

Dear Mr Gale,

I have recently read your letter regarding the rehab centre in Minster, which is obviously sincere and heartfelt, but I feel is based on various false perceptions.

You say *'It is not true to say that there has been no consultation as the company involved in the project held three public meetings in Minster very recently indeed....'* (June 8th). On the morning of June 8th I had thought the same as you, that it was the start of a consultation process. But I decided to ring Kent Police to find out what they thought about the project and they informed me it was a 'done deal'. I don't call that consultation. Do you?

You continue *'any proposal will be considered in accordance with the law by Thanet District Council if and when appropriate notices are issued and at the correct time.'* In the letter of April 26th from TDC Chairman Jeffrey Kirkpatrick we learn that, 'no approach will be made (by Mr Milne) to the Council until after the elections'. Is 'after the elections' what you would call 'the correct time'? Why do you think Mr Milne's approach was delayed till 'after the elections'?

You continue, *'I believe...those behind the project are responsible, honest, and well-intentioned'*. Lets see:

At the lunchtime meeting of June 8th, I was reassured by Peter from RAPt, who answered safety concerns by telling us that there had never been a single complaint about any of their 18 centres. That afternoon I did a little research and discovered that 16 of the 18 centres are based within prison walls. The other two are in Tower Hamlets (open since 2006), and in central Hull (open since 2004). Further research showed that the centre in Hull had caused great upset to residents, as, like Minster, it had been sneaked in without notice to residents, and in a way that evaded planning laws.

Do you think Peter was honest and responsible?

The same afternoon I rang Wendy Stone, head of Minster School (400 pupils), and found that she knew nothing about the project. I rang Minster Surgery; they had written to Kenny Milne with their concerns but received no reply; they have written again since but still had no reply.

Do you think that's responsible?

At the June 8th meetings it was obvious that you, Sandy Ezekiel and Steve Ladyman were the only ones who seemed to know about the scheme, but no one in Minster, not even the local Catholic parishioners, knew anything about it.

Do you think that's honest and responsible?

At the June 8th lunchtime meeting Kenny Milne rebuffed a polite request to see his business plan, with 'I'll show you a copy of my business plan in my own good time'.

Do you think that's responsible? Do you think 'his own good time' will be a month after he's opened?

Just after the June 8th meetings, I wrote a letter which I distributed around the village (full text attached). I wrote,

'I think the nuns are good people with good motives..... In my opinion I think the village should treat the nuns with courtesy and respect..... I have asked the nuns if they would like me to print (free of charge) a leaflet to help explain their point of view.'

If Mr Milne ever decided to go out and talk to people in Minster, he would find that at all times I have encouraged kindness towards the nuns.

For Kenny Milne's reaction to me and my letter, please read the following emails I have received, first from the editor of Minster Matters, and secondly from Malcolm Farley:

EMAIL FROM RAY OWEN (MINSTER MATTERS) TO BEN WHELAN

Hi Ben

Kenny Milne phoned me, to tell me to back off and remove the forum, as it is biased and libellous against his project. He tells me that you (BEN) are the subject of a police investigation for the letters you are spreading around the village and that he intends to speak to his solicitors about myself and Minster Matters.

We had a short heated argument about why I hadn't published all the emails and letters that I had supposedly received in support of his project and my reply, when he'd let me get a word in, was that I had published everything I had received that was in favour of the project that had come to me, complete with a name and address, but he wouldn't accept that, saying he had copies of emails that had been sent to me and had been ignored.

So I'm awaiting a knock on the door from the boys in blue or an official solicitors letter in my post, but the forum remains intact !!!

I asked him if he had seen the latest edition of our magazine to which he replied, no.

Oh, and he did say I originate from Glasgow and am well used to street fighting.

Ray Owen

The phone he rang from number was 292*. It was a very intimidating call.**

EMAIL WRITTEN BY KENNY MILNE TO MALCOLM FARLEY (I'll attach the full exchange):

.....alas it seems you are also a cowerd just like your friend Ben..... As i said Ben is under investigation by Kent police and rightly so, anyone who puts nuns in a state of fear one of whom is 82 yrs old can not even call himself a man, theres an old saying in Glasgow that goes "Show me the company you keep and i will show you what you are " I rest my case .

Do you think that's honest and responsible? Do you think I have put the nuns in a state of fear? Do you think Mr Milne sounds well-intentioned.

In addition I can tell you categorically I am not under police investigation, what Mr Milne has said is a lie, and his comments are libellous.

Do you still think that Mr Milne is honest and responsible?

(I believe Mr Milne has apologised to Malcolm on the instruction of Sr Benedict, though he has not apologised to me. I am sure he will apologise when his advisors tell him to).

I could write volumes on the holes in the Pathways literature that has been circulated, but I'll just give you one example. Mr Milne writes:

'People who relapse.....will be escorted from the project and the Minster area'

I don't need to tell you that such action would be illegal, something the average schoolkid would know.

As for your claim that Mr Milne is well intentioned, this remains to be seen. You will know that Rehab centres can be highly profitable money-spinning ventures. An almost identical centre in Spain (exactly the same size and programme, with potential to expand), is currently up for sale and boasts an annual profit of £200, 000. It is the same as Minster with one big difference. It advertises its location as 'specifically chosen to be away from population centres.....' Inevitably the money involved in rehab means that for every Mother Theresa that goes into the rehab business, there is a Conrad Black.

You close your letter with, 'I am deeply saddened by the misinformation that has been propagated within the village of Minster'. At least on this point we are in strong agreement.

Yours faithfully

Ben Whelan

Dear Sir

As a frequent visitor over the past 5 years to this friendly family orientated village I have become aware of the ongoing debate over the establishment of a drug reform centre in the Abbey grounds.

Although in principle the idea is very worthy I have spent much of my professional life around this sphere of work and where some may desire to change many are not able to do so and unfortunately this leads to a demand for drugs, this in turn means "dealers".

Although we all know this is a fact of life, one feels that to encourage it in such a pleasant village is undesirable. The future of this village is the younger generation and much thought should be given to their general protection.

Jane Down

RGN RHV

Minster Matters
C/o Minster Library Monkton Road Minster
Kent
20th July 2007

Dear Sir
RE: Rehab Centre

We are enclosing the response we received from Roger Gale to our second letter, for what it is worth.

He has again totally ignored the very serious situation he has created regarding the Rehab Centre and being a politician has been very economic with the truth and again responded in a pompous and challenging attitude.

We must be aware of his involvement and it appears we still have a long way to go to resolve this very worrying problem regarding the Rehab Centre in Minster. Hopefully the new steering group will assist to bring this unfortunate situation to a satisfactory conclusion.

Yours sincerely
John and Sandra Day
cc. Minster Parish Council.

Roger Gale M.P.

Dear Mr & Mrs Day,

Proposed Rehabilitation Centre - Minster Abbey

I acknowledge receipt of your further letter of the 9th July.

You tell me that it is "irrelevant that Mr. Milne is one of my constituents". I am afraid that is not the case. I have a bounden duty to represent my own constituents and that I shall continue to do as I have done for the last twenty-four years.

If and when I am elected to represent the residents of the village of Minster then I shall, as is my custom, endeavour to do so fairly and without fear or favour. Until that time I am afraid that I have to insist that you direct your concerns concerning the proposal to your own Member of Parliament Dr Stephen Ladyman, I appreciate that as he has indicated his support for this project you may feel that that is a waste of time but it is incumbent upon me to observe the Parliamentary convention however unacceptable you may find that.

With my best wishes.

Yours sincerely,

Roger Gale M.P.

25-07-07

To Dr. Stephen Ladyman MP

Dear Dr. Ladyman,

Thankyou for attending the public meeting on Saturday 7th July. After the outrage and frustrations expressed at the previous meeting, Mr. Milne had a real talent of avoiding answers. We needed to be listened to, and not fobbed off with half-truths and deceit.

I felt that we emerged from the public meeting with a greater understanding on both sides, our concerns are very real. You heard many sound objections and there are many more. We felt we had gained your support and you will look a lot deeper into the facts behind our objections.

I have no confidence in Mr. Milne's ability to run this programme. The more I hear about him the more anxious I become. To reject a client the moment a relapse occurs is not at all supportive. To expect 100% success is totally unrealistic. We have no information as to what happens to these people once they are off the programme. I understand programmes are costly, so where will the funding come from. I feel very suspicious that it is no more than a profit making business venture, and our village will suffer the consequences.

I would be very interested to know why the Pathway House programme was rejected from Cliftonville and Westgate. These areas would have been a better location, but he was turned down. That makes alarm bells ring. Something is just not right, so it is up to us to uncover the mystery and expose it for what it really is, including any back door deals he may think he can do with the planning authority.

Yours truly,

Hazel Grove

9th July 2007

Dear Dr Ladyman,

Following Saturday's meeting at Minster Village Hall with regard to the proposed Drug & Alcohol Rehab Centre I am writing to you with the following objections.

- Under Local Plan CC1 & KMSP EN1 the need to protect the countryside should be paramount unless there is an overriding need for the new development. In 2003 KCC identified less than 115 drug addicts In Thanet, none of them in Minster. The Southeast Drug Action Team Data Profile (2006) identified there are already 27 centres across Kent offering treatment. It can not be argued there is an overriding need for this facility to be based in Minster. There are also many programmes available free of charge to clients, where as Mr Milne intends to charge for this programme, it could be argued there is no need for this project at all.
- KMSP SP1 & TP3 any development that generates excess traffic should be resisted unless there is an overriding need for the project to be based in this location. Although Mr Milne has suggested Minster is an ideal location as it removes the addicts from their environment, I do not believe this is so. Addicts will be bussed in for a day programme and then returned to their environment at night, they will then be left unsupported in the very hours they are probably most vulnerable. The onus should be on Mr Milne to prove why the peace and tranquillity found in Minster is more therapeutic than that found else where in Thanet. Mr Milne has claimed that traffic generated by the project will not use the actual village. Using the lanes is not a viable option as the road junctions are hazardous at the best of times without being subjected to unnecessary excess traffic. I also wonder how non-use of the village would be governed for each individual staff member going to and from work.
- Although Mr Milne claims this is a community project and thus falls within the same planning category as the museum I do not believe this is true. Information provided states that the centre will be partly financed by The Royal Bank of Scotland, this would indicate that it is a business venture. Addicts will also have to be funded to go to the centre indicating it is a profit-making organisation. The project will be only be open to the addicts paying to be there it will not be a facility that can be used by the community in which it is placed. It is primarily a profit making business.
- Mr Milne is trying to class the project as an education and training centre. However the timetable published in the information given out does not include any formal education or training sessions. It covers different types of therapy both psychological and complimentary, thus making the project a Therapy or Mental Health Centre not an education and training centre.
- Mr Milne is trying to claim the centre will have a strong focus on agriculture and animal husbandry thus being well placed at the old museum site. However these activities appear no where on the published timetable as an essential part of the programme. This would appear to be an underhand attempt to avoid planning permission.

- The Government advocate the principle of social inclusion, bussing addicts to a secluded location does not fit with this policy. It is more beneficial for drug & alcohol rehab to be based within a community where addicts can be included. This requires the appropriate infrastructure such as cafes, recreational facilities, shops, etc in a community sufficiently large enough to provide some amount of either acceptance or anonymity.
- Mr Milne has stated that if any client uses drugs or alcohol they will be evicted from the project. This puts a potentially violent and volatile person into the community of Minster. The project is based within minuets of an old persons home, 2 nurseries and a primary school, all of which will be placed at risk. It seems extremely dangerous and untherapeutic to throw someone out of a project into unfamiliar surroundings whilst under the influence of mood altering substances and expect them to make their own way home after being bussed in.

Further issues I believe also need exploring are as follows:-

With regard to Mr Milne himself

- What exactly are his qualifications: type of training, length of training, accredited by who, formal qualifications (e.g. BSc, MSc, diploma), etc
- What experience does he have in working with addicts, managing a rehab facility, dealing with complaints and disruptions, etc?
- If it were a NHS facility he would be required to undergo a CRB police check to ensure he was a fit and proper person to be working with vulnerable adults, will he be undergoing this check?

With regard to the facility

- What will be the staff to client ratio
- What will be the qualified to unqualified staff ratio
- What qualifications will the staff hold
- How will aggressive behaviour be dealt with
- How will non-compliance of the programme be dealt with
- How will clients be prevented from entering the village without infringement of their human rights
- What will there complaint procedure be
- Where will clients be referred from
- How do they attend to address staff recruitment and retention when there is already a huge staff shortage in this field
- What is the clinical rational and evidence base for treating food addictions, alcohol addiction, illicit & prescription drug addictions together?
- What evidence base is there to support a day programme based within a religious community in a rural location?
- How will clients be supported outside of the day programme?
- How will attendance at the programme be ensured?

Yours Sincerely

Nic and Donna Morling-Grove

Letter to Dr. Ladyman

Re :- Potential Drug Rehabilitation Centre (Pathways House) in Minster

Dear Sir

Firstly may I thank you for attending the recent public meeting in Minster Community Centre, I trust you found the meeting to be open, reasonable and fair. It was regrettable that neither the Nuns nor the representative of Pathways House were able to attend.

That aside I must register my objection to the possible housing of the project within the village of Minster, this objection is based on a number of factors.

There is a very large doubt over the qualifications of the project leader.

Pathways House does not appear to be registered with any Government, Department, Business Organisation, Health Authority or Council body. There is a lack of information on how & by whom the project will be run. The village does not appear to be a suitable venue for such a project. The lack of consultation with the residents of Minster, could be interpreted as a sign of something to hide.

All of the above; together with the reluctance of the project leader to register any form of business plan, or indeed communicate in a open and honest manner, would lead a reasonable person to believe that they are not fit and proper to run such a high profile and potentially difficult project.

Therefore I ask you to note this objection and request that you convey my objections to the relevant parties on my behalf.

Thanks in anticipation of your response.

Alan Blake

26th July 07

Dear Mr Ladyman,

Thank you for your reply to my last letter, at our Village meeting here in the Village Hall on 7th July, you said you'd happily ask Mr. Milne questions on our behalf. I have just a couple for you to ask and they are as below:-

1, Isn't it a fact that Mr. Milne was asked and invited to attend a meeting with Doctor's from our local Surgery, but declined the offer ? – one can only wonder why.

2, Can he give the re-assurances to the local Surgery that they require for the safety of their dispensary, and any additional burden placed on them as a result of call outs to attend temporary patients – namely his clients.

3, What was Mr. Milnes aim in sending threatening emails and telephone calls to Minster Residents that are opposing him and his Rehab centre ? Do we not have the power of free speech where he is concerned.

4, Is Mr. Milne a Scientologist ?

Thank you for your time

Yours sincerely,
Sylvia Gibbs

cc Mother Nikola Proksch, Rev. Kevin McDonald, Minster Matters.

7th August 2007

Thanet District Council
Planning Department

Dear Madam / Sir,

I am writing in relation to the proposed Drug and Alcohol Rehab Centre within the grounds of Minster Abbey. I understand that the solicitors acting on behalf of Mr Milne, who is proposing the centre, have requested to meet with the planning department with a view to having the current planning restrictions revoked. I would implore the planning department not to allow this to happen, as I believe the consequences would be devastating to the village of Minster.

If you look at the Isle of Thanet, Minster is an exceptional and unique village. We have many thriving businesses supporting the community, such as a Post Office, Chemist, Newsagents, Corner Shop, Hardware Store, Hairdressers and more recently a Beauty Salon. We also have a number of community resources such as the Library, Public Houses, Primary School and Nurseries. There are numerous clubs for children and adults including Cubs, Brownies, holiday clubs, Horticultural Society, Theatre group, Bowls club, OAP club and church groups. We also have several committees focused on village activities such as The Flower Show, Twinning Association and Parish Council. This is to mention only a few of the outstanding benefits Minster has to offer.

A drug and alcohol centre is entirely out of place in a rural location such as Minster, and it is essential to safe guard the pockets of rural life that we have left in Thanet. Should the conditions of the current planning permission, granted to the former Minster Museum, be revoked it could open the door for all kinds of developments within Minster, for once one non-rural development has been granted it then sets precedent for further non-rural developments in the future as it then becomes harder to object as the community has already been shattered.

I would like to raise a number of points in objection to the revoking of the conditions on the current planning permission and also against any planning permission request that may be submitted in the future. These points may have already been passed to you via Dr Ladyman, who I have also written to, so I therefore apologise for any repetition.

- Under Local Plan CC1 & KMSP EN1 the need to protect the countryside should be paramount unless there is an overriding need for the new development. In 2003 KCC identified less than 115 drug addicts in Thanet, none of them in Minster. The Southeast Drug Action Team Data Profile (2006) identified there are already 27 centres across Kent offering treatment. It can not be argued there is an overriding need for this facility to be based in Minster. There are also many programmes available free of charge to clients, where as Mr Milne intends to charge for this programme, it could be argued there is no need for this project at all.

- KMSP SP1 & TP3 any development that generates excess traffic should be resisted unless there is an overriding need for the project to be based in this location. Although Mr Milne has suggested Minster is an ideal location as it removes the addicts from their environment, I do not believe this is so. Addicts will be bussed in for a day programme and then returned to their environment at night, they will then be left unsupported in the very hours they are probably most vulnerable. The onus should be on Mr Milne to prove why the peace and tranquillity found in Minster is more therapeutic than that found elsewhere in Thanet. Mr Milne has claimed that traffic generated by the project will not use the actual village. Using the lanes is not a viable option as the road junctions are hazardous at the best of times without being subjected to unnecessary excess traffic. I also wonder how non-use of the village would be governed for each individual staff member going to and from work.
- Although Mr Milne claims this is a community project and thus falls within the same planning category as the museum I do not believe this is true. Information provided states that the centre will be partly financed by The Royal Bank of Scotland, this would indicate that it is a business venture. Addicts will also have to be funded to go to the centre indicating it is a profit-making organisation. The project will be only be open to the addicts paying to be there it will not be a facility that can be used by the community in which it is placed. It is primarily a profit making business.
- Mr Milne is trying to class the project as an education and training centre. However the timetable published in the information given out does not include any formal education or training sessions. It covers different types of therapy both psychological and complimentary, thus making the project a Therapy or Mental Health Centre not an education and training centre.
- Mr Milne is trying to claim the centre will have a strong focus on agriculture and animal husbandry thus being well placed at the old museum site. However these activities appear nowhere on the published timetable as an essential part of the programme. This would appear to be an underhand attempt to avoid planning permission.
- The Government advocate the principle of social inclusion, bussing addicts to a secluded location does not fit with this policy. It is more beneficial for drug & alcohol rehab to be based within a community where addicts can be included. This requires the appropriate infrastructure such as cafes, recreational facilities, shops, etc in a community sufficiently large enough to provide some amount of either acceptance or anonymity.
- Mr Milne has stated that if any client uses drugs or alcohol they will be evicted from the project. This puts a potentially violent and volatile person into the community of Minster. The project is based within minutes of an old person's home, 2 nurseries and a primary school, all of which will be placed at risk. It seems extremely dangerous and untherapeutic to throw someone out of a project into unfamiliar surroundings whilst under the influence of mood altering substances and expect them to make their own way home after being bussed in.

Yours Sincerely

Nic Morling and Donna Morling-Grove

7th August 2007

Dear Sisters,

I am writing in respect of the proposed drug and alcohol centre. I am very much against having this facility within the village of Minster for several reasons.

I was born in Minster and although moved away some 15 years ago, my wider family has always lived here and I have remained a frequent visitor. Two years ago when my daughter was born my husband and I made the decision to give up our life and careers in London and return to Minster. We did not want our daughter growing up in the sort of environment London offered.

We did infact live in the same street as a drug rehab centre. In London this was appropriate as there is a very real need for it. Minster has no need. The client's of the centre occasionally caused problems such as violent outbursts in the street. However a much bigger problem was the entourage of people who would follow. The so called friends still using drugs trying to persuade the clients to return to the old lifestyle, the drug dealers supplying the friends and trying to regain the custom of the clients. It was not unusual to hear of friends and neighbours being robbed by these people.

Minster has always been home to me, a place where I felt I wanted to return to raise my family, where they would be safe. Where my daughter could go out for a walk, or a ride on her bike in safety. You are about to destroy this. No matter how hard I try I am unable to understand how people who are supposed to be part of the heart of our community can totally disregard the communities feelings and continue on a path that is causing so much anguish and upset to so many people. I can understand your vocation is to do God's work and help those in need, but at any cost?

I have read your information sheet and the information published by Pathways. I have many questions and many concerns. You state you believe the project can save 50 lives a year, bearing in mind independent clinical research has proven these type of projects have a less than 20% (often less than 5%) success rate are you proposing having over 250 clients a year?

You also state you wish to receive all who come to you as Christ himself was received. Presumably this only applies to those who can afford to pay the fees and then 'be received'. I also wonder why people from the village itself who have been life long friends to you are no longer welcome if you wish to receive all?

I also wonder how you can convince yourself this project is charitable. Clients will have to pay or be funded to attend, how does this constitute charity especially when there are many more clinically robust rehab centres offering free treatment?

You have stated that you feel intimately tied to the local community. If this really is so then take a long and open look into your heart and hear what the community is saying to you. This project will bring devastation, pain and suffering to far more people than it could ever save, and the people you are harming are your very own community.

Regards

Donna Morling-Grove

Mr. John Bunnett
Corporate Director
Thanet District Council
P0 Box 9
Cecil Street
Margate
CT9 1XZ

20th August 2007

Dear Sirs

RE: Proposed Drug Rehabilitation Centre at Minster Abbey.

I, like the majority of Minster residents and represented by the group MARC (Minster Against Rehab Centre) are totally opposed to the location of this Drug Rehabilitation Centre at the Minster Abbey site.

I must bring to your attention an extremely worrying situation regarding the proposed Drug Rehabilitation Centre at Minster Abbey. As you are probably aware the existing Agricultural Museum was closed by The Trustees, due to unreasonable financial restraints and pressure by the Minster Benedictine Nuns.

There has now been an unorthodox approach to circumvent the planning laws and apply for a serious alteration to the planning conditions on the site without presenting a full planning application.

This approach, and any other planning applications to locate a Drug Rehab. Centre at Minster Abbey should be rejected. The other two sites in Cliftonville and Westgate were rejected and deemed to be unsuitable. Therefore, is a Historic Abbey site suitable?

I am enclosing a report by Nicola Cole, one of your planning officers, in response to the unorthodox request, which appears to indicate that the request would require a full planning application, including stringent criteria before any centre would be considered.

I am also enclosing two letters from greatly respected local Surgeons who have considerable knowledge in the subject of rehabilitation of Drug users and they are also totally opposed to the location of this project at Minster Abbey.

I would like you to also consider the following objections to the proposed site.

The site is detrimental to the Environment.

The site is detrimental to the Amenities.

The site is detrimental and detracts from the Social and Visual aspect of the area.

The site is detrimental to the Infrastructure.

The site is detrimental to the Tourist and Amenity in the Historic Abbey surroundings.

The Existing planning approval states Agricultural Use Only.

The Building is Designated Agricultural use only.

It is Inappropriate use of the building.

The proposal Contravenes the Local Plan.

The proposals will have an Adverse affect on roads with increased traffic generated and the impact on the rural locality.

The proposal will be Detrimental to the safety of Children.

The proposal will have an Adverse affect on the safety to the Minster Primary School and Children, who are in close proximity.

The proposals will have an Adverse affect on Pre-School club in Old Schools, who are closer to the project.

It will have an Adverse affect on Nursery School in the Old Schools, with similar location problems.

The proposals Contravene the Listed Building Use, as clarified by Mr. Nick Dermott, TDC Conservation Architect.

The proposal will Contravene the integrity of the Listed Building Consent.

The proposal will Contravene the Local Plan policy EPIO which restricts development within the Wantsum Flood Risk Area.

The proposal has not a financial structure or manning proposals for operating within the strict government criteria and guide lines.

The project has been refused in both Westgate and Cliftonville, the reasons being that it was not suitable to the areas.

There are more suitable locations that have not been investigated.

A Drug Rehabilitation Centre should be in close vicinity to a hospital where professional assistance would be available.

There are sufficient planning objection reasons why this proposal should be refused outright. The organizers of the proposed Drug Rehab. Centre should be contacted immediately by Thanet District Council, in writing, stating that any approach to establish a Drug Rehabilitation Centre in the grounds of the Historic Minster Abbey will be refused and contested vigorously at any appeal.

I would appreciate a considered reply to this letter and your comments about the propriety of the proposed Drug Rehab. Centre and an assurance that Thanet District Council will object to this or any other approach to establish a Drug Rehabilitation Centre at the Historic Abbey site.

I have sent copies of this letter to Head of Development Brian White; Building Control Geoff Musk; Planning Application Manager Simon Thomas; Strategic Planning Colin Fitt, and to all current Councillors on the Planning Committee. Will you all please reply with your views and comments to this very serious situation.

Yours sincerely

John Day

14th July 2007

C o p y

Mr. Rodney Fell, BSc(Hons), MRCS, LIRCP, MB, FRCS, MAE, CpRINA

Dear Rodney,

Re: Proposed Drugs & Alcohol Rehabilitation Centre at Minster Abbey

Many thanks for your letter, in which I think you've incorporated the most relevant outstanding issues on this subject, and trust that these observations will be investigated and acted upon by those involved in decision—making.

As a former chairman of the Thanet Community Safety Partnership Alcohol and Drug/Substance misuse Sub—group, I also have serious concerns about the proposals which have been put forward.

My first concern is that no Business or Care Pathway plans have been submitted to indicate just how this scheme will be run and how the clients/patients will be managed. Nowhere in any of the handouts, is there any mention of the Guidelines on Drug Misuse and Dependence Clinical Management, produced by and for, the Department of Health, the Scottish Office, the Welsh Office and Department of Health and Social Security for Northern Ireland. This document is the Standard set down by the Government as to how substance misusers should be managed in the UK. There appears to be no criteria for deciding eligibility for attendance at the proposed Minster Centre, but this should follow the lines described by Prochaska and DiClemente, in 'Towards a Comprehensive Model of Change', in "Treating Addictive Behaviour - Process of Change": New York Premium Press 1986: 3-29.

The whole process of treating substance misusers should be audited by the NTORS Study (National Treatment Outcome Research Study), London, Department of Health 1996.

Both above—mentioned systems are vital, but Mr. Milne neither mentions using the Care Pathway Approach under requirements of the Strategic Health Authorities, nor is there assurance that any substance misuse treatment is governed by and audited by further appraisal of how the system is coping, both clinically and financially.

Further concerns relate to infection with Hepatitis B, C and HIV. The Department of Health Guidelines state that 50-80% of past and present drug misusers, are infected with Hepatitis B. This raises concerns about the suitability of conversion of a Grade II Listed barn and its

surrounding outbuildings, to a place in which to treat and care for these clients/patients who should be in an environment that has at least some element of clinical control.

The Guidelines also state that about a third of substance misusers suffer from mental illness problems; some of those being serious. This is another justifiable concern for the inhabitants of Minster, especially the young and the vulnerable.

In none of the information provided by Mr. Milne, is there any mention of the MAP (Maudsley Addiction Profile) which has been developed in Britain as a statutory tool for deciding the suitability or eligibility of clients/patients to attend such a programme.

The Department of Health also advises that the Strategic Health Authority should monitor the performance of any drug misuse treatment and centre, but those proposed for Minster are said to be a private venture, so would appear to lie outside this statutory monitoring authority, which is of serious concern.

Turning to the proposed treatment of drug misusers by Mr. Milne, the Appendix in the Department of Health Guidelines in Clinical Management, specifies rigid criteria for the role of the drug worker. It states that:

“In the drug misuse field, workers from a variety of professional backgrounds are often referred to as Drug Counsellors or Drug Workers, but are not professionals. Almost all professional drug workers are trained in specific techniques including individual and family therapies and working with young people. Counselling drug misusers is a core functioning treatment and rehabilitation service, and the professional competence and clinical effectiveness is closely related to training, competent supervision and formal accreditation.”

Please note the last two words.

There would not appear to be any evidence in the information provided by Mr. Milne, of accreditation or professional indemnities.

The stated Government guidelines regarding treatment of substance misusers are followed closely by EATA, the (European Association for the Treatment of Addiction), and all the

Centres under this banner are also corporate members of the FDAP (Federation of Drug/Alcohol professionals), also being kitemarked as Investing in People. Neither of these bodies are mentioned in the proposals for the Minster Centre.

As regards the values of therapies that may work in drug addiction and misuse; in “Advances in Psychiatric Treatment” 2003, produced by the Royal College of Psychiatrists, it is stated that:

“Few psychiatric specialties attract so much attention from other authorities and the general public, as drug misuse.”

(A point proven by the local response to this project).

Nicholas Sievewright, author of “Community Treatment of Drug Misuse”, Cambridge University Press, states:

“The tendency is to overstate the effectiveness of treatment, and this must surely be resisted, as the realities of on-going drug use, even in the face of advice, are often all too plain to see.”

and he also states:

“I have encountered the unqualified slogan ‘Treatment Works’ in various settings including lobbying to Governments, but such over—generalisation is unhelpful and detracts from the vital message that this is a field in which prevention seems decidedly better than attempted cure.”

In “What works in Drug Addiction”: “Advances in Psychiatric Treatment”, No.9; 280-287 Luty points out that:

“The support for psycho-social approaches, including systematic drug counselling, Twelve Step methods, residential rehabilitation from systematic studies, is relatively weak and indeed no treatments have an evidence base that is compared with that for methadone maintenance therapy.”

Indeed Mr. Milne seems to have placed his faith in his counselling program at Minster when research has shown that in enhanced programs of psycho-social treatment with daily counselling, etc. many of the clients actually attended only once each week despite the offer of more frequent sessions.

Research also shows that results of abstinence from opiates and cocaine-use for one year, were extremely poor, and the results were even less promising than those from an earlier randomized trial. Overall, the enhanced program did not confer significant benefit over standard drug counselling, which was confirmed also by a cost-effective analysis. The latter statement however, is at variance with the proposed costings issued by Mr. Milne and the Sisters at the Abbey.

Regarding the Twelve Step Approach, this was originally used by Narcotics Anonymous, and Luty states that:

“Narcotics Anonymous provides support groups for problem drug users. These groups are widely available and free to participants,”

yet Mr. Milne states that he wishes to charge his clients for attending his Pathway approach sessions.

Cognitive Behaviour Therapy techniques were subjected to research in randomized control trials, and although CBT is better researched, they also were no more effective than other psychological methods in addiction.

Investigators also failed to find any advantages for psycho-dynamic psychotherapy in substance misuse: another form of therapy. Motivation interviewing and motivation enhancement therapy techniques have also been subjected to research and review. This also was shown to have a significantly lower success rate as compared with conventional therapy which is recognised by the Department of Health and the Strategic Health Authorities.

The conclusion by Luty in “What Works in Drug Addiction” showed that methadone maintenance was the safest and most effective variety of measures for preventing illicit drug use, but this can only be given under the guidance and supervision of duly accredited health professionals.

The Department of Health states that Shared Care is “the joint participation of specialists, GPs and other agencies as appropriate, and the prime delivery of care for the patient who has drug misuse problems.”

It thus appears that the Family Practice which covers the area of this proposed Centre should be one of the first port of call by Mr. Milne and his associates, to provide the doctors with an

itemised Business Plan and, certainly, a Care Plan which has to be accepted by the Primary Healthcare Trust.

In summary, the proposed Rehabilitation Project and Twelve Step Program, despite the enthusiasm for, and by, the proposers of the Minster Centre, would fall far short of legislative and statutory requirements and, quite justifiably, as you so eloquently stated, ‘increases concern of the man in the street that the well-intentioned Sisters of Minster Abbey may have been misled and with worrying consequences.’

Yours sincerely,

Alan Jones

Consultant in Accident & Emergency

SMQPM. Tribunals Judiciary, Department of Constitutional Affairs

cc: Dr. S.Ladyman, MP: Dr. C. Crossfield: S. Ezekiel Esq: R. Samuel Esq:
M. Roberts Esq: R. Groves Esq., W. Hayton Esq.

Exact transcript from handwritten letter (minus addresses)

Dear Dr. Ladyman

Proposed siting of Re-hab Centre in Minster

Thank you for your courtesy in attending our village meeting on Saturday last, 8th July.

You asked us to write to you about the planned imposition on our village of Mr. Milne's re-hab centre, a plan that appears to have been brewed from a questionable mixture of political expediency, opportunism and credulity.

The whole scenario could be entitled "The Peace-BREAKERS' plot", the scenes running roughly as follows:

- 1) bureaucracy needs a site for this Centre, which has been rejected elsewhere
- 2) the individual seeking to run this enterprise is introduced by one of the aforementioned bureaucrats to
- 3) sympathetic owners of possible site, and "sells" himself and his plan to them
- 4) the pot thickens as an "inconvenient" but much-loved (especially by the village children) obstruction to the re-hab plan is "helped" off the site
- 5) re-hab planners belatedly and reluctantly disclose their intent to us, the insignificant inhabitants of the village. Kenny Milne resorts to intimidatory tactics and vilification of some of those openly opposing his plan

To a certain extent, Dr. Ladyman, it is within your power to influence the direction of the closing lines of this sorry tale, which could be

- a) rejection of the re-hab centre on the Minster site, for planning and suitability reasons, and to preserve security and restore peace in the Abbey and village communities

or

- b) "fixing" of planning consent and bulldozing over objections

installation of centre, followed by possible attraction to site of dealers, and addicts from outside, and finally, total repudiation, by all involved in enforcing the establishment of the centre, of responsibility for any resulting problems or harm to the Abbey or villagers.

Solution

Please search for and locate the Centre in a really suitable and safe place.

Ensure that those running it are qualified.

Minster appears to be an easy target for those hunting for a site, but I believe that the well-being and peace of mind of the human beings who live here does matter.

Yours sincerely,

(Mrs) Susan M Whelan

P.S. If you have no objection, I will send a copy of this to “Minster Matters”?

Dear Sisters in Christ,

I understand that you are under attack for your desire to use some of your buildings as a rehab centre - a typical case of NIMBY syndrome, I guess. I have been involved in the SU beach mission at Minnis Bay for a number of years and I know that you give us 24/7 prayer cover for that, for which we thank the Lord.

I just wanted to assure you that you will be in my prayers at this time. While Jesus warned His followers that following Him would lead to persecution it isn't an easy place to be in.

Bless you for all that you do in His name!

Yours in Him,

Jenny Brewer (Birchington Baptist Church)