SCOTTISH POLICE

Agenda Item 2.2

Meeting	SPA Policing Performance Committee
Date	1 September 2021
Location	Video Conference
Title of Paper	Drug Related Deaths Update
Presented By	ACC Gary Ritchie, Partnership, Prevention and Community Wellbeing
Recommendation to Members	For Discussion
Appendix Attached	No

PURPOSE

This report will provide an update for the Committee on work undertaken to reduce Drug Related Deaths (DRDs) and plans to monitor and evaluate the impact of that work

The paper is presented in line with Scottish Police Authority Committee Terms of Reference.

Members are invited to discuss and note the information contained within this report.



1. BACKGROUND

- 1.1 The significant harm caused by the use of drugs in Scotland continues to present a considerable challenge for individuals, communities and the wide range of services and stakeholders working to reduce that harm.
- 1.2 The Police Scotland performance report for October to December 2020, that was submitted to the Committee and discussed at its meeting of 9 March 2021, described the work being undertaken to address drug related deaths (DRDs) in Scotland. This report provides some further detail on that work.

2. FURTHER DETAIL ON THE REPORT TOPIC

2.1 Police Scotland's **Drug Strategy Board** (DSB) is led by ACC Gary Ritchie, Partnership, Prevention and Community Wellbeing. The Board provides strategic oversight, governance and policy direction in relation to Police Scotland's prevention, intelligence and enforcement activities relative to drug and substance misuse across the country.

The DSB has a defined vision, membership and supporting substructure, via a Drug Harm Prevention Sub-Group and an Enforcement Sub-Group. The Board recognised a clear need for the police to focus on these two elements: Enforcement to disrupt supply and bring offenders to justice; and Prevention, to divert users away from the drugs market and towards support/treatment.

- 2.2 The focus of the DSB is:
 - To set the strategic approach for partnership collaboration to gain a better understanding of Scotland's substance misuse problem and effectively coordinate and direct the Drug Harm Prevention Group in relation to any identified threat, risk and harm.
 - Where necessary engage with partners to tackle drug and substance misuse harms at national and international levels.
 - Provide strategic direction and Coordination of tactical and operational responses to drug and substance misuse harms by local policing divisions and specialist divisions.
 - Provide strategic oversight of Police Scotland's drug related communication strategy.

It is recognised that to deliver the best possible outcomes, prevent substance harm and reduce drug related deaths, partnership working is key. The success of the DSB strategy is dependent on PSOS's ability to work with partners both internally and externally. The following groups, teams and departments though carrying their own portfolios and work streams, work together and share information which provides direction of travel for each area to contribute to achieving the overall aim of reducing drug related deaths.

2.3 The **Drug Harm Prevention Group** is chaired by Chief Superintendent Linda Jones and, with partners, focuses on understanding the level and type of drug and substance misuse activity at a local and national level. It monitors trends in relation to drug and substance misuse through the creation of local and national intelligence profiles and reports to the Drugs Strategy Board.

The group's main objectives include developing new substance harm prevention approaches, which will support the Drug Harm Taskforce and align to the Scottish Governments Rights, Respect and Recovery; Alcohol and Drug Strategy.

This will be achieved through enhancing opportunities for relevant data sharing around drug related harm, to support the wider public health surveillance and allow for early identification of emerging risks/trends.

The group discuss and implement ways to maximise referral pathways, for people who use drugs, towards appropriate support services. They consider innovative multi-agency approaches to engagement with children and young people, to raise awareness of substance harm and support positive life choices. They also consider ways to reduce the effect of stigma, through awareness raising and adopting a public health approach.

2.4 At the beginning of 2021 a **Scottish Drug Harm Threat Assessment** (DHTA) was commissioned by Detective Superintendent Garry Mitchell, Specialist Crime Division.

The DHTA focussed, and provided recommendations on five key areas:

- Prevalence of Drug Type
- Partner Contributions
- Intelligence and Criminal Investigation

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- Conviction and Reconviction
- Correlation with Deprivation.

The DHTA recognised the correlation between harm prevention and, intelligence and criminal investigation, and how the two must run in parallel for each to be effective.

The DHTA identified the prevalence of synthetic drugs in DRDs and recommended focus shift from Class A drugs, such as Cocaine and Diamorphine, towards synthetic drugs.

In response to this threat assessment, a multi-agency orientated task force was established by Police Scotland to examine the harm associated with the illegal consumption of synthetic drugs, particularly benzodiazepines, across Scotland.

This shift in focus has seen increased operational activity resulting in the recovery of pill presses, commodity and other materials used in the manufacture of synthetic drugs. It has also identified companies involved in supplying pill presses to Organised Crime Groups and looks at ways to disrupt this activity through consultation with appropriate partners including Trading Standards.

2.5 The **Drug Harm Task Force** consists of dedicated intelligence staff based within the National Intelligence Bureau. Since implementation, work has been ongoing to capture and evaluate the full circumstances of all DRDs, nationally, since the start of 2021. This involves collation and review of each death report submitted to COPF(S), review of productions, including phones and other electronic devices, witness statements and capturing data in relation to illicit and controlled commodity recovered from the scene, with a particular emphasis on benzodiazepines and synthetic drugs.

This holistic approach enables greater opportunity for the identification of trends and patterns in DRDs and the identification of clusters within ward areas and key nominals of interest. This, in turn facilitates enhanced intelligence development and additional investigative opportunities, rather than DRDs being investigated in isolation.

2.6 The **Substance Harm Prevention Team**, which forms part of Partnerships, Prevention and Wellbeing Division lead on Police Scotland's approach at a national level to monitor and reduce drug related deaths and prevent substance harm. They take direction from the DSB and propose, develop and implement new national SPA Policing Performance Committee Drug Related Deaths Update

policy to address substance harms and align with Police Scotland's own drug strategy and the Scottish Governments Rights, Respect & Recovery: Alcohol and Drug Harms strategy. They record drug related deaths nationally via the Drug Deaths database and work closely with local policing Divisions and external partners, including PHS, NHS Scotland, Alcohol and Drug Partnerships and third sector support services, in order to identify any emerging Substance related threats and/or trends.

2.7 Police Scotland operates a **County Lines** strategy which is focussed on delivering its strategic objectives in accordance with the NPCC County Lines Strategy and Strategic Assessment. The aim of the Police Scotland strategy is to provide an overarching framework which will support existing procedures and their reporting mechanisms to ensure a coherent reporting, monitoring and governance framework for all county lines activity.

Their strategic objectives include minimising the current threat of county lines activity throughout Scotland and reduce the associated risk of violence and exploitation towards children, young people and vulnerable adults. This will be achieved through engaging with partners to identify those most susceptible, and vulnerable, to such exploitation and provide an appropriate level of intervention and support.

NALOXONE

- 2.8 The DSB's primary focus in recent months has been on the implementation of the test of change (ToC) that involves officers being given the opportunity to carry Naloxone, a medicine that is administered intra-nasally to reverse the effects of opioid overdose.
- 2.9 The ToC was proposed as part of the wider public health approach to problematic drug use in communities across the country. It is being supported (and funded in part) by the Scottish Drug Deaths Taskforce (DDTF) and will provide an increased evidence base regarding the impact and efficacy of the carriage and use of intranasal Naloxone by Police Officers.
- 2.10 A wide range of partner agencies were involved in the planning, preparation and implementation of the ToC, which has now commenced in three localities, i.e. Dundee, Falkirk and Glasgow (East). Operational officers in these areas were trained in the carriage and use of Naloxone and then given the opportunity to carry the medicine if they wished.

- 2.11 Naloxone training began on 1 March in the Falkirk and Glasgow areas, and commenced in Dundee on 13 April, with the final training session being completed on 5 May 2021. These sessions were delivered by the Police Scotland Naloxone Co-ordination Team, assisted by various partner agencies, e.g. Scottish Drugs Forum and Scottish Ambulance Service, who attended numerous sessions delivering key information to officers within the test bed areas.
- 2.12 Additional training has been delivered to Stirling Community Policing Teams and Divisional Alcohol & Violence Reduction Unit as well as Community and Response officers stationed at Wick and Thurso. Training is currently on-going to Police Custody Officers within the original test-bed areas.
- 2.13 To date (10th August 2021), 776 officers have received training within the three test bed and additional areas. Additional training sessions continue for Probationers and officers transferring to the test bed areas, as well as those who were unable to attend the main sessions. On completion, approximately 830 Police Constables, Sergeants and Inspectors will be fully trained and given the opportunity to participate in the ToC.
- 2.14 The carriage of Naloxone by officers is voluntary and it is encouraging to note that officers have attended training with an open mind, engaged meaningfully in the sessions and made an informed decision. Of the 776 officers who have received the Naloxone training to date, 627 have elected to take part in the ToC, i.e. an uptake rate of 81% combined across the three test bed areas.
- 2.15 A full and independent academic evaluation of the ToC has commenced and will report shortly after the conclusion of the ToC in November 2021. The evaluation involves an element of baseline work, which was carried out in advance of the ToC, with subsequent follow-up at appropriate intervals, as the pilot progresses. It will take into consideration the following factors:
 - police officers' attitudes towards drug use and people who use drugs;
 - Naloxone as a first aid intervention;
 - the effectiveness of Naloxone training;
 - the experience of carrying Naloxone; and
 - feedback from local communities and agencies regarding any impact on stigma.

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The evaluation will allow elements of learning and best practice to be identified and will inform future policy decisions around the wider delivery of Naloxone carriage/administration by Police Scotland officers and staff.

2.16 Since the commencement of training in March, officers successfully administered Naloxone on 33 separate occasions. On each occasion, officers were attending a routine call that police would normally attend or had been flagged down by members of the public, which tends to demonstrate the relevance of the ToC.

DRUGS DEATH TASK FORCE (DDTF): ALTERNATIVE TO CRIMINAL JUSTICE OUTCOME

- 2.17 Police Scotland is committed to the DDTF and continues to work with partners to explore opportunities to reduce harm.
- 2.18 The Criminal Justice and the Law sub-group of the DDTF is sponsoring a ToC to explore a referral service for vulnerable people who use drugs. This service, which commenced on 5th July 2021, will run in parallel with the established Criminal Justice process and will allow officers to refer relevant individuals into support services from the initial point of contact (as opposed to being considered by COPFS or the Court at a later stage in the process). It will be operated in the Inverness area in the first instance, with a view to expansion into additional areas in subsequent years.
- 2.19 This service will introduce persons acting as 'pathfinders' to provide guidance, advice and support for persons referred (note the change of terminology from previously intimated 'navigator' service this has been done to avoid confusion with existing navigator services). The service will be operated by 'Medics Against Violence (MAV)' and recruitment of staff has recently been concluded. Police Scotland Highland & Island Division is closely involved in this process and engaged with stakeholders to deliver the ToC, which will be evaluated by the DDTF.

DDTF: DATA AND INFORMATION

2.20 Police Scotland continues to participate in the Public Health Surveillance sub-group of the DDTF, which is led by Public Health Scotland, with a view to establishing a health surveillance system

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that will quickly recognise and respond to incidences of short to medium term threats to public health and wellbeing.

2.21 In addition, Police Scotland is part of a Scottish Government led working group set up to improve the availability of information specifically relating to DRDs. The Group has developed a publicfacing dashboard, which will be released on a quarterly basis, providing information on confirmed and suspected DRDs. A trial run took place in June 2021 and was circulated to police and partners for review and feedback, to shape the eventual format. Police Scotland data will be a key component of that publication, which is anticipated to 'go live' in September 2021. Initial management concerns around data security and information sharing have been addressed and the initial publication approved by ACC Ritchie, PPCW.

PARTNERSHIP DRUG TYPE ANALYSIS

2.22 A Minute of Agreement has been agreed between Police Scotland and Abertay and Robert Gordon Universities. The project will see police provide the universities with seized drugs, which are not part of a live case, sent for analysis.

The project which will be for intelligence purposes only, will allow a quick time turn-around in drug analysis, providing a current update on drug types, strengths and trends impacting on our communities across Scotland. The updated intelligence picture will provide greater focus on relevant substance harm prevention and enforcement activity

The information will be shared with Partners to provide them direction in their own substance harm prevention activities.

PROBATIONER TRAINING

2.23 Initial discussions have taken place between the Substance Harm Prevention Team and the Scottish Police College with a view to enhancing current probationer training on substance abuse and misuse of drug offences.

These inputs will be delivered in partnership with the Scottish Drugs Forum, Scottish Recovery Consortium, Scottish Families Affected by Drugs and The Crown Office and Procurator Fiscal Services.

The focus of delivery will be to raise officer awareness on: the Public Health approach to justice, the benefits of prevention and early intervention, addressing stigma and the impact of drug related deaths and relevant support services available.

All content delivered will align with the current Annual Police Plan, Police Scotland Drug Strategy and the Scottish Government's Rights, Respect and Recovery: Alcohol and Drug Treatment Strategy.

DRUG STRATEGY BOARD: THREAT AND HARM

2.24 Police Scotland has undertaken a strategic threat assessment based on the harm caused by drugs, which provides a fresh perspective on the issue. Work will now be progressed under the auspices of the DSB to augment this report (which is protectively marked as 'Sensitive') by overlaying with appropriate partner data, with a view to providing a regular assessment of threat that can be used to inform policing (and partner) activity, e.g. to counter the threat posed by the production, sale and use of synthetic drugs.

POLICE SCOTLAND - PARTNERSHIP, PREVENTION AND COMMUNITY WELLBEING (PPCW) DIVISION

- 2.25 In parallel with the work referenced, to tackle the harm caused by drugs, ACC Ritchie will lead on work to develop a Divisional strategy for PPCW, which has recently been formally launched as a discrete Division. This strategy will be firmly based on developing the public health approach to policing in Scotland and a whole systems approach. This wider strategic work will be informed by and lend support to the work to address drug harms.
- 2.26 PPCW Division also works closely with Local Policing Divisions to support existing and developing local initiatives aimed at reducing drug harm (either specifically or as part of wider work to address vulnerability), in line with local and national policing priorities. Examples of this work include:
 - Dundee supporting the Division's approach in developing partnership work to address non-fatal overdoses (which is being closely observed by other policing Divisions) and to facilitate the whole systems approach in alliance with the Scottish Violence reduction Unit and local partners

- South Ayrshire working with a range of partners to implement an effective whole systems approach
- Glasgow supporting the Division's development of a Public Health strategy and ongoing work in pursuit of its Drug Strategy, including the Positive Outcomes Project
- Edinburgh ongoing work to support local delivery of a range of intervention activity to support recovery.

NEXT STEPS: EVALUATION

- 2.27 Evaluation of work in this area of business is clearly important in terms of understanding and attributing impact and informing future activity. Ultimately, the common aim for those delivering services and support is to see a reduction in the harm caused by drugs, as can be evidenced by the number of DRDs or instances of non-fatal overdose.
- 2.28 There are, however, challenges and limitations in quantitatively assessing the impact of preventative work. Furthermore, the timescale over which this work will have an impact will vary widely and, in some cases, be lengthy. It will, therefore, be important to consider and utilise more qualitative approaches, and to make good use of partner's data and experience where appropriate.
- 2.29 In the shorter term, projects and initiatives will be evaluated individually based on parameters agreed during the planning phases, as described above for the Naloxone ToC.

3. FINANCIAL IMPLICATIONS

- 3.1 Much of this work is absorbed by the PPCW Substance Harm Prevention Team as business as usual, and local policing Divisions support interventions in a similar vein.
- 3.2 Funding has been sought from the DDTF and approved for matters such as the Naloxone ToC, to fund officers to deliver the programme and to purchase the Naloxone itself.
- 3.3 Funding for MAV to deliver the Pathfinder Programme has similarly been provided by the DDTF and there is little financial impact for PSOS. It is, however, hoped that reduction in vulnerabilities and drug related harms will improve community wellbeing and have significant benefit in reducing demand on officers.

4. **PERSONNEL IMPLICATIONS**

4.1 No immediate personnel implications as the work is overseen by the PPCW Substance Harm Prevention Team whose role it is to undertake these activities.

5. LEGAL IMPLICATIONS

5.1 No legal implications.

6. **REPUTATIONAL IMPLICATIONS**

6.1 It is hoped that this work will enhance Police Scotland's reputation with individuals or within communities affected by drugs.

7. SOCIAL IMPLICATIONS

- 7.1 This work will help to develop officers understanding of societal challenges experienced by a significant part of the population.
- 7.2 It is further hoped that people with lived and living experience will be reassured that policing goes beyond law enforcement and that officers are there to help and support.

8. COMMUNITY IMPACT

8.1 No identified community impact.

9. EQUALITIES IMPLICATIONS

9.1 There are no perceived equality implications.

10. ENVIRONMENT IMPLICATIONS

10.1 There are no perceived environmental implications.

RECOMMENDATION

Members are invited to discuss and note the information contained within this report.

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