

## Drug Deaths Taskforce Recommendations

Since the Taskforce was formed in 2019, a number of recommendations were made by the Taskforce to a range of stakeholders, from Government, to the First Minister and the Lord Advocate.

These recommendations relate to a wide range of topics that the Taskforce believe would have a positive impact on tackling the drug problem faced in Scotland and ultimately save lives.

Below are details of all recommendations from the creation of the Taskforce in 2019, to present.

Accountability and Governance	Date of Recommendation
The Taskforce recommended that Government extend the renewed leadership and call for action (from the National Mission) to include local leadership and organisation leads.	12 January 2021
The Taskforce highlighted the challenges faced in relation to delays in toxicology and asked for Government to act now to resolve this. The Taskforce will work closely with Government to develop real time monitoring to enable effective decision making.	12 January 2021
The Taskforce highlighted concerns regarding accountability and outlined that Government should hold the leadership of statutory services and local delivery leaders to account. This was highlighted in the Dundee Commission but also has been a recurring theme when communicating with ADPs.	12 January 2021
Assertive Outreach	Date of Recommendation
Work needs to be undertaken in identifying those not in treatment, noting the increased harm this population already experience, and the likely disruption to supply of drugs ( <i>during the Covid-19 pandemic</i> ).	16 April 2020

Outreach support should initiate same day access to Opiate Substitution Therapy (OST) alongside provision of Take Home Naloxone (THN) supply.	16 April 2020
Outreach support should maintain therapeutic support through phone and text, particularly for those receiving OST unsupervised and those in self-isolation. This can be done through the 'NHSNearMe' technology which the majority of GP practices have now installed.	16 April 2020
The Taskforce recommends that Scottish Government make additional resources available for local organisations to provide service users with the means to maintain communication, e.g. mobile phones with credit/data packages, to ensure users can still receive a consistent level of support.	28 July 2020
Peer support and advocacy are instrumental in accessing appropriate services, and the Taskforce recommends that the Government support the development of a national peer support programme that can be put in place without delay.	12 January 2021
The Taskforce will continue to explore the use of navigators and peer support workers and make a recommendation on the best model for a national navigator service to support individuals to access treatment, including in justice settings. In the interim, the national expansion of the MAV hospital navigator programme should be pursued, taking a particular interest in substance use.	6 September 2021
<b>Benzodiazepines</b>	<b>Date of Recommendation</b>
Addressing the availability of benzodiazepines should be a key priority of this Government and the Taskforce would expect them to work with Police Scotland to reduce the availability of these, as well as supporting harm reduction initiatives	12 January 2021
Interim guidance has been produced by the Benzodiazepine Working Group. A series of consensus building events will take place before final guidance is published.	August 2021

The production of illicit pills, including atypical benzodiazepines, cause significant harm. Progress is required to ensure the regulation of pill presses, including a suitable licensing system to reduce related harm.	6 September 2021
<b>Covid 19</b>	<b>Date of Recommendation</b>
The Taskforce highlighted the importance of maintaining service-level provision of drug and alcohol services during the COVID-19 outbreak and to plan for additional capacity to these services on the basis of public health surveillance.	16 April 2020
Provide risk assessment of the most vulnerable to ensure safety and that emerging needs are met at times when individuals need to self-isolate, or are at increased risk and subject to shielding guidelines due to underlying health conditions.	16 April 2020
Consider people who use drugs (PWUD) as a priority group. This would ensure they receive COVID-19 testing, in particular those who are homeless/in prison/prisoners on release etc.	16 April 2020
Accommodation and prioritisation of rough sleepers to enable safe social distancing measures and self-isolation amongst this population, accompanied by proactive testing for COVID-19 to allow appropriate measures to be put in place and 'cohorting' of accommodation to be considered.	16 April 2020
Ensure a range of in-reach services including OST and THN supply in hostels and requisitioned sites, such as hotels.	16 April 2020
<b>Crisis and Stabilisation</b>	<b>Date of Recommendation</b>
The Benzodiazepine working group of the Taskforce recommended that the Scottish Government should urgently consider allocating funding resources for nationally commissioned safety and stabilisation services.	15 <sup>th</sup> September 2021

<p>This would include:</p> <ul style="list-style-type: none"> <li>○ The development of appropriate pathways to embed a stabilisation service in the current and developing treatment and support landscape</li> <li>○ Further feasibility and scoping work to cover any gaps in the existing evidence.</li> <li>○ Commitment to the development of the evidence base for safety and stabilisation resource through lessons learned.</li> </ul>	
<b>Dispensing and Prescribing</b>	<b>Date of Recommendation</b>
<p>As part of the Taskforce’s recommendations on Covid (16 April 2020), the Taskforce highlighted that:</p> <ul style="list-style-type: none"> <li>○ A rights-based approach should be taken, prioritising OST as an essential medicine.</li> <li>○ Safe storage boxes should be provided for the storage of medicines and take home doses.</li> <li>○ There should be ongoing availability of oral toxicology testing to those considered most at risk (e.g. those with unstable drug use or child protection issues) to enable accurate risk assessment around supervision and dispensing arrangements.</li> <li>○ Home delivery outreach networks should be established - using a mixture of redeployed staff from other services, third sector and volunteers.</li> <li>○ The use of long acting depot injection should be investigated in OST preparations, given its ability to aid initiatives such as self-isolation/quarantine.</li> <li>○ Local formularies should be reviewed as a matter of urgency to ensure they contain the range of licensed, approved OST medicines (methadone, buprenorphine in its various forms, including injectable long-acting preparations) so that there is equity of provision and choice for patients and prescribers.</li> <li>○ Laboratory facilities e.g. for oral fluid testing and oral toxicology testing needs to be maintained to ensure treatment is optimal.</li> <li>○ Preparation of alternative systems of delivery should pharmacy provision be further depleted e.g. central stocks of OST medicines; skeleton staff to provide OST &amp; IEP despite being closed to general public; expansion of outreach networks and delivery vehicles.</li> </ul>	<p>16<sup>th</sup> April 2020</p>

<ul style="list-style-type: none"> <li>○ Identify pharmacies with high patient numbers receiving OST for site-specific contingency plans to be developed.</li> <li>○ Ensure that all health boards include OST dispensing and IEP provision as essential pharmacy services to be maintained as core elements of the emergency response.</li> <li>○ Support pharmacies with volunteers to help manage queues.</li> </ul>	
<p>The Taskforce supports prescribers' call for a review of the regulations on dispensing and prescription forms to take account of clinical and technological advances since implementation in 2001.</p>	6 September 2021
<p>The Taskforce recommended that the UK Government extends the temporary Covid-19 measures put in place to support the resilience of medicine supplies and treatment continuity, allowing Scottish Ministers to implement an immediate response to local emergencies within the existing legal framework.</p>	6 September 2021
<p><b>Diversion from Prosecution</b></p>	<p><b>Date of Recommendation</b></p>
<p>The Criminal Justice and the Law Subgroup is working on recommendations around diversion from prosecution and will report between July 2022 and December 2022.</p>	
<p><b>Drug Checking</b></p>	<p><b>Date of Recommendation</b></p>
<p>Drugs checking facilities may have an important role in empowering individuals to make safe choices. They also potentially provide an early warning system. The Taskforce recommend the Scottish Government work with the Home Office to review the current drug licencing regime to ensure that it is open, transparent and accessible, in line with a health based approach.</p>	6 September 2021
<p>The Scottish Government should support drug testing nationally and work with local services to ensure it is available.</p>	6 September 2021

<b>Drug Paraphernalia</b>	<b>Date of Recommendation</b>
The UK Government should amend the Misuse of Drugs Act 1971 or Misuse of Drugs Regulations 2000 to allow for the legal provision of a wider range of drug paraphernalia through harm reduction and treatment services, to enable safer drug consumption.	6 September 2021
In the interim, the Scottish Government should explore all options to support this provision.	6 September 2021
<b>Drug Testing and Treatment Orders (DTTOs)</b>	<b>Date of Recommendation</b>
Scottish Government should review DTTOs to assess how they have been used, their outcomes and whether they are the most effective mechanism to support an individual's recovery and reduce recidivism rates.	6 September 2021
Scottish Government should also work with the Judicial Institute to improve understanding of how to best support an individual's recovery journey.	6 September 2021
<b>Equality Act 2010</b>	<b>Date of Recommendation</b>
A transparent review is needed of the exemption set out in S3.1 of the Equality Act 2010, (Disability) Regulations 2010 to explore the impact of this exemption and whether it best serves people suffering from addiction, what the implications of removing it and making addiction a protected characteristic would be.	6 September 2021

<b>Families</b>	<b>Date of Recommendation</b>
<p>The Taskforce welcomes the engagement with its drug law reform report from family members and feel their contributions reflect strongly the direction and ambition of the Taskforce. The Taskforce will continue to learn from the projects funded and will make further recommendations on options for treatment, support and recovery.</p>	<p>6 September 2021</p>
<b>Funding</b>	<b>Date of Recommendation</b>
<p>The Taskforce clearly outlined in our meeting with the Minister and First Minister that additional funding should be made available for grass roots organisations and community-based projects alongside services to support vulnerable people.</p>	<p>12 January 2021</p>
<b>Information Governance</b>	<b>Date of Recommendation</b>
<p>The Taskforce outlined to the First Minister some of the challenges faced with data sharing which the Government must work urgently to resolve, if lifesaving interventions are to progress.</p>	<p>12 January 2021</p>
<b>Law Reform</b>	<b>Date of Recommendation</b>
<p>A root and branch review of the Misuse of Drugs Act is needed, taking a public health approach, and reforming the law to support harm reduction measures.</p>	<p>6 September 2021</p>
<p>If the UK Government are not willing to reform the Misuse of Drugs Act, it should commit to exploring all available options openly with the Scottish Government to enable Scotland to take a public health approach.</p>	<p>6 September 2021</p>

Meanwhile the Scottish Government should do more to maximise flexibility under the current legislation.	6 September 2021
Further consultation should be undertaken in the second phase of the drug law reform engagement exploring: <ul style="list-style-type: none"> <li>○ The public's perceptions of drug policy and opinions on what our guiding principles should be when developing policy and legislation.</li> <li>○ People's thoughts on relaxing the laws around drug possession offences, such as decriminalisation or legalisation and regulation.</li> <li>○ Gauging public support for the harm reduction measures currently restricted by the Misuse of Drugs Act or related regulations.</li> <li>○ User engagement to understand how the law impacts people's willingness to access services.</li> </ul>	6 September 2021
<b>Lived and Living Experience</b>	<b>Date of Recommendation</b>
Extend inclusion criteria for Scottish Government national helpline (0800 111 4000) for vulnerable people to include PWUD.	16 April 2020
More needs to be done to engage with those who do not currently access services. The Taskforce therefore recommend that a network of people with <i>living</i> experience is established in the next 6 months	12 January 2021
<b>Medication Assisted Treatment</b>	<b>Date of Recommendation</b>
The implementation of MAT Standards must be scaled up at pace. To enable this the Taskforce would recommend formal standards and indicators are developed by Health Improvement Scotland by the end of 2021. Scottish Government will have a vital role in supporting this roll out by ensuring that Chief Officers take accountability for delivery of the standards at local level.	12 January 2021



The Taskforce supports the devolution of licensing for Heroin Assisted Treatment (HAT) premises to allow the single-office co-ordination of premises and prescriber licensing and the Scottish Government should support and promote a national roll out for HAT.	6 September 2021
<b>Naloxone</b>	<b>Date of Recommendation</b>
Maximise naloxone distribution through all channels, including on release from prison and through families, with the possibility of using third sector organisations and recovery communities.	16 April 2020
Make allowance for other relevant organisations to hold/distribute naloxone during this pandemic, even if only for a specific timescale.	16 April 2020
Request that all 'first responders' to drug overdoses (emergency services) are naloxone trained.	16 April 2020
Naloxone is a lifesaving drug, which the Taskforce have made significant progress in increasing its distribution through channels where its use can save lives. There is still capacity to increase this further, and this should be developed with urgency.	12 January 2021
The UK Government should support permanent reclassification of naloxone to make it easier to provide supply.	6 September 2021
In the absence of a full reclassification, the Scottish Government should work closely with the UK Government to ensure that the changes planned reflect the breadth of the existing statement of prosecution policy in Scotland.	6 September 2021
In the interim, the Scottish Government should also engage with the Lord Advocate in relation to the extension of the current statement of prosecution policy.	6 September 2021

<p>The Taskforce, at a minimum, recommends a replication of the Lord Advocate’s statement of prosecution policy. However, the Taskforce believes that it would be even more beneficial for naloxone to be reclassified from a ‘Prescription Only Medicine’ to a ‘Pharmacy’ or a ‘General Sales List’ medicine.</p>	<p>28 September 2021</p>
<p><b>Non-Fatal Overdose</b></p>	<p><b>Date of Recommendation</b></p>
<p>Non-fatal overdose pathways are vital to catching the most at-risk people early and providing them with the support needed to avoid a fatal overdose. The Taskforce would recommend that these should be expanded nationally, learning from the tests of change ongoing through the Taskforce.</p>	<p>12 January 2021</p>
<p><b>Policing</b></p>	<p><b>Date of Recommendation</b></p>
<p>Practical policing decisions, such as physical patrols can influence people’s perceptions and decisions about drug use and service engagement. Therefore the possibility of tolerance zones should be explored where police agree not to make active patrols or use stop-and-frisk powers in the vicinity of certain services</p>	<p>6 September 2021</p>
<p>The Taskforce would support consideration of the extension of Recorded Police Warnings in relation to drug possession offences to cover all classifications of drugs and concludes that there would be value in work by the Scottish Government, Police Scotland and COPFS to increase understanding of the scheme.</p>	<p>6 September 2021</p>
<p><b>Prison</b></p>	<p><b>Date of Recommendation</b></p>
<p>The Taskforce recommends that adequate throughcare provision is available to prisoners on liberation including: access to GP (information about the ‘Access to Healthcare – GP Registration Cards’ for vulnerable people accessing GPs available here - <a href="#">Access to Healthcare</a>) and continuity of OST provision.</p>	<p>16 April 2020</p>

Provision of naloxone for all prisoners with a history of substance use on liberation, and their families (exploring distribution of intra-nasal naloxone might also be an option) is essential.	16 April 2020
Further work is needed to ensure holistic support is provided for people with multiple complex needs, including exploring the reintroduction of throughcare support officers. The Taskforce asks that options for sustainably funding a reinstated throughcare service are explored	6 September 2021
Scottish Government should work with the Scottish Prison Service to end Friday liberations from custody, implementing a blanket policy of no liberations on a Friday or in advance of a public holiday. It should also explore ways to support individuals released directly from custody.	6 September 2021
Further exploration of alternatives to remand and imprisonment should be considered, including bail supervision and residential rehabilitation.	6 September 2021
<b>Public Health Surveillance</b>	<b>Date of Recommendation</b>
Public Health Surveillance and the need for real-time information and data should be prioritised. This includes information on the impact of COVID-19 on drug related deaths, but also the impact on illicit drug supplies and levels of quality. This will better enable Health Boards, ADPs and service providers to provide a suitable response.	16 April 2020
<b>Safer Drug Consumption Facilities</b>	<b>Date of Recommendation</b>
The Taskforce supports the introduction of properly resourced safer consumption facilities in Scotland. The Drugs Death Taskforce recommends that the UK Government consider a legislative framework to support their introduction. In the interim, the Scottish Government should explore all options within the existing legal framework to support the delivery of safer consumption facilities.	6 September 2021

The Scottish Government should also take steps to increase public understanding of such facilities.	6 September 2021
<b>Stigma</b>	<b>Date of Recommendation</b>
Scotland should have a national and local mission statements on addressing stigmatisation – including self-stigma, stigma by association, structural stigma and public stigma.	30 July 2020
All responses to problem drug use must be co-developed or co-produced with those who deliver services to people with drug problems and people with lived experience.	30 July 2020
All responses to problem drug use must pay specific attention to clients and groups who are most likely to experience stigmatisation.	30 July 2020
All services must help reframe the narrative around problem drug use wherever possible. Drug services should celebrate the success of recovery communities and focus on and communicate strong messages about the positive outcomes PWDP can expect when engaging with them.	30 July 2020
Services must actively promote opportunities for anyone – from the client group, from families and communities and from the workforce – to be able to challenge stigma or stigmatising behaviour, process or environments.	30 July 2020
<b>Recommendations for journalists and editors:</b> <ul style="list-style-type: none"> <li>• Use positive imagery.</li> <li>• Adopt People first language.</li> <li>• Use your article as an opportunity to educate.</li> <li>• Always include support service information.</li> <li>• Learn about lived experience and the impact of stigma.</li> </ul>	30 July 2020

The Taskforce called for First Minister support for the Stigma Strategy and outlined that the stigma charter (in development) should be adopted by all public bodies and services.	12 January 2021
The Taskforce recommends the Scottish Government works with justice partners to support the adoption of the Stigma Strategy, trauma informed and family inclusive practice and the adoption of distress based interventions.	6 September 2021
<b>Whole Systems Approach</b>	<b>Date of Recommendation</b>
Access to treatment at the weekend continues to be a considerable gap in delivering a whole systems model of care. The Taskforce therefore recommends that Scottish Government pursue increased weekend access to treatment and support.	12 January 2021
<b>Women</b>	<b>Date of Recommendation</b>
The Taskforce will be making recommendations on specific support for women following the publication of its women's group report prior to the end of 2021.	
<b>Workforce</b>	<b>Date of Recommendation</b>
To ensure workforce capacity for injecting equipment provision (IEP), opioid substitution therapy (OST) and take-home naloxone (THN) delivery and ensure non-fatal overdose follow-up pathways are maintained. These services add value to necessary COVID-19 response measures as well as mitigate unintended consequences, and so prevent additional burden on the NHS.	16 April 2020
A costing exercise should be undertaken, reflecting that a push to increase the number of people in services must recognise the increase pressure this will put on these services and the needs that may flow from it. This would enable costing of a long-term sustainable system of care. This includes workforce modelling options.	12 January 2021

Building a skilled and motivated workforce is essential, but there has been little central investment in professional development. The Taskforce therefore believe that a workforce review is required. This would enable clear career development pathways to be defined including core skills and competencies.	12 January 2021
There is a need for a managed clinical care network, as was established in response to the Hepatitis C emergency. This network should include health boards and relevant professional networks	12 January 2021