

Citizen Participation and Public Petitions Committee

9th Meeting, 2023 (Session 6), Wednesday
31 May 2023

PE1900: Access to prescribed medication for detainees in police custody

Lodged on	14 September 2021
Petitioner	Kevin John Lawson
Petition summary	Calling on the Scottish Parliament to urge the Scottish Government to ensure that all detainees in police custody can access their prescribed medication, including methadone, in line with existing relevant operational procedures and guidance.
Webpage	https://petitions.parliament.scot/petitions/PE1900

Introduction

1. The Committee last considered this petition at its meeting on [18 January 2023](#).
2. At its meeting on 7 December, the Committee agreed to write to the Minister for Drugs Policy and NHS Grampian.
3. The petition summary is included in **Annexe A** and the Official Report of the Committee's last consideration of this petition is at **Annexe B**.
4. The Committee has received two written submissions from the Minister for Drugs and Alcohol Policy, Elena Whitham MSP which can be found at **Annexe C**. The first written submission includes a response from NHS Grampian on issues raised by the Committee following its last consideration of the petition.
5. Written submissions received prior to the Committee's last consideration can be found on the [petition's webpage](#).
6. Further background information about this petition can be found in the SPICe [briefing](#) for this petition.

7. The Scottish Government's initial position on this petition can be found on the [petition's webpage](#).
8. Every petition collects signatures while it remains under consideration. At the time of writing, 4 signatures have been received on this petition.

Action

The Committee is invited to consider what action it wishes to take.

Clerk to the Committee

Annexe A

PE1900: Access to prescribed medication for detainees in police custody

Petitioner

Kevin John Lawson

Date Lodged

14/09/21

Petition summary

Calling on the Scottish Parliament to urge the Scottish Government to ensure that all detainees in police custody can access their prescribed medication, including methadone, in line with existing relevant operational procedures and guidance.

Previous action

I have written to Jamie Halcro Johnston MSP who spoke to Humza Yousaf, who confirmed that detainees in police custody should have access to their prescribed methadone. I have also written to the Chief Executive of the local NHS Board who said it was not their policy to treat detainees in accordance with Official Guidance, and contrary to the Mandela Rules 24-25. I also wrote to the Chief Constable of Police Scotland who stated it wasn't his problem.

Background information

Police Scotland standing operating procedures says that, as long as it is safe and appropriate to do so, detainees should have prescribed medication continued whilst in police custody including the consideration of opiate substitution therapy such as methadone. The NHS delivers that care.

Humza Yousaf said that this is what should be happening, however, the Chief Executive of the local NHS Board confirmed that it was not their policy to treat detainees.

I am angry that detainees are not being treated in accordance with Official Guidance nor [The Mandela Rules](#), Rules 24 and 25. I believe that this actually breaks [Article 3 of the Human Rights Act](#).

I therefore want the Scottish Government to make sure that detainees are being given their prescribed methadone, as they would in the community, or in prison, in accordance with the Official Guidance.

Annexe B

Extract from Official Report of last consideration of PE1900 on 18th January 2023

The Convener: PE1900 was lodged by Kevin John Lawson. The petition, on which, as colleagues will recall, we have previously taken evidence, calls on the Scottish Parliament to urge the Scottish Government to ensure that all detainees in police custody can access their prescribed medication, including methadone, in line with existing relevant operational procedures and guidance. We took evidence from former members of the Drug Deaths Taskforce and, subsequently, the Minister for Drugs Policy. We explored a range of issues in relation to the petition, including the use of dihydrocodeine, access to monitoring data and implementation of the medication-assisted treatment standards.

The committee has received two submissions from the petitioner, Kevin John Lawson, which are included in our papers, and correspondence from NHS Grampian to the Minister for Drugs Policy, which was an area that we explored in our cross-examination.

The correspondence from NHS Grampian confirms that it is currently unable to administer MAT, including methadone, in a police custody setting. That, it states, is due to historical constraints and the absence of a controlled drug licence.

The correspondence states that NHS Grampian has set up two short-life working groups, one of which is specifically tasked with completing the implementation of MAT standards in police custody. NHS Grampian is also looking to have a controlled drug licence in place by the end of February this year.

In the light of the responses received, do colleagues have any comments or suggestions for action?

David Torrance: I would like us to keep the petition open. I think that, in doing so, we should write to the Minister for Drugs Policy to highlight the issues that are raised in the petition and the related evidence; welcome the work of the MAT implementation group to date; highlight the on-going concerns about resource and capacity issues in the health sector; ask for an update on the situation in NHS Grampian by the end of February with regard to whether a controlled drug licence for police custody settings has been obtained and the timescale for completing the implementation of MAT standards in police custody settings; and seek reassurance on issues of capacity and monitoring of implementation across Scotland to ensure that MAT standards are being met.

The Convener: The confirmation of the position in NHS Grampian was disappointing, I have to say; in progressing the petition, we should give proper emphasis to that.

Paul Sweeney (Glasgow) (Lab): I agree with the recommendations that Mr Torrance suggests. Furthermore, I suggest that we consider direct engagement with

health and social care partnerships, where there are clear deficiencies in implementation of the related MAT standards that we are discussing. Perhaps we could seek evidence directly from those health and social care partnerships about what the blockages and impediments are, which could offer us a way to be useful in getting delivery expedited.

The Convener: Just to be clear, what would that involve us doing?

Paul Sweeney: It would involve us identifying health and social care partnerships that are not achieving the MAT standards and inviting the management of those health and social care partnerships to give evidence on why that is a problem.

The Convener: Perhaps we could explore that. [Interruption.] I wonder how to pursue that in the round. NHS Grampian has said that it has not been able to implement the MAT standards in police custody without explaining to us why that is the case, so I wonder whether we might pursue that point directly with NHS Grampian in the first instance, as an example of a health board that is struggling.

Fergus Ewing: I agree in principle with Mr Sweeney's recommendation, because the health and social care partnerships have a direct role to play. I wonder whether, in the first instance, we could raise the specific point in the letter to the minister and perhaps couple that with a request that she provide us with an update on what progress has been made in using the substantial amount of money—I cannot remember the figure; was it £500 million?—that has been set aside for the pursuit of drugs policy objectives in general. The indication that the minister gave was that that was to be used, in large part, to hire relevant personnel, whether as employees, consultants or contractors.

In the case of the provision of services to detainees in police custody, that might well involve the provision of budget for doctors, or other health professionals, who would be hired by the police. I am sorry—I am being a bit long winded, convener.

The Convener: No, it is helpful to tease this out.

Fergus Ewing: A related way of pursuing Mr Sweeney's point might be to ask the minister specifically what progress has been made and how many additional people have been employed in each particular area, if she has that information. If not, we could ask her to get that information, and to give us a progress report on how that money has been spent thus far, because that gets into the nitty-gritty. It is a very substantial amount of money, but what is it being used for? It is not easy to hire the right people quickly—that is a difficult, complex task.

However, I know that the minister is entirely devoted to this work, and I think that all members would be interested in more factual information on these issues.

The Convener: I accept that, but I am mindful of the petitioner here, and I wonder whether, in the first instance, we want to focus specifically on the position in NHS Grampian in our inquiry to the minister.

Fergus Ewing: That is fine, but I think that the situation in all parts of Scotland would probably be of interest.

The Convener: It would be helpful to draft a letter that we could consider before we send it off. I suggest that we ask the clerks to produce a draft letter.

Paul Sweeney: To follow up on that point, what was interesting in the correspondence from NHS Grampian was the point that it is seeking to implement a controlled drug licence by the end of February. It is almost offering itself as a pilot of how to rapidly implement a controlled drug licence. When that happens, it would be helpful to get an insight from the health board and the relevant health and social care partnership as to how they achieved that and what the impediments were.

That might offer an insight for the minister and, indeed, the Parliament into how to speed up the process for other health boards and other health and social care partnership areas so that we can try to get this rolled out. It seems that that was the key sticking point that was identified in the correspondence, so if we find out how to break through that bureaucratic issue, we could focus on that.

The Convener: Yes, that makes sense. We will accommodate all of that. I would quite like us to see a draft—even by correspondence—of the potential letter to the minister. Is that agreed?

Members indicated agreement.

Annexe C

Minister for Drugs and Alcohol Policy submission of 17 April 2023

PE1900/O: Access to prescribed medication for detainees in police custody

I refer to your letter dated 21 March 2023 to Angela Constance MSP in respect of the above petition. In my role as the new Minister for Drugs and Alcohol Policy in Scotland I welcome the opportunity to respond to the Committee's request.

The Scottish Government have written to NHS Grampian to ask for an update on this matter. I attach that letter and the reply from NHS Grampian as part of this submission, alongside the further information below.

Funding

In January 2021, the former First Minister announced a National Mission to save and improve lives alongside an investment of £250 million over 5 years. This included £10 million per year, over the life of this Parliament, to support work on Medication Assisted Treatment (MAT) standards.

With specific regard to NHS Grampian, I can also confirm that the MAT funding allocated is £1,052,919 per year.

Staffing

In terms of workforce, I fully recognise the recruitment challenges affecting the drugs and alcohol workforce, vacancies are problematic across a wide variety of roles and organisation types. That is why, some of the MAT funding is being utilised to recruit new posts to local services.

In November 2022, local areas returned progress reports to the Scottish Government, including the number of staff that had been successfully recruited to that date. The information returned detailed that whilst challenges remained, 140.45 WTE posts had been filled across all areas in Scotland.

With regards to NHS Grampian, and again as of November 2022, 32.8 WTE posts had been recruited. I must caveat however, as I am sure you will appreciate, that the figures returned are only able to provide a snapshot of the picture for all areas at that particular time. This figure is not an official or published statistic and will of course change as time progresses.

NHS Grampian Letter

You will see from the attached letter (Annexe A) from NHS Grampian that there has been a delay in relation to the Controlled Drug Licence application. This is disappointing, but it is unfortunately not within the competence of the Scottish Government to intervene. This is because the Home Office is responsible for the administration of Controlled Drug Licences and the delivery of healthcare in police custody is the responsibility of Integration Authorities working closely with Police Scotland.

I am encouraged that NHS Grampian reported 15 additional members of staff secured through MAT/ National Mission funding to support the implementation of MAT standards. However, you will notice that this is different to the 32.8 WTE staffing number reported by NHS Grampian in November 2022 (as above). We have clarified with NHS Grampian, and the reason is that there are 15 additional NHS staff, and there has also been a range of roles recruited to implement all aspects of MAT, including social workers and support workers which make up the balance.

I am also encouraged by the progress made through the NHS Grampian working group to support the implementation of MAT standards. This includes sharing practices and creating more pathways and support for those who are moved to police custody.

Please let me know if there is anything further that you require on this matter. I am keen that we work collectively on the areas where we are able to reduce the harms of problematic drug use and address the high number of drug-related deaths across our country.

Minister for Drugs and Alcohol Policy, Elena Whitham MSP

Annexe A

Dear Orlando Heijmer-Mason,

Thank you for your letter dated 28th March 2023. The detail below should provide an update as requested.

Status of NHS Grampian's Controlled Drug License Application

An initial date of February 2023 was given to the Minister for Drug Policy for an application to be made for a Controlled Drug Licence. This related to the application being submitted, not the timescale for a licence to be in place. The process for applying for a licence is complex and we apologise that with hindsight a date of February 2023 was an ambitious target given the processes that need to be in place and the current system wide pressures being experienced by health and social care services. It is difficult to give a definitive timescale as to when a licence will be in place as the Home Office require to visit the site prior to any licence being granted and this could be upwards of 16 weeks from the application being made. We are currently working to an application being made by the end of April 2023.

Progress made by the NHS Grampian working group tasked with the complete implementation of MAT standards within Police Custody

The working group continues to meet on a fortnightly basis and now has membership from wider multi agency partners from within the Health and Social Care Partnership. Community based Drug and Alcohol Service and Justice Social Work Service are key partners involved in supporting the implementation of MAT standards within Police Custody. Although the working group has a clear focus on Police Custody, this is only one of the justice settings in which we are working towards the implementation of MAT within the required timeline of 31 March 2025.

Our community based Drug and Alcohol service colleagues have been working on the redesign of service delivery to achieve the implementation of MAT Standards 1-5 over the last 12 months. This work is now progressing to the next phase of implementation of MAT 6-10 in the coming 12 months. There is learning which is being shared across the community and custody teams to develop Mat 1-5 in the setting of Police Custody, for example, some standard operating procedures, processes, practice guidance and training and support of practitioners. This also promotes a more seamless transition for people

who move between community and custody because their experience of treatment and support is consistent with what is established as good practice in meeting the MAT standards in the community. For example, in terms of the provision of harm reduction, many Grampian wide standard operating procedures and supporting practice guidance are being shared with practitioners who are based within Police Custody.

Pharmacy colleagues have been central to this work within the community and these procedures are as relevant within custody although there may be some contextual changes required.

The inclusion of Custody health centre practitioners in the community based Project Groups implementing each of the MAT standards is a key component to support the full implementation of MAT in police custody and this will continue across the next 12 months. This ensures access to the specific training and support to implement MAT 6 and 10.

Care pathways into and from police custody are also an important area of work which is being progressed in order that information sharing and processes across the localities in Grampian are established and onward referral routes are clear following release after Court appearance. The identification of people most at risk of drug related harm and specifically near fatal overdose is also central to evidencing that MAT 3 is being implemented. Assessment processes and access to information similar to what is available in the community are key features to ensuring that custody practitioners are aware of a person's history and also how best to safeguard their wellbeing through appropriate referrals to outreach services following release.

Sharing process and practice from the Outreach Service established in Aberdeenshire is taking place with custody practitioners to raise awareness and access learning of new assessment skills and interventions. Justice social work in the settings of Court are also part of this work to ensure the information sharing and care pathways to treatment and support are clear.

The specific challenges being faced by NHS Grampian in delivering MAT standards in Police Custody

The large geographical area which custody setting cover is challenging due to the requirement for practitioners to become familiar with a number of different community based services, processes and care pathways.

Recruitment and retention of staff is an ongoing challenge. Access to additional training and support to ensure that new skills and different ways of working are being established in a safe and consistent way across the workforce is difficult given that day to day operational demand takes priority.

How many additional members of staff have been secured to support further progress with MAT implementation in NHS Grampian

Within Aberdeenshire NHS Grampian staffing in the community, there have been fifteen additional members of staff secured through MAT/National Mission funding to support the implementation of MAT standards.

Yours sincerely

Professor Caroline Hiscox

Chief Executive, NHS Grampian

**Minister for Drugs and Alcohol Policy
submission of 24 April 2023**

**PE1900/P: Access to prescribed medication for
detainees in police custody**

Following my most recent correspondence to the Citizen Participation and Public Petitions Committee, the HMICS has published new information relevant to petition PE1900.

This new report outlines similar issues to those reported in Grampian, which is the subject of petition PE1900, in the NHS Lanarkshire area. This new information contradicts the assurances the former Minister for Drugs Policy received in advance of her evidence to this committee, 7 December 2022.

I would therefore like to bring this new development to the Committees attention and to provide a short update on our next steps.

Today, I will commit to conducting a rapid review of each health board to ascertain the extent of these issues across Scotland.

I will write to the Chief Executive of each territorial health board requesting confirmation that they have:

- A controlled drug licence to store and/or supply controlled drugs as required by law, in every custody unit.
- Written policies and effective practices which ensure that every detainee has access to their prescribed medication in custody, whether that be OST or any other prescribed medication.
- Robust processes and adequate training to ensure that every adverse health event, complaint or feedback is recorded on Datix.

I will also write to Police Scotland to request assurances that:

- They have written policies and effective practices which ensure that every detainee has access to their prescribed medication in custody, whether that be OST or any other prescribed medication.
- Every member of custody staff is trained to administer naloxone and that this is available in every custody unit.
- Every member of custody staff has undertaken specialist training on substance dependency, mental health and trauma informed care.

Where these are not in place, I will be requesting a plan for implementing these changes and a timeline. I will monitor this situation closely and provide further updates to the committees as they become available.

I look forward to working with you on this matter.

Minister for Drugs and Alcohol Policy, Elena Whitham MSP