

**Scottish Drug Deaths Taskforce
Update Briefing
December 2021**

This briefing provides an update on the work of the Taskforce over the last 12 months, in response to the tragic rise in drug related deaths and our plan for the final year of the Taskforce.

Background

Drug Related Deaths in Scotland

In January 2021 the Scottish Government announced a National Mission to reduce Scotland's unacceptable drug death rates. Part of this commitment is to improve data and surveillance. This report is published quarterly and focusses on management information from Police Scotland on suspected drug deaths, to provide as timely an indication of current trends in drug deaths in Scotland as is possible. Statistics from the National Records of Scotland (NRS) are also presented for wider context. to be a general upward trend over the period for which data is available.

Police Scotland management information gives an indication of recent trends in drug deaths in Scotland based on reports from police officers. A suspected drug death is based on an officer's observations and initial enquiries at the scene of death.

The number of suspected drug deaths during the first six months of 2021 was 722, a similar level to the first six months of 2020 where 731 suspected drug deaths were recorded. From the months of July to September 2021, there were 285 suspected drug deaths, 13% (44) fewer than the previous calendar quarter (April to June 2021), and 10% (31) fewer than during the same calendar quarter in the previous year (July to September 2020).

Drug Deaths Taskforce

The Drug Deaths Taskforce was formed in 2019 to identify and advise on an evidence-based strategy, and its component parts, to tackle Scotland's unique challenge. Chaired by Professor Catriona Matheson, with Neil Richardson OBE as Vice Chair, the Taskforce is made up of individuals selected for their expertise either in a personal capacity or on behalf of the organisations they represent. The Taskforce also maintains a broad virtual team of individuals and organisations that provides valuable experience. A full membership list can be found here - [Our Members | Drug Deaths Taskforce](#).

Members recognise the urgent nature of the drug deaths crisis in Scotland. This means that waiting on all the evidence to emerge in a completed, collated form is not possible and that an emergency response to save lives is required as we continue to develop the evidence base. This means:

- Supporting front line projects which have potential to save lives as well as inform future strategy;
- Rapid implementation of learning across all relevant agencies whenever these are identified as capable of immediate impact – Evidence in Action.

The Taskforce has met a total of 18 times and the minutes can be accessed on the website. ([Meeting Minutes | Drug Deaths Taskforce](#))

Phase Two of the Taskforce

In December 2020, the Taskforce published a high-level [Forward Plan](#) which sets out its aims as well as the approaches and methods it will take.

It also includes a 2020-2022 timeline across three focus areas that the evidence highlights where lives can be saved in the short, medium and longer term:

- **Emergency Response** focuses on preventing an overdose event becoming a fatal overdose;
- **Reducing Risk** focuses on preventing the risk of an overdose;
- **Reducing Vulnerability** changing the landscape for those affected by drug use.

In June 2021, the Taskforce published an [Interim Report](#) which summarises the progress made and highlights the scope of work it has been involved in. Phase 2 focuses on providing recommendations to the Scottish Government, for the national roll out of effective identified interventions, and for the further exploration of key issues that will reduce drug-related deaths. All recommendations are reviewed by our reference groups (Families, front-line staff, lived and living experience).

A summary of recommendations made to date can be found here - [DDTF - Recommendations | Drug Deaths Taskforce](#).

Key pieces of work in the last 12 months

The Taskforce have covered a range of work over the last 12 months. Seminal work to develop MAT standards has now be transferred to Scottish Government to implement.

Other major work includes:

DRUG LAW REFORM: The Criminal Justice and Law Sub Group have completed the first phase of work to consult on drug law reform in Scotland through engagement with over 100 stakeholders who work in health and justice. This aims to improve our understanding of what barriers to implementing a health based approach are being experienced under current reserved legislation. The [Drug Law Reform report](#) was published on 6 September 2021 and includes thirty proposals for the UK and Scottish Government and partners. These range from what can be done in the shorter term within the current law, to essential wholesale changes, including a full review of the reserved Misuse of Drugs Act (1971).

The issues surrounding current reserved drug legislation are not new and have been well documented by almost every other committee or expert that has looked at it in recent years. The Taskforce does, however, believe that we have now passed a tipping point in Scotland and asks '*how much evidence is enough?*' for this to change. Letters have been written to both the [UK](#) and [Scottish Ministers](#) outlining the relevant proposals in the drug law reform report.

NALOXONE: One of the Taskforce's early priorities has been expanding the provision of naloxone to ensure that anyone who may witness an overdose has access to this life-saving drug. Our goal is to develop the most expansive naloxone

network in the world, with this in mind we have supported naloxone distribution to the Police, Scottish Ambulance Service (SAS) and frontline services, as well as supporting family and peer to peer distribution. The pilot on the Police carriage of Naloxone has now concluded, with over 800 officers trained and 53 life-saving uses. With the evidence from the evaluation we will continue to support a national roll out. We have supported the employment of three regional naloxone leads in the SAS who have now trained the majority of clinical staff in the use and supply of naloxone, this has grown the distribution of Take Home Naloxone to 848 kits supplied in 2021, and 80% of staff trained to supply naloxone. We have expanded our peer supply of naloxone project with the Scottish Drugs Forum to six new areas, bringing the total to nine, continuing to ensure that naloxone is available for all those that need it. Other areas have developed naloxone distribution networks through our ADP fund.

At the beginning of this year we secured a deal with Ethypharm for 10,000 free naloxone kits. We have now distributed these kits across Scotland targeting the areas with the lowest reach of naloxone. Through this work we have supported Scottish Families Affected by Alcohol and Drugs (SFAD) with their national click and deliver service, which has been a huge success. We will now evaluate the distribution of Ethypharm supplies and highlight where increased action is needed to improve the naloxone network. This work has only been possible due to the Lord Advocate's statement of prosecution policy and as such we have continued to campaign for these changes to be made permanent, supporting the reclassification of naloxone in the recent four nations consultation. We welcomed the reference to upcoming changes in the UK Drug Strategy and will continue to engage to ensure that any changes enable the scale of distribution needed.

WOMEN'S DRD: At the start of the year, the Taskforce discussed the issues facing women, following a rise in drug related deaths. A short term working group explored key themes and made recommendations building on previous work commissioned by Scottish Government. [here](#)

The report titled '[Women and Drug Related Deaths](#)' is now published as has a [summary](#) which you can read [here](#). This work operationalises the recommendations of the 2018 paper.

The report was accompanied by a series of engaging short podcasts where women involved in the working group discuss some of the key changes needed. The podcasts are available on the [Taskforce website](#).

BENZODIAZEPINES: According to data from the National Records of Scotland street benzodiazepines (or benzos) in 2019 were a factor in around 70% of all drug related deaths. Due to this, the Drug Deaths Taskforce created a Benzodiazepines Working Group to tackle the rising crisis surrounding the use of benzodiazepines.

The group was made up of a range of professionals with a wide range of background and experience, from clinicians and prescribers, to GPs and Lived Experience members. The group developed [Interim Guidance](#) around both the pharmacological and psychological management of benzodiazepine dependency in the context of those who are also opiate dependent that is consistent across Scotland.

This is a challenging area given the lack of clinical evidence but clear evidence of harm. With this in mind the MAT Standards MIST team will now run a consensus building roundtable followed by a consensus conference to finalise the guidance.

STABILISATION SERVICES: The Benzodiazepine Working Group importantly identified a gap in provision of services to stabilise a person's chaotic drug use in particular for benzodiazepine use. They recommended that **a place of immediate safety** is needed for some individuals giving access to appropriate treatment. While this recommendation has come from work on benzodiazepines, given the known harms of poly substance use in Scotland, the Taskforce believes that stabilisation services should be available to all individuals rather than be specific to benzodiazepine use.

It has been recommended to government that appropriate pathways are developed urgently to embed a stabilisation service in the developing treatment landscape.

This work, and the recommendations, have been passed to Government and we continue to engage on the process of implementation.

NON-FATAL OVERDOSE WORK: The evidence is clear that fatal overdoses often follow non-fatal ones. Therefore the Taskforce has supported a range of non-fatal overdose pathways to ensure that anyone who suffers a non-fatal overdose is properly supported to access treatment and prevent further overdoses. We have funded and recently expanded the Glasgow Overdose Response Team, who have supported over 733 individuals in Glasgow City and since their expansion to Lanarkshire and the wider GGC health board have supported close to 100 more people. We have recently launched a new project with the Scottish Recovery Consortium to establish pathways into residential rehab from a non-fatal overdose. We have supported a range of pathways through direct ADP funding and many ADPs have developed effective multi-disciplinary teams to support individuals into treatment and support services. We will continue to explore this important area, producing an evidence briefing early in 2022.

STIGMA: Evidence demonstrates that many who could benefit from treatment can be discouraged from doing so by language, attitudes and behaviours that appear judgmental, even if these are displayed unwittingly. The Taskforce recognises that tackling stigma could make a significant contribution to reducing drug-related deaths in Scotland and has published a strategy paper highlighting a way forward.

We have worked closely with stakeholders to highlight the negative impact of stigma and work to ensure every touchpoint in support services projects a positive, encouraging outlook to those engaging with them.

A stigma strategy has been created and can be found here - [Stigma Policy and Strategy | Drug Deaths Taskforce](#). This strategy and its accompanying charter have been picked up by Scottish Government for implementation, leading to the positive Scottish Government stigma campaign launched earlier this month.

Plans for the Final Year:

The DDTF will conclude its work in 2022. In the coming year, we will:

1. Bring together the evidence we have implemented and explored over the past two years into a roadmap for tackling rising drug deaths and harms by reviewing key initiatives: MAT standards, naloxone, non-fatal overdose pathways, stabilisation services, the criminal justice system, navigators, peer support and the integration of key services to support people with multiple and complex needs.
2. Build on the 74 recommendations made to date producing wide reaching strategic guidance on a whole systems, holistic approach which provides the greatest support to people who use drugs, their families and the workforce.
3. Outline changes that will improve and save lives, as well as truly valuing and supporting the individuals working in the sector, who have committed themselves to this goal for many years.
4. Recommend expansion across Scotland where the evidence from our established interventions demonstrates meaningful improvements.
5. Review progress on our recommendations and highlight areas for further enhanced activity if we consider action to be too slow.
6. Express the need for further resources where needed to support research initiatives to conduct the critical role of assessing the effectiveness of new interventions and changes to practice in the longer term.
7. Continue to develop a 'National Conversation' on drugs, highlighting what is needed now and in the future to make a difference for every individual affected by problematic drug use. We have and will continue to call for swift and meaningful action from the both the UK and Scottish Governments, as well as from all partners involved in supporting people who use drugs and affected families. The workforce, peers and families who support people at risk must feel valued and supported.

*This National Conversation must continue to build around the strong message that
“the evidence is clear, now is the time to act”*