.
- Commission a detailed technical audit of the new insurance policies to ensure that the cover is in line with best practice and reflects the risk profile of the States
- Develop an appropriate strategy and structure for sourcing risk management and insurance services. It is necessary to balance in-house capabilities and external advisors to achieve the most cost-effective and efficient service, without over reliance on any one advisor.

We would like to thank those involved for their time and support. We would welcome the opportunity to develop these issues further and would be happy to provide further assistance.”

4. DETAILED RECOMMENDATIONS

4.1 Insurance & Risk Management Programme

- 4.1.1 Compile a comprehensive risk profile of the States, which identifies and prioritises the key risks, assesses the adequacy of the present controls and highlights where insurance can be used effectively.
- 4.1.2 Initiate a consistent and on-going process for the identification and reporting of key risks by all States Committees.
- 4.1.3 Investigate the potential to access cost savings within the retained risk area by the introduction of a targeted loss reduction programme combined with an integrated risk management programme.
- 4.1.4 Initiate a detailed review of the cover provided and the construction of the newly issued insurance contract to ensure that cover is aligned to the risk profile, the needs of the States, world-wide risk trends and to ensure long-term integrity.
- 4.1.5 The States should negotiate the removal of the 125% claims to premiums ratio cancellation provision. This will potentially have cost implications.
- 4.1.6 Consider tailoring the self-insurance levels to reflect the claims trends and profiles of the individual States Committees. This should be linked to the introduction of a risk-based and equitable premium allocation system whilst safeguarding the premium in the short-term.
- 4.1.7 Formally review the large loss files and agree appropriate action with insurers.
- 4.1.8 Introduce and agree claims review procedures for both large losses and claims trends. These should encompass committee, centre and insurer requirements.

4.2 Internal Infrastructure

- 4.2.1 The Board of Administration plays a key role within the States in co-ordinating and purchasing of insurance and risk management services. It is necessary that the States Committees support any risk management initiative instigated by the Board of Administration (or which ever Committee has responsibility for Insurance & Risk Management in the future)
- 4.2.2 Develop an overall policy statement in respect of risk management and insurance with input from key States Committees.
- 4.2.3 Prepare and issue a set of risk management and insurance procedures and guidance which should encompass the following:
 - Summary of cover
 - Protocol in relation to collection of data for insurers

- Mechanism for reviewing cover requirements in relation to the States' risk profile; and
 - Procedures for claims handling and recording
- 4.2.4 Reposition the existing in-house resource from focusing on insurance administration to an emphasis on risk management.
- 4.2.5 Review the existing skill base and competencies of those responsible for risk both at a central and Committee level. Derive an appropriate training and competencies programme to develop a more risk-aware infrastructure with the requisite skills and knowledge.

4.3 External Services

- 4.3.1 The States needs to consider a plan of action in the event that the States' current primary insurer is no longer in a position to, or required by the States to, provide cover.
- 4.3.2 Develop a plan to move the States to a position where it is less dependent on one advisor and is able to control and direct the sourcing of insurance and technical support.
- 4.3.3 Develop service agreements with providers to ensure value for money and quality of service.
- 4.3.4 The States has a number of options with regards to the insurance and risk management function. Our recommendation, which is in line with currently accepted practice, is that the States outsource low-value, routine work such as claims and insurance administration and focus the in-house efforts towards risk management strategy, implementation and support. Specialist risk management support could be sourced from expert providers on an 'as required' basis.

4.4 Audit Commission Recommendations

- 4.4.1 That the States commissions a full strategic risk analysis of the inherent risks within the States Committees and devises an action plan for the management of those risks.
- 4.4.2 That the existing role of insurance and risk management, and the current resources involved in this function, be moved under the management of Advisory & Finance Committee, either within the States Treasury or as a separate function reporting directly to the States Supervisor. This would be a central co-ordinating and strategic function and would not remove the need for individual Committees to continue to play a vital role in the management of their specific business risks. In our opinion, this structure follows current normal practice, with Risk Management being seen primarily as a Finance function. This recommendation bears no reflection on the Board of Administration.

- 4.4.3 That Advisory & Finance Committee seek to attract a Risk Management Specialist, from within that Industry, for employment on a two-year contract, with the aims of supporting the current Insurance & Risk Manager, developing a way-forward, addressing the recommendations within this report and transferring skills and knowledge.
- 4.4.4 That the Advisory & Finance Admin & Accounting Guideline entitled “Tendering” be amended in respect of Insurance. The Guideline should recommend that Committees request evidence of adequate Professional Indemnity Insurance (PII) or Public and Products Liability Insurance (PPLI). Further guidance should be given on appropriate levels of PII or PPLI expected and specifically, contractors should not be employed where they do not have PII or PPLI.

APPENDIX I

TERMS OF REFERENCE

The terms of reference for the review were negotiated and it was agreed that Deloitte & Touche would provide the following deliverables on completion of the review:

Insurance and Risk Management Programme

- An assessment of the adequacy of the existing key insurance cover and confirmation of whether the policies offer value for money in the current market
- Recommendations on the optimum insurance programme structure, including the most suitable level of retained risk and the options for how it can be structured and financed.

Internal Infrastructure

- A summary of the principle policies, procedures and practices relating to key aspects of insurance as carried out by the various committees and undertakings of the States.
- An assessment of the adequacy of the existing approach by States Committees to managing risk, including an evaluation of the prevailing control culture.

External Services

- Recommendations of how best to source insurance services in the future and an assessment of the potential impact on the existing insurance administration infrastructure.

Additional Work Required

- Identification of areas where additional work or research is required. This will include the identification of any uninsured areas, which come to light during the review, and an assessment of potential risk areas which may not be adequately managed.

Disclaimer

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APPENDIX III

STATES ADVISORY AND FINANCE COMMITTEE

INTERNATIONAL CONVENTIONS AND AGREEMENTS

The President,
States of Guernsey,
Royal Court House,
St. Peter Port,
Guernsey.

3rd March, 2000.

Sir,

INTERNATIONAL CONVENTIONS AND AGREEMENTS

On the 25th February 1987 the States resolved:

1.
2. that the States Advisory and Finance Committee shall submit annually to the Bailiff for inclusion as an Appendix to a Billet d'Etat, a report setting out the title and brief description of each International Agreement received by the States Advisory and Finance Committee in the preceding year and giving details of the action taken in relation to that Agreement.

On this occasion the report is in respect of two years - 1998 and 1999. It is regretted that the report for 1998 was not submitted sooner to the States.

In accordance with the resolution of the States I have the honour to request that you be good enough to publish the report appended hereto as an Appendix to a Billet d'Etat.

I am, Sir,
Your obedient Servant,
L. C. MORGAN,
President,
States Advisory and Finance Committee.

REPORT FOR 1998 AND 1999

ON INTERNATIONAL CONVENTIONS AND AGREEMENTS

(in accordance with Resolution VIII (2) of Billet d'État IV 1987)

PART I - OUTSTANDING MATTERS FROM PREVIOUS REPORTS

1. United Nations Convention on the Rights of the Child

Object: To make provision for the implementation of 54 wide-ranging articles concerning the right of the child, several of which involve human rights and fundamental freedoms.

Consultation: Alderney and Sark
H.M. Procureur
H.M. Government
Education Council
Children Board
Guernsey Social Security Authority
Committee for Home Affairs
Board of Industry
Board of Health

Action: In 1987 the States resolved that where international agreements involved questions of human rights and fundamental freedoms the terms of such agreements should be laid before the States.

Much consultative work has been carried out to establish the legislative requirements which will be necessary to enable compliance with the Convention. That process continues and it is expected that a report will be presented to the States in 2000.

2. European Convention and additional Protocol on Mutual Assistance in Criminal Matters

Object: To provide that the contracting parties shall afford each other the widest measure of mutual assistance in proceedings in respect of offences the punishment of which falls within the competence of the judicial authorities of the requesting party.

Consultation: H.M. Procureur
H.M. Government
Jersey and Isle of Man Authorities
Income Tax Authority
Financial Services Commission

Action: This matter is still under consideration.

3. Treaty between the United States of America and the United Kingdom on Mutual Legal Assistance in Criminal Matters

Object: To improve the effectiveness of the Law enforcement authorities of both countries in the investigation, prosecution and combating of crime through co-operation and mutual legal assistance in criminal matters and to reaffirm the Contracting Parties' determination to enhance assistance in the fight against crime as set out in an earlier Agreement.

Consultation: H.M. Procureur
Financial Services Commission

Action: The general question of this Treaty is still under review. A separate Agreement relating to the sharing between the representative jurisdictions of assets which have been confiscated as being the proceeds of drug trafficking was concluded on 29th July, 1996.

4. Council of Europe Convention on Laundering, Search, Seizure and Confiscation of the Proceeds of Crime

Object: To increase the co-operation between the Parties in investigations and proceedings aimed at the confiscation of instrumentalities and proceeds of crime by requiring each Party to adopt legislative and other measures to enable it to comply with requests for confiscation of proceeds of crime and for investigatory assistance.

Consultation: As in 2 above.

Action: A request will be made for the extension of this Convention to Guernsey as soon as up to date legislation on international co-operation, which will include the necessary provisions on the forfeiture of the instrumentalities of crime, has been approved.

5. Convention on the Crossing of the External Frontiers of the Member States of the European Community

Object: To put into effect article 8a of the Treaty establishing the European Economic Community which sets the common objective of an area without internal frontiers.

Consultation: Alderney and Sark
H.M. Procureur
H.M. Government
Jersey Authorities
Isle of Man Authorities
Board of Administration

Action: This matter is still under consideration.

6. World Declaration on the Survival, Protection and Development of Children and Plan of Action for Implementing the aforesaid World Declaration in the 1990's

Object: To undertake a joint commitment, and to make an urgent universal appeal, to give every child a better future.

Consultation: H.M. Procureur

Action: The issues involved are closely related to those under consideration in relation to the U.N. Convention on the Rights of the Child (see Part I No. 1) and will be examined when a decision is reached with regard to the Convention.

7. Convention for the Protection of the Marine Environment of the North East Atlantic

Object: To provide that the Contracting Parties shall take all possible steps to prevent and eliminate pollution and shall take the necessary measures to protect the maritime area against the adverse effects of human activities so as to safeguard human health and to conserve marine ecosystems and, when practicable, restore marine areas which have been adversely affected.

Consultation: Alderney and Sark
H.M. Procureur
Board of Administration
Board of Health
Sea Fisheries Committee
Public Thoroughfares Committee

Action: The issues involved are linked to the control of environmental pollution and the implementation of the Waste Strategy Assessment. In February, 1997 the States directed the preparation of legislation

to control environmental pollution. The first report on the Waste Strategy Assessment was considered by the States in June, 1997. The possible extension of the Convention will be considered once those issues are decided.

8. Extradition Treaty between the United Kingdom and the Republic of India

Object: To make more effective the co-operation of the two countries in the suppression of crime by making further provision for the reciprocal extradition of offenders and in the recognition that concrete steps are necessary to combat terrorism.

Consultation: Alderney and Sark
H.M. Procureur

Action: This matter is still under consideration.

9. United Nations Convention on Biological Diversity

Object: To conserve the maximum possible biological diversity for the benefit of present and future generations and for its intrinsic value by ensuring that the use of biological resources is sustainable; and by securing economic and legal conditions favourable for the transfer of technology necessary to accomplish this objective.

Consultation: Alderney and Sark
H.M. Procureur
H.M. Government
Board of Administration
Agricultural and Milk Marketing Board
Island Development Committee

Action: This matter is still under consideration.

10. United Nations Framework Convention on Climate Change

Object: To achieve stabilization of greenhouse gas concentrations in the atmosphere at a level that would prevent dangerous anthropogenic interference with the climate system. Such a level should be achieved within a time frame sufficient to allow

ecosystems to adapt naturally to climatic change, to ensure that food production is not threatened and to enable economic development to proceed in a sustainable manner.

Consultation: Alderney and Sark
H.M. Procureur
H.M. Government
Board of Administration
Board of Health
Electricity Board

Action: This matter is still under consideration.

11. European Information System Convention

Object: To contribute to the maintenance of public order and security including state security and to combat illegal immigration. (This Convention is associated with No 5 above).

Consultation: Alderney and Sark
H.M. Procureur
Board of Administration

Action: This matter is still under consideration.

12. European Convention on Extradition
(Second Additional Protocol Chapter 2)

Object: To extend the terms of the principal Convention to include fiscal offences

Consultation: Alderney and Sark
H.M. Procureur
Jersey and Isle of Man Authorities
Financial Services Commission

Action: This matter, together with various other issues relating to extradition and extradition treaties, is still under consideration.

13. Agreement establishing the World Trade Organization

The Agreement establishing the World Trade Organization comprises three separate parts: the General Agreement on Tariffs and Trade, 1994 (GATT); the General Agreement on Trade in Services (GATS) and the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS). It puts the GATT on a formal footing.

a. The General Agreement on Tariffs and Trade, 1994

Object: To increase market access by reducing or eliminating trade barriers. This objective was met by reductions in tariffs, reductions in non-tariff support in agriculture and the elimination of bilateral quantitative restrictions.

To increase the legal security of the new levels of access. This has resulted in strengthened and expanded rules, procedures and institutions.

To implement a phased reduction in tariffs on a wide range of goods.

To reduce non-tariff barriers.

To provide a new framework of rules on subsidies and trade restrictions.

To provide for a free global textile trade.

To bring agriculture fully within the GATT for the first time. This includes the conversion of all restrictions on trade to tariffs which are transparent. A minimum reduction in every tariff of 15%. A guarantee that at least 3% of domestic agricultural product markets will be open to imports. Controls will be introduced on domestic support and export subsidies.

The Multifibre Agreement will be phased out and trade in textiles will be re-integrated into the GATT system over a ten year period.

Anti-dumping rules will be strengthened and clarified.

To provide for more rapid and effective settlement of trade disputes.

Consultation: Alderney and Sark
H.M. Procureur
H.M. Government
Financial Services Commission
Board of Administration
Guernsey Transport Board
Telecommunications Board

Tourist Board
Recreation Committee
Board of Health
Education Council
Committees at Raymond Falla House
Jersey and Isle of Man authorities

Action: This matter is still under consideration.

b. General Agreement on Trade in Services.

Object: To introduce the principles of the GATT regarding multilateral trade rules to services, including the principles of national treatment, most-favoured-nation, transparency and progressive liberalisation.

To liberalise trade in a wide range of services as a basis for freer trade in the future.

To guarantee existing levels of access in many areas.

Consultation and Action: As in a. above.

c. Agreement on Trade-Related Aspects of Intellectual Property Rights.

Object: To introduce a set of agreed multilateral rules requiring basic protection of intellectual property rights including the principles of national treatment and most-favoured-nation.

Consultation: H.M. Government
H.M. Procureur
Jersey authorities
Board of Industry

Action: The Advisory and Finance Committee has established a Working Party to consider the issue of intellectual property rights and to determine what legislation would be necessary to fulfil our obligations if this Agreement was extended to the Island.

14. E.U. Agreement on Government Procurement

Object: To broaden and improve the 1979 Agreement on Government Procurement (as amended in 1987) on the basis of mutual reciprocity and to expand the coverage of the Agreement to include Service Contracts.

Consultation: Alderney and Sark
H.M. Procureur
Committee for Home Affairs
Board of Industry
Public Thoroughfares Committee
Post Office Board
Education Council
Water Board
Telecommunications Board
Electricity Board
Agricultural and Milk Marketing Board
Board of Health
Board of Administration

Action: This matter is still under consideration.

15. **Draft UNCITRAL Convention/Model Law on Independent Guarantees and Stand-by Letters of Credit**

Object: To promote a uniform law regulating independent guarantees and stand-by letters of credit.

Consultation: Alderney and Sark
H.M. Procureur
Financial Services Commission

Action: Decision deferred as the matter is still under consideration by H.M. Government.

16. **European Energy Treaty**

Object: To encourage economic growth by means of measures to liberalise investment and trade in energy.

To promote long-term cooperation in the energy field by means of provision on investment, trade, transit, sovereignty over resources, environment competition, taxation; and access to capital and technology.

Consultation: Alderney and Sark
H.M. Procureur
Financial Services Commission
Board of Administration
Electricity Board
Board of Industry
Island Development Committee
Traffic Committee

Action: Extension to Guernsey agreed.

17. Council of Europe Convention relating to questions of copyright law and neighbouring rights in the framework of transfrontier broadcasting by satellite

Object: To promote the broadest possible harmonisation of the Law of the Member States, and the other States party to the European Cultural Convention, on copyright and neighbouring rights with regard to new technical developments in the field of broadcasting by satellite.

Notably the need to safeguard the rights and interests of authors and other contributors when protected works and other contributions are broadcast by satellite. To consider further legal aspects of broadcasting by satellite from the viewpoint of copyright law and neighbouring rights.

Consultation: Alderney and Sark
H.M. Procureur
Broadcasting Committee
Board of Industry

Action: The Committee has deferred a decision on this Convention pending the receipt of a report from the Working Party set up by the Committee to review the Island's legislation regarding Patents, Designs, Trademarks and Copyright.

18. International Convention for the Prevention of Pollution from Ships (MARPOL)

Object: To achieve the complete elimination of intentional pollution of the marine environment by oil and other harmful substances and the minimization of accidental discharge of such substances.

Consultation: H.M. Government
Alderney and Sark
H.M. Procureur
Board of Administration

Action: The possible extension of the Convention will be considered once Guernsey's new Merchant Shipping Legislation is in place.

19. Convention establishing the European Police Office (EUROPOL)

Object: To establish a European Police Office (EUROPOL).

Consultation: Alderney and Sark
H.M. Procureur
Board of Administration
Committee for Home Affairs
Data Protection Registrar

Action: In accordance with the similar decisions taken in Jersey and the Isle of Man it was decided that the Convention should not be extended to Guernsey. However, Guernsey will continue to play a full part in the international fight against crime.

20. Agreements between the European Community and each member of the Andean Pact on control of the trade in precursors and chemical substances

Object: To strengthen administrative co-operation between the Contracting Parties to prevent the diversion of substances frequently used in the illicit manufacture of narcotic drugs or psychotropic substances.

Consultation: Alderney and Sark
H.M. Procureur
Board of Administration

Action: It was determined that the Agreement was not applicable under the terms of Protocol 3 to the United Kingdom's Act of Accession.

21. Draft Agreement between the European Community and the United States of America on control of the trade in precursors and chemical substances

Object: To prevent and combat the illicit manufacture of narcotic drugs and psychotropic substances by controlling the supply of precursors and chemical substances frequently used for such purposes.

Consultation: Alderney and Sark
H.M. Procureur
Board of Administration

Action: It was determined that the Agreement was not applicable under the terms of Protocol 3 to the United Kingdom's Act of Accession.

22. Montreal Amendment to the Montreal Protocol on Substances that deplete the ozone layer to the Vienna Convention for the Protection of the Environment

Object: To amend the provisions of the Montreal Protocol as follows:

to extend the trade controls to methyl bromide;

to require all parties to have a licensing system in place for the import and export of controlled substances;

to require parties in non-compliance to ban the export of used, recycled and reclaimed controlled substances.

Consultation: Alderney and Sark
H.M. Procureur
Board of Industry

Action: This matter is still under consideration.

23. Council of Europe Convention on the Protection of Animals for Slaughter

Object: To establish common minimum standards for the protection of animals at the time of slaughter to spare them avoidable pain or suffering.

Consultation: Alderney and Sark
H.M. Procureur
Agricultural and Milk Marketing Board

Action: Not to be extended to Guernsey as implementation of the Convention in the United Kingdom is by an EC Council Directive which does not apply to Guernsey under the terms of Protocol 3 to the United Kingdom's Act of Accession.

24. Joint Convention on the Safety of Spent Fuel Management and the Safety of Radioactive Waste Management

Object: To achieve and maintain a high level of safety worldwide in spent fuel and radioactive waste management;

to ensure that during all stages of spent fuel and radioactive waste management there are effective defences against potential hazards;

to prevent accidents with radiological consequences
and to mitigate their consequences.

Consultation: Alderney and Sark
H.M. Procureur
Civil Defence Committee

Action: Extension to Guernsey agreed.

PART II - NEW MATTERS CONSIDERED DURING 1998 AND 1999

1. 1996 Protocol to the Convention on the Prevention of Marine Pollution by Dumping of Wastes and Other Matter

Object: To strengthen the global controls over the dumping of wastes at sea which were established under the London Convention of 1972. The single most significant change is the move away from a list of wastes which may not be dumped to a restricted list of materials which may be considered for sea disposal, all others being prohibited.

Consultation: Alderney and Sark
H.M. Procureur
Board of Administration

Action: Extension to Guernsey agreed.

2. Agreement between the United Kingdom Czech Republic on International Road Transport

Object: To facilitate international road transport between the two parties and in transit between their territories.

Consultation: Alderney and Sark
H.M. Procureur
Chief Officer of Police

Action: Extension to Guernsey agreed.

3. Agreement between the United Kingdom and the Slovak Republic on International Road Transport

Object: To facilitate international road transport between the two parties and in transit through their territories.

Consultation: Alderney and Sark
H.M. Procureur
Chief Officer of Police

Action: Extension to Guernsey agreed.

4. Agreement between the United Kingdom and the Russian Federation on International Road Transport

Object: To facilitate international road transport between the two parties and in transit through their territories.

Consultation: Alderney and Sark
H.M. Procureur
Traffic Committee
Chief Officer of Police

Action: Extension to Guernsey agreed.

5. Unidroit Convention on Stolen or Illegally Exported Cultural Objects

Object: To harmonize and co-ordinate the private law of States with regard to the restitution of stolen cultural objects. It provides for the return of cultural objects removed from the territory of a contracting State contrary to its law regulating the export of cultural objects for the purpose of protecting its cultural heritage. Cultural objects are defined as those which, on religious or secular grounds, are of importance for archeology, pre-history, history, literature, art or science.

Consultation: Alderney and Sark
H.M. Procureur
Heritage Committee

Action: Not to be extended to Guernsey in view of the number of complex legal issues raised by the Convention. It is open for Guernsey to request extension of the Convention in the future if it is then considered appropriate to do so.

6. Agreement between the United Kingdom and the Italian Republic concerning the Co-Production of Films

Object: To benefit the film industries in the two countries by closer mutual co-operation in the production of films and the resulting increases in financial and cultural exchanges.

Consultation: Alderney and Sark
Board of Industry

Action: Not to be extended to Guernsey as the States do not provide funding for commercial films.

7. Convention on the Prior Informed Consent Procedure for Certain Hazardous Chemicals and Pesticides in International Trade

Object: To promote shared responsibility and co-operative efforts among the parties in the International Trade

of Certain Hazardous Chemicals in order to protect human health and the environment from potential harm and to contribute to their environmentally sound use, by facilitating information exchange about their characteristics, by providing for a national decision-making process on their import and export and by disseminating these decisions to parties.

Consultation: Alderney and Sark
H.M. Procureur
Board of Industry

Action: Extension to Guernsey agreed.

8. Locarno Agreement establishing an International Classification for Industrial Designs

Object: To establish a Classification for Industrial Designs. The classification system is solely of an administrative character, but would become part of the requirements for design registration and the publication of registered designs.

Consultation: Alderney and Sark
H.M. Procureur
Board of Industry

Action: Not to be extended to Guernsey at present in view of an on-going review of intellectual property rights.

9. Agreement between the United Kingdom and the Azerbaijan Republic on International Road Transport

Object: To facilitate international road transport between the two parties and in transit through their territories.

Consultation: Alderney and Sark
H.M. Procureur
Traffic Committee
Chief Officer of Police

Action: Extension to Guernsey agreed.

10. European Convention on Mutual Assistance and Co-operation between Customs Administration (NAPLES II)

Object: To require the Member States of the European Union, without prejudice to the competencies of the Community, to provide each other with mutual assistance and to co-operate with one another through their customs administrations, with a view to preventing and detecting infringements of national customs provisions and prosecuting and punishing infringements of Community and national customs provisions.

Consultation: Alderney and Sark
H.M. Procureur
Board of Administration

Action: Extension to Guernsey agreed.

11. Sixth Protocol to the European Convention for the Protection of Human Rights and Fundamental Freedoms

Object: To incorporate within the Convention the provision that the death penalty shall be abolished and that no-one should be condemned to such penalty or be executed.

Consultation: Alderney and Sark
H.M. Procureur

Action: On the 28th October 1998 the States resolved to request H.M. Government to make a declaration to extend the provisions of the Sixth Protocol to the Bailiwick of Guernsey and it was extended on the 23rd April 1999.

12. OECD Convention on Combating Bribery of Foreign Public Officials in International Business Transactions

Object: To establish a framework whereby each participating country will have in place equivalent resources to fight such corruption in line with their existing legal traditions.

Consultation: Alderney and Sark
H.M. Procureur

Action: Extension to Guernsey agreed in principle. Insular legislation will be necessary before the Convention can take effect.

13. United Nations Convention on Contracts for the International Sale of Goods

Object: The Convention provides a uniform law for international sales of goods. It provides common ground between the parties to a contract. For example, it could be used where a seller and an overseas buyer are unable to agree on which of their national laws should apply to their contract.

Consultation: Alderney and Sark
H.M. Procureur
Board of Industry
Financial Services Commission

Action: This matter remains under consideration.

14. European Convention for the Protection of Vertebrate Animals used for Experimental and other Scientific Purposes

Object: To lay down the scientific purpose for which experiments on animals may be authorized and the conditions under which they are to be carried out with a view to reducing the number of animals used, keeping their suffering to a minimum and introducing the necessary controls by the national authorities on establishing breeding, supplying and using laboratory animals. The ultimate long-term aim is to replace experiments on animals by alternative methods of measures wherever practicable.

Consultation: Alderney and Sark
H.M. Procureur
Agricultural and Milk Marketing Board

Action: Not to be extended to Guernsey as no relevant scientific procedures are carried out on vertebrate animals on the Island.

15. Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on their Destruction

Object: To put an end to the suffering and casualties caused by anti-personnel mines, that kill or maim hundreds of people every week, mostly innocent and defenceless civilians and especially children, obstruct economic development and reconstruction, inhibit the repatriation of refugees and internally displaced persons, and have other severe consequences for years after emplacement.

Consultation: Alderney and Sark
H.M. Procureur

Action: Extension to Guernsey agreed.

16. 1996 International Agreement on Safeguards against Nuclear Proliferation and Additional Protocol

Object: To provide design information in respect of facilities or parts of facilities which will contain nuclear materials; to provide an initial report of all nuclear material and facilities or parts of facilities which are subject to safeguards under the Agreement from which will be established an initial inventory of such material; to keep accounting records and operating records showing changes in the initial inventory and other relevant information; to make reports; to carry out inspections to verify the information set out in the records and reports.

Consultation: Alderney and Sark
H.M. Procureur
Civil Defence Committee

Action: Extension to Guernsey agreed.

17. Immigration and Asylum Re-admission Agreement between the United Kingdom and Bulgaria

Object: To overcome the problems encountered in returning foreign nationals who are not in the Common Travel Area lawfully, in particular with regard to the lack of documentation or evidence of identity which frequently arises in such cases.

Consultation: Alderney and Sark
H.M. Procureur
Board of Administration

Action: Extension to Guernsey agreed.

18. Council of Europe Framework Convention for the Protection of National Minorities

Object: To specify the legal principles which States undertake to respect in order to ensure the protection of national minorities.

Consultation: Alderney and Sark
H.M. Procureur

Action: This matter remains under consideration.

19. Council of Europe Convention on Corruption

Object: To pursue, as a matter of priority, a common criminal policy aimed at the protection of society against corruption, including the adoption of appropriate legislation and preventative measures.

Consultation: Alderney and Sark
Jersey authorities
Isle of Man authorities
H.M. Procureur

Action: Extension to Guernsey agreed in principle. Insular legislation will be necessary before the Convention can take effect.

20. 17 Investment, Promotion and Protection Agreements between the United Kingdom and Nicaragua, Croatia, Tonga, Uganda, Hong Kong, Azerbaijan, Bulgaria, Chile, China, Cote d'Ivoire, Kyrgyzstan, Moldova, South Africa, Uruguay, Armenia, Laos and Venezuela

Object: To protect and encourage investment overseas by providing for prompt, adequate and effective payment in the event of expropriation; the transfer of profits and repatriation of capital; subrogation; independent settlement of investment disputes and international arbitration on disputes.

Consultation: Alderney and Sark
Board of Industry

Action: Extension to Guernsey agreed.

21. UN Convention on Long-Range Transboundary Air Pollution - Protocol on Heavy Metals

Object: To control emission of heavy metals caused by anthropogenic activities that are subject to long-range transboundary atmospheric transport and are likely to have significant adverse effects on human health or the environment.

Consultation: Alderney and Sark
H.M. Procureur
Board of Health
Board of Industry
Electricity Board

Action: Not to be extended to Guernsey as the resources which would need to be deployed in monitoring the emissions would be disproportionate to any benefits.

22. UN Convention on Long-Range Transboundary Air Pollution - Protocol on Persistent Organic Pollutants

Object: To control, reduce or eliminate discharges, emissions or losses of persistent organic pollutants.

Consultation
and Action: As in 21 above.

23. International Criminal Court Statute

Object: To provide a permanent independent forum to investigate and try genocide, war crimes and crimes against humanity.

Consultation: Alderney and Sark
H.M. Procureur

Action: This matter is still under consideration.

24. Convention on the Protection of the European Communities' Financial Interest

Object: To combat fraud affecting the European Communities' financial interest by undertaking obligations concerning jurisdiction, extradition and mutual co-operation and to make such conduct punishable with effective, proportionate and dissuasive criminal penalties, without prejudice to the possibility of applying other penalties in appropriate cases and of the need, at least in serious cases, to make such conduct punishable with deprivation of liberty which can give rise to extradition.

Consultation: Alderney and Sark
Jersey authorities
Isle of Man authorities
H.M. Procureur

Action: This matter is still under consideration.

25. Euro-Mediterranean Agreement establishing an association between the European Communities and their Member States and Jordan

Object: To provide an appropriate framework for the political dialogue, allowing the development of close political relations between the Parties; to establish the conditions for the progressive liberalization of trade in goods, services and capital; to foster the development of balanced economic and social relations between the parties through dialogue and co-operation; to improve living and employment conditions, and enhance productive and financial stability to encourage regional co-operation with a view to the consolidation of peaceful co-existence and economic and political stability; to promote co-operation in other areas which are of reciprocal interest.

Consultation: Alderney and Sark
H.M. Procureur

Action: Extension to Guernsey agreed only to the extent that the Agreement applies within the terms established by Protocol 3 to the United Kingdom's Act of Accession.

26. Economic Partnership, Political Co-ordination and Co-operation Agreement between the European Community and its Member States and Mexico

Object: To strengthen existing relations between the Parties on the basis of reciprocity and mutual interest. To this end, the Agreement institutionalizes political dialogue, strengthens commercial and economic relations by means of the liberalization of trade in conformity with the rules of the WTO and reinforces and broadens competition.

Consultation
and Action: As in 25 above.

27. Framework Agreement for Trade and Co-operation between the European Community and its Member States and Korea

Object: To promote the development and diversification of reciprocal commercial exchanges to the highest possible level and to the mutual benefit of the

parties; to achieve improved market access conditions and to work towards the elimination of barriers to trade.

Consultation: Alderney and Sark
H.M. Procureur

Action: Extension to Guernsey agreed only to the extent that the Agreement applies within the terms established by Protocol 3 to the United Kingdom's Act of Accession. However, as article 3, paragraph 2 of the Agreement makes express reference to the WTO Agreement on Trade-Related Aspects of Intellectual Property Rights Guernsey may not be in a position to comply with this aspect until legislation in that regard has been revised.

28. Convention on the Recognition of Qualifications concerning Higher Education in the European Region

Object: To establish a mechanism whereby a person with a qualification gained in one country may apply to have that qualification assessed and recognized in another country before (a) access to higher education; (b) access to further higher education; (c) use of an academic title and (d) access to the labour market.

Consultation: Alderney and Sark
H.M. Procureur
Education Council

Action: Not to be extended to Guernsey as the Island does not have its own system of further and higher education qualifications and, therefore, is not in a position to give binding decisions as to the status of qualifications gained in other countries which adopt the Convention.

29. Amendment to the International Telecommunications Union Constitution and Convention

Object: To introduce processing charges for satellite network filings; to approve active involvement of the ITU in internet governance issues; to review the need to revise the International Telecommunications Regulations to take account of the globalization and

deregulation of world telecommunications and to provide an enhanced status to Palestine to those of observers and the possibility to obtain an international country code, call signs and frequency co-ordination.

Consultation: Alderney and Sark
H.M. Procureur
Telecommunications Board

Action: Extension to Guernsey agreed.

30. Amendments to the Convention on the European Telecommunications Satellite Organisation (EUTELSAT)

Object: To allow the Organisation to make the transition to a national law company established in France.

Consultation: Alderney and Sark
H.M. Procureur
Telecommunications Board

Action: Extension to Guernsey agreed.

31. Convention on the Fight Against Corruption Involving Officials of the European Communities or Officials of Member States of the European Union

Object: To improve judicial co-operation in the fight against acts of corruption involving National or Community officials which are damaging or likely to damage European Communities' financial interest.

Consultation: Alderney and Sark
Jersey authorities
Isle of Man authorities
H.M. Procureur

Action: This matter is still under consideration.

32. International Convention on the Simplification and Harmonization of Customs Procedures

Object: To promote the Simplification and Harmonization of Customs Procedures, and to that end, to conform to the standards set out in the Convention.

Consultation: Alderney and Sark
H.M. Procureur
Board of Administration

Action: Extension to Guernsey agreed.

33. International Plant Protection Convention

Object: To adopt legislative, technical and administrative measures to prevent the spread and introduction of pests of plants and plant products and to promote appropriate measures for their control.

Consultation: Alderney and Sark
H.M. Procureur
Committee for Horticulture

Action: This matter remains under consideration.

34. Letter of Intent concerning Measures to Facilitate the Restructuring of the European Defence Industry

Object: To agree concrete proposals to remove some of the barriers to the restructuring of the European defence industry in particular with regard to security of supply, export procedures, research and technology, treatment of technical information, harmonization of military requirements and security of information.

Consultation: Alderney and Sark
H.M. Procureur

Action: Not to be extended to Guernsey as the Island has no defence industry.

35. Montreal Convention for the Unification of Certain Rules for International Carriage by Air

Object: To replace the existing Warsaw System which has become cumbersome and outdated. The principle feature of the Convention is that it updates the liability regime for death or bodily injury to passengers. Under the new system the limits on air carriers liability for financial compensation will be removed. For claims above 100,000 SDRs (Special

Drawing Rights) the burden of proof will be on the carrier to prove that it was not at fault. For claims less than that figure, airlines have no defence except where the passenger caused the damage. The new Convention offers positive consumer benefits over the existing Warsaw System.

Consultation: Alderney and Sark
H.M. Procureur
Board of Administration

Action: This matter is under consideration.

36. Agreement between the United Kingdom and Australia concerning the Investment, Restraint and Confiscation of the Proceeds and Instruments of Crime

Object: To provide the widest measure of mutual assistance in the investment, restraint and confiscation of the proceeds and instruments of crime.

Consultation: Alderney and Sark
H.M. Procureur

Action: This matter is still under consideration.

37. Agreement between the United Kingdom and Canada regarding the Sharing of Forfeited or Confiscated Assets or their equivalent funds

Object: To enable the Parties to share confiscated criminal proceeds where the non-confiscating country has made a significant contribution to the investigation.

Consultation: Alderney and Sark
H.M. Procureur

Action: This matter is still under consideration.

PART III - MATTERS FROM PREVIOUS REPORTS TO BE RECONSIDERED

1. United Nations Convention on the Elimination of All Forms of Discrimination against Women

Object: To achieve equal rights for women throughout the world in all fields of life - political, economic, social, cultural and civil.

Consultation: Alderney and Sark
H.M. Procureur
H.M. Government
all States Committees

Action: Having resolved, inter alia, on the 15th December, 1993 not to seek ratification of this Convention, on the 28th November, 1996 the States further resolved:-

1. To note the progress made since the previous report on the UN Convention on Elimination of all Forms of Discrimination against Women was considered by the States on the 15th December, 1993.
2. To endorse the States Advisory and Finance Committee's intention, prior to its next report on the Convention, to carry out a detailed review in both the public and private sector to identify what measures and potential resource implications might be required to eliminate discrimination against women and to meet the aims and objectives of the Convention.
3. To direct the States Advisory and Finance Committee to implement a confidential service to record complaints by, and provide advice to, women who claim to have been discriminated against, and to report back to the States annually (by means of an appendix to a Billet d'Etat) with appropriate details of such service.
4. To instruct the States Advisory and Finance Committee to enquire officially what steps, legislative or otherwise, the States would be obliged to take before Her Majesty's Government would be willing to request that the Convention be ratified on the Island's behalf and to report back to the States as soon as may be on the substance of the reply.

5. Further to instruct the States Advisory and Finance Committee to enquire officially of Her Majesty's Government what reservations, if any, it would be willing to enter on the Island's behalf if it were to request that the Convention be ratified on the Island's behalf and how those reservations would affect the answer to the question posed in resolution 4.
6. To instruct the States Advisory and Finance Committee to report back to the States with the replies of Her Majesty's Government arising from resolutions 4 and 5 as soon as may be.

The Committee was unable to meet the deadline of reporting to the States by November, 1999 and a statement was made to the House in October, 1999. The current position is that the Committee is carrying out the detailed review and consultations required by the States.

Provided H.M. Government's responses are timely and as anticipated, it is expected that a policy letter will be laid before the States at or before the July 2000 States meeting.

A confidential service to record complaints by, and provide advice to, women who claim to have been discriminated against was established in April, 1998. An annual report on the numbers of complaints made is included as an appendix to a Billet d'État.

PART IV - REPORTS SUBMITTED BY GUERNSEY

During 1999 the Advisory and Finance Committee submitted a periodic report on the International Covenant of Civil and Political Rights.

Copies of that report and reports published by the United Nations Human Rights Committee are available, free of charge, on request from the Head of External and Constitutional Affairs at Sir Charles Frossard House.

Copies have also been deposited at the Royal Court Library and with the Citizen's Advice Bureau, Guille-Allès Library, Priaulx Library, Alderney Library and Sark Library.

APPENDIX IV

STATES OVERSEAS AID COMMITTEE

ANNUAL REPORT FOR 1999

The President,
States of Guernsey,
Royal Court House,
St. Peter Port,
Guernsey.

18th February, 2000.

Sir

In accordance with Resolution XIII of the States of 28 February, 1980, I have the honour to enclose the report of the States Overseas Aid Committee for 1999 for publication as an appendix in a Billet d'Etat.

I am, Sir,
Your obedient Servant,
E. W. WALTERS,
President,
States Overseas Aid Committee.

States Overseas Aid Committee - Annual Report

In accordance with Resolution XIII on Billet d'Etat III 1980

The Committee's budget for contributions to development aid overseas in 1999 was £809,000 plus the sum of £1,467 taken from the Committee's savings. This was used to fund the following types of projects: Agriculture Fisheries, Education Training, Health and Integrated Development.

The policy of the Overseas Aid Committee has long precluded emergency disaster relief and aid to non-third world countries. However, in view of the plight of the ethnic Albanians fleeing from the Serbian onslaught in Kosovo and the overwhelming need for humanitarian assistance in that area, the Committee, together with the Advisory and Finance Committee, agreed the unprecedented step of providing an immediate grant of £100,000 to the Disasters Emergency Committee Kosovo Appeal. In April, the Advisory and Finance Committee sought the retrospective approval of the States (Billet d'Etat IX) for an increase in the budget of the Overseas Aid Committee for this purpose.

The Overseas Aid Committee is grateful to the States that, as a result of this, and following a recommendation by the Advisory and Finance Committee in the July Policy Planning Report (Billet d'Etat XIII), a facility has now been established whereby the Advisory and Finance Committee in conjunction with this Committee, is able to increase the budget of the Overseas Aid Committee by up to £200,000 each calendar year for the purpose of providing aid in respect of specific emergency disasters. This facility will be used if the delay required for the submission of a special Billet d'Etat is considered unwarranted.

In this respect, therefore, in November the Committee, together with the Advisory and Finance Committee, agreed to provide an immediate grant of £50,000 to the Disasters Emergency Committee India Cyclone Appeal, in the wake of the catastrophic cyclone which caused widespread devastation and loss of life in Orissa State, India.

Projects Supported - 1999

Agriculture/Fisheries

CHAD

Oxfam

Meeting Basic Needs in Rural Areas of South-West Chad

£22,195

To improve the lives of poor people in Mayo-Kebbi Prefecture, South-West Chad, through increasing income and improving food security in 14 villages by helping them boost agricultural production, particularly market gardening, improve livestock production and develop savings and credit groups. Funding is for the provision of agricultural inputs through a revolving credit fund, an all terrain vehicle and the construction of 1 village well.

PERU

Oxfam

Rebuilding Agriculture for Returning Communities, Chopcca Micro Basin

£12,222

To support the return of poor people to their homes in Huancavelica, Chopcca Micro Basin, after being displaced by violence. The project aims to enable poor women farmers to improve their families' nutritional levels by starting a number of different activities such as poultry and small livestock rearing, improved cereal production, greenhouse and vegetable gardening, and bread making. Specialised training in small animal rearing, vegetable cultivation, literacy and organisational skills will enable them to manage the new activities into the future, and will also strengthen women's participation in decision making at community level.

RWANDA

World Vision UK

Small Livestock Restocking Project, Umutara Prefecture

£18,750

Increased food production and improved soil fertility through the provision of 420 goats to 400 most vulnerable farmer families in Murambi Commune, Umutara Prefecture, the training of the farmers in animal husbandry, manure collection, composting and use.

SUDAN

World Vision UK

Ox-Plough Training, Bahr-El-Ghazal

£24,028

To increase food security and self-reliance in Tonj and Gogrial Counties, Bahr-El-Ghazal, by improving the capacity of Tonj and Gogrial farmers to produce more food and seeds, through the provision of 150 ox-ploughs - ie 75 ploughs in Tonj and 75 ploughs in Gogrial - and the training of 300 oxen - ie 150 in each county - training workshops and farmer field days. The project will target 14,000 households (approx. 84,000 individuals).

ZIMBABWE

Dabane Trust

Tractor for Dam Building Programme, Matabeleland

£23,875

The general objective is to alleviate some of the hardships of the rural population of Zimbabwe through the provision of small dams in areas where it is not feasible to tap into underground water. The specific objectives are: to support the local communities' efforts by providing a second hand John Deere tractor to supplement the hard manual labour provided by the local villagers, particularly women; to use the tractor to build dams to provide a reliable water supply for livestock and irrigation and thus to improve nutrition in the area; to increase local income by providing crops and vegetables for sale and by improving the condition of goats and livestock for local consumption and sale; to assist rural people to be able to supplement their incomes in situ instead of being totally reliant on money sent from absent relatives. This third tractor will be set up solely to do the sub-soiling, ferrying of materials and water and pulling of the consolidating roller and will leave the other tractors free to deliver a continuous, unhindered supply of earth to the dam wall, and will thus more than double the output of the present equipment. Funding is for the purchase and freight costs.

Education**CAMBODIA****Save the Children Fund (UK)****School Renovation Project, Prey Veng Province****£11,778**

The renovation and expansion of the Prek Phkoam primary school in a remote village in Prey Veng Province, in order to support rising school attendance rates and contribute to the discouragement of child trafficking. The poverty of the region, isolated location, and recent flood damage has left the School in a severely damaged condition. It is expected that the reconstruction will both enable and provide incentives for more children to enroll in school, thus decreasing their exposure to the high risk of exploitation by sex traders.

DOMINICAN REPUBLIC**Community Partners Association****Bombita Development Programme - Construction of Two
Additional Classrooms, Barahona Province****£20,145**

The basic aim of the project is to assist in the development of an extremely poor Haitian migrant community living at Batey Bombita in the Province of Barahona. This community has been established for very many years but has received no assistance from the Dominican Government. The Community Partners Association (COPA) is striving to achieve its aims through education, health provision and health education. To this end it has constructed a school and clinic similar to those already completed by COPA in La Hoya. Further to the 2 classrooms funded by the Overseas Aid Committee in 1997, funding is for the provision of a double classroom with staffroom and toilet.

GHANA

CamFed

Vocational Training Centre, Gushiegu, Northern Region

£21,000

To strengthen training opportunities for employment and economic regeneration in Northern Ghana, through the construction, equipping and operation of a Vocational Training Centre in Gushiegu, Northern Region, as a community focal point of training and job creation in order to catalyse economic regeneration. The provision of the Centre will: provide local, viable training opportunities for young people and stem the drift of migration that deprives communities of their energy and skills; safeguard young people, and particularly young women, from the hazards of urban migration, labour and sexual exploitation of this group is common; enable unemployed and under-employed people in Gushiegu to become self-reliant; establish the Centre as a model for replication in similar communities. The Centre will provide training in skills identified by the community as those which can lead to secure livelihoods. Six courses are planned: batik and tie dyeing; shea butter production; carpentry and furniture making; food processing, particularly drying and storage of excess produce; farming techniques; and tailoring. A business course will be available to all trainees to include management, book-keeping and marketing skills. Funding is for costs relating to site preparation, building materials and labour and the provision of tools and equipment for training.

HAITI

Tear Fund

Rural Primary Education Programme

£24,671

The overall aim of the Rural Primary Education Programme is to provide and improve the quality of basic primary education for disadvantaged children in Haiti, through the provision, construction and improvement of schools. Due to the lack of government involvement nearly 70% of primary school students are in private schools. Half of these private schools are run by Protestant churches. The Baptist Haiti Mission (BHM) is one such church-based organisation. BHM provides in-service training for teachers. In addition to providing education for the children, BHM also provides vaccination and simple medical and dental care. Some schools have facilities to provide meals and milk for the pupils. This proposal forms part of this larger programme supported by Tearfund. Specifically, funding is for the construction and furnishing of 5 schools, to hold 150-200 pupils each.

INDIA

Goodwill Children's Homes

Trade Training for Rural and Tribal Youth, Tamil Nadu

£15,443

To provide Trade Training for young men and women from rural and tribal communities in the middle and lower Palani Hills area of Anna District, Tamil Nadu. The training will enable these young adults to secure a decent standard of living for themselves and their families. Four centres will provide practical and theoretical skills in: Television and Radio Repair; Garment manufacture; Two-Wheeler maintenance; Basic Electrical Wiring. Each centre will be fully equipped and staffed to conform to NCVT requirements as laid down by the Government of India, to provide trainees with recognised certificates. The centre will train 60 young men and women each year from within Goodwill Homes and surrounding tribal/rural communities. Counselling will enable young women to overcome parental and community objections to female employment. Business management training and support through government subsidies and loans will provide the means for trainees to start their own small business. Networking with companies and local workshops will provide work placements within the course and opportunities for employment on completion of training.

PLAN International UK

Solar Power Workshops and Training of Mechanics, Rajasthan

£22,664

To set up and equip three workshops and train local people as solar lantern engineers and the manufacture of 200 lanterns in Ajmer, Jaipur and Sikar Districts, Rajasthan. This project will make the existing solar programme in the area more sustainable by providing a decentralised and low-cost manufacture and repair service for solar lanterns. Solar power is already in use in some villages in the area especially in night schools and community centres. The project will also provide a livelihood for the people who will receive training as solar mechanics. Some 12,500 people will benefit from this project.

RWANDA

Lawrence Barham Memorial Trust

Construction of New Primary School, Rasano Village, Diocese of Cyangugu

£12,000

To construct a new Primary School in Rasano Village, Diocese of Cyangugu, Bweyeye Prefecture, to replace the present, rotting, leaking, timber building. The village of Rasano is located in a very inaccessible area near the Nyungwe Forest and there is no public transport of any sort with villagers having to walk for seven hours to reach the main road. The provision of a new Primary School will improve the conditions for education for some 812 pupils.

SOUTH AFRICA

Overseas Council, Channel Islands

"Children at Risk" Worker's Training Programme, Cornerstone Christian College, Cape Town

£2,500

Through the Cornerstone Christian College's relationship with local NGO's who work with children at risk, the College has come to recognise that the vast majority of people working with such children had had no training at all. With the College's experience in various disciplines, including behavioural sciences, it is well placed to assist in developing these workers. The overall aim of the Programme is: to provide protection for children at risk in the poverty stricken sector of South African society, through training of carers: to provide and target the training in such a way that it is available for the needy groups in South African society: to provide the training at levels of recognised curriculum and standard development. Specifically, funding is requested for the provision of training materials, including handouts.

UGANDA

Namirembe Resource Centre c/o Uganda Development Services

Completion of Hostel for Girl Students, Kampala

£25,242

Girls are generally marginalised in formal education particularly in up-country Uganda, and there is an alarmingly high drop-out rate when these girls are only able to study in schools near their homes. Secondary education is generally of a poorer standard outside the Kampala area so many students seek better schooling in city day schools. They then are led into poor or even dangerous situations seeking residential accommodation. The aim of this joint project between the Education Department, Church of Uganda and the Boys' and Girls' Brigade of Uganda is to set up a Girls' Hostel in Kampala to provide suitable and affordable accommodation for 80 girl students while continuing studies in the Kampala area. Priority will be given to orphans, refugees, the disabled and disadvantaged. The accommodation provided will be secure, conducive to serious study, and maintained to a high standard. The Centre will offer a study room including relevant text books. Planned future expansion will include a reference library, classroom and reading room and other organisations with well- equipped conference facilities. Also, there will be opportunities for extra- curricular activities such as health care, skills such as needlework, sports and other recreational activities. Funding is for the completion of outstanding building works in respect of Phase I.

Uganda Society for Disabled Children (USDC)

Construction of Dormitory Block, Masaka Vocational Rehabilitation Centre, Masaka District

£9,175

To construct a dormitory block for the Masaka Vocational Rehabilitation Centre, Masaka District, for the 50 disabled trainees who will be resident on their courses lasting a year. The Masaka Vocational Rehabilitation Centre was founded in the late 1960s by the then Uganda Government, with the main aim of providing sheltered employment to the severely physically handicapped. Throughout the 1970s and 1980s the workshop largely fell into disrepair owing to the widespread civil unrest which was a feature of Uganda throughout those years. The Uganda Society for Disabled Children has been asked by the Masaka District Council to extensively rehabilitate the unit, with the aim of taking on young disabled trainees, who can learn a skill which they may use to provide them with longer-term employment.

ZIMBABWE

Reform Corporation

Freight and Transport Costs of Sending Container to Zimbabwe to Enable the Development of Rural Libraries Project, Dete, Hwange and Victoria Falls

£2,096

To enable Zimbabwe's Rural Library Regional Development Programme through funding the cost of sea freight and transport costs to provide books and educational equipment to support long term educational development in rural areas. The books and equipment will be housed in rural central libraries - Dete, Hwange and Victoria Falls - and will serve many other schools within walking/cycling distance. Those schools not within this proximity will be served by a travelling library service. The computer equipment will be centrally managed. As well as literacy development, the project will also encourage and support basic skills development.

Emergency Disaster Relief

INDIA

Disasters Emergency Committee

Donation to India Cyclone Appeal, Orissa State

£50,000

To enable the eleven UK member aid agencies of the Disasters Emergency Committee to provide emergency relief following the catastrophic cyclone in Orissa State, India. The resultant tidal wave and the combination of extremely high winds and flooding caused widespread devastation and loss of life. The funds will assist to provide immediate essentials such as food, clean water, shelter, medicines, blankets, etc.

YUGOSLAVIA

Disasters Emergency Committee

Donation to Kosovo Crisis Appeal

£100,000

To enable the twelve UK member aid agencies of the Disasters Emergency Committee to provide emergency relief to the hundreds of thousands of ethnic Albanian refugees fleeing war-torn Kosovo. The funds will assist to provide food, shelter, medicines, blankets, mattresses, clean water, sanitation etc.

Health**BANGLADESH****The Leprosy Mission****Autoclave for Chandraghona Hospital, Chandraghona State****£5,000**

The provision of a new autoclave (surgical sterilizer) for use at Chandraghona Hospital, Chandraghona State, the surgical referral centre for the Mission's Chittagong Leprosy Control Programme. This programme, the only one of its kind in south-eastern Bangladesh, detects over 1,000 new cases of leprosy every year. More than one in eight already have disabilities by the time of diagnosis. Every year approximately 150 operations are carried out at the Hospital. These are mainly septic surgery to repair limb-threatening ulcers, and reconstructive surgery restoring function to hands or feet. Other operations are performed as necessary. Sterile instruments are essential for surgery. The existing autoclave has broken down and cannot be repaired. The centre's surgical programme would be severely comprised without a replacement.

The Leprosy Mission**Health Education Materials, Dhaka****£7,143**

The Leprosy Mission's Country Office in Dhaka plans to publish and distribute a range of posters, calendars and leaflets, and to take press advertising space, as a key part of its Health Education campaign in Bangladesh. In view of the country's high illiteracy rate, much of the material will be pictorial (eg cartoons). The budget for 1999 includes a sum for a contract editor. The programme is aimed: 1) at people affected by leprosy, to teach them to avoid needless disability both by preventative measures like wearing protective footwear and by self-referral for treatment before deformities develop; 2) at the wider community, to explain that leprosy is curable and to dispel the stigma induced by fear and ignorance of the disease.

ETHIOPIA

Oxfam

Community-Based Rehabilitation for Disabled Children, Cherkos Slums, Addis Ababa

£15,113

To improve the health status of poor slum dwellers and reduce the high prevalence of disability and provide opportunities for disabled children in Cherkos slums (Woreda 21), Addis Ababa. It will provide basic rehabilitation training in the homes of people with disabilities, identify health problems and refer disabled people for assistance, meeting the cost of the poorest families. To minimise disability the project will provide: primary health care and health education to 680 families, 232 groups and 6,000 children; basic rehabilitation training to 140 disabled people; support 100 people with costs of appliances, surgery and medicines; provide vocational skills training to 30 disabled young people. Funding is for the provision of a motor vehicle, training materials and tools, education materials, office costs and support for medicines and appliances for the poorest families.

Save the Children Fund (UK)

Generator and Equipment for Akesta Hospital, South Wollo Region

£15,000

To cover the cost of a generator, a refrigerator, an autoclave, overhead operation lights and surgical equipment for the Akesta Hospital, a rural hospital in a remote area of South Wollo in Ethiopia. The equipment will enable hospital staff to provide improved services to a population of 1,254,000 people living in six districts, and to handle surgical emergencies 24 hours a day which otherwise would not be possible.

World Vision UK

Hand Pump Project, Adjibar, Amhara National Region States

£23,813

To provide safe and adequate water for 1,000 households in 10 localities in Adjibar, Amhara National Region State, at a reasonable distance for the beneficiaries, through the construction of 10 shallow well hand pumps and the provision of relevant spare parts and tools; the training of 20 community members in appropriate management of domestic water supply systems; to create awareness on sanitation and efficient water utilisation. The project will target 1,000 households (approximately 5,000 beneficiaries), in addition to the livestock of these households.

GHANA**Matercare International****Provision of Ambulance for Maternal Health Project, Accra and Nkoranza District, Brong-Ahafo Region****£20,000**

To develop an emergency obstetric transport system for mothers in the catchment area of St Theresa's Hospital, Accra and Nkoranza District, Brong-Ahafo region. A maternal health project has been developed in this rural area of Ghana designed to evaluate new programmes designed to reduce the high rates of maternal mortality and morbidity. The programmes includes the training of traditional birth attendants (TBAs) to use a pictorial antenatal card to identify and refer high risk mothers to the district hospital early; to train nurse/midwives in rural maternity centres to use the labour partograph to follow the progress of labour and to identify when labour becomes obstructed; to evaluate an emergency obstetric transport system (EOTS) which also has the capability of providing blood transfusion; and a research project to evaluate a simple, effective, inexpensive oral method of treating life threatening postpartum haemorrhage, which could be used by TBAs in the villages. This model maternity care project began in 1998 with the training programme of TBAs and nurse/midwives with support from the Overseas Aid Committee, the Canadian International Development Agency and private donations from charities, church groups and individuals. The next programmes which will now be introduced is the EOTS with the blood transfusion capability. The evaluation of these programmes which compliment existing safe motherhood programmes implemented by the ministry of Health of Ghana, will take three years. The results will be given to the ministry of Health of Ghana. Specifically, funding is required for the provision of a fully-equipped Land Rover ambulance for the EOTS.

HAITI**Children's Aid Direct****Support to Practical Nutrition Workshops, Port Salut and Port au Prince****£25,263**

To improve the nutrition and health care of the local communities at Port Salut and Port au Prince through practical nutrition workshops (Foyers de Demonstration Nutritionelle). Specifically, funding is required to purchase the foodstuffs necessary for 500 2-week nutrition and healthcare workshops. The workshops are very practical in nature with no more than 12 mothers and 12 children, and will enable local people to be trained in aspects of community health. From the group of 12 mothers chosen for each workshop, one will be selected to be trained to share the knowledge they have gained with selected mothers and children. The project will directly benefit some 12,000 mothers and children, and up to 72,000 indirectly.

INDIA

Arpana Charitable Trust (UK)

Vehicles for Mobile Health Services, Haryana and Himachal Pradesh

£18,995

Vehicles are essential to carry Arpana's medical teams over the rugged countryside of the programme area, to the 35 villages which it serves in Haryana and Himachal Pradesh. Specifically, two vehicles are required for use in the mobile health services: a larger one for use as a mobile clinic for general health clinics serving the 35 village - intensive target area (well-baby clinics, antenatal clinics, medical camps etc) and to engage in eye screening camps, and bring eye patients to the Arpana Hospital for operations; a smaller vehicle for the mobile clinics and for surgical/medical camps in Himachal Pradesh, and for taking medical teams to clinics and centres in both States.

PLAN International UK

Rainwater Harvesting: Community Water Tanks, Rajasthan

£15,000

To provide 6,100 people in villages in Jaipur and Sikar Districts of Rajasthan with clean drinking water through the provision of 24 underground rainwater storage tanks with an average capacity of 26,000 litres. The project area is in a semi-arid region where access to clean drinking water is very poor and the incidence of water-borne diseases is high. The water table is already low in this area and this project takes advantage of the monsoon rains to store water for year-round use without further exploiting the water table.

Ryder-Cheshire Foundation

Equipment and Vehicle for the Seva Nilayam Centre, Theni District, Tamil Nadu

£9,357

To support the work of the Ryder-Cheshire Foundation's Seva Nilayam (House of Service) Centre, Theni District, Tamil Nadu. The Centre, which lies some 60 miles from the city of Madurai, provides for the diagnosis and treatment of a wide variety of diseases - especially the high evidence of tuberculosis - in a rural area where there are no other medical facilities of the kind available. The Centre also has a particular expertise in skin diseases and the treatment of hookworm, and it seeks to improve the health of the population in the general area served by the Centre, through health education and maternity and childcare. Funding is for the provision of: a new 4WD vehicle, to replace the existing vehicle which is worn out, and will allow the Centre's medical team to visit the widely dispersed villages in the area; a 6kv generator which will enable the Centre to overcome problems associated with an intermittent and unpredictable local electricity supply; a laser printer to enable the Centre to increase greatly the reach and effectiveness of its health education programme.

The Leprosy Mission

Repairs to Champa Hospital and Vocational Training Centre, Madhya Pradesh

£2,864

To carry out much needed repairs to the roofing and fabric of several buildings around the campus of Champa Hospital, Bilaspur District, Madhya Pradesh. Whilst most of the buildings of the Vocational Training Centre are new, the weaving department is housed in an old workshop which particularly requires renovation. Other areas in need of repair are: physiotherapy technician's quarters; guest house; stores/maintenance department. Repairs also need to be made to the campus' cement boundary wall.

The Leprosy Mission

Mini Bus for Kothara Hospital, Maharashtra State

£6,364

The provision of a mini bus to Kothara Hospital, Amaravati District, Maharashtra State, will enable the Hospital's mobile team to extend its outreach programme into the remotest parts of a catchment area of some 14, 175 sq. km. This 4-wheel drive vehicle will enable paramedical workers to bring leprosy treatment and general healthcare services to the site of each field clinic in this largely rural and tribal area.

INDONESIA

PLAN International UK

Potable Water and Sanitation Project, Dompu District, Sumbawa Island

£14,676

To provide potable water and sanitation facilities to over 1,600 families in Bima District, on the island of Sumbawa. This will be achieved through the construction of a 3km water pipe system, the drilling and equipping of 25 wells and the construction of 59 washing and toilet units. These activities will be complemented with health education to ensure the full health benefits are achieved from the project.

KENYA

Africa Now

Water and Group Enterprise Project, Kakamega and Vihigia Districts, Western Province

£6,200

The Water and Group Enterprise project (WAGE) is an expansion of an original initiative which commenced in 1991, to train local people in Western Kenya to build rainwater catchment tanks at local schools mostly, and health centres, to provide clean water at the lowest possible cost in one of the most populated parts of Africa. The present project, WAGE, has built upon the success of the original project, and is now in its final year. The Overseas Aid Committee has funded both the original project and the present one on several occasions. Funding is for the provision of 8 rainwater catchment tanks and 8 spring protections.

Cooper, Bryan & Marjorie - "Wishing for a Well" Appeal

Construction of Two Dams, Mwingi District

£10,500

The construction of a further two rock catchment dams, one each in the villages of Katingula and Kwa-Mala in the Mwingi District of N E Kenya, to serve the Akamba people, in this very arid and famine-stricken area.

NEPAL

Water Aid

Sonarniya Village Water Supply Scheme, Rauthhat District

£19,222

To provide sustainable improvements in the quality and quantity of water available; reduction in journey times to collect water; improvements in sanitation and hygiene behaviour of the community; and improvements in the NGO's project management capabilities through the construction of 52 tubewells for 576 households in Sonarniya Village, Rauthhat District, Central Region.

PERU

Christian Aid

Water and Sanitation Infrastructure Project, Chica Valley

£12,178

To improve the water and sanitation systems for 16 communities in the Chica Valley, Peru with an estimated population of 3,800 beneficiaries. The aim will also include the installation of 200 latrines and the training of community families in health and sanitation. The communities have returned to the rural areas after over a decade of fighting and their water and sanitation systems were either non-existent, damaged or destroyed in the conflict.

SOMALIA

Christian Aid

Water and Sanitation Project, Lower Shabelle

£11,639

In 1997 heavy rain resulted in extensive and catastrophic flooding in southern Somalia. The international community responded to an emergency appeal for aid but now that people have returned to their homes there is a need to support longer term development in the region. This project will go a long way to assisting those most in danger from inadequate household water security and poor sanitation. Clean water and good sanitation remain priority needs for these people. Disease has been a major problem during the months of flooding and the provision of adequate sanitation and water resources will help to eliminate these risks as people reestablish their lives and their livelihoods. The flooding of both the Juba and Shabelle rivers resulted in the loss of human life, livestock, crops and property. The total funding of the Water and Sanitation project will provide 100 pit latrines, 25 hand pumps, repair ten elevated and tank pumps and repair existing piping. The local community will provide the labour. The project will benefit some 32,000 people in approximately 5,600 households.

TANZANIA

PLAN International UK

Potable Water Project, Mwanza District

£19,333

To provide 2,287 families in Mwanza District with nearby sources of potable water. This will be achieved through the construction of 7 shallow wells and 3 medium wells. Seven community members will be elected to form Community Interest Groups who, following training, will be responsible for the general management of the wells. Two community members will also be elected for each well and trained to conduct basic maintenance and repair work. On completion of the project women and children will have more time to conduct productive activities as opposed to water collection and the incidence of water-borne diseases will be dramatically reduced.

TIBET AUTONOMOUS REGION

Save the Children Fund (UK)

Environmental Health Project, Lhasa Municipality

£6,127

To fund a project in rural areas of the Tibet Autonomous Region providing safe water, hygiene and improved sanitation to 45,000 people in over 130 villages. The project includes rehabilitation to 24 piped water systems, open wells and shallow tubewell handpumps, as well as the provision of technical support and training to local communities. Specifically, funding is for the provision of materials, and to recruit a translation interpreter.

TOGO

PLAN International UK

Construction of Community Clinic and Drug Store, Koza Prefecture

£20,281

To build a community clinic and drug-store in a remote mountain area in the Prefecture of Koza as the base for the establishment of a sustainable community-based health system. Clinic equipment and 2 traditional ambulances will be provided. Health facilities are presently very limited and the village suffers high levels of maternal and infant mortality and morbidity. After the facilities are completed they will be staffed by trained community volunteers supported by regular visits from Ministry of Health personnel. A total of 8,000 people will benefit.

UGANDA

PLAN International UK

Health Promotion and Training, Luwero District

£21,982

The aim of the project is to reduce the mortality and morbidity rates among women and children in 66 communities in Luwero District. This will be achieved through the training of Community Health Workers, Supervisors and Parish Health Committees. The health personnel will conduct various health programmes and training sessions. In total the project will benefit 172,000 people. Funding is for training costs and various items of equipment.

ZAMBIA

Kasanka Trust

Equipment for Chalilo Clinic, Serenge District

£19,006

To enable Phase 1 of the Chalilo Clinic Project, Serenge District, through the provision of equipment to this rural clinic located in an isolated community, in a co-operative venture between Government, Kasanka Trust, local people, two commercial farmers and an Asian shopkeeper. The need was established as a result of a community survey performed by the Kasanka Trust in 1996 and is actively supported by the District Health Board. The Trust's aim in running the Kasanka National Park is to include aid to the impoverished and poorly-served community living around its borders. The second phase will involve the recruitment of a Qualified Midwife and possibly a Medical Officer to initiate an active program of training in midwifery and family planning. Funding is for equipment, including a solar vaccine refrigerator, a motor cycle, and furniture and fittings for 3 staff houses.

PLAN International UK

Clinic Construction Project, Naluama/Mugoto Area, Mazabuka District

£24,554

To provide access to quality medical services for some 8,000 people living in the Naluama/Mugoto area in Mazabuka District through the construction of a clinic. The clinic will provide both curative and preventative services, which are currently only available from the District Hospital, located more than 50 km away from the targeted community. At present, basic primary health care services are virtually non-existent in the project area, and the construction of the clinic will address this need.

St Francis' Hospital, Katete District

Construction of Additional Housing Units, St Francis' Hospital, Eastern Province

£20,000

St Francis' Hospital, Katete District, Eastern Province, is administered jointly by the Anglican and Catholic Churches in Zambia. It is a general hospital of 360 beds. Katete District has a population of 175,000 of mainly subsistence farmers (maize, ground nuts, sunflowers and cotton) and small traders. St Francis' is the only hospital in Katete District, and also acts as referral hospital for the Eastern Province (pop. 1 million), particularly for surgical, orthopaedic, obstetric and eye patients. The Hospital not only provides curative services, but also preventive services, both at the Hospital and through outreach visits. Training of medical students, surgical registrars, enrolled nurses and midwives is undertaken. Zambia has a tropical climate and the spectrum of common diseases is determined by poverty and climate: malaria, schistosomiasis and other parasitic infestations as well as gastro-enteritis, respiratory tract infections and tuberculosis are rife. HIV is endemic and puts its mark on the entire society, not only in the city but also in the rural areas. An example of the impact of HIV/AIDS is that the incidence of tuberculosis has quadrupled in the period 1985-1995. The Hospital receives a monthly grant in aid from the Government which cannot cover all costs. Donations from Zambia and abroad are vital for the running of the Hospital. Patient's fees are a small contribution to the total budget. Capital projects are entirely funded from donations, mostly as projects. Specifically, funding is requested for the construction of a maximum of 4 additional staff houses which will enable the Hospital to attract and retain staff required to help it to deliver quality medical care to the District and Province.

Integrated Development

BANGLADESH

HelpAge International

Rehabilitation for Older People Affected by Flooding, Perojpur District

£16,515

To provide support to older people, Perojpur District - one of the most disaster-prone coastal areas of Bangladesh - in rebuilding their lives and gaining greater self-sufficiency following the severe flooding in 1998, through provision of health care, income-generating opportunities, and social support. Some 300 older people will be supported. Funding is for the provision of a revolving loan fund; 3 bicycles for aid workers; the provision of a medical clinic in 4 sites on 4 days each week; rent and equipment for an office and for club rooms for older people.

Oxfam

Integrated Rural Development, Dinajpur and Thakurgaon Districts

£21,403

To enable over 16,000 landless and poor small farmers in Dinajpur and Thakurgaon Districts, North-West Bangladesh, to: improve their literacy; provide primary education for their children; tackle their health and sanitation problems; improve food production using organic methods; regreen their communities; and earn income for their families. To enable this, funding is for the cost of teaching materials for 60 non-formal primary schools and 90 adult literacy centres, equipping a training centre, providing 5 project bicycles and 8 motorcycles, as well as soil-testing kits.

ETHIOPIA

HelpAge International

Support to Older Urban Slum Dwellers, Addis Ababa

£13,765

To improve the quality of life of vulnerable and destitute older people, living in the extremely poor slum district of Kebele 08, Addis Ababa, by providing housing assistance, basic needs, developing a day centre and a volunteer support programme, and income generation and health projects. Some 300 of the most vulnerable older people will be so assisted.

FIJI

UK Foundation for the South Pacific (UKFSP)

Rehabilitation of School Gardens following Drought and Floods, Northern and Western Divisions

£10,250

To provide seeds and fertilisers to rehabilitate school gardens in the Provinces of Ra, Ba, Macuata and Bua, in the Northern and Western Divisions of Fiji, which have been severely affected by both drought and flood, during 1998 and January 1999 respectively. School gardens play an important role in supplying food for school lunches and, thus, nourishment for children. The produce grown will be divided between providing nutritious meals at school and distributing to those families who have been most affected by drought. Some 90 to 100 schools will be assisted and the project will benefit between 10,000 and 15,000 people.

INDIA

Opportunity International UK

Training Microenterprise Organisations for Growth, Bangalore, Madras, New Dehli and Nagpur

£7,250

The four indigenous partners of Opportunity International UK in India - The Bridge Foundation, Bangalore; IIDA, Madras; EFICOR-MED Unit, New Dehli and Community Development Services, Nagpur - have merged operations in order to reach greater numbers of India's poor entrepreneurs. By 2002 the partners plan to reach 241,000 clients by lending over £24 million in capital funds. Specifically, therefore, funding is sought to train these organisations in areas of financial management, information technology, governance, fund-raising and project monitoring thus enabling them to more effectively manage the massive planned growth in their operations.

Oxfam

Rural Development for Forest Tribes in Madhya Pradesh

£20,007

To tackle food and water shortages, malnutrition, environmental degradation, and the problems of indebtedness and acute poverty faced by some 1,800 tribal people living in 4 villages in Mahakoshal and Chattisgarh Region, Western Madhya Pradesh, as part of a much larger project covering 48 villages. The project will do this by supporting village groups in soil and water conservation, well repair, basic health care, agroforestry, ecologically sensitive agriculture, income generation, small scale thrift and credit and pre-school education.

PHILIPPINES

Delancey Elim Church, Guernsey

Freight Costs of Sending Container to the Philippines

£1,796

To provide funding to cover Delancey Elim's freight costs for a container of clothing, toys, tins of food, medicine, bicycles, tools, typewriters, sewing machines etc, to be shipped to Cebu in the Philippines.

RWANDA

HelpAge International

Savings and Rural Credit Scheme, Kayonza, Kabarondo and Rukara Districts

£16,500

To support 1,438 vulnerable older people by providing them with credit to start small businesses. This will provide an opportunity for older Rwandans to gain some security and independence. They will thus be better placed to improve their diet, health and living conditions. Following the genocide and war in Rwanda in 1994 many older people were displaced or lost family members. Since then older people have become one of the most vulnerable groups in a very poor society. Many are responsible for grandchildren and other dependents and are also still traumatised following the events of 1994, for which they have received little support. Older people often denied access to resources to improve their living standards, which are available to other age groups. Yet older people have a vital part to play in the rebuilding of communities, since they hold the knowledge and experience to act as leaders and to reinstate structures. HelpAge International has identified the need to support older people so that they can take responsibility for their own lives and play a role in their communities. The project aims to develop a revolving credit scheme. Funding is for the provision of training in planning and project management and in seeking additional funding and project support; support systems and follow up; publicity and awareness raising etc.

Trocaire

Income Generation for Widows and Orphans, Nationwide

£14,830

To assist nationwide some of the most vulnerable survivors of genocide and war by supporting entrepreneurial or potentially entrepreneurial widows and orphans to develop small income-generating projects. The specific objectives of the project are: to promote income-generating opportunities among widows and orphans; to provide participants with skills and resources to establish their own businesses; to create a revolving fund for the continuous provision of credit facilities to vulnerable groups; to encourage widows to provide support for vulnerable orphans within their own communities; to fund 120 income-generating projects.

UGANDA

Uganda Women's Effort to Save Orphans UK Trust (UWESO)

Beekeeping Project for the Benefit of Orphans and their Families, **Mbarara District**

£20,790

Overall, to increase the cash income available to orphans and their carers in Mbarara District through development of beekeeping and improving access to the market. The community-based project will be organised into a system of 10 inter-linked village groups each consisting of 10 families, benefiting between 500-1000 people. The project will provide training to the orphans and their carers to enable them to increase the number of traditional hives, and be able to produce honey of suitable quality for sale locally and to other districts. Specifically the objectives are: to increase production of honey and wax amongst the target group; to increase the value of their product by more appropriate processing; to have access to a worthwhile, sustainable market for their products; the availability of more honey, pollen etc as a food supplement for the target group; to develop a set of recommendations which form the basis for training and extension work. These might be traditional techniques as currently practised by the most effective beekeepers or a modified version developed by a local institution. Funding is for training, equipment and staff costs.

ZAMBIA

Help an African Schoolchild Trust

Construction and Equipping of Tetekela Community Centre, **Kasama District**

£29,967

To construct and equip a community centre/feeding station at Tetekela, Kasama District, which will help address the plight of orphans and street children in and around Kasama. The Centre will act as a feeding station for some 200 children and orphans. AIDS is rife in northern Zambia and many children are terminally ill without any extended family to care for them. The Centre will provide a base for adult literacy classes, and act as a youth centre and day nursery. It is intended that the Centre will also eventually provide permanent care for 40 terminally ill orphans/street children and a guest house and mill/shop to generate income. Funding is for building costs and various items of equipment.

Distribution of Funding 1999

Africa

<i>Agriculture/Fisheries</i>	£88,848.00	
<i>Education</i>	£72,013.00	
<i>Health</i>	£227,421.00	
<i>Integrated Development</i>	£95,852.00	
Total Aid Given to Africa		£484,134.00

Europe

<i>Emergency Disaster Relief</i>	£100,000.00	
Total Aid Given to Europe		£100,000.00

Indian Sub-Continent

<i>Education</i>	£38,107.00	
<i>Emergency Disaster Relief</i>	£50,000.00	
<i>Health</i>	£83,945.00	
<i>Integrated Development</i>	£65,175.00	
Total Aid Given to Indian Sub-Continent		£237,227.00

Latin America & Caribbean

<i>Agriculture/Fisheries</i>	£12,222.00	
<i>Education</i>	£44,816.00	
<i>Health</i>	£37,441.00	
<i>Integrated Development</i>	£0.00	
Total Aid Given to Latin America & Caribbean		£94,479.00

Other Asia & Pacific*Agriculture/Fisheries* £0.00*Education* £11,778.00*Health* £20,803.00*Integrated Development* £12,046.00**Total Aid Given to Other Asia & Pacific** £44,627.00

Total Contribution to Aid Overseas £960,467.00

APPENDIX V

SEATING IN THE STATES OF DELIBERATION FOLLOWING THE ABOLITION OF THE OFFICE OF CONSEILLER

I am grateful to members who have responded to the informal consultation that I have carried out in connection with this issue.

The result of such consultation shows that there is still clear support for the first nine seats to be occupied by the presidents of the States Committees graded A+ and A under the Rules for the payment to States members approved by the States on the 28th February, 1996, and I so decide. That leaves three seats to be filled and I have decided to follow the provisional view of my predecessor that the President should have discretion as to who should be appointed to occupy these seats. Generally, it will be my policy to appoint senior B Presidents to occupy these seats, but I may wish to appoint an acting President of the States who has not got an A or B presidency. I will make the final decision after the first meeting of the new States which is scheduled to be held on the 10th May when the elections to Committees has been held.

With regard to that first meeting there will be at least one A presidency to fill and I have decided that rather than provide a special order for seating for one meeting we will have the Douzeniers and Alderney representatives sitting on the upper bench and all the Deputies sitting in the well of the Chamber. After that meeting a new seating plan will be devised which will remain in force until the States meeting in June 2001. That is to say that every member will occupy the same seat for the twelve months ended the 31st May, 2001, and should a member resign or die during the twelve-month period his successor will occupy the seat that he occupied for the remainder of that period; likewise if a president resigns his presidency in the course of the year he will remain in the same seat until the following June.

Those members who responded to my consultation were equally divided on the issue as to whether it was desirable to have a special seat on the bench where persons presenting a proposition would sit. Without clear support I am not prepared to make this change of my own motion.

de V. G. Carey
8th March, 2000.