CJ/S6/25/22/1

Criminal Justice Committee
Wednesday 10 September 2025
22nd Meeting, 2025 (Session 6)

Tackling Harm from Substance Misuse in Scottish Prisons – Session 4

Note by the Clerk

Introduction

1. At its meeting on 30 April 2025, the Criminal Justice Committee agreed to undertake a short inquiry into the harm caused by substance misuse in Scotland's prisons. This follows a recommendation from the Scottish Parliament's People's Panel, which raised concerns about the increasing prevalence and potency of synthetic drugs in prisons, the impacts on both prisoners and staff, and the adequacy of rehabilitation and support systems.

2. The inquiry was formally launched on Friday 16 May 2025, alongside a public call for views. The Committee invited written submissions until **Friday 22 August 2025**.

3. The Committee has held its two preparatory evidence sessions in May and June (28 May and 4 June). The Committee heard from different bodies on the scale of substance misuse in Scotland's prisons, and how public services, policing and the justice system currently respond to it.

4. On 3 September, the Committee heard from a number of witnesses from advocacy and support organisations in the third sector and those with expertise in public health and prison healthcare. The session focused on throughcare and in-custody rehabilitation, and on alcohol harm and community reintegration.

5. Today's session will focus on prevention and enforcement. We will have two panels.

6. On the first panel, we will hear from the Prison Officers Association on the following themes:

    - Impact of substance misuse trends on frontline staff, with a focus on synthetic drugs
    - Training and support for officers in rehabilitation and recovery approaches
    - Staff wellbeing and mental health supports currently in place
    - Safety concerns among staff and whether they feel heard and supported
    - Perceptions of the MAT programme and trauma-informed practice among prison officers

7. On the second panel, we will hear from Police Scotland, the Scottish Prison Service, and the Leverhulme Research Centre for Forensic Science on the following themes:

- Routes of illicit substance entry into prisons, including drones, mail, and visitors
- Inter-agency collaboration between SPS, Police, and border services
- Influence of organised crime in the prison drug trade
- Role of corruption in facilitating substance entry
- Effectiveness and limitations of security-focused approaches
- Risks of enforcement strategies potentially displacing or worsening harm

Evidence

8. The Committee will take evidence from the following panel of witnesses—

Panel 1

- **Phil Fairlie**, Assistant General Secretary and;
- **John Cairney**, Scottish National Committee Chair, Prison Officers Association (Scotland)

Panel 2

- **Detective Chief Superintendent Raymond Higgins**, Police Scotland
- **Jim Smith**, Head of Operations and Public Protection, Scottish Prison Service;
- **Gillian Walker**, Governor in Charge, HMP Shotts, Scottish Prison Service
- **Dr Victoria Marland**, Lead researcher for Scottish Prison Service research project, Leverhulme Research Centre for Forensic Science, School of Science and Engineering, University of Dundee

9. See **Annexe A** for details of written submissions from Prison Officers Association (Scotland), Police Scotland, Scottish Prison Service and Prison Governors Association (Scotland), and Leverhulme Research Centre for Forensic Science.

Actions

10. Members are invited to discuss issues related to prevention and enforcement with today's panel.

Clerks to the Criminal Justice Committee
September 2025

Annexe A

Written submission from Prison Officers Association (Scotland)

Scottish Parliament Criminal Justice Committee Inquiry into the harm caused by substance misuse in Scottish Prisons

The Prison Officers Association (POA) is an independent, democratic trade union representing uniformed prison grades and staff working in Psychiatric Care and has around 4000 members working in the Scottish Prison Service (SPS) and the State Hospital at Carstairs.

Scotland is the drugs deaths capital of Europe and substance misuse amongst the prisoner population exceeds levels experienced by the general population. Prisons are high risk environments for those using drugs; the nature of the problem is fluid with new drugs or versions of them available.

Drugs and contraband are brought in by prison visitors in a variety of ways but the biggest threat at the moment is through drone activity. That does not mean that we do not still have illicit items being supplied into prisons from the usual more traditional routes such as through visits, or over prison walls.

Drugs unsettle a prison and have a major impact on offenders and the running of any of our prisons. The scale of the problem and the currency of the *"drugs business"* in prisons and the unpredictability of those under the influence make managing the situation very difficult and is made significantly worse by the present overcrowding and understaffing crisis.

Research conducted by The University of Glasgow in 2022 identified:

"Between 40-75% reported a drug problem or tested positive for illegal substances on entering prison

- *Nearly 40% reported using illegal drugs while in prison*
- *Between one-quarter and one-third of those tested on leaving prison have illegal substances in their bodies"*

The table below provided by the SPS under FOI in 2025 shows that since 2015 there has been an 82% increase in drug discoveries, a 181% increase in weapons finds and an increase in alcohol finds from 0 cases in 2018 to 343 incidents in 2024.

RFI 14 Response: Please see table below:

Year	Drug Recoveries	Weapon Recoveries	Alcohol Recoveries	PCD Recoveries	Other Recoveries (Unspecified)	TOTAL
2015	1968	240	0	245	746	**3199**
2016	2240	270	0	270	790	**3570**
2017	2494	353	0	274	877	**3998**
2018	2584	504	0	288	918	**4294**
2019	2771	491	84	437	1305	**5088**
2020	4623	373	251	428	1256	**6931**
2021	6568	531	324	402	1982	**9807**
2022	3556	419	400	317	1214	**5906**
2023	3727	409	352	986	2014	**7488**
2024	3580	675	343	894	1599	**7091**
2025 (to 10/03/25)	597	123	72	109	247	**1148**

*Please note – These figures are subject to changes in reporting categories, processes and legislation, including: Smoking ban (2018) Changes to violence reporting (2019)
Mobile phone introduction (2020) and subsequent removal (2023) Mail Photocopying (2021)

Prison officers report an evolving drugs scene which reflects the world outside, but which also recognises attempts by those who supply and use drugs to avoid detection.

Historically cannabis, cocaine and heroin were the main drugs being traded in Scotland's prisons but in recent years the focus has moved to synthetic cannabinoids (SPICE), benzodiazepines and opiates.

The Herald recently reported "*that at one prison over one weekend 47 prisoners had to be monitored after suspected overdoses on drugs brought into the prison, most likely psychoactive substances also known as "legal highs".*"
Between 2012-13 and 2022-23, there were 52 drug misuse deaths in prison custody. This represents around 14.5% of all deaths in prison custody within this time period.

In an attempt to address the widespread use of drugs in Scotland's prisons NHS Scotland issued *"The Management of Offender at Risk Due to Any Substance [MORS] policy (updated in 2025)"* which:

"Instructs prison staff on how to respond if they identify someone as being at risk from a substance and how healthcare staff should engage with the incident."

Under the MORS guidance a prisoner suspected to be under the influence of illicit substances should be clinically assessed and depending on the outcome an ambulance called or the prisoner is monitored every 15 minutes - 60 minutes depending on their condition.

Prison Officers who are not medically trained are highly critical of the implementation and practicalities of MORS. In a recent survey of POA members, MORS was raised repeatedly.

The graph below shows a steep increase in the number of MORS episodes and hospital transfers as a result of prisoners taking illicit substances.

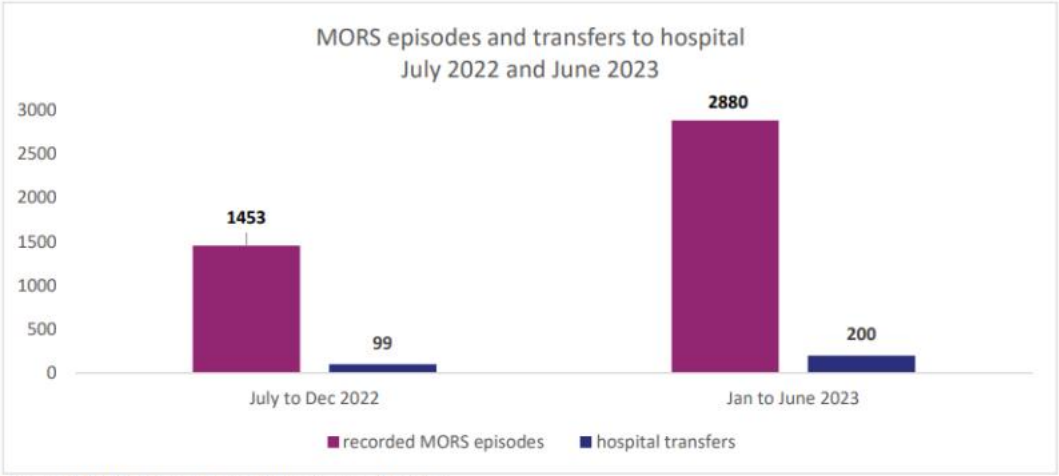

Figure 2: MORS episodes and transfers to hospital

This is what POA members said in relation to MORS and substance misuse:

"Staff received no training on MORS and were instead told to read guidance."

"We have no idea what a prisoner has or hasn't taken but are expected to enter a cell that may be filled with residue from drugs, with no PPE"

"There is a conflict between the MORS policy of having to enter a cell where they may be at risk of passive inhalation and an officer's right to move to a place of safety if they are at risk."

"There are loads of drugs in prisons, coming in from a variety of routes"

"At Glenochil and other prisons there is little to stimulate or engage prisoners - no wonder they take drugs"

"Drugs are affecting prisoners psychologically, causing them to attack officers"

"The MORS process should be changed, we are not medical professionals"

“More potent drugs are being used, they are having a huge impact”

“Staff who were affected by fumes from drugs didn’t get help and support, they were asked by managers “if they were dehydrated and drinking enough water”

“I have finished a shift, and helped out with my 2 year old sleep routine by reading a story. Unknown to myself I have inhaled legal high, I struggled with reading out basic words”

“What is the long-term health impact of ingesting drugs over time?”

“By providing prisoners with vapes SPS gave them the tools to smoke drugs and the policy of vapes only being smoked in cells is never enforced”

“Staff are being put at risk from being exposed to smoke from drugs”

“In a move to try and reduce tobacco use prisoners were given vapes which they now use to smoke NPS, we have given them the tools”

“We have already had a staff member resign over these issues (drugs exposure)”

“The SPS cannot tell us what the long term health implications are of ingesting passive smoke from drugs misuse”

“Prison officers are expected to go into cells where drugs have been smoked then drive home afterwards, this is putting them at risk”

“Prisoners put substances in their vapes and I've frequently felt unwell as a result. We should NEVER be allowed to be exposed to vape smoke let alone smoke containing substances that seriously impact our health. I mean, we get in our cars and have to drive home afterwards. This is just crazy. The prisons should ban vaping just like any other workplace”

“A nurse should be placed on each locked down flat to administer first aid , oxygen etc to staff should it be required it should not take a death or the administration of Naloxone before the welfare of staff becomes paramount”

Responses to POA survey

Survey question: How do you feel about the following statement? *“I am concerned about being exposed to the effects of drugs used by prisoners and the impact on my health."*

37.82% Strongly agreed
37.82% Agreed
17.38% Neither agreed nor disagreed
6.13% Disagreed
0.85% Strongly disagreed

Survey question: How do you feel about the following statement? *“My employer puts in place adequate health and safety measures to ensure the safety of Prison Officers dealing with a prisoner under the Management of Offender at Risk Due to Any Substance (MORS) policy."*

2.03% Strongly agreed
18.44% Agreed
22.17% Neither agreed nor disagreed
30.08% Disagreed
26.57% Strongly disagreed

Survey question: How do you feel about the following statement? *“The level of substance misuse and illicit items being brought into the prison I work in is greater than at any time during my career in the prison service."*

45.01% Strongly agreed
29.61% Agreed
18.27% Neither agreed nor disagreed
5.75% Disagreed
1.35% Strongly disagreed

Prison staff are very concerned about their exposure to drugs used by prisoners and are highly critical of the MORS policy. The SPS has a duty of care to its staff and must provide relevant PPE for those at risk of exposure to drugs and passive inhalation. The MORS policy should be reviewed taking on board the concerns of the staff who have to implement it.

In some cases these responses from staff may be based on perception and we are not in a position to substantiate some of the comments, but it is a worrying sign of the frame of mind, lack of assurance, and any sense of feeling ‘safe’ for some staff that the current drug use, and drug use management seems to have instilled in the mind of some staff.

A very widely shared view of staff in regard to MORS is that they are being asked to make really significant, what at times feels like ‘life or death’ decisions about a prisoner's state of health and determine what actions to take, and that they are not in

any way qualified to do so. It is a source of enormous pressure and burden on those staff and they do not feel in any way equipped or supported to make those calls.

Other risks to staff in relation to the drug issues inside our prisons come in several ways:

- Having to manage numbers of prisoners who have taken substances that are in circulation inside a prison hall
- Managing prisoners who present themselves as being completely detached from their environment and unaware of their behaviours due to the extreme impact of drugs.
- Staff have been assaulted many times when trying to manage prisoners under the influence of drugs
- Staff have been assaulted or injured by having to intervene in fallouts and violence amongst the prisoners under the influence, and who have no recollection of events when asked the following day.

Staff are required to keep all the prisoners secure and safe in the system, including those who become victims of violence from the Serious and Organised Crime Group members who seek retribution on others who are competing for the ‘territory’ or, in intervening where prisoners who have got into debt and unable to pay, who suffer violence as a consequence. Once again it is the frontline staff who are expected to intervene and manage the resultant violence.

A further, different threat is made to staff for simply doing their jobs and getting in the way of the drug supply routes, or for interfering and restricting the ability of the suppliers to operate and we have seen evidence and now convictions of those who have set alight staff cars in prison car parks. We have seen officers and their families having to be removed to a place of safety from their family homes, due to the risk to their safety, and in some cases their lives.

Actions required

The MORS policy should be reviewed

Care and support measures should be introduced for staff who face exposure to substances in the course of their duties

Anti drone technology should be introduced to all prisons

NHS nurses to be engaged 24/7 to provide medical support through the night to prisoners affected by MORS

The prison population needs to be reduced significantly and for the long term, to allow staff to adequately carry out their role in the prevention of illicit substances coming into prison, and to free up the time and space for the management of the population under the influence.

In absence of a significant reduction in population, we need more prisons and more staff to manage them, and help create an environment that facilitates the opportunity at least, of a ‘safe, recovery-focused environment’.

Written submission from Police Scotland

Dear Ms Nicoll,

Submission to Criminal Justice Committee

A request has been made in advance of the Criminal Justice committee meeting on 10th September 2025.

The topic of the upcoming meeting is outlined as Substance Misuse within Scottish Prisons, and I provide brief observations on the following: -

How illicit drugs enter prisons and how do organised crime operate in this context:

- Controlled drugs, intelligence provides are found to enter the prison estate in a variety of forms, including powders, pills and impregnated in items such as paper. The use of vapes is becoming more common. These are filled with small amounts (0.1 grams) of controlled drugs and can be sold for around £50 per 'deal'.

- Cases of drugs being smuggled into prison estates include drugs being passed between visitors and inmates during arranged visits. Items are also commonly recovered being posted into prison and through drone use.

- Organised crime directed via well connected incarcerated subjects is well documented. Crime groups exploit the use of 'specialists' which includes 'drone pilots' who facilitate a wide range of illicit items into Scottish prisons.

- Other methods include "throw overs" looking to target vulnerabilities within certain areas of our prison estate where detection is more challenging.

What technologies and inter-agency efforts are being used to reduce harm.

- The use of drones is a national issue, widely reported in the media. The NCA assess that in addition to delivering illicit goods to prisoners, it is likely that drones will become more widely integrated into SOC offending models as costs decrease and functionality improves

- SOCGs are increasingly using drones to move illegal commodities instead of using more traditional modes of transport. They are also utilising them to conduct reconnaissance activity.

- SPS continue to receive several reports of drones being used to facilitate the delivery of illicit articles. These packages include drugs, weapons and mobile handsets/sims/accessories.

- Police Scotland and Scottish Prison Service are engaged with NPCC and NCA to support Project CONSUITOR to work collaboratively to assess and disrupt the threat to our Prison estate from the organised criminal use of drones across the UK. This will enable greater understanding of the threat and technology used to enable both proactive and reactive investigations into those facilitating this harm in our prison communities.

- Police Scotland and Scottish Prison service continue to work together in an operational and strategic basis to share information and intelligence to inform analysis and investigations to detect and disrupt the threat this present in the prison estate across Scotland.

In addition to the above a request has also been made for comment on: -

How prisons and police are tackling supply routes and associated violence or exploitation.

- Police Scotland executive action resulted in enforcement at two different SCRA (Synthetic cannabinoid receptor agonists) labs over a five-month period in the west of Scotland.
- A chemist deployed to the locus gathered swabs /samples, that indicated, ADB-INACA (which is not controlled but has been used as a starting product to make other synthetic cannabinoids) and MAB-CHMINACA (Class B/end product). The makeshift labs were constructed to produce Synthetic Cannabinoid Receptor Agonists (SCRA) or 'spice.' It is assessed as highly likely that both labs were concerned in the supply of this commodity to Scottish prisons.
- The targeting of Benzodiazepines has seen a significant increase in recoveries of pill presses in Scotland in 2025.

  In 3 separate operations we have seen:
  a) Three pill presses, 37,000 pills and 2.5kg of etizolam recovered.
  b) Pill press, with blue powder residue thereon, 30kg of mixing agent, diamorphine, spice and a 'chemist kit' recovered.
  c) Pill press and tens of thousands of benzodiazepines recovered which were the suspected cause of NFODs and DRDS in the surrounding area.

I trust that this response provides an indication of the work ongoing and happy to discuss further at the upcoming meeting.

Yours sincerely,

Raymond Higgins
Detective Chief Superintendent
Specialist Crime Division
Police Scotland

Written submission from Scottish Prison Service

Dear Ms Nicoll

SECURITY AND ENFORCEMENT RESPONSE TO SUBSTANCE MISUSE

Prior to the panel appearance of Gillian Walker (Governor in Charge, HMP Shotts, SPS) and James Smith (Head of the Public Protection Unit, SPS) on 10 September, I provide below some additional operational context to the key areas of interest to the Committee's Inquiry which I hope is helpful for Committee members.

The areas are:

1. How illicit drugs enter prisons;
2. How organised crime operates in this context;
3. What technologies and interagency efforts are being used to reduce harm; and
4. Practical enforcement experience on how prisons and police are tackling supply routes and associated violence or exploitation.

1. How illicit drugs enter prisons

SPS has witnessed an increase in the use of technology, such as drones, which have increased the threat of illicit drugs entering prisons due to the level of payload these devices are equipped to carry. These payloads will often include drugs, mobile phones and weapons. As well as drones, other methods of entry include members of the public throwing illicit items over the perimeter wall.

Face to face visits is also an area where small drug items can be passed between visitors and prisoners at the start/end of a visit, as well as items being concealed on people or in items coming into our establishments. Another targeted area is property being sent in by associates in the community which has an illegal commodity hidden within it.

To prevent or mitigate these risks, SPS work with colleagues in the wider justice sector sharing intelligence and practice aligning to the threats presented to explore wide-ranging responses. This work has led to several solutions being implemented to combat these issues such as, modified window grilles currently being installed in several establishments and the introduction of the X-ray body scanner. Further solutions are continually being explored to further strengthen our defences against these evolving significant security threats.

It is regrettable that, despite robust security processes, some individuals are ultimately successful in bypassing these.

2. How organised crime operates in this context

At the centre of the organisation of commodities entering prisons in significant quantities are Serious and Organised Crime Groups (SOCG). SPS has noted in the last 3 or 4 years an increase in the amount and level of seniority of the nominals from these groups being sent to prison. This is due to the success in the detection and prosecution of these individuals by Police Scotland and their partners. Despite being in custody, however, these individuals are still able to reach into their communities and continue to influence them.

In response to this, SPS are working tirelessly with Police Scotland and other partners as part of the SOCG Taskforce which gives the SPS an opportunity to share and collaborate with external partners to mitigate the threats from these groups. This includes exploring the deployment of a range of tactics to disrupt criminal activity.
SPS continues to be committed to addressing the threat these groups pose to the good running of our establishments whilst lessening the harmful impact on the wider community.

3. What technologies and interagency efforts are being used to reduce harm

SPS deploy several technical and tactical measures to help prevent the introduction of substances into establishments, including walkthrough metal detectors, cell sense, hand-held wands and X-Ray machines. There is a National Tactical Search Unit specifically trained in searching (with the use of drug detection dogs) across all establishments, with regular searching of prisoners, visitors and staff being undertaken.

As mentioned earlier, SPS has recently introduced X-Ray Body Scanners across the estate and is also exploring other measures such as infrastructure modifications (installation of window grills) and targeted reactive measures to counter the current drone threat.

Rapiscan Itemiser technology currently in place specifically assists in detecting substances which may have been concealed into items of mail and personal property. Rapiscan is in use in every prison in Scotland.

By working closely with partners such as Police Scotland and the National Crime Agency, SPS is vigilant to the continuously evolving nature of drug use to ensure use

of technology and tactical measures remain current, adaptable, and capable of detecting and preventing drugs from entering prisons.

We continue to advise our staff on safety and risk assessment processes in conducting their duties, to minimise the impact and risk of exposure to any unknown hazardous substance.

SPS also works closely with the NHS, World Health Organisation (WHO), Police Scotland and Dundee University to identify and share information on drug trends.

4. Practical enforcement experience on how prisons and police are tackling supply routes and associated violence or exploitation

SPS recognises the importance of providing a safe and secure environment for those in its care as well as for the people who work in and visit our prisons, and we continue to collaborate with partners to prevent the introduction of contraband. We do have a reciprocal relationship with Police Scotland to share intelligence to work collaboratively to prevent the introduction of illicit items and substances and we will seek to secure convictions where appropriate.

Whilst risk reduction mitigations such as the implementation of photocopying general correspondence have been successful in deterring the introduction of illicit substances, some individuals do still try to introduce drugs via this method. Unfortunately, elements within (and out with) our prison population are continuously seeking new and alternative methods to introduce such items. However, SPS stands ready to be responsive and remain alert to the assessment of these emerging avenues through both tactical and strategic risk assessments at local establishment and corporate level.

The challenges faced in prisons reflect those same challenges faced in our local communities. We remain vigilant about the threat posed by new substances, as well as the means to introduce these items into prisons, which continues to evolve in complexity and sophistication

I trust this information is helpful and we look forward to providing further context during the panel session.

Yours sincerely

TERESA MEDHURST
Chief Executive

Written submission from Prison Governors Association (Scotland)

Dear Convener,

Substance Misuse in Prisons

Thank you for the opportunity for allowing the Prison Governors Association (Scotland) to provide a written submission around the impact of substance misuse in custody and the impact on front line staff.

This submission has been completed using lived experiences from current Governors in Charge and Senior Management Teams. The use or misuse of substances in prison results in an enormous ripple effect throughout the prison estate and beyond. The modern trend of developing drug substances/ drug compounds has incurred a massive change around staff and prisoner safety, impact on regimes, service delivery and the on-going impact on external partners such as Prisoner Escort Providers, Scottish Ambulance Service, Police Scotland and the National Health Service.

Impact – Human

Substance misuse encompasses drugs such as opioids, stimulants, depressants, hallucinogens, and alcohol, where these pose a significant threat to individuals in custody, those responsible for their care and safety; and to the families of those who abuse substances. Its consequences are multifaceted, affecting physical and mental health, social structures, economic stability, and public safety.

Prisoners under the influence of substances present in several ways, from a trance like state to becoming violent, unco-operative, unresponsive and extremely unpredictable. After the fact, those under the influence often have no recall of any events that occurred or indeed the extent of their behaviours.

Sadly, misuse of substances, has seen naloxone being administered regularly in an attempt to save lives. The remarkable efforts and professionalism of SPS prison staff and our NHS colleagues should not be underestimated. Witnessing these events takes its toll on front line staff and our members and is extremely stressful.

Chronic misuse of substances often leads to severe health issues including liver damage, cardiovascular disease, respiratory problems, neurological impairments, and increased risk of infectious diseases such as HIV/AIDS due to unsafe practices. Mental health disorders such as depression, anxiety, and drug induced psychosis are also commonly associated with substance misuse. All of these issues have a knock-on effect on NHS both within and outside of custody.

Users advise that symptoms during withdrawal periods are significantly worse than those experienced by users coming off other substances for example heroin. We have witnessed prisoners very close to losing their lives through the misuse of

substances, yet despite this knowledge, they are finding it challenging to refrain from further episodes of misuse.

Impact - Operational

The past 12 – 18 months have seen significant population pressures on the prison estate. The high numbers are one factor; however, they cannot be looked at in isolation, with other operational considerations such as serious and organised crime groups, mental health issues and substance misuse. The influence and impact of serious organised crime (SOCG) preying on what are often vulnerable individuals, caught up in addictions and hopelessness, results in a cycle of drug debt and violent incidents.

The business of illicit substances in prisons is clearly very lucrative and there are numerous methods utilised by those seeking to facilitate their introduction into prison. Staff work tirelessly to identify routes and apply preventative measures where possible. The use of drones to deliver illicit items has increased and we believe requires the support of legislation (such as no-fly zones around prisons) and suitable penalties for those found to use this method in our communities.

Prisoners under the influence of substances, are managed within residential units under regular and structed observation plans. Whilst necessary, this is highly disruptive to the general running of the prison regime. As well as that, it is becoming a regular occurrence for prisoners to become unresponsive and to be transferred to hospital, often by an emergency ambulance(s). These emergencies can also have significant impact on staffing levels and therefore the prison regime.

In a recent example at HMP Perth, 20 ambulances and paramedic teams were situated on site because lives were at risk. This or similar experiences have been seen in many of our prisons and where the impact on the operational stability, safety and delivery of our daily legislative requirements are under serious threat. At these times, the focus becomes very much ‘life or death’, where the risks and stress from the management of these incidents can last for several weeks.

For example, prisoners admitted to hospital require to be supervised by two prison officers at least until such time as the prisoner escort provider can take over. The operational reality has evidenced that on many occasions the prisoner escort service provider, having already reached their contractually agreed bed watch capacity, cannot resource the level of hospital admissions. As such, SPS staff remain with the hospital admission, until either discharge or when further capacity can be delivered by the service provider.

The impact of staff having to undertake hospital escorts influences the day-to-day regime delivery within the prison. This includes regime options such as purposeful activities and offence related programmes. In extreme cases, such as the one highlighted earlier, this level of staff depletion puts enormous strain on management teams trying to deliver a safe, humane and legislatively compliant regime.

Impact on Society

The impact on society has been briefly mentioned and this encapsulates the use of resources with the Scottish Ambulance Service, Police Scotland and the NHS. These services, like many others, are under operational strains to deliver services timely and effectively. The widespread misuse of substances in prisons and the consequences where there are multiple people under the influence, places enormous strain on these services, and where the impact can be wide reaching. Simply put, we neither have adequate space or resources to manage this within a prison setting and this should be considered in our view as a significant public health issue.

Addressing the issue

We fully appreciate that this is very much a 'wicked problem' and where there is almost certainly very few short-term fixes. Sadly, the harrowing lived experiences of those who have put their lives at risk, does not appear to be a deterrent. The impact of restrictive and less than ideal regimes due to population pressures, increases tension in prison and where misusing substances as a means of escape from the daily grind, become more attractive.

It is our understanding the very addictive nature of substances makes it extremely challenging to manage and encourage a change in lifestyle. Sadly, due to the lucrative nature of controlling the availability of illicit substances, serious and organised crime groups are able to take advantage of those most vulnerable.

Staff resources are stretched, and we believe there is a very strong argument that more staff would help, as would a substantial increase in the training and awareness for staff when dealing with prisoners presenting under the influence. Consideration being given to having 24-hour on-site NHS support and or paramedic support would be extremely helpful.

It is also important to identify that resource support has to include all aspects of those tasked with delivering health, welfare and decency within prisons. Furthermore, it is our view, that wider consideration as to whether Scotland's Drug Policy remains adequate is paramount in any review.

Many of our members are indicating that they are close to burn out and are emotionally fatigued. The intended benefits of the reduction in the working week have not been realised for senior management, in reality it has become worse. Our management resource requirements are outdated and inadequately reflect the modern prison system and the operational realities Governors, and their teams face daily.

Conclusion

Substance misuse is a pervasive issue with profound and lasting impacts on so many identified in this submission. Tackling it will not be easy and as such requires a coordinated effort across healthcare, education, justice, and Scotland's community.

Whilst we believe **resources** and **training** are very much key enablers, in the short term at least, it should not at any time be underestimated the adverse effect this is

having on front line prison officers, NHS colleagues, Governors and senior management teams in our prisons. Resources we currently have to manage population numbers, population complexities, lack of physical space, mental health and substance abuse challenges, we believe are insufficient and need to be increased.

Sadly, as mentioned impacts transgress prison walls and impact on NHS health boards, Scottish Ambulance Service, Police Scotland, and society as a whole. We need to have a greater balance around resourcing situational issues as well as greater emphasis on harm reduction/ harm elimination and recovery work. This is both a Public Health and Drugs Policy issue that desperately requires new ways of working.

Yours sincerely,

J Kirkwood

James Kirkwood
Executive Officer
PGA Scotland

Call for Views submission from Leverhulme Research Centre for Forensic Science

Submission in response to call for views for the inquiry into tackling harm caused by substance misuse in Scottish prisons.

Dr Victoria Marland, Dr Lorna Nisbet, Professor Anne Coxon, Professor Niamh Nic Daéid Leverhulme Research Centre for Forensic Science, University of Dundee

Declared interest:
LRCFS receives a research grant to work with the Scottish Prison Service in the provision of drug testing for non- judicial samples seized within the prison establishments.

1. Background and Context

In May 2017, the Scottish Prison Service (SPS) Public Protection Unit (PPU) highlighted intelligence within the prison estate indicating the emergence of New Psychoactive Substances (NPS) as drugs of choice. It was reported that the use of such substances had contributed to an increase in violence and erratic behaviour by prisoners and that staff were reporting feeling unwell after suspected exposure to such substances. The emergence of NPS also saw a change in the smuggling routes for illicit drugs into prisons, particularly the use of the mail system for introducing papers infused with NPS to avoid detection.

An initial pilot study was established, between the SPS and the Leverhulme Research Centre in Forensic Science (LRCFS) at the University of Dundee in 2019, to determine the identity of unknown compounds entering the prison establishments by examining non-judicial seizures. Early results confirmed the high prevalence of synthetic cannabinoid receptor agonists in infused paper samples within the Scottish prisons (1).

In 2019 the pilot study evolved into a joint project directly funded by SPS which expanded the focus of the pilot study from synthetic cannabinoid-infused papers in three prison establishments to all drug and sample types from all 15 SPS establishments. Data from the project has been published in a series of peer reviewed research papers (see Section 6) and provided to the UK Advisory Council for the Misuse of Drugs (ACMD), the European Union Drugs Agency (EUDA), Public Health Scotland RADAR early warning system, the World Health Organisation (WHO) and the United Nations Office on Drugs and Crime (UNODC).

As a result, this data has supported the development of multiple national and international policy changes, such as the WHO's critical review of bromazolam and its subsequent international control (2). Academic staff and researchers involved in the project attend and contribute to a wide range of national meetings and committees such as the National Drug and Alcohol Related Death (NDARD) meetings, the Toxicology and Pathology Network (TAPIN) meetings, and meeting with the Scottish Prison Service Incident Management Team (IMT). Additionally, they provide continuous support directly to the SPS front line staff.

2. Sample Test Results

As of July 2025, a total of 4887 samples, from 3713 individual seizures, from 15 Scottish prisons have been analysed. Of these samples 2632 (54 %) have tested positive for one or more substance of interest (i.e., controlled substances, prescription or over the counter medicines, nicotine etc.), cutting agent and/or adulterant.

2.1. Drug Detection Trends

2.1.1. Synthetic Cannabinoids

Synthetic Cannabinoid Receptor Agonists (SCRAs) have been the most commonly detected compound throughout the project, accounting for 51 % of all positive samples (1346 out of 2632). SCRAs, commonly known as "spice", are a class of novel psychoactive substances (NPS) designed to mimic the effects of D9-tetrahydrocannabinol (D9-THC), the main psychoactive component of cannabis. The SCRA illicit market is constantly evolving with over 224 different synthetic cannabinoids detected in the EU since 2008.

A summary of the prevalence of SCRA compounds detected in the Scottish prisons across the whole project, since 2018, is shown in Figure 1 and a summary of detections from the past year (2024 Q3- 2025 Q2) is shown in Figure 2.

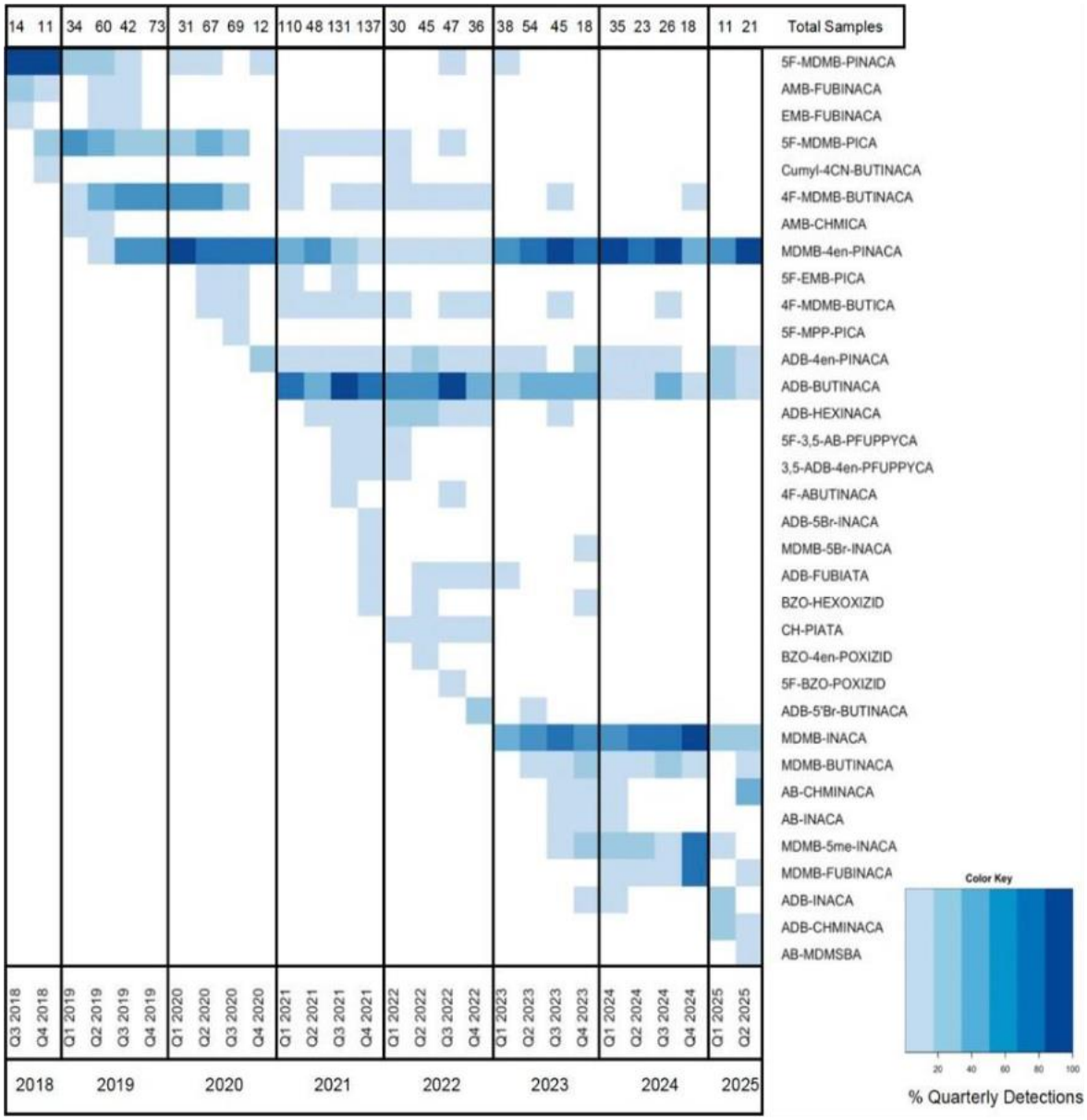

Figure 1: Evolution of synthetic cannabinoid compounds detected during the SPS Drugs in Prison Project, Q3 2018 to Q2 2025 (n = 1286 samples). 60 samples, in which a SCRA was detected, were submitted without a seizure date and are not included in this figure.

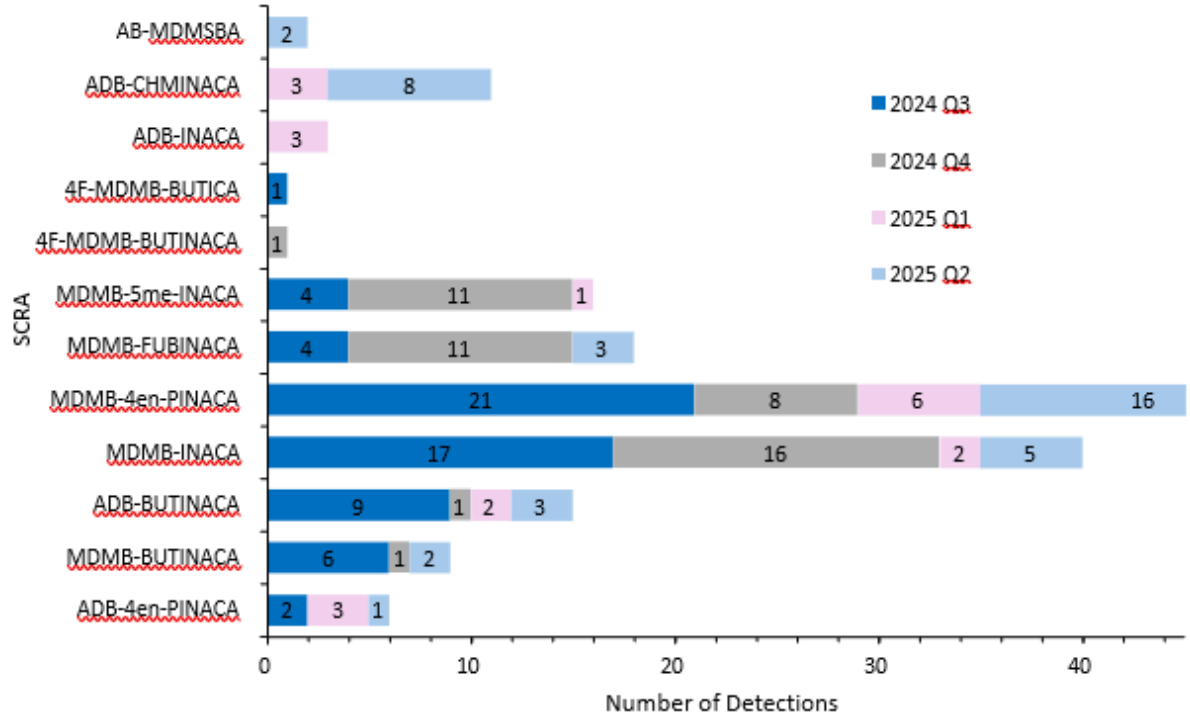

Figure 2: Summary of SCRA detections in the SPS Drugs in Prisons Project 2024 Q3 to 2025 Q2 (n= 75 samples).

The prevalence of SCRAs detected throughout this project has been notably affected by changes in international legislation. China is one of the main producer countries of SCRAs and, as such, Chinese legislation has a significant impact on the types of SCRAs detected at a global level. In 2021, China introduced generic legislation which banned a wide range of SCRA analogues, including those most commonly detected in Scottish prisons at that time (e.g. MDMB-4en-PINACA and ADB-BUTINACA).

Following the ban in 2021, increased diversity began to occur in SCRA detections (Figure 1), including the detection of compounds such as BZO-HEXOXIZID and 3,5-ADB-4en-PFUPPYCA which were not covered by the generic legislation. This was observed alongside a decrease in the number of MDMB-4en-PINACA detections. However, from January 2023 onwards, detections of MDMB-4en-PINACA in non-judicial Scottish prison samples began to increase once again (Figure 1).

Notably, these detections consistently co-occurred with MDMB-INACA, an unscheduled tail-less SCRA that may serve as a precursor in the synthesis of MDMB-4en-PINACA. This, in conjunction with the discovery of clandestine SCRA production facilities in European countries such as Switzerland, provides supporting evidence that tail-less SCRAs are being used as intermediates to circumvent Chinese legislative controls while still enabling the synthesis of the intended SCRA end products (3). As such, MDMB-4en-PINACA remains the most prevalent SCRA detected in samples received as part of this project.

1.a.2. Benzodiazepines

Following SCRAs, benzodiazepines are the next most commonly detected compounds in the SPS project, accounting for 22 % of all positive samples (587 out of 2632). Benzodiazepines are the most widely prescribed psychotropic drugs globally and are known for their anxiolytic and sedative effects. Previously, the diversion of prescription benzodiazepines, particularly diazepam and alprazolam, accounted for the majority of the illicit benzodiazepine tablets circulating in the European market.

However, since 2007, there has been an increase in the availability of illicitly produced tablets and blotters. Many of these illicitly produced products contain novel benzodiazepines, which are structurally distinct from benzodiazepines but exhibit similar clinical and pharmacological properties. In this report, the term “benzodiazepine” refers to both the traditional prescription and novel benzodiazepines. A summary of the prevalence of benzodiazepine compounds detected in the Scottish prisons across the whole project, since 2019, is shown in Figure 3 and a summary of detections from the past year (2024 Q2- 2025 Q1) is shown in Figure 4.

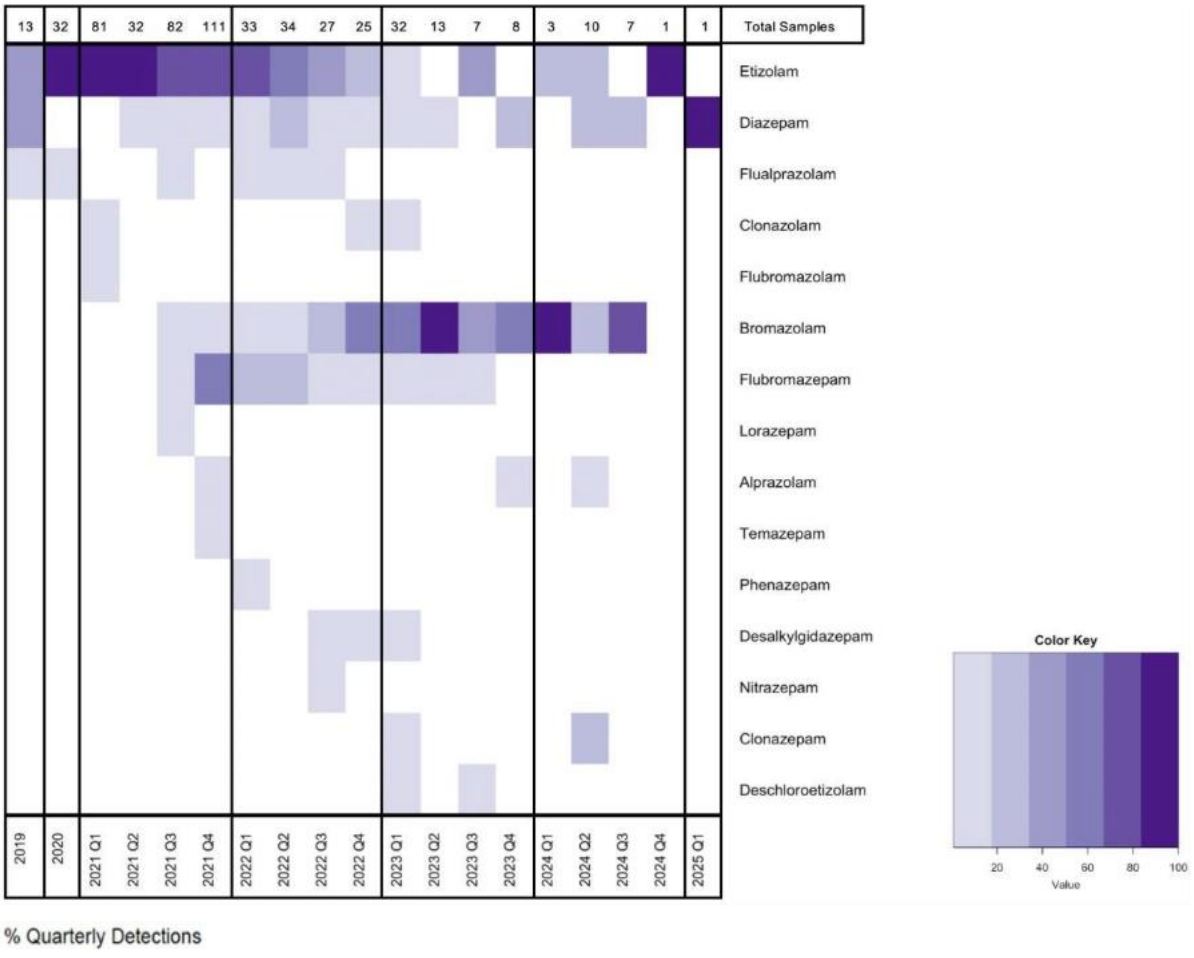

Figure 3: Evolution of benzodiazepine compounds detected during the SPS Drugs in Prison Project, 2019 to Q1 2025 (n = 552 samples). 35 samples, in which a benzodiazepine was detected, were submitted without a seizure date and are not included in this figure.

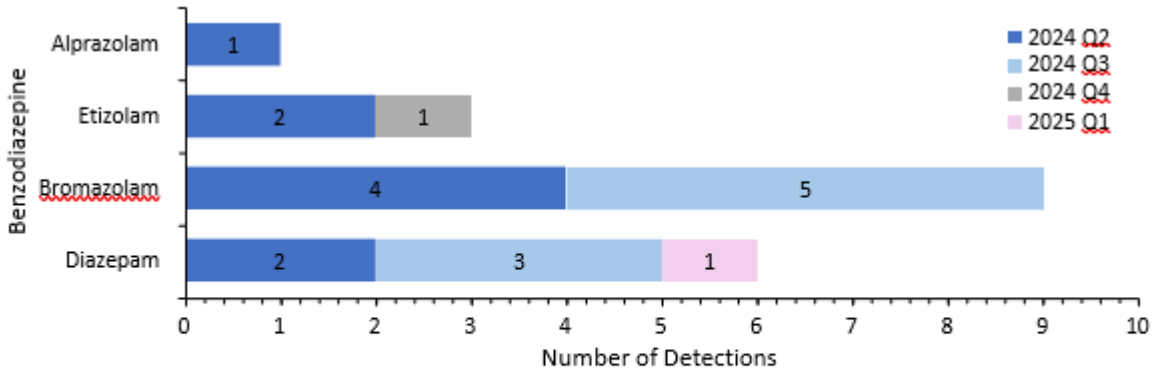

Figure 4: Summary of SCRA detections in the SPS Drugs in Prisons Project- 2024 Q2 to 2025 Q1 (n= 19 samples).

Similarly to SCRAs, the prevalence of benzodiazepines has been impacted by changes in international legislation. In November 2020, etizolam was internationally controlled by the Commission on Narcotic Drugs (CND) under Schedule IV of the Convention of Psychotropic Substances. At this time, etizolam was the most commonly detected benzodiazepine in non-judicial samples seized in Scottish prisons. In the months after the legislation change, detections of etizolam began to decrease and in Q3 (July-September) of 2021 bromazolam was detected for the first time in SPS samples. These early detections occurred approximately 8 months before Scottish toxicology services were able to begin screening for bromazolam in post-mortem toxicology, and 15 months before routine testing was available (4). This highlights the project's position at the forefront of drug monitoring, providing an early warning capability for the identification of emerging substances in Scotland. By Q4 (October-December) 2022, bromazolam was the most prevalent benzodiazepine being detected in SPS samples. In November 2024, bromazolam was also scheduled under schedule IV of the Convention of Psychotropic Substances by the CND. The impact of this legislation on the prevalence of bromazolam within Scottish prisons remains to be determined, and ongoing monitoring of benzodiazepine detections in submitted samples continues to be a priority.

To date no new novel benzodiazepines have been detected in the SPS samples, however compounds such as ethylbromazolam have been detected by the Welsh Emerging Drugs and Identification of Novel Psychoactive Substances (WEDINOS) team and so may appear within the SPS samples in due course. Like many of the novel benzodiazepines there is very limited data on the potency of ethylbromazolam, however novel benzodiazepines are often more potent than prescribed benzodiazepines such as diazepam, providing evidence of the usefulness of continued monitoring of these substances within the prison estate.

1.a.3. Other Detections

Throughout the duration of this project a wide range of drugs have been detected in non-judicial samples from the Scottish prisons. SCRAs and benzodiazepines have

been the most prevalent, followed by opiates/opioids (5 %, 142 out of 2632 positive samples) cocaine (3 %, 126 out of 2632 positive samples) and steroids (4 %, 111 out of 2632 positive samples).

A summary of all compounds detected, including benzodiazepines and SCRAs, throughout this study is provided in Figure 5. A summary of this data, excluding benzodiazepines and SCRAs, is provided in Figure 6.

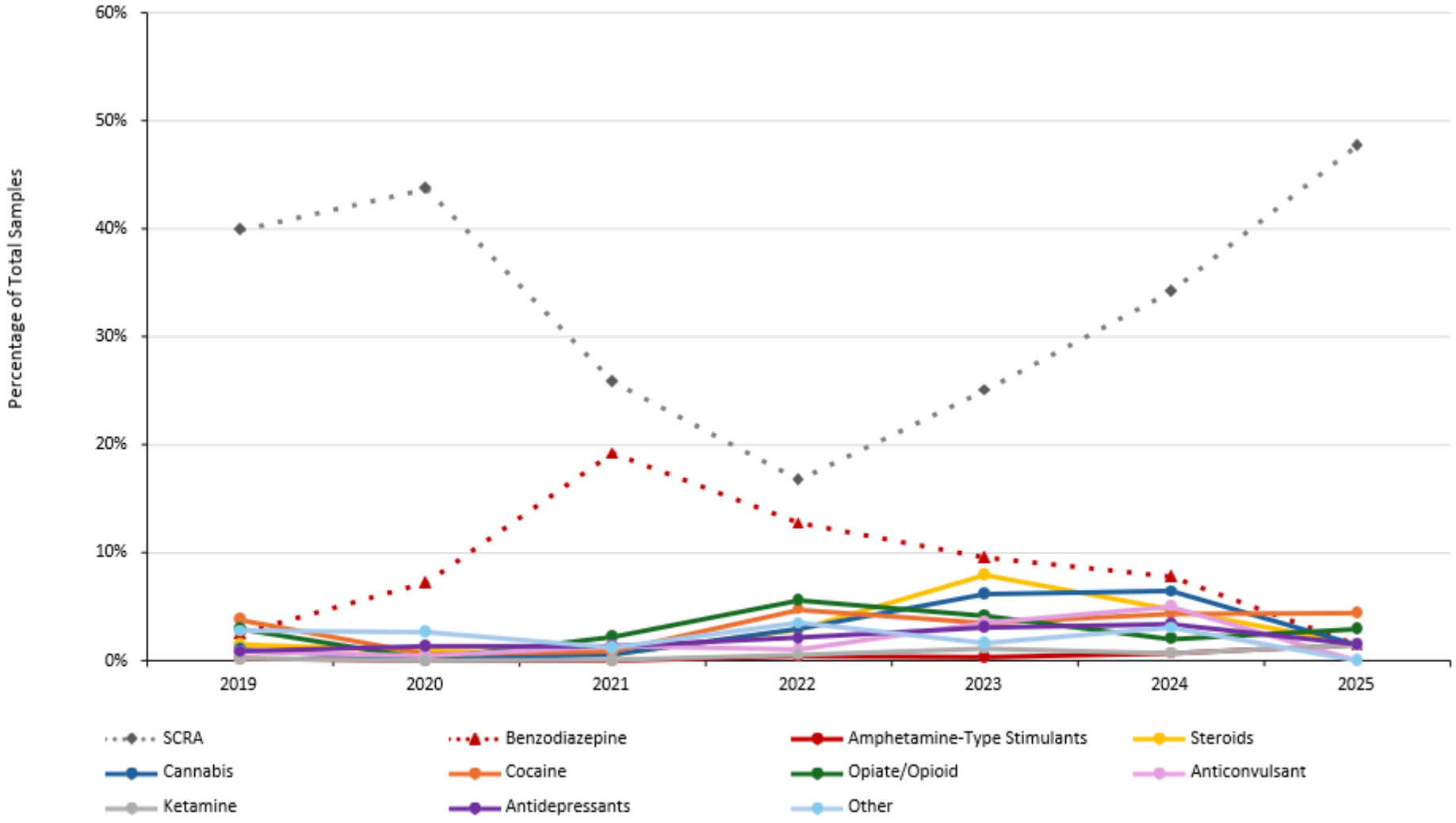

Figure 5: Summary of all drugs detected, including SCRAs and benzodiazepines, from 2019 to 2025 (Q2). The category 'other' refers to analgesics, anaesthetics, z-drugs, antihistamines and antipsychotics

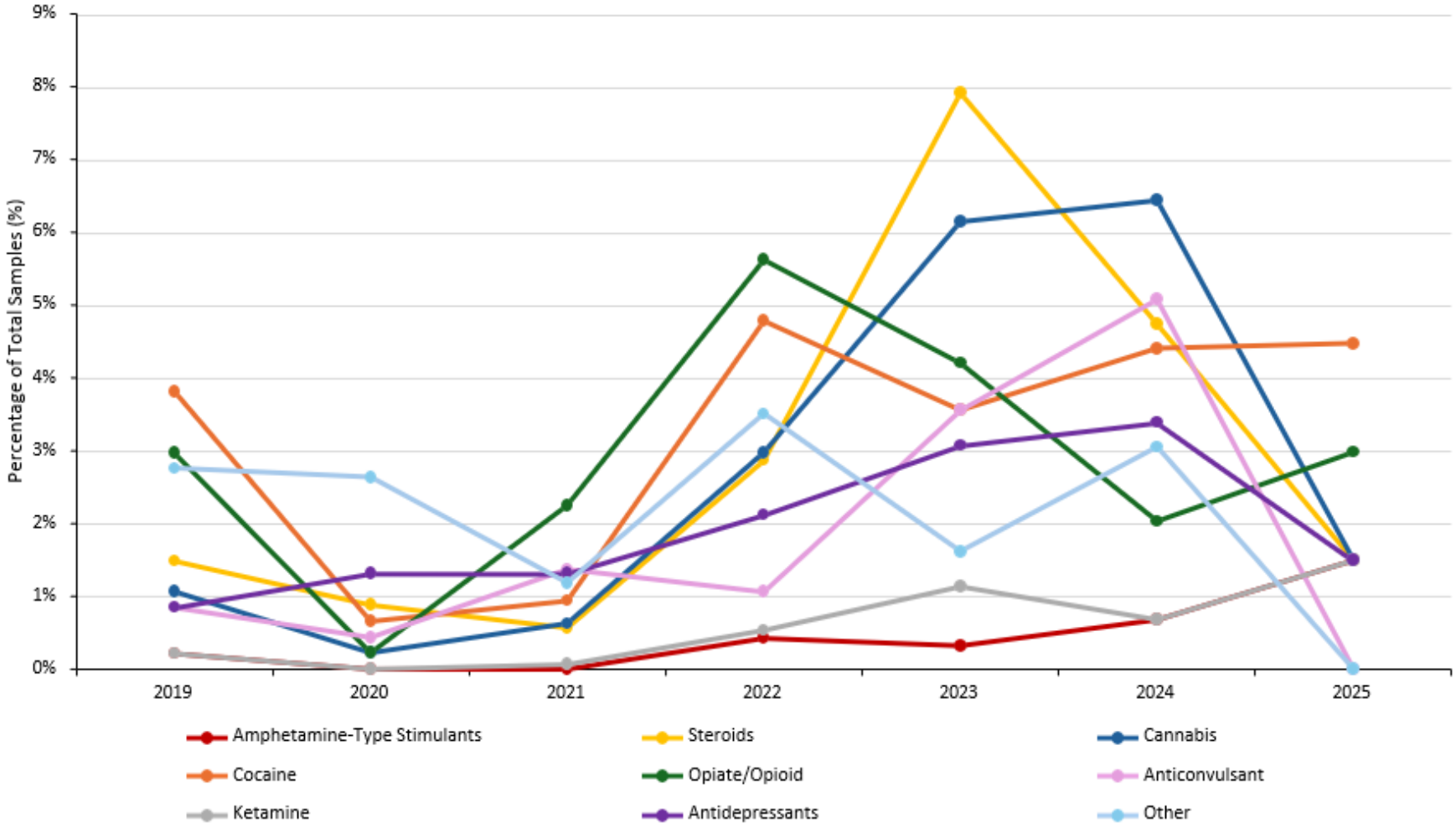

Figure 6: Summary of all drugs detected, excluding SCRAs and benzodiazepines, from 2019 to 2025 (Q2). The category 'other' refers to analgesics, anaesthetics, z-drugs, antihistamines and antipsychotics

Opiates and opioids remain the substance most commonly associated with drug-related deaths in Scotland (5) and for those who have been recently liberated from prison (6). The most commonly detected opiate/opioid is buprenorphine (51 %, 73 out of 142 samples) followed by diamorphine, commonly referred to as heroin (25 %, 36 out of 142 samples).

In addition to these detections the potent synthetic opioid metonitazene, a nitazene analogue, was detected in 7 samples that were seized in 2021 (n= 1) and 2022 (n= 6). Nitazenes are of a growing concern in the United Kingdom due to increased detection in drug-related deaths. They were developed in the 1950s as opioid analgesics but failed to receive medicinal approval (7). The potency of these compounds varies significantly between analogues (8) which are frequently found in combination with other opioids, such as diamorphine, as part of heroin mixtures (9). Potentially more concerning is the detection of nitazenes in non-opiate mixtures, posing an added risk of these substances being unwillingly ingested by opiate naive users (10). In this project, nitazenes have been detected in mixtures with synthetic cannabinoids (n= 6) and benzodiazepines (n= 5). Despite these concerns there have been no detections of nitazenes in the project since 2022, however the samples received as part of this project continue to be monitored closely for these compounds.

In 2023, cocaine was the third most frequently implicated substance in drug-related deaths in Scotland, following opiates and benzodiazepines. Cocaine accounted for 3 % of all samples (n= 126) received as part of this project and has been most commonly detected in powders (47 %, 59 out of 126 samples), followed by infused paper/card (32 %, 40 out of 126 samples).

Anabolic-androgenic steroids, often referred to simply as anabolic steroids, are synthetic drugs related to the male sex hormone testosterone. While these drugs are available as prescription medications to treat hormonal problems or counteract the loss of muscle caused by diseases such as cancer and HIV (11, 12), they are often misused as performance-enhancing drugs to increase muscle mass and improve athletic performance. Although anabolic steroids are mainly regarded as an issue within athletics, people who misuse anabolic steroids often use them alongside other psychoactive substances (illicit drugs and alcohol) (13). Anabolic steroids may also be

used to cope with the bodily and emotional change caused by withdrawal from psychoactive substances. Anabolic steroid misuse can lead to serious health problems, including liver malfunction, cardiac problems, and problems with reproductive organs as well as being associated with psychological problems, including increased aggression and depression (11, 13). In 2023, an increase in anabolic steroid detections in Scottish prisons was observed, these detections occurred predominantly in powder/tablet samples (46 out of 51 anabolic steroid detections in 2023), however 3 of these detections occurred in vape pods. Anabolic steroids are not usually associated with vaping and as such the harms of this method of ingestion are not fully understood. Oxymetholone is the most commonly detected anabolic steroid in the project (58 out of 111), followed by oxandrolone (30 out of 111) and methandienone (29 out of 111).

2.2 Sample Format Trends

Throughout the project, the most commonly encountered format of samples testing positive for a substance has been paper and card, representing 47 % of all positive samples (1232 out of 2632). This is followed by tablets/capsules (18 %, 486 out of 2632) and powders (16 %, 432 out of 2632). However, seized sample formats have evolved considerably over the course of the project (Figure 7).

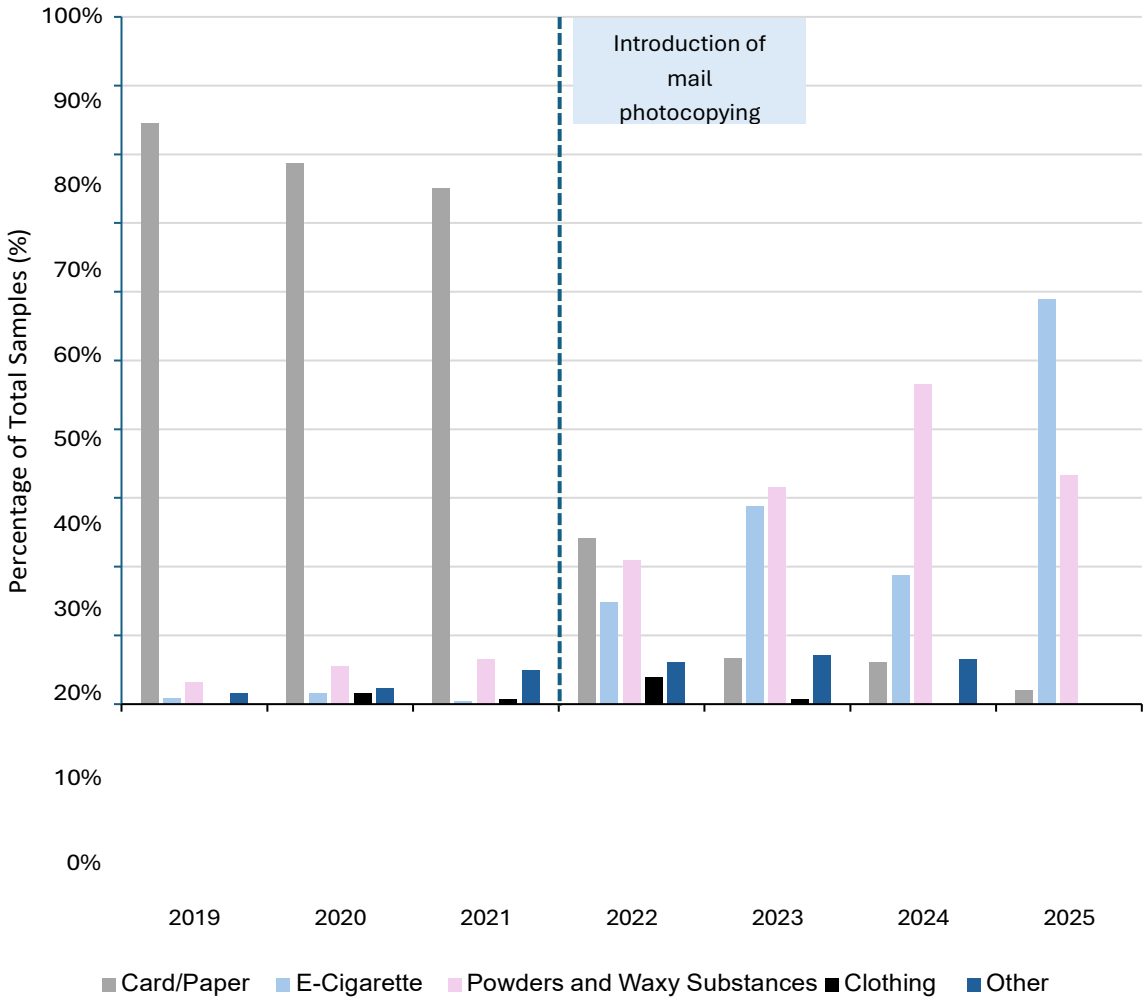

Figure 7: Evolution of sample formats detected during the SPS Drugs in Prison Project, 2019 to July 2025 (n = 2632 positive samples). The category 'Other' includes blotters, herbal material, liquids, and miscellaneous (e.g. drug paraphernalia).

In the first year of the project (2019), positive samples consisted predominantly of paper and card (84 %, 212 samples out of 251) and this trend continued throughout 2020 and 2021. This prevalence data provided a substantial evidence base that demonstrated the mail systems of Scottish prisons were being used as a major route

for controlled substances to enter prison establishments. As a result, in November 2021, a policy change enforced the photocopying of all incoming mail in Scottish prisons (14), with the exception of legal correspondence. While this policy isn't mandated across the rest of the UK, some prisons have chosen to adopt it voluntarily.

Subsequently, increased diversity was observed in sample formats which tested positive for substances, including a notable increase in the number of e-cigarette and powder/ waxy substances. In 2024, powders and waxy substances were the most commonly detected format accounting for 47 % (107 out of 230 samples) of all

samples testing positive, followed by e-cigarettes (19 %, 43 out of 230 samples). This trend has continued into 2025, with e-cigarettes currently being the most detected positive sample format (59 %, 30 out of 51 samples), followed by powders/waxy substances (33 %, 17 out of 51 samples).

E-cigarettes have been available in Scottish prisons since the introduction of the smoke-free prisons policy in 2018. However, it is only since the introduction of the photocopying mail policy in 2021 that e-cigarettes have become one of the most commonly encountered sample formats in the drug seizures project. Although it is not possible to confirm, this may be linked to the increase in powders and waxy substances entering prison establishments.

At the time that paper/card accounted for the majority of sample seizures, it was reported that approximately 1 cm^2 of these materials would be placed between the vape pod and the burner component of the e-cigarette, concealed by the outer casing of the device (1). Such tampering would be challenging to identify during cell searches by prison staff. Since 2022, it is evident from seizures received that powders are being inserted into the clear plastic cartridges (vape pods) of the e-cigarettes. This results in the e-liquid within the cartridge becoming cloudy in appearance and often large particulates are visible (Figure 8). Such tampering would be more evident during a cell search and as such may have resulted in the increase in the number of e-cigarette seizures.

Figure 8: Photograph of vape pod submitted by the SPS to LRCFS. Off-white particulates are visible in the vape liquid.

Following the introduction of the mail photocopying policy, near real-time monitoring of non-judicial drug seizures enabled the rapid identification of a shift in smuggling methods from drug-infused papers to powders. The observed increase in powder seizures may be attributable to the rising prevalence of drone-facilitated deliveries, a problem that has escalated sharply in Scottish prisons. Drone detections across eight Scottish prison estates rose to 65 in 2024, compared to only 2 in 2019 (15-17). While this change suggests a displacement of the problem rather than its resolution, the introduction of photocopying measures for incoming paper correspondence has curtailed one smuggling route.

Subsequent monitoring of the market supported strategic decision making within the SPS and allowed resources to be redirected towards counter-drone interventions. In late 2024, HMP Perth installed secure window grilles and as a result reported no drone breaches following their installation (18). This data highlights the importance of sustained vigilance and real-time monitoring of samples to detect emerging smuggling routes within Scottish prison settings. Such proactive surveillance enables the timely identification of new concealment methods and trafficking patterns, allowing for the rapid implementation of targeted mitigation strategies to reduce drug availability and associated harms.

1. Scottish Prison Service Rapiscan User Network

In addition to monitoring prevalence trends using non-judicial samples, LRCFS provides sustained technical and analytical support to the Scottish Prisons Rapiscan User Network, a collaborative group which meets monthly, comprising researchers at LRCFS and prison staff responsible for the routine operation of ion mobility spectrometry (IMS) instruments within custodial settings. Fifteen Scottish prisons currently use IMS to screen for illicit substances in suspected contraband. The instruments are purchased from the company Rapiscan and are either the Itemiser® 3E or Itemiser® 4DN models. The Rapiscan User Network functions as a forum in which operators can raise troubleshooting queries, share operational experiences, and report notable or unusual detections of contraband. This exchange of information enhances collective problem-solving capacity and promotes the rapid dissemination of best practices across the prison estate. The presence of researchers from LRCFS in these meetings ensures that any technical concerns are addressed promptly and that intelligence generated within the network informs future instrument updates and

training content.

One notable outcome of this information exchange was the evaluation of fentanyl test strips to address operational challenges arising from false positive fentanyl alarms following a routine library update by Rapiscan. Such alarms, triggered by synthetic cannabinoids, created unnecessary disruption, triggered intensive safety protocols, and placed additional strain on staff. In addition, given the high-risk nature of suspected fentanyl seizures, all these samples had to be sent to the Scottish Police Authority (SPA), contributing to high workloads. To counter this, LRCFS evaluated the use of fentanyl test strips as a simple verification tool, enabling staff to rapidly distinguish genuine threats from false alarms (19). This approach ensures that health and safety procedures are enacted only when necessary, while also improving operational efficiency and reducing the volume of unnecessary submissions being submitted to SPA.

A core component of LRCFS's contribution lies in the maintenance and continual development of the internal instrument libraries that underpin the Rapiscan instrument's detection capabilities. Ensuring that these libraries remain current is critical for the reliable identification of emerging substances, particularly given the dynamic nature of illicit drug market within Scottish prisons. LRCFS provides extensive reference data to the Rapiscan User Network, equipping prison staff with the resources needed to confidently identify suspected drug identifications through robust comparative analysis.

In addition, LRCFS provides ongoing support for the training needs of network members. This includes delivering support in instrument operation, interpretation of results, and the handling of novel or challenging sample types. Such training ensures that prison staff remain proficient in utilising the full functionality of the Rapiscan instruments and are confident in addressing operational issues as they arise. LRCFS also plays a key role in the rapid response to urgent operational incidents. Where samples are linked to a serious event, such as the hospitalisation of individuals, LRCFS can expedite their analysis through the network, ensuring that results are delivered with minimal delay. To further streamline this process, LRCFS is working in partnership with SPS to develop a standardised fast-track sample submission form, designed to enable efficient prioritisation and processing of such high-importance cases.

2. Ongoing Collaborative Projects

LRCFS continues to work in close partnership with the SPS to address emerging drug-related challenges in Scottish prisons. An important area of current focus is the monitoring of increased hospital admissions linked to the use of powders, with particular concern around SCRAs. It has been hypothesised by the LRCFS research team that the increased harms associated with these samples is associated with the change in sample format from infused paper to powders. The powders submitted to LRCFS are typically unadulterated and pose a significant risk of individuals exposing themselves to a higher dosage than when consuming infused paper. LRCFS is currently undertaking comparative research examining the strength of synthetic cannabinoid-infused paper samples relative to powder samples seized within the Scottish prisons. By generating robust, evidence-based insights, this work seeks to clarify the risks associated with different sample formats. Findings are being shared directly with SPS to ensure that they can inform frontline practices, enhance staff awareness, and contribute to the development of effective harm reduction strategies. This collaborative approach underscores the value of embedding drug chemistry expertise into operational contexts, enabling responsive action to protect health and safety in prisons.

3. Conclusions

The Scottish Prisons Non-Judicial Drug Seizure Monitoring Project, delivered by LRCFS in partnership with SPS, has generated a comprehensive, evidence-based understanding of the prevalence, composition, and evolving nature of illicit substances within the Scottish prison estate. The near real-time analysis of non-judicial seizures has enabled the timely identification of emerging drug types, concealment methods, and delivery routes, including the sustained presence of synthetic cannabinoids, the detection of novel benzodiazepines, the tampering of e-cigarette devices, the identification of drug infused mail as a smuggling route and the recent shift towards powders and waxy substances. This intelligence has informed operational decision-making and policy development at both national and international levels, ensuring that interventions are targeted, proportionate, and responsive to changing market conditions.

The implementation of a mail photocopying policy in November 2021 illustrates the operational value of this surveillance model. Detection data provided the evidence base for the intervention and subsequent monitoring confirmed its effectiveness, as well as the displacement of smuggling activities towards alternative methods. Intelligence on these adaptations has supported the Scottish Prison Service in prioritising mitigation measures, including the installation of secure window grilles, which have reduced drone detections in certain establishments.

The integration of the project with the Scottish Prisons Rapiscan User Network has strengthened the operational capacity of frontline staff. Regular instrument library updates and the provision of extensive reference data by the team at LRCFS support the confident identification of suspected drug samples. In addition, targeted training and a structured forum for troubleshooting and intelligence sharing have enhanced detection capability across the estate. The facility to expedite the analysis of high-priority samples, particularly those linked to serious incidents such as hospitalisations, further underscores the project's operational impact.

This project demonstrates that sustained vigilance, underpinned by robust scientific capability and close operational collaboration, is essential to reducing the harms associated with drug use in custodial settings. The established framework offers a

model for ongoing, adaptive harm reduction informed by real-time, actionable intelligence.

4. Peer Reviewed Publications

1. Norman C, G Walker, B McKirdy, C McDonald, D Fletcher, LH Antonides, OB Sutcliffe, N Nic Daéid, C McKenzie. Detection and quantitation of synthetic cannabinoid receptor agonists in infused papers from prisons in a constantly evolving illicit market. *Drug Test Anal*, 2020, 12, 538–554. doi:10.1002/dta.2767.

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