Title: SUBJECTING NBOMe AND BENZOFURAN COMPOUNDS, INCLUDING THEIR RELATED SUBSTANCES, UNDER A TEMPORARY CLASS DRUG ORDER **IA No:** HO **Lead department or agency:** HOME OFFICE **Other departments or agencies:** DEPARTMENT OF HEALTH, DEPARTMENT FOR BUSINESS INNOVATIONS AND SKILLS AND LAW ENFORCEMENT AGENCIES	**Impact Assessment (IA)** **Date:** 30/5/13 **Stage:** Final **Source of intervention:** Domestic **Type of measure:** Secondary legislation **Contact for enquiries**: Joseph Ponan (Telephone: 0207 035 6069) (Joseph.Ponan@Homeoffice.gsi.gov.uk

Summary: Intervention and Options

RPC Opinion: RPC Opinion Status

Cost of Preferred (or more likely) Option				
Total Net Present Value	**Business Net Present Value**	**Net cost to business per year** (EANCB on 2009 prices)	**In scope of One-In, One-Out?**	**Measure qualifies as**
£m	£m	£m	No	NA

What is the problem under consideration? Why is government intervention necessary?

NBOMe and benzofuran compounds and their related substances are derivatives of, or related to controlled Class A phenethylamine compounds or phenethylamine type-materials which are not captured by the current generic definitions under the Misuse of Drugs Act 1971. A list of these compounds have been assessed by the Advisory Council on the Misuse of Drugs (ACMD) as harmful drugs, posing a serious health threat, warranting control as temporary class drugs under Section 2A of the Misuse of Drugs Act 1971. Government intervention is necessary to take immediate action on these compounds, in order to prevent them from gaining a foothold in the UK drugs market and to protect the public from their immediate harms, while the ACMD undertakes a full assessment of the substance relating to permanent control under the 1971 Act.

What are the policy objectives and the intended effects?

Take immediate action by invoking a temporary class drug order on the listed compounds for up to 12 months. The intended effect is to curb availability via suppliers 'self-regulating' following temporary control and enable law enforcement agencies to take appropriate action to tackle the unauthorised activities of production, supply and import/exportation relating to these substances, and to deter misuse.

What policy options have been considered, including any alternatives to regulation? Please justify preferred option (further details in Evidence Base)

Option 1 - Do nothing

Option 2 - Make a temporary class drug order under Section 2A to the Misuse of Drugs Act 1971 of the listed NBOMe and benzofuran compounds, including some of their simple derivatives.

Option 2 is the preferred option on the basis of the current evidence and the ACMD's initial assessments on the harms and misuse associated with these compounds.

Will the policy be reviewed? It will be reviewed. **If applicable, set review date:** Within 12 months.					
Does implementation go beyond minimum EU requirements?			Yes		
Are any of these organisations in scope? If Micros not exempted set out reason in Evidence Base.	**Micro** Yes	**< 20** Yes	**Small** Yes	**Medium** Yes	**Large** Yes
What is the CO_2 equivalent change in greenhouse gas emissions? (Million tonnes CO_2 equivalent)			**Traded:**	**Non-traded:**	

I have read the Impact Assessment and I am satisfied that (a) it represents a fair and reasonable view of the expected costs, benefits and impact of the policy, and (b) that the benefits justify the costs

Signed by the responsible Minister: Jeremy Browne Date: 3rd June 2013

Summary: Analysis & Evidence

Policy Option 2

Description: Make a temporary class drug order under Section 2A to the Misuse of Drugs Act 1971 of the listed NBOMe and benzofuran compounds, including some of their simple derivatives.

FULL ECONOMIC ASSESSMENT

Price Base Year	PV Base Year	Time Period Years	Net Benefit (Present Value (PV)) (£m)		
			Low:	**High:**	**Best Estimate:** NK

COSTS (£m)	Total Transition (Constant Price)	Years	Average Annual (excl. Transition) (Constant Price)	Total Cost (Present Value)
Low				
High				
Best Estimate				**NK**

Description and scale of key monetised costs by 'main affected groups'

It is not possible to monetise the costs of this option in light of the current available data.

Other key non-monetised costs by 'main affected groups'

- **Businesses**- Following consultation with BIS, the MHRA and the chemical and pharmaceutical industry, these compounds and related substances have been identified as having no legitimate industrial or medicinal use. Businesses selling these substances in the 'legal high' market will have to comply with the Order or risk prosecution.
- **Public sector** costs may fall to the police, criminal justic system and other law enforcement partners as a regulatory response similar to the control of other drugs under the 1971 Act.
- **Personal** costs may fall to people that can no longer use these subtances.

BENEFITS (£m)	Total Transition (Constant Price)	Years	Average Annual (excl. Transition) (Constant Price)	Total Benefit (Present Value)
Low				
High				
Best Estimate				**NK**

Description and scale of key monetised benefits by 'main affected groups'

It is not possible to monetise the benefits of this option in light of the current available data.

Other key non-monetised benefits by 'main affected groups'

- **Public sector** benefits arise from a reduction in the number of people seeking medical attention due to the misuse of these substances. There are also benefits from the consistency in law enforcement and regulatory response.
- **Personal** benefits arise from the protection against potential harm.
- **Society** is protected against people who have taken these substances.

Key assumptions/sensitivities/risks — **Discount rate (%)**

- Potential risk to the research sector, however there is no known use of these substances and there are suitable Class A substitutes.
- Risk of costs to bodies that may need to apply for a licence to undertake activities involving temporary class drugs.

BUSINESS ASSESSMENT (Option 1)

Direct impact on business (Equivalent Annual) £m:			In scope of OIOO?	Measure qualifies as
Costs:	**Benefits:**	**Net:** 0	No	NA

Evidence Base (for summary sheets)

A. Strategic Overview

A.1 Background

This Impact Assessment assesses the proposal to make a temporary class drug order for the listed NBOMe and benzofuran compounds, including simple derivatives (salts, stereoisomeric forms and preparations, except esters and ethers) under the Misuse of Drugs Act 1971 (Temporary Class Drug) Order 2013.

On 29th May 2013, the ACMD provided initial advice on the harms and misuse of the listed NBOMe and benzofuran compounds pursuant to Section 2B of the 1971 Act (provisions on temporary class drug orders – role of the Advisory Council).

NBOMe compounds and related substances

The NBOMe compounds (25I-NBOMe, 25B-NBOMe etc) are variants of the 2C-X series of the psychoactive phenethylamines which are currently controlled as Class A drugs under the 1971 Act by generic definition. They are highly potent hallucinogens used as 'legal' alternatives to escape control measures. The ACMD have identified them as more potent compounds than the Class A phenethylamines and can be probably regarded as alternatives to LSD. The ACMD recommends urgent action because of the high risk of overdose in powder or liquid form.

Anecdotal self-reported users report highlight that 25I-NBOMe produces effects that can last up to 6 to 10 hours. While the ACMD reported general effects of using the drug, it reports that the highly negative effects include confusion, shaking, nausea, insomnia, paranoia and unwanted feelings.

The UK Focal Point identified the 25I-NBOMe compound was linked to a series of 7 serious non-fatal intoxication cases in January 2013. Clinically observed features included tachycardia, hypertension, agitation and aggression, visual and audio hallucinations, seizures, hyperpyrexia, clonus, elevated white blood cell count and metabolic acidosis. Two patients required admission to intensive care. One patient had severe rhabdomyolysis leading to renal failure, and all of the cases had elevated creatine kinase to varying degree. Another hospital case reported in December 2012 who had use alcohol in combination with other substances including 25I-NBOMe had suffered kidney function impairment and required sedation and the use of a ventilator. Data from the Home Office's Forensic Early Warning System (FEWS) has recently shown severe toxicity in the UK associated with 25I-NBOMe. A number of recent presentations have also reported severe harms relating to the controlled Class A 2C-X type materials, 2CI and 2CT-7.

Following consultation with the Department for Business Innovation and Skills (BIS), the Medicines and Healthcare products Regulatory Agency (MHRA) and the chemical and pharmaceutical industry, NBOMe compounds and related substances have been identified as having no legitimate industrial or medicinal use. The MHRA also confirms that there are no marketing authorisations for medicines containing these compounds.

In light of the compelling evidence of health harms posing a serious threat, the ACMD recommends that NBOMe compounds and related substances should be subject to a temporary class drug order. The ACMD's assessment details that these compounds are drugs that are being, or are likely to be, misused, and that misuse is having, or is capable of having, harmful effects.

In line with its statutory duties and the joint working protocol, the ACMD will continue to gather all available evidence while the temporary class drug order is in force, and will aim to provide a full independent expert assessment of the harms of the listed compounds within 12 months to recommend whether they should be subject to permanent control under the 1971 Act.

Benzofuran compounds and related substances

Benzofuran compounds (5- and 6-APB – 1-(benzofuran-5-yl)-propan-2-amine and 1-(benzofuran-6-yl)-propan-2-amine – etc) and related substances , including 5-IT (2-(1*H*-Indol-5-yl)-1-methylethylamine) and 6-IT (2-(1*H*-Indol-6-yl)-1-methylethylamine) are phenethylamine-type materials, related to controlled Class A methylenedioxyphenethylamines such as ecstasy (MDMA) and 3, 4-methylenedioxyamphetamine (MDA). They are most commonly sold under the brand name 'Benzo Fury' and marketed as legal alternatives to ecstasy, available in the form of powders or tablets (referred to as "pellets" to circumvent current legislation). They are also mixed with other substances including controlled drugs and other new psychoactive substances.

The ACMD indicates that anecdotal user reports suggest that the consumption of these substances can cause insomnia, increased heart rate and anxiety, with some users reporting MDMA like symptoms. Several deaths and hospitalisations in the UK have been associated with the use of these compounds. Research indicates that there is a potential risk of cardiac toxicity associated with the long-term use of 5- and 6-APB.

Following consultation with BIS, the MHRA and the chemical and pharmaceutical industry, the listed benzofuran compounds and related substances have been identified as having no legitimate industrial or medicinal use, though there may be some limited use for research purposes and scope following research activity for them to be used in the synthesis of non-controlled pharmaceuticals albeit very limited, if at all. The MHRA also confirms that there are no marketing authorisations for medicines containing these compounds.

The ACMD recommends that the listed benzofuran compounds and related substances should be subject to a temporary class drug order. The ACMD's assessment states that these compounds are drugs that are being, or are likely to be, misused, and that misuse is having, or is capable of having, harmful effects. .

In line with its statutory duties and the joint working protocol, the ACMD will continue to gather all available evidence while the temporary class drug order is in force, and will aim to provide a full independent expert assessment of the harms of the listed compounds within 12 months to recommend whether they should be subject to permanent control under the 1971 Act.

Description of controls

Under the Misuse of Drugs Act 1971, on indictment the maximum penalties for offences relating to drugs which are subject to a temporary class drug order are - for supply, production, importation/exportation up to fourteen years' and/or an unlimited fine. On summary conviction, the maximum penalties for offences relating to supply, production or importation/exportation are six months' imprisonment and/or a prescribed fine (including, for the latter offences, one determined by the value of the drugs if greater than the prescribed amount).

There is no offence or penalty for simple possession of a temporary class drug order. However, under Section 23A of the 1971 Act, law enforcement officers have been given the following powers to:

- search and detain a person (vehicle or vessel) where there are reasonable grounds to suspect that the person is in possession of a temporary class drug;
- seize, detain and dispose of a suspected temporary class drug; and
- arrest or charge a person who commits the offence of intentionally obstructing an enforcement officer in the exercise of their powers in respect of temporary class drugs.

A.2 Groups Affected

The proposal to temporarily control the listed NBOMe and benzofuran compounds and related substances may affect groups making legitimate use of any of these substances, such as organisations which use chemicals for research purposes. This is consistent with activities relating to drugs listed in Schedule 1 of the Misuse of Drugs Regulations 2001, which are subject to Home Office licensing by application from a new producer/supplier (as well as for import/export activities).

The 'legal high' market ('head shops' and internet suppliers) will no longer be able to lawfully market these substances or 'legal high' branded products containing them. There may be minimal costs and resource implications for UK law enforcement and criminal justice agencies arising from this option but it is expected that this will be subsumed into the enforcement and regulatory response to similar drugs permanently controlled under the 1971 Act. It is also expected that members of the public, especially young people and young adults, will be aware of and protected against the potential harms of these substances and their misuse for up to 12 months.

A.3 Consultation

Within Government

The Home Office has consulted with the MHRA, BIS and the chemical/pharmaceutical industry in deciding its preferred options.

Public Consultation

The Government has considered the recommendations of the Advisory Council on the Misuse of Drugs.

B. Rationale

The misuse of drugs, including new psychoactive substances or so called “legal highs”, imposes a cost on society greatly in excess of the individual costs to users. Government intervention is necessary to prevent the listed compounds from taking a foothold in the UK and to protect the public from their harmful effects with reference to available current availability and the ACMD’s initial assessment of their harms:

NBOMe compounds

Pursuant to Section 2B(6) of the Misuse of Drugs Act 1971, the ACMD consider that, in the case of the compounds subject to the Order, they are drugs that are being, or are likely to be, misused, and that misuse is having, or is capable of having, harmful effects.

There are risks associated with the misuse of these compounds, some of them being marketed as ‘legal high’ products in the UK.

Data from the Home Office Forensic Early Warning System (FEWS) identified the emergence of 25I-NBOMe and other related substances in the UK. A range of the compounds were encountered through test purchasing activities conducted by forensic providers and the Centre for Applied Science and Technology (CAST). A SOCA report highlighted to the ACMD Council the evidence that sizeable amounts of 25I-NBOMe entered the UK for distribution in blotter format from Chinese producers. The SOCA report also indicates that a relatively small amount of 25I-NBOMe in powder form can generate many doses (up to 20 million for 1kg) and it is considered as LSD by sellers and users.

The European Monitoring Centre for Drugs and Drugs Addiction (EMCDDA) also reports the presence of 25I-NBOMe and related compounds in European countries, while FRANK reports a high number of visits (95,000 in 2012/13) to the website on the Class A 2C family compounds. International evidence gathered also reports hospitalisations and fatalities associated with 25I-NBOMe. Other sources are available in the ACMD’s report at https://www.gov.uk/government/publications?departments%5B%5D=advisory-council-on-the-misuse-of-drugs.

Benzofuran compounds and related substances

Pursuant to Section 2B(6) of the Misuse of Drugs Act 1971, the ACMD consider that, in the case of the compounds subject to the Order, they are drugs that are being, or are likely to be, misused, and that misuse is having, or is capable of having, harmful effects.

Data from the Home Office Forensic Early Warning System (FEWS) identified the presence of 5- and 6-APB and related substances in the UK. Samples which contained 5- and 6-APB were found in different forms (powders or tablets), sometimes in combination with other substances, such as methiopropamine and caffeine.

The data from the National Poisons Information Service database (TOXBASE) also suggests increasing presentations to hospitals with 65 telephone enquiries from health professional relating to 5- or 6-APB and 741 accesses to TOXBASE online for information in the period of

March 2009 to March 2013. FRANK reports a high number of visits to the website (around 40,000 in 2012/13). Other sources are listed in the ACMD's report at https://www.gov.uk/government/publications?departments%5B%5D=advisory-council-on-the-misuse-of-drugs.

The European Monitoring Centre for Drugs and Drugs Addiction (EMCDDA) also reports the presence of 5- and 6-APB and related substances, such as 5-IT, in European countries. The EMCDDA has shown particular concern on 5-IT compound resulting in the preparation of an EMCDDA-Europol joint report. The report further highlights that there have been 15 non-fatal intoxications and 21 deaths associated with 5-IT in three member states including the UK and Sweden. A number of seizures have also been made and the report confirms that there is no known human or veterinary medical use of 5-IT at EU level. It has recommended that *'The health and social risks caused by the manufacture, trafficking and use of 5-(2-aminopropyl) indole, as well as the involvement of organised crime and possible consequences of control measures, could be thoroughly assessed through a risk assessment procedure as foreseen by Article 6 of Council Decision 2005/387/JHA'.* The full report is available at http://www.emcdda.europa.eu/publications/joint-reports/5-IT.

C. Objectives

The policy objective is to make a temporary class drug order on NBOMe and benzofuran compounds and their related substances under the Misuse of Drugs Act 1971 to support the Government's commitment to reduce the risk of harm from new psychoactive substances, while providing sufficient time for the ACMD to provide a full independent expert assessment, on whether their harms and effects warrant permanent control under the 1971 Act. Legitimate activities, limited to research,, will be enabled under the Misuse of Drugs Regulations 2001 for those who are existing Schedule 1 licence holders or for those companies/establishments being granted a new licence. This action is also in line with the Government's overarching Drug Strategy to take a preventative, enforcement and recovery-based approach to drug-related issues supported by the available evidence and expert advice of the ACMD.

The measure is also an essential intervention to deliver the objectives of the cross government NPS Action Plan, published on 17 May 2012, which combines legislative measures alongside public health, prevention and international policy approaches to tackle NPS. A successful outcome will be a reduction in the demand, availability and misuse of these compounds and raised awareness of the harms of these new psychoactive substances

D. Options

Two options have been considered in respect of these substances:

OPTION 1: Do nothing

OPTION 2: Make a temporary class drug order under Section 2A to the Misuse of Drugs Act 1971 of the listed NBOMe and benzofuran compounds, including some of their simple derivatives.

The Government's preferred option is **option 2** and is supported by the ACMD's initial advice. The use of the 1971 Act and its Regulations to temporarily control the listed substances provides the best means to reduce availability and potential harm to the public.

E. Appraisal

OPTION 2: Make a temporary class drug order under Section 2A to the Misuse of Drugs Act 1971 of the listed NBOMe and benzofuran compounds, including simple derivatives.

COSTS

Business

Those businesses selling these substances in the "legal high" market, the potential harm is such that those trading in this market are expected to comply with the Order or face the risk of prosecution. Following consultation with BIS, the MHRA and the chemical and pharmaceutical industry, these compounds and related substances have been identified as having no legitimate industrial or medicinal use.

Public Sector (enforcement agencies, CJS, regulators)

Any real and opportunity costs associated with option 2 cannot be predicted in light of nil to limited data on prevalence and use of the listed substances to be controlled in the UK, amid some evidence that the market self-regulates with temporary control.

It is expected that minimal costs arising from option 2 will be subsumed into the law enforcement and regulatory response to the control of other drugs under the 1971 Act. The law enforcement response will be managed within existing resources, informed by policy and operational prioritisation. The police and other law enforcement agencies will prioritise resources towards tackling crime, including drug related crime, with a focus on those offences which cause the most harm. As such, operational activity may focus on Class A and B drugs as well as new psychoactive substances.

Personal and society

Personal costs will be incurred by people who can no longer legitimately purchase NBOMe and benzofuran compounds and their related substances. We are unable to monetise these costs.

BENEFITS

Business

No benefits accrue to businesses from this policy.

Public Sector (enforcement agencies, CJS, regulators)

Benefits accruing to the public sector arise from savings to be made through a reduction in the number of people seeking medical assistance due to the misuse of these substances. These savings cannot be quantified due to the novelty of the substances in relation to long-term/chronic use and the novelty of the challenges that they pose to healthcare and treatment services in light of the harms that they can cause.

Benefits are expected to arise from consistency in enforcement and regulatory response to the temporary control of these substances which are variants of, or related to Class A phenethylamines under the 1971 Act.

Personal and society

Personal benefits arise from the protection against potential harms of the listed substances. Evidence suggests that the 25I-NBOMe compound was linked to a series of 7 serious non-fatal intoxication cases in January 2013.

Society will be protected against possible externalities resulting from people who have taken NBOMe and benzofuran compounds and their related substances. It is expected that the public will be protected against the potential harms of the listed substances and their misuse for up to 12 months', while the ACMD undertakes a full assessment of their harms in relation to permanent control under the 1971 Act.

NET EFFECT

Overall it is considered likely that the benefits from the proposals will outweigh the costs, although it has not been possible to quantify these benefits and costs. The main benefits to arise from the proposals are:

- A reduction in the number of people seeking medical help and therefore a reduction in costs to the public purse.

- Public awareness of, and protection from, the harms associated with the misuse of the listed NBOMe and benzofuran compounds and related substances for up to 12 months while the ACMD undertakes a full assessment of these drugs for permanent control.

ONE-IN-TWO-OUT (OITO)

Costs (INs)

Due to the absence of evidence of legitimate business use and the negligible costs that would be associated with any such use, the assumption is made that there are no cost implications to business, including micro business**.** For those businesses selling these substances in the "legal high" market, the potential harm is such that those trading in this market are expected to comply with the Order or face the risk of prosecution.

Benefits (OUTs)

No benefits accrue to the third or private sector from this proposal.

Net

No costs assumed for businesses.

F. Risks

1. There are risks associated with this option on the basis of evidence and expert advice that the 'legal high' market will look to synthesise and advertise chemical derivatives of

2. Risks may arise from the impact on law enforcement and criminal justice agencies. However, it is accepted that Government intervention is needed to enable law enforcement to protect the public from the harms of these drugs under option 2, of which these may become insufficient over a period of time as the emergence of new related compounds cannot be excluded. This risk is usually mitigated by the ACMD which has a duty to review the situation in relation to both controlled and non-controlled drugs (including new psychoactive substances) and temporary class drugs.

3. There is a risk that there may be costs to the research sector, although these cannot be quantified at this time in the absence of baseline figures. However, there is no known legitimate use of these compounds in the UK except limited chemical research use. In respect of the 5- and 6-APB and related substances, there could be potential use for the synthesis of non-controlled pharmaceuticals. However, the use of these compounds is expected to be minimal, if at all, as there are other Class A substitute phenethylamines available to conduct the same activity for which relevant organisations already possess a Schedule 1 licence.

4. There is also a limited risk that voluntary, charity or private sector research organisations or institutions: manufacturers, distributors and wholesalers that produce, supply, import or export these substances or use them for the synthesis of non-controlled pharmaceuticals may become adversely affected due to the potential costs of updating or applying for a license. However, organisations dealing with permanently controlled scheduled drugs will already possess a licence to undertake activities involving temporary class drugs which are treated as those listed under Schedule 1 to the Misuse of Drugs Regulations 2001. Due to the absence of evidence of legitimate business use and the negligible costs that would be associated with any use, the assumption is made that there are no cost implications to business,

G. Enforcement

Enforcement of the proposed legislation will be undertaken by Police Forces, the UK Border Force (UKBF), the Home Office Drug Licensing Unit and other relevant agencies responsible for enforcing the legislative and regulatory framework for controlled drugs in the UK. Police enforcement will form part of their wider approach to tackling new psychoactive substances as well as other drug controlled under the 1971 Act. The UKBF will enforce import controls by seizing suspected substances at the ports, also as part of their wider customs role. There will be no interference with the regulatory framework and processes implementing temporary control measures in law enforcement and regulatory agencies as part of their routine activities.

H. Summary and Recommendations

The table below outlines the costs and benefits of the proposed changes.

Table H.1 Costs and Benefits

Option	Costs	Benefits
2	£NK	£NK
	- Businesses selling these substances will have to comply with the Order of risk prosecution. - Law enforcement agencies and regulatory response to the control of drugs. - Personal costs to people that can no longer legitimately buy these substances.	- Public sector savings from reduction in people seeking medical assistance. - Consistency in enforcement and regulatory response. - Personal benefits from protection against potential harms. - Society is protected against externalities resulting from people who have taken these substances.

Option 2 is the preferred option. The harms associated with the use/misuse of these listed compounds require Government to act swiftly through effective legislation to protect the public. There are benefits to be derived from implementing the proposal through a reduction in medical costs associated with the misuse of these drugs.

Option 1 bears minimal costs but little/no benefits in light of the prevalence of harmful new psychoactive substances sold as 'legal' alternatives to existing controlled drugs.

I. Implementation

The Government plans to implement these changes via the made affirmative resolution, subject to debates in both Houses of Parliament within 40 sitting Parliamentary days from which the temporary class drug order is made, to seek approval of the Misuse of Drugs Act 1971 (Temporary Class Drug) Order 2013.

J. Monitoring and Evaluation

As part of its statutory duties under the 1971 Act the ACMD keeps the situation relating to drugs under review. Together with the Government, they will continue to monitor the listed compounds by gathering data on their prevalence and misuse (particularly whilst under temporary drug control) through UK and EU drugs early warning systems, the health sector and the regulatory framework governing legitimate activities (predominately research) in relation to these drugs. The Home Office, as the regulatory authority on licensing of activities relating to all controlled drugs and as lead department working with other Government departments to deliver the Drug Strategy, will continue to monitor the situation in relation to compliance with the regulatory framework.

K. Feedback

No feedback will be sought from suppliers or users as a result of the lack of medical and industrial uses of these substances. However, feedback will be sought from law enforcement agencies; the UK Border Force and the Police. The ACMD will undertake a full assessment of the substances for consideration for their permanent control under the 1971 Act.

L. Specific Impact Tests

See Annex 1 below.

Annex 1. Specific Impact Tests

Economic Impacts

Competition Assessment

It is expected that temporary drug control measures in relation to producers and suppliers of the listed compounds will apply equally to firms involved in the domestic trade of these substances as well as firms involved in their importation/exportation.

Social Impacts

Health and Well-being

Temporary drug controls under the provisions of the 1971 Act and its Regulations reinforce Government measures to reduce the risk and, protect the public, from the harms of new psychoactive substances. The legislative approach supports the Government's drug policies on prevention, law enforcement and public health.

Human Rights

Government intervention to protect the public from harmful drugs and the harms associated with their misuse through the introduction of temporary drug controls to help limit their availability and curb demand constitutes an interference with qualified human rights. However, it is proportionate in circumstances where control is ordered because of the harms, or potential harms, represented by the drugs in question, both to the physical and mental health of the individual users and to society.

Justice

It is expected that many suppliers will 'self-regulate' and that the intervention will curb availability. Therefore, the new legislation should amount to a minimal impact on the criminal justice system as part of its wider activities relating to the implementation of drug control legislation.

Policy Equality Statement

Provided separately.