

Kit Malthouse MP
Minister of State for Crime and Policing
2 Marsham Street
London SW1P 4DF

www.gov.uk/home-office

Joe Fitzpatrick MSP
Minister for Public Health, Sport and Wellbeing
Joe.FitzPatrick.msp@parliament.scot

Humza Yousaf MSP, Cabinet Secretary for Justice CabSecJustice@gov.scot

By email only

14 December 2020

Dear Joe, Humza,

I am writing to follow up on our discussions regarding Project ADDER (Addiction, Disruption, Diversion, Enforcement and Recovery) to see whether you have come to a decision on the involvement of the Scottish Government.

Project ADDER will take a whole-system response to tackle drug use in areas hardest hit by drug-related harm, through co-ordinated law enforcement activity, expanded diversionary interventions and enhanced treatment and recovery provision. This will be complemented by national activity to disrupt middle market drug supply. We are currently mobilising four projects in England and working with the Welsh Government to mobilise an additional project in Wales. My ambition for the project is that by bringing all relevant actors together in a concentrated way we can turn the dial on drug-related offending, drug-related deaths and drug-prevalence and that learning from the project will inform cross-government policy making and delivery.

As previously discussed, I believe the project presents a real opportunity for us to take joint action to address drug use and the devastation it causes in the hardest hit areas and to create a network of areas to share best practice and innovation. I would therefore, welcome Scottish Government involvement in the ADDER project and Partnership Network and investment in establishing similar projects within Scotland. I have also spoke with Vaughan Gething, Welsh Government Health Minister who has agreed to rolling out the project to Wales. I plan to publicly announce Project ADDER early in the New Year and if the Scottish Government agreed to collaborate on the project it would be a good opportunity to flag the ongoing work and collaboration across the nations to address this issue.

I understand that since my letter of 30th September our officials have been exploring options for collaboration on Project ADDER and discussing how the project could align with the work the Scottish Government are doing to tackle drug use, including through the Drug Deaths Taskforce. My officials have also provided further information to inform the Scottish Government's decision on involvement.

I was encouraged to hear that following discussions with Catriona Matheson, Chair of the Drug Deaths Taskforce and Neil Richardson, Vice-Chair, it was agreed that there was a lot of commonality and shared goals between Project ADDER and the work of the Drug Deaths Taskforce. I was pleased to hear therefore that the Taskforce has agreed to be part of the Project ADDER Partnership Learning Network, which will allow us to share learning and encourage a UK-wide whole-system approach to tackling the issue.

If the Scottish Government was minded to roll out similar projects in Scotland, we would ensure that the Scottish Government are an integral part of the project governance and evaluation. Whilst the activities carried out a local level fall within devolved competence and therefore would ordinarily be funded by the Scottish Government, we would explore what further law enforcement partners could do to enhance the existing work to disrupt drugs supply to Scotland and the project locations through UK Government investment. The Home Office would also look to fund the independent evaluation of the projects within Scotland and the wider Project ADDER network.

I believe that by working together as one United Kingdom, rather than separately, we can tackle these issues more successfully. I look forward to hearing your latest position on Project ADDER and continuing to work with you to tackle drug use and the issues it causes.

Kit Malthouse MP
Minister of State for Crime and Policing

cc. Secretary of State for Scotland, Parliamentary Under-Secretary of State for Prevention, Public Health and Primary Care