



Agenda Item 4.1

Meeting	Policing Performance Committee
Date	07 December 2022
Location	Video Conference
Title of Paper	Naloxone National Roll Out
Presented By	ACC Ritchie, Partnership, Prevention and Community Wellbeing
Recommendation to Members	For Discussion
Appendix Attached	No

PURPOSE

The purpose of this paper is to provide an update to the SPA regarding the nationwide implementation of Police Scotland carriage of Naloxone.

Members are invited to discuss the contents of this report.

1. BACKGROUND

- 1.1 Police Scotland remains committed to improving the safety and wellbeing of people across the country. Clearly, given the consistent increase in drug related deaths, there is a need to drive change in how drug related harm is addressed in Scotland. Public bodies, particularly frontline responders, must consider new approaches to tackling the crisis and Police carriage of naloxone on a national level offers a real opportunity for Police Scotland to demonstrate a positive, proactive commitment to addressing drug related harm.
- 1.2 The Naloxone Test of Change trialled by Police Scotland delivered positive results and benefits to Police Scotland, the police officers involved and the public and communities they serve. By developing appropriate harm-reducing measures to tackle problem drug use, the national carriage of naloxone has the potential to be a new chapter in Police Scotland's approach to drug harms.
- 1.3 On Wednesday 9 February 2022 the independent Evaluation Report of the Test of Change was presented to the Chief Constable and Strategic Leadership Board. The report recommended that Naloxone training should be made compulsory for all Police Scotland officers and staff, including police custody and security officers (PCSOs).
- 1.4 The evaluation recognised that combatting the stigma around drug addiction is a crucial component of fighting the opioid epidemic and recommended that Naloxone training should be complemented by compulsory in-depth training/education to develop knowledge and understanding of problematic drugs use and address stigmatising attitudes towards drug users. Developing a stigma training course in Police Scotland was indicated as a particular objective in the Scottish Drugs Strategy and the results of the evaluation lend support to this.
- 1.5 The findings of the evaluation indicated that the majority of police officers who participated in the research element held a positive view of the carriage and administration of naloxone by Police. The high uptake of naloxone kits by officers who attended the training presents a general indication of the acceptability of the intervention.
- 1.6 Approval was subsequently granted for all Police Scotland operational officers, up to and including the rank of Inspector, to be trained and equipped with Naloxone as standard personal equipment. Naloxone is to be carried by these officers during operational duties in line with the Naloxone policy, which was also endorsed.

- 1.7 All relevant stakeholders represented on the Naloxone Delivery Steering Group (NDSG) were updated with the decision. The NDSG will be maintained for the foreseeable future to provide support, scrutiny and collaborative views throughout the National Project.

2. FURTHER DETAIL ON NATIONAL ROLL OUT

- 2.1 The national rollout process will see the procurement, training and delivery of Naloxone to around 12,500 Police Scotland Officers. The Scottish Government has agreed to fully fund the project which entails the provision of Naloxone to Local Health Boards throughout Scotland, allowing each Health Board to provide naloxone to policing divisions when required. Further funding has been provided to equip all Police Scotland officers with individual pouches to carry naloxone as part of their standard uniform.
- 2.2 The Scottish Government provided funding for two officers to continue work within PPCW's Naloxone Co-ordination Unit has also been extended to December 2023, these officers will directly oversee the National rollout process, engaging with Divisions following each administration.
- 2.3 The national rollout began on 31st August 2022 (International Overdose Awareness Day) and will see probationary Officers receiving training during their initial Scottish Police College course.
- 2.4 Additionally, all current operational officers will complete a Moodle training package which was produced in collaboration between Naloxone Coordination and the Scottish Drugs Forum. This bespoke training package is now live for officers in divisions next to receive naloxone, the package includes learning on Naloxone and the associated legislation for legal administrations of the drug, how to administer Naloxone, signs of a drug overdose and targeting the stigma often associated with substance use addiction.
- 2.5 Further to this, each officer will receive Naloxone refresher training during their annual officer safety training.
- 2.6 Each policing division has previously identified divisional Champions (minimum rank of Inspector) who have been provided with a 2 hour face to face training session on Naloxone and will act as support within Divisions for any Naloxone related questions. They in turn will receive support from PPCW's Naloxone Coordination department.

- 2.7 The Naloxone Coordination department will receive the 12500 naloxone pouches in phased deliveries, this is due to the ongoing conflict between Russia and Ukraine. The department received the first 3000 pouches at the beginning of November. It is expected around 4000 Police Scotland Officers will be trained and equipped with naloxone by mid-December 2022, this number includes officers who took part in the Test of change.
- 2.8 The next shipment of 9500 naloxone pouches is due for delivery during January 2023 with all operational officers expected to be equipped during January-February 2023 (dependent on delivery date of pouches).
- 2.9 Newly trained probationers will receive their naloxone training by staff and leave the Scottish Police College early 2023 equipped with naloxone when they attend their assigned local Policing Division.

3. ADMINISTRATIONS

- 3.1 During the Test of Change, there were 51 administrations of naloxone by police officers throughout the test bed areas. The administrations have continued to increase throughout the test bed areas since the approval and mandatory carriage of naloxone for the national rollout.
- 3.2 The current figure is now 91 administrations by officers throughout various incidents.

Division / Area	Administration incidents
G - Glasgow	27
D- Dundee	37
C - Forth Valley	13
C – Stirling community policing	7
R - Falkirk custody	1
N - Caithness	6
Total	91

- 3.3 The circumstances leading to Naloxone administrations have been varied and includes incidents where officers have happened upon unconscious casualties during patrols or being alerted to an overdose by a member of the public. Other administrations involved persons in police custody, during police Public Order incidents and the execution of a search warrant. Naloxone has also been administered to persons attempting suicide.

A number of people were found in a critical condition and believed to be close to death, however after receiving Naloxone all but 2 showed sufficient response to allow either further first-aid treatment to be administered, leading to that person's life being preserved or them leaving the scene of their own volition.

These other 2 administrations resulted in the subject person being pronounced dead at the scene. Although it is impossible to fully know the status of the person, then due to all available information at scene, it is believed that both people were already deceased on Police arrival. Naloxone was administered to give the best opportunity to protect life.

89 administrations had a successful outcome and there has been no adverse reactions, negative feedback or complaints received following any administration.

4. MEDIA COVERAGE

- 4.1 Police carriage of naloxone has attracted considerable print, broadcast and online media coverage, locally across the test-bed areas, nationally across Scotland, UK-wide, and overseas. Further significant social media interaction has also been achieved, particularly with the support of partner organisations.

Police Scotland has undertaken a significant volume of communications work, both internally and externally, relating first to the Test of Change and now to the national roll out. The Communications strategy is aligned to the Scottish Government nationwide campaign to raise public awareness of the signs of a drug overdose and the widening availability of naloxone.

- 4.2 The Naloxone micro-site previously established on the organisation's intranet for the Test of Change to ensure officers and staff were able to access the relevant information easily, remains in place and has been updated to reflect the national project.

5. FEEDBACK (COMMUNITIES & PARTNERS)

- 5.1 The national rollout of naloxone is overwhelmingly supported by Scottish Government, who are funding the project, and all key stakeholders and senior strategic stakeholders (with the exception of the Scottish Police Federation). The evaluation report of the Test of Change advised that Community participants also overwhelmingly supported the police carriage of naloxone. Partners, the public and media response to the programme has been extremely positive.
- 5.2 There also continues to be significant interest and enquiries from other police services throughout the UK and internationally, who are either considering carriage of naloxone by their officers, or implementing their own Test of Change. This engagement has provided an opportunity to gather and share information at a local, national and international level.

6. FINANCIAL IMPLICATIONS

- 6.1 The initial cost of equipping all front line officers, up to and including the rank of Inspector, with Naloxone and carriage pouch, will be an estimated incremental cost of £0.5m during 22/23. The figures for the national project are based on purchasing equipment for 12,500-13,500 officers, with the expenditure for both the naloxone kit and pouches subject to the Force Standing Orders and associated procurement routes.
- 6.2 The total estimated cost currently includes both the Naloxone and the accompanying pouch, with both being funded by the Scottish Government. For the following financial years there may be an expectation that Police Scotland would absorb the budgetary pressure however, if there was an opportunity to bid for additional funding, this will be explored further with the Scottish Government

7. PERSONNEL IMPLICATIONS

- 7.1 The Scottish Police Federation and UNISON were represented on the Naloxone delivery steering group and have been fully engaged throughout the Test of Change and National Roll Out. People and Development have also been consulted regarding during both processes.
- 7.2 The national rollout will include approximately 12,500 officers, with all Police Scotland operational officers, up to and including the rank

of Inspector, being issued with a supply of naloxone and carriage pouch.

- 7.3 Police carriage of Naloxone is relevant to the role of front line officers and also the welfare of those officers.
- 7.4 The findings of the evaluation report indicated that the majority of police officers who participated in the research held a positive view of the carriage and administration of naloxone by Police. The high uptake of naloxone kits by officers who attended the training (81%) presents a general indication of the acceptability of the intervention. The findings of the evaluation report indicate that the naloxone training was effective in developing police officers' knowledge and attitudes about drug overdose and naloxone administration. It was also effective in increasing the acceptability of naloxone administration as part of a police officer's role.
- 7.5 A police officer's general duty is to protect life, from the evaluation findings, Naloxone was seen by officers as an opportunity for proactivity around this duty. For many officers this duty to save a life overcame any other reservations or concerns.
- 7.6 Naloxone can also potentially reduce demand on officers; in the short-term through negating the need for subsequent procedures should a death occur and in the long-term, increase opportunity for engagement between drug users and treatment services. Naloxone provides an opportunity to link people who have recently overdosed into support services.
- 7.7 Furthermore, the national project offers real opportunity to positively influence officer attitude to drug use and people who have a drug dependency, thereby reducing associated stigma and increasing positive community engagement.
- 7.8 Via the evaluation and personal testimony from police officers, there is evidence that provides that in the vast majority of cases the training delivery increased officer understanding and awareness of the benefits of naloxone and drug overdose incidents, whilst positively influencing their attitudes towards persons who have a drug dependency. Several community participants have shared positive accounts of police officers who were proactive and compassionate in their support of people who use drugs.
- 7.9 Throughout the Test of Change numerous individual officers from around the country contacted Naloxone coordination volunteering to carry naloxone. Some of the reasons cited included a spike in drug related hospitalisations and / or deaths in their area of work, a

willingness to support the harm prevention efforts of health services and to encourage better engagement between the police and the drug community. The requesting officer's regular engagement with drug users and personal experience of dealing with overdose incidents figured prominently in the requests.

Since the decision to equip all front line officers with naloxone officers have continued to contact Naloxone coordination with enquiries, volunteering to carry naloxone at the earliest opportunity and commending the decision to equip officers nationally.

- 7.10 There has also been officers who had initially chosen not to carry naloxone after receiving the training input during the test of change, but altered this decision, contacting Naloxone coordination to arrange to be issued with a pouch and kit. Reasons provided for this change included discussion with colleagues, attending overdose incidents and personally witnessing the positive effects of naloxone.

8. LEGAL IMPLICATIONS

- 8.1 Police Scotland Legal Services is represented on the DSG and they have been fully engaged throughout the development of this proposal.
- 8.2 The Principal Solicitor with Police Scotland's Legal Services Department has stated that, *"the decision whether to administer Naloxone to an unconscious member of the public should be made in the same way as any decision to administer first aid treatment which police officers are trained to provide. In each case the officer will require to determine if the administration of Naloxone is appropriate, based on their assessment of the circumstances and the training which they have received. Police Officers are personally liable for the decisions they make whilst on duty. In terms however of Section 24 of the Police and Fire Reform (Scotland) Act 2012, the Chief Constable is liable in respect of any unlawful conduct on the part of a Constable. In addition the Scottish Police Authority must pay damages and expenses awarded against the Chief Constable in any action which is raised against the Force as a result of this Section"*.
- 8.3 Any administration of intra-nasal Naloxone by police officers is intended as an immediate first aid intervention to preserve life, in accordance with the Right to Life in terms of Article 2 of the European Convention on Human Rights and the Human Rights Act 1998. It is also aligned to the legal duty of all police officers detailed within the Police and Fire Reform (Scotland) Act 2012.

- 8.4 The administration of Naloxone by an officer will not routinely be considered for referral to PIRC. This is a policy decision made by PIRC that acknowledges the administration of Naloxone, to potentially save a life, will not be a causal or contributory factor in any subsequent harm to the recipient. Should a person suffer a fatal overdose, the presence, or not, of Naloxone will have no bearing on whether or not the matter is treated as a death following police contact. Current policies and process will not be affected or require amendment.
- 8.5 In 2005, Naloxone was added to the limited list of drugs contained within Regulation 214(2) Schedule 19 of the Human Medicines Regulations 1968 that could be administered by anyone, for the purposes of saving a life. This legislative change was the impetus for the development of a number of local pilots in Scotland and formed the basis for the subsequent national 'Take Home Naloxone' (THN) programme. This has allowed a greater distribution of Naloxone via third sector organisations to members of the public without consent from the person at risk of overdose. Police officers are not exempt from this legislative framework.

9. REPUTATIONAL IMPLICATIONS

- 9.1 The carriage of Naloxone intranasal spray allows Police Scotland officers to have a potentially lifesaving option available to them in life threatening situations. The carriage has already had significant unintended impact with organisations and members of the public requesting Naloxone through the Scottish Governments National Naloxone programme as a direct result of Police Scotland's Test of Change.

10. SOCIAL IMPLICATIONS

- 10.1 Evidence submitted by charity, Scottish Families Affected by Drugs and Alcohol has already demonstrated that the police carriage has influenced the public to carry Naloxone. This has included members of the general public, police officers from various constabularies when off duty and private organisations expressing their desire to carry Naloxone. This approach is one tool officers will have at their disposal to support some of the most vulnerable members of society, thus challenging both barriers and stigma alike.

11. EQUALITIES IMPLICATIONS

11.1 Engagement has been undertaken with the Force Equality and Diversity Advisors, in respect of the proposal and any potential impact on equality and human rights. The assessment indicates a positive impact on all areas of equality, diversity and human rights.

12. ENVIRONMENT IMPLICATIONS

12.1 Development of a process to replace expiring naloxone from local health boards who will then distribute these kits to areas of highest use will work towards minimising waste and ensuring best use of this life saving tool. No other environmental impacts have been identified.

RECOMMENDATIONS

Members are invited to discuss the contents of this report.