

THE SHIPMAN INQUIRY

Chairman: Dame Janet Smith DBE

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The Rt. Hon. John Reid MP
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15th June 2004

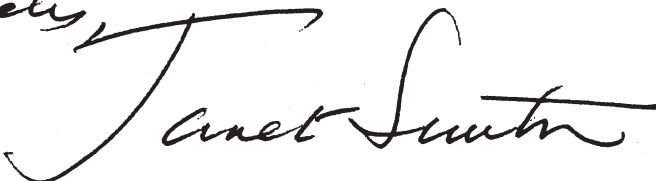
Dear Secretaries of State,

Shipman Inquiry - Fourth Report.

I have pleasure in submitting my Fourth Report, which deals with the regulation of controlled drugs in the community. In my First Report, I explained how, over a very long period, Shipman had acquired large amounts of diamorphine which he had used to kill his patients. In the penultimate Stage of the Inquiry, I set out to discover why the existing systems of regulation had failed to prevent or detect these acquisitions. The Inquiry's Terms of Reference also required me to recommend what steps, if any, should be taken to protect patients in future.

I have to report that there is no easy way to prevent a doctor who is determined to obtain illicit supplies of a controlled drug from doing so. Nor is there any foolproof way of detecting, after the event, that a doctor has diverted controlled drugs to his or her own use. However, there is much that could be done to improve the present position. I have made a number of recommendations, which I am confident would, if implemented, make it far more difficult for a dishonest doctor to obtain drugs illicitly and would greatly improve the prospects of detection after the event. Perhaps the most important single recommendation is for the creation of a controlled drugs inspectorate, to replace the fragmented provisions for inspection and monitoring that exist at the present time.

There has been virtually no revision of the legislation relating to controlled drugs for over thirty years. Some of the existing provisions are sound in principle but others are out of date or have become over complicated. In particular, many of the existing rules prevent the proper and sensible use of computer technology. It is time for revision. The Home Office Drugs Branch is aware of the need for change but there has been little movement to date, possibly owing to a lack of resources. At present, the impetus for change is coming from the Department of Health, through the development of information technology systems. These changes are primarily designed to improve health care and may not take sufficient account of the need for security in dealing with controlled drugs. In my view, the two Departments should join in the revision of the legislation, so that the new framework can allow for the use of computer technology with an eye to improved regulation as well as improved patient care.

Yours sincerely,


Janet Smith

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Independent public inquiry into the issues arising from the case of Harold Shipman