

DRUG DEATHS TASKFORCE: MINUTE OF MEETING SIXTEEN

Wednesday 8 September 2021

Virtual via Zoom

10:00 – 13:00

Taskforce Members:

Catriona Matheson (Chair)	University of Stirling
Neil Richardson (Vice Chair)	Turning Point Scotland
Carole Hunter	Royal Pharmaceutical Society (Scotland)
Colin Hutcheon	Families Lived Experience Representative
Fiona Doig	Borders ADP and Health Improvement
Gary Rutherford	Scottish Ambulance Service
Jason Wallace	SDF - Lived Experience Representative
Rebecca Wood	Lived/Living Experience Representative
Alison Munro	Academic Representative
Linda Jones (Deputy for Gary Ritchie))	Scottish Police Service
Anthony McGeehan	Crown Office and Procurator Fiscal Service
Tara Shivaji	Public Health Scotland
Ewen Stewart	Royal College of General Practitioners
Rebecca Lawrence	Royal College of Psychiatrists

Attendees:

Chris Wallace	Wallace Transform
Henry Acres	Scottish Government: Drug Deaths Taskforce Support Team
Maggie Page	Scottish Government: Principle Researcher
Lauren Ross	Scottish Government: Drug Deaths Taskforce Support Team
Roz Currie	Scottish Government: Drug Deaths Taskforce Support Team
Pat McAuley	Scottish Government: Head of Drug Deaths Unit
Georgia De Courcy Wheeler	Scottish Government: Mission Projects Team – Stigma Lead
Alison Fleming	Scottish Families Affected by Alcohol and Drugs
Justina Murray	Scottish Families Affected by Alcohol and Drugs
Peter McCulloch	Research Fellow at the University of Dundee

Apologies:

Gary Ritchie	Scottish Police Service
Diane McCulloch	Social Work Representative

Introduction

1. The Chair opened the meeting and welcomed attendees to the sixteenth meeting of the Taskforce.
2. The Chair introduced guest speakers to the meeting from Scottish Families Affected by Alcohol and Drugs and a colleague from Dundee University.
3. The group approved the minutes from July's meeting and the chair confirmed that these can now be published on to the Taskforce website.

4. An update was given on the Women's Report and Young People's report which confirmed these are both in final stages and will be shared with the members in the coming weeks.
5. The Chair highlighted the Drug Law Reform report was published on the Taskforce website on Monday 6th September. The chair asked members to read the report and distribute to their networks and share when possible to allow people to give additional feedback. The next steps of this are developing an action plan, which the Vice Chair will be taking forward, as well as discussions with the working group and sub group.
6. In the last meeting Stigmatising language was discussed, and a piece was prepared and in response to articles in the press which has been published on the Taskforce website. This page has been viewed 902 times. Group to be mindful if this occurs again we can respond swiftly.
7. An update was given by the Comms lead on the website. It was confirmed that the website receives 3000 visits a month, which is a 40% increase on the same period last year. It is believed some of this increase is linked to the recent publication of Drug Related Death figures.
 - 80% of visits to the website are new visits. 40% increase has also been captured on the length of time individuals spend on the website.
 - The most viewed page on the website is the News Page, which could have a link to more information being shared on the Taskforce twitter page.

Feedback from Glasgow Overdose Response Team Visit (GORT)

8. The Chair, Catriona Matheson and Vice Chair, Neil Richardson visited GORT, and gave the group an update on findings from the visit.
 - At the visit, they met with four members of staff and the dedication of the team came across very strongly. The team has now expanded with the Taskforce funding to cover the wider GGC health board and Lanarkshire, which will bring new challenges, around process and data sharing.
 - Confirmed that the Glasgow team have currently worked with over 600 individuals to date.
 - Challenges highlighted included the speed of response, and staff felt they missed some referrals due to not receiving information quick enough. It was confirmed the team receive weekly referral lists from NHS, which for some people can be around 7 days after initial overdose. This means the window of opportunity may be lost.
 - Confirmed the NHS health boards receive daily updates from Scottish Ambulance Service in a 7 day rolling report to cover any technical issues
 - The referrals the team receive are not just for those overdosing, it can also be referring partners and families in to relevant services such as Scottish Families Affected by Alcohol and Drugs. This was an additional unforeseen benefit.
 - It was confirmed the team at GORT are building strong evidence, and the pressing issue now is to think of what can be done to take this forward and deal with the data sharing issue nationally and in a consistent way.
 - Discussion around data sharing procedures and barriers, and some suggestions around perhaps looking at a protocol which Police Scotland use in Dementia, called the Herbert Protocol, and getting this group identified as a vulnerable group.
 - Potential learning from Dundee on holding daily conferences at a local level with a local agreement.

- There is an important opportunity to engage with Scottish Government information governance department to work on a basic national framework that areas could sign up to.

Actions

- Scottish Government Policy colleagues to link in with Information Governance Department on this and come up with a range of options to take forward for a national solution.
- Secretariat to arrange a discussion with Scottish Ambulance Service and Glasgow Overdose Response Team to discuss a local solution for this project.

Presentation from Scottish Families Affected by Alcohol and Drugs / Scottish Families

9. Justina Murray and Alison Fleming, along with Colin Hutcheon from Scottish Families Affected by Alcohol and Drugs gave a presentation on three topics: Families as Lifesavers/Holding on, Click and Deliver service and Family Inclusive Practice

Families as Lifesavers/Holding On

- The project was initially called 'Families as Lifesavers, and then was re-branded to 'Holding On'. This is an intensive support project, holding on to family members, who are holding on to their loved ones and a life of their own.
- Background on this project was given, along with information on how this project has secured funding from the Taskforce which has given them the opportunity to extend to two posts, and they now have new staff in the team.
- The project's focus was working with families in their own right and to work in partnership with services, along with making them more family inclusive.
- Findings show that mental health of family member really suffers when trying to look after their loved ones and support them with their addiction.
- Naloxone training has been done with family members, now focuses on harm reduction. A group is organised through Holding On where they all can come together and discuss.
- Struggling to get information of Holding On out there with services and to get contact back from services. Trying to get services to buy in to families and realise the support families need.
- Evaluation will cover the use of services however it does seem to be families come to Scottish Families at the point of crisis.

Click and Deliver

- Initiative was created last year when the Lord Advocate approved new guidance around naloxone provision, and Scottish Drugs Forum approached Scottish Families Affected by Alcohol and Drugs.
- Progress on this was achieved quickly and the service began three weeks after the initial conversations.
- There was an understanding family members wanted to carry naloxone but did not want to go to services for this and have to share information. By setting up naloxone this way, it is confidential and delivered to their door, which allows anyone to apply for naloxone so it is not a restricted service.
- The online ordering service has been a huge success, along with phone deliveries.
- Training is provided (online) and all required information is captured for national reporting.
- By 31st March 2021, 295 kits had been distributed.

- Nyxoid (intranasal) has also been added to their service, funded by Scottish Government, which suits some family members better in terms of them not wanting needles in their household.
- 522 kits have been delivered since the launch of this project, including to members of the public.
- Really trying to normalise individuals carrying naloxone, and doing a lot more work around campaigns and spreading the word.
- They are seeing a rapid increase in demand of naloxone, following the national naloxone campaign. Week commencing 30 August, 200 kits were issued, and there was a high demand in particular on International Overdose Awareness Day and the following day.

Family Inclusive Practice

- Discussed that most Families have not heard of, or experienced, Family Inclusive Practice.
- This has been around for a long time, and is highlighted in documents such as 'Road to Recovery' and even more so in 'Rights, Respect and Recovery'
- Family inclusive practice should start when visiting GPs or Drug and Alcohol services.
- Flexibility is required around the issue of families not being allowed in the room with their loved ones in services, and approaches can be different.
- Needs assessment of the family does not always have to be done, some local authorities want the individual to ask for one themselves, whereas it should be done automatically.
- LEAP is an example of where family support is offered and well received, but some other services could improve.
- Members highlighted Taskforce should think about how they can get services to link in with SFAD (and local groups), and ensure families have access to these services.

Action –Members are encouraged to share info about SFAD with their networks. Community pharmacy highlighted specifically. CH to consider.

Action – Taskforce to expand on needs assessment and workforce recommendations to ensure they include Families.

Action – For Scottish Families staff to gather case studies, along with good examples of Family Inclusive Practice and share these with the Taskforce for sharing on Taskforce website.

Action - Scottish Families to provide a plan on better engaging and supporting families for Taskforce consideration.

Action – Scottish Families to share the number of naloxone kits delivered to date via the Click and Deliver service with Taskforce members.

Update on Stigma Work

10. A member of staff from the Scottish Government Drugs Policy Division who is the lead on Stigma work provided an update on the work to date:

- The team are currently looking at how the Stigma charter will get picked up by Scottish Government and then be a Scottish Government Charter.

- A pack is being developed that would go out to help people organise events, and to develop discussions on a stigma charter for their organisation. This will be circulated to the group shortly.
- Support will be given to a range of people in services, including Department of Working Pensions (DWP) and bigger institutions that are not as embedded in this field of work.
- Currently looking to see if something can be done around smaller organisations creating their own charter e.g. providing funding.
- The group want to ensure Lived/Living experience and Families are included in decision making when it comes to making charters.
- A Stigma Campaign is due to launch at the end of November with the ambition to continue throughout the national mission.
- A website will be developed on the back of this campaign linked to that messaging and that will house the stigma charter. There would be training packages available on how to create charters, and the aim is that charters from different organisations can be shared on here.
- Robust evaluation will be done next year to assess the success of the campaign.

Discussion underway from taskforce member AM and BW with the University of Dundee regarding using the DDTF sample charter. Action: GCW to link in to this initiative.

Ethypharm naloxone update – Process and next steps

11. A colleague from Scottish Government Drug Deaths Taskforce Support Team who leads on this work provided an update on the Ethypharm naloxone process.

- Provided background on the agreement the Taskforce previously made with Ethypharm, receiving 10,000 free naloxone kits.
- Confirmed that the process is to link with naloxone leads across local areas to agree a number of kits and what services these will go to, along with what the aim is by having these extra kits.
- Quarter one and two have all successfully been delivered and in total 5,100 have been allocated.
- For quarter three, the remaining 4,900 kits will be allocation to local areas by being split equitably.
- The lead will write out to local area naloxone lead again to capture an understanding on the impact the total number of kits has had on the area, where these have been used, and how many from the total number have been used.
- This information will all then be collated and can be shared with the group.
- The aim is for quarter three allocation to be sent out before the end of September.

Action: A one page summary to be provided to DDTF members on kits distributed with detail of the type of service and geographical location.

Naloxone Consultation Response

12. A member of staff from the Drug Death Taskforce Support Team provided an update to the group around the naloxone consultation response.

- The deadline for responses to the consultation is 28th September, all members should submit individual responses and the Taskforce will submit a combined response.

- There are currently 69 non-drug services who supply naloxone on the Scottish Government register.
- The aim is to make naloxone available to anyone who may witness an overdose and make as widely accessible as possible.
- The Drug Law Reform Report includes recommendations around the reclassification of naloxone from a 'Prescription Only Medicine' to a 'Pharmacy' or 'General Sales List' medicine, in particular changing the law to make Nyxoid a 'General Sales List' medicine.
- The Taskforce are keen to promote the reclassification of naloxone or at the very least a replication of the current arrangement set out in the Lord Advocate's statement of prosecution policy.

Action – Members to provide information to be included in the Taskforce naloxone response. Secretariat will then collate responses and create draft submission.

Action - Guidance on aspects people might want to include in individual consultation responses will be shared with members.

Action – Secretariat to formulate a recommendation to be shared at the next meeting on having dedicated time for a naloxone lead in every health board as currently this role is voluntary.

Social Care Review Update

13. Neil Richardson, the Vice Chair, provided an update on the Social Care Review.

- A background on the Social Care Review was provided. The intention is to act on bringing a National Care Service by the end of Parliament. The first stage of consultation is out now.
- Themes in the report were covered, and sections that may be of relevance and of interest to the Taskforce were highlighted for awareness.
- There has been an agreement to collate a submission and Neil confirmed he is happy to pull together a final submission on behalf of the Taskforce amid some suggestions and discussions. The date for this has been extended to the 2nd of November.
- Anyone who wishes to contribute to the submission, can contact Neil.

Action – Secretariat and Neil to bring group together and formulate responses to the consultation.

Presentation from Alison Munro/Peter McCulloch from University of Dundee

14. Alison Munro and colleague Peter McCulloch gave a presentation to the group on : *The results of an international systematic review examining barriers and facilitators to medication assisted treatment and injecting equipment provision*

- Some background information and the aims of this study were highlighted to the group.
- A presentation of slide shows was then shared by Peter. Evidence suggests Medication assisted Treatment (MAT) and Needle and Syringe Programmes (NSP) are successful.
- The study includes understanding the barriers around both of these methods, and findings were shared throughout the presentation.
- Findings included the need for a client centre approach, more outlets and choice and the implementation of One Stop Shops.

- Summary of major key implementations was given, and it was confirmed that MAT and NSP services need to address the barriers that have been documented over the years in various studies.
- Key issues to be addressed are: power and control, stigma, goals, needs, preferences and knowledge.
- Papers are being prepared for publication in a peer-reviewed publication and it is hoped the research will be published soon.

In discussion the DDTF were reassured that MAT standards were in line with this latest and comprehensive synthesis of international evidence.

Surveillance Updates

15. Tara Shivaji, Public Health Scotland representative, gave an update to the group in relation to Surveillance work:

- A report was recently sent to members and there is little deviation from that report in recent trends.
- The team have been looking at harm patterns available in Scotland for the month of August, and there is nothing unusual in non-fatal overdoses or suspected drug related deaths.
- Some specific substances have been identified, which are not typically investigated by toxicology but are now looking at this.
- Quarterly drug related death statistics will begin to be published with the first publication 14 September.
- The Chair highlighted that during a recent visit to a service, a new substance has appeared in a local area and believes we should be looking at ways on how this information can be shared with other areas to make them all aware. A potential forum to share information before it becomes official and in the public domain was suggested.
- This is in the development stages but PHS will keep members up to date on progress.
- The Scottish Government Analytical team confirmed they are working on collating further information on health board variation in DRD and the role of methadone and changes in prescribing/dispensing during Covid, and will share when completed.
- The Taskforce agreed the Surveillance reports and updates they receive are very useful and appreciated.

Summary and Any Other Business

16. The Chair highlighted this was the end of the meeting, and opened to members if there was any other business to discuss before drawing meeting to a close.

- The Scottish Government support team confirmed there had been discussion around formalising individual roles of members and offering remuneration if not covered by current employment. Informed members they should be receiving letters from the Minister soon.
- Highlighted 14th September publication of suspected Drug Related Deaths, this will include suspected Drug Death information based on Police Scotland data and will be published by Scot Gov. Data will be published quarterly going forward.