

Publication Report



National Naloxone Programme Scotland Monitoring Report – naloxone kits issued in 2011/12

31st July 2012

Contents

Contents.....	1
Introduction	2
Key points	3
‘Take home’ naloxone kits issued in the community.....	3
‘Take home’ naloxone kits issued by prisons	3
Results and Commentary.....	5
1. Supply of ‘take-home’ naloxone kits in the community.....	5
1.1 Participation across NHS boards	5
1.2 Whom kits were issued to	8
1.3 Kits supplied to ‘persons at risk’ – gender and age of recipient	9
1.4 First supply or repeat supply?.....	11
2. Supply of ‘take-home’ naloxone kits by prisons	13
2.1 Participation across prisons	13
2.2 Whom kits were issued to	14
2.3 Kits supplied to ‘persons at risk’ – gender and age of recipient	14
2.4 First supply or repeat supply?.....	16
3. Conclusions	18
Glossary.....	19
List of Tables.....	20
Contact.....	21
Further Information.....	21
Rate this publication.....	21
Appendix	22
A1 – Background Information	22
A1.1 Policy Context.....	22
A1.2 National Naloxone Programme Supply Monitoring – Dataset Items	23
A1.3 Baseline Survey and Measure.....	25
A1.4 References	26
A2 – Publication Metadata (including revisions details).....	27
A3 – Early Access details (including Pre-Release Access)	29
A4 – ISD and Official Statistics.....	30

Introduction

This is the first annual release of monitoring information from the National Naloxone Programme in Scotland (further background to the national programme is available at Appendix A1.1). This report presents data on the number of 'take-home' naloxone kits issued as part of the national programme during 2011/12. Data are presented separately for kits issued in the community and kits issued by prisons, prior to prisoner release.

The national naloxone monitoring analyses presented here provide vital evidence of the reach of the national 'take home' naloxone programme in Scotland. The Scottish Government commissioned the Information Services Division (ISD) of NHS National Services Scotland to report on the programme monitoring, using an agreed national dataset and a database set up at ISD.

Naloxone is an opioid antagonist which can temporarily reverse the effects of an opioid overdose, providing more time for emergency services to arrive and treatment to be given. 'Take home' naloxone is administered intramuscularly. The supply of a 'take-home' kit follows training on how to administer it safely and quickly. A National Coordinator has been appointed to facilitate the delivery of the programme, develop training resources, deliver training to a range of stakeholders across Scotland and support local agencies to embed 'take-home' naloxone distribution within community-based services.

During April 2011, Greater Glasgow & Clyde and Highland NHS boards piloted the data collection processes for the community-based element of the National Naloxone Programme. Incremental rollout of 'take-home' naloxone, and associated data collection, continued throughout Scotland from April 2011. By January 2012, 13 of 14 NHS boards in Scotland were participating in the programme. The supply of 'take home' naloxone by prisons was introduced, incrementally, from February 2011 and by June 2011 all Scottish prisons were participating in the programme. From 1st November 2011 responsibility for prisoner health care transferred from the Scottish Prison Service (SPS) to the NHS.

When interpreting the figures provided in this publication it should be recognised that this is the first year of the national programme monitoring, that there has been an incremental rollout of the programme across Scotland in year one, and that as the monitoring progresses there may be 'lessons learnt' to enhance data quality and completeness.

The aim of the National Naloxone Programme is to contribute to a reduction in fatal opioid overdoses in Scotland. The rate of drug related deaths in Scotland remains higher than the UK average (9.17 drug related deaths per 100,000 population in Scotland in 2010, compared with 3.1 in the UK¹). An earlier investigation into drug related deaths in Scotland and more recent information from Scotland's national drug related deaths database has shown that the majority of these deaths are opioid related, the majority are 'accidental overdoses', the majority are 'witnessed' and 50% have been in prison (Zador et al, 2005²; Graham et al, 2011 and 2012^{3 4}). As well as monitoring the supply of 'take-home' naloxone kits in Scotland, ISD Scotland were tasked by the Scottish Government to measure the impact of increased naloxone availability on the number of (opioid) drug related deaths in Scotland and, in particular, to monitor the number and percentage of these occurring within four weeks of prison release. ISD have conducted a baseline survey, using calendar years 2007-2009, and the results of this are shown in [tables 3.1](#) and [3.2](#). Performance against this baseline will be measured for calendar years 2011-2013. See Appendix A1.3 for more details.

Key points

- There were 3,445 'take home' naloxone kits issued in Scotland in 2011/12, as part of the National Naloxone Programme.

'Take home' naloxone kits issued in the community

- There were a total of 2,730 'take home' naloxone kits issued in the community in Scotland in 2011/12, as part of the National Naloxone Programme. There was an incremental rollout of the programme across NHS boards in Scotland during the year. By January 2012, 13 of 14 NHS boards were participating in the programme.
- With regard to monthly supply figures, the largest number of kits supplied in the community was in the month of December. It should be noted though that this coincides with festive overdose prevention campaigns, the festive period being a recognised high risk period for this client group. The October to December 2011 quarter had the largest number of kits issued, of the four quarterly periods in 2011/12.
- The majority of kits issued in the community (2,370, or 87%), were issued to individuals at risk of opioid overdose, 295 (11%) were supplied to service workers, 60 (2%) to family and friends (with the recorded consent of the person at risk) and five (<1%) 'unknown' who they were supplied to.
- Of the total 2,730 kits issued in the community in 2011/12, 2,287 (84%) were reported to be a 'first' supply, 348 (13%) a 'repeat' supply and 95 (3%) 'unknown' if first or repeat supply. In 132 cases 'repeat' supply was due to use of the previous kit on a person at risk.
- As part of the agreed national naloxone dataset, persons at risk of opioid overdose are asked for their consent to the recording of their personal data for monitoring purposes. There were 2,370 kits issued in the community in 2011/12 where the recipient was a person at risk. In 2,055 of these cases (87%) the individual consented to the recording of their personal data. Of these, almost two thirds (64%) were male, whilst 10% were under 25 years of age, 46% aged 25-34 years, 43% aged 35 years plus and <1% 'unknown'. Note: the above data relate to 'kits issued' to persons at risk, rather than 'individuals' who were issued a kit, so could include repeat issues to the same person.

'Take home' naloxone kits issued by prisons

- In addition to the kits issued in the community, there were a total of 715 'take home' naloxone kits issued by prisons in Scotland in 2011/12, all to persons at risk of opioid overdose. It is important to note that kits are not issued 'in prison', rather they are supplied to the individual 'on release'.
- Based on quarterly statistics, the largest number of kits issued was in the first quarter of the year, April to June 2011, and the smallest in the fourth quarter, January to March 2012. Figures for the first quarter of the year are based on aggregate statistics supplied to ISD from SPS HQ, whilst data from 1st July 2011 onwards are based on individual monitoring returns submitted to ISD.
- Based on the time period for which individual monitoring returns were submitted to ISD (and therefore for which more analyses of the data are possible), there were a total of 502 kits issued and in 498 cases (99%) the person consented to the recording of their personal data for monitoring purposes. Of these, over two thirds (68%) were male,

whilst 19% were under 25 years of age, 52% were aged 25-34, 27% aged 35 years and over and 2% 'unknown'. When compared with kits supplied to persons at risk of opioid overdose in the community, recipients in prisons were more likely to be male and their age profile was 'relatively' younger.

- Of the total 715 kits issued in prisons in 2011/12, 679 (95%) were reported to be a 'first' supply and 36 (5%) a 'repeat' supply. Where the supply was noted as a 'repeat' supply this could be following initial supply in the community, or it could be that the previous supply was made on release from a previous stay in prison (i.e. issued by a prison).

Results and Commentary

1. Supply of ‘take-home’ naloxone kits in the community

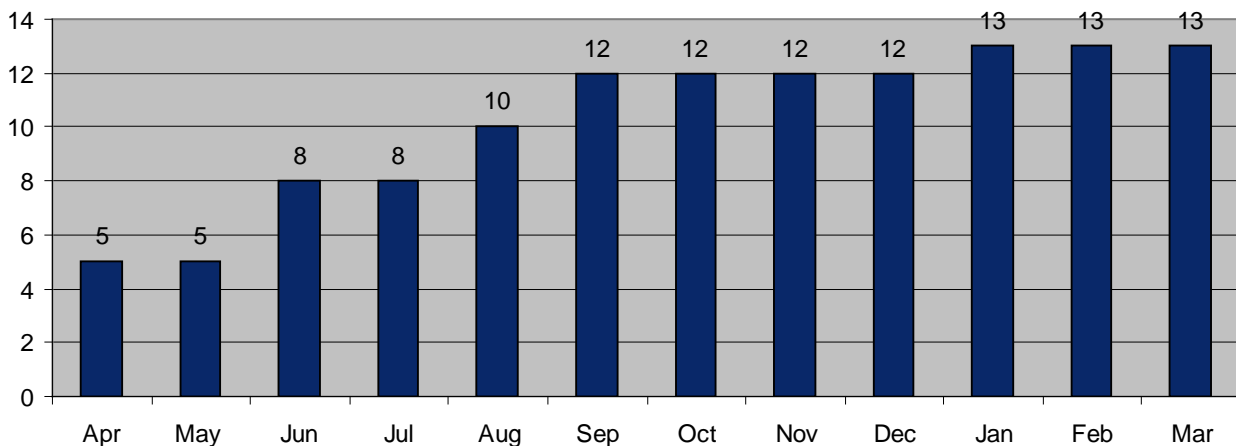
This chapter presents information on the number of ‘take-home’ naloxone kits issued in the community in Scotland in 2011/12, including breakdowns by month and by NHS board as well as estimates of the number of kits issued per 1,000 people with problem drug use (PDUs) in each board. Presented also, for those kits issued to individuals at risk of opioid overdose (and for those cases where the person consented to the sharing of their personal data for monitoring purposes), are breakdowns by gender and by age. There are data too on numbers of ‘first’ and ‘repeat’ supplies and reasons for ‘repeat’ supply.

1.1 Participation across NHS boards

When considering the statistics in this report on the first year of monitoring of the National Naloxone Programme ‘take-home’ kits initiative, it is important to bear in mind that there has been an incremental rollout of the programme across NHS boards during 2011/12, rather than all boards commencing from 1st April 2011. Also, three board areas (Greater Glasgow & Clyde, the Inverness area of NHS Highland and Lanarkshire) were involved in the supply of ‘take-home’ naloxone prior to the official National Programme supply and monitoring, and this longer-term supply of naloxone in these areas may impact on their 2011/12 statistics. This is commented on further later in the report.

The data collection processes for the monitoring of the National Naloxone Programme were first piloted in Greater Glasgow & Clyde and Highland NHS boards from early April 2011 with Dumfries & Galloway, Lanarkshire and Lothian commencing data collection later in April. It had been hoped to involve four boards in the initial monitoring pilot, however delays in the supply of the naloxone kits led to this being conducted in two boards. By September 2011, 12 NHS boards were participating and by January 2012 this has risen to 13 of the 14 NHS boards in Scotland (note: the remaining board is Western Isles, who will not be participating), see Figure 1.1.

Figure 1.1: Number of NHS boards participating in the National Naloxone Programme community-based supply of kits in 2011/12



1. Western Isles is not participating in the programme.

Figure 1.2: Number of ‘take-home’ naloxone kits issued each month in the community in Scotland, in 2011/12

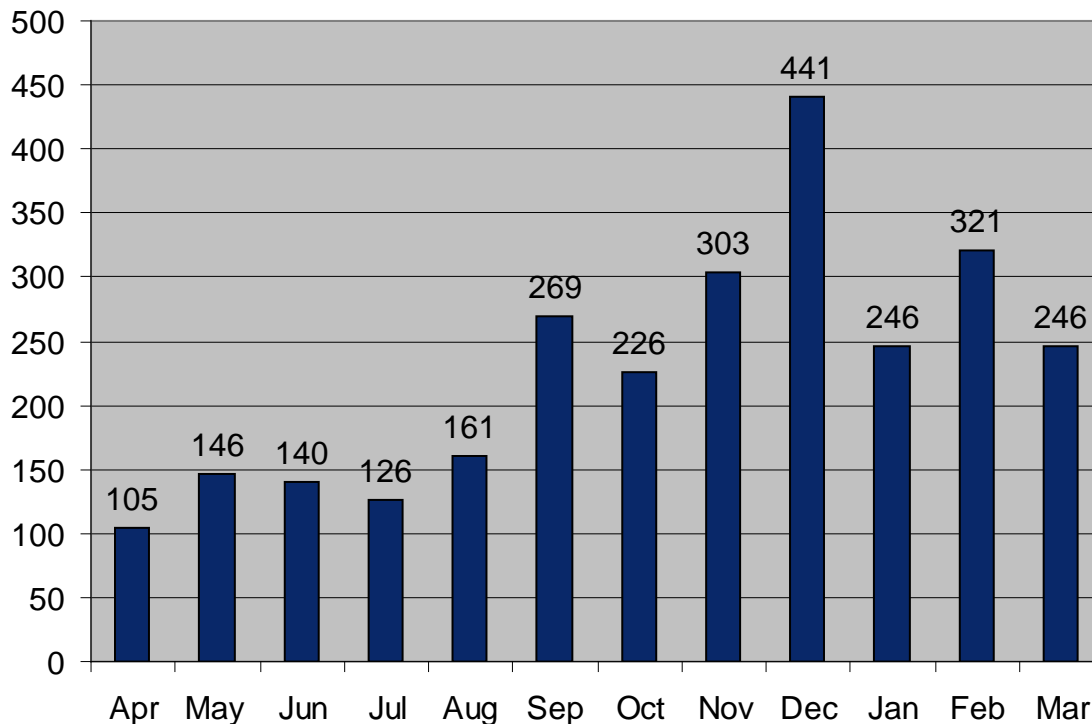


Figure 1.2 and [table 1.1](#) show the number of ‘take home’ naloxone kits issued each month in 2011/12, beginning with 105 kits issued in April and reaching a peak of 441 in December 2011. Figures on the number of kits supplied on a quarterly basis in 2011/12 are shown in [table 1.2](#) including a breakdown of the figures by NHS board. There were 391 kits issued in the first quarter of the year. The highest number of kits issued (970) was in the third quarter, October to December 2011.

Figure 1.3 and [table 1.2](#) show the total number of ‘take-home’ naloxone kits issued in the community in each NHS board in 2011/12. As noted above, NHS boards began to participate in the programme at different times during the year. In 2011/12, Greater Glasgow & Clyde supplied the largest number of kits (623), followed by Lothian 520 and Highland 338. A total of 2,730 kits were issued in the community in Scotland in 2011/12 as part of the National Naloxone Programme.

A number of factors will have influenced the numbers of naloxone kits supplied in the community in 2011/12. Amongst the issues that have been highlighted by NHS boards are: an increase in numbers over time as more staff/services have been trained to deliver ‘take home’ naloxone; staff resource shortages/vacancies impacting on the numbers; lessons learnt on the most effective ways of delivering the service (e.g. one-to-one versus group sessions, and the use of ‘outreach’ services); the challenges in engaging with clients (getting them to admit to still injecting or being around those who inject and therefore in need of a naloxone supply); reference to ‘normalisation’ of ‘take-home’ naloxone kits in the community – as more individuals accepted the training and kits, others felt it was OK for them to participate too. There are boards whose naloxone supply predates the National Naloxone Programme, e.g. the Inverness area of Highland NHS board (where kits have been supplied since July 2009). Numbers there, therefore, might not be expected to keep rising throughout 2011/12 and beyond. Also, for boards who had pre existing programmes

the introduction of a national scheme necessitated changes in training, delivery, paperwork and recording systems that affected implementation.

Figure 1.3 : Number of ‘take-home’ naloxone kits supplied in the community in 2011/12, NHS boards (Scotland total 2,730)

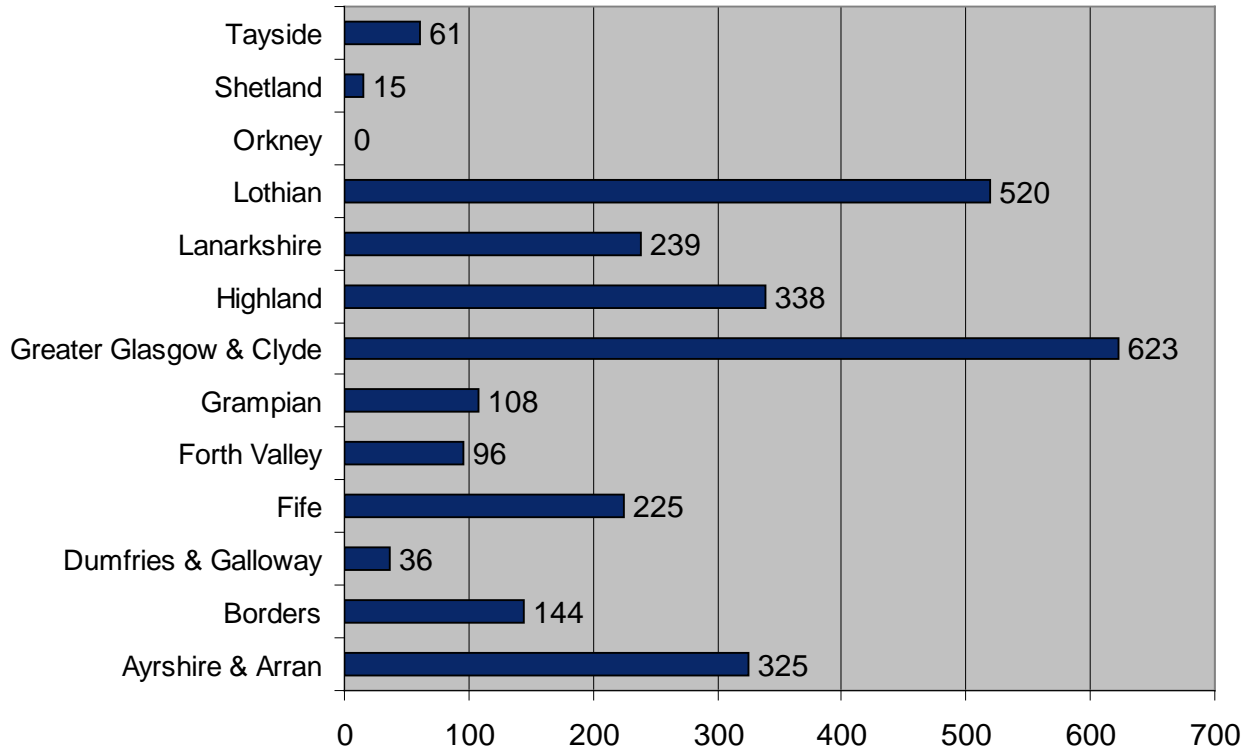
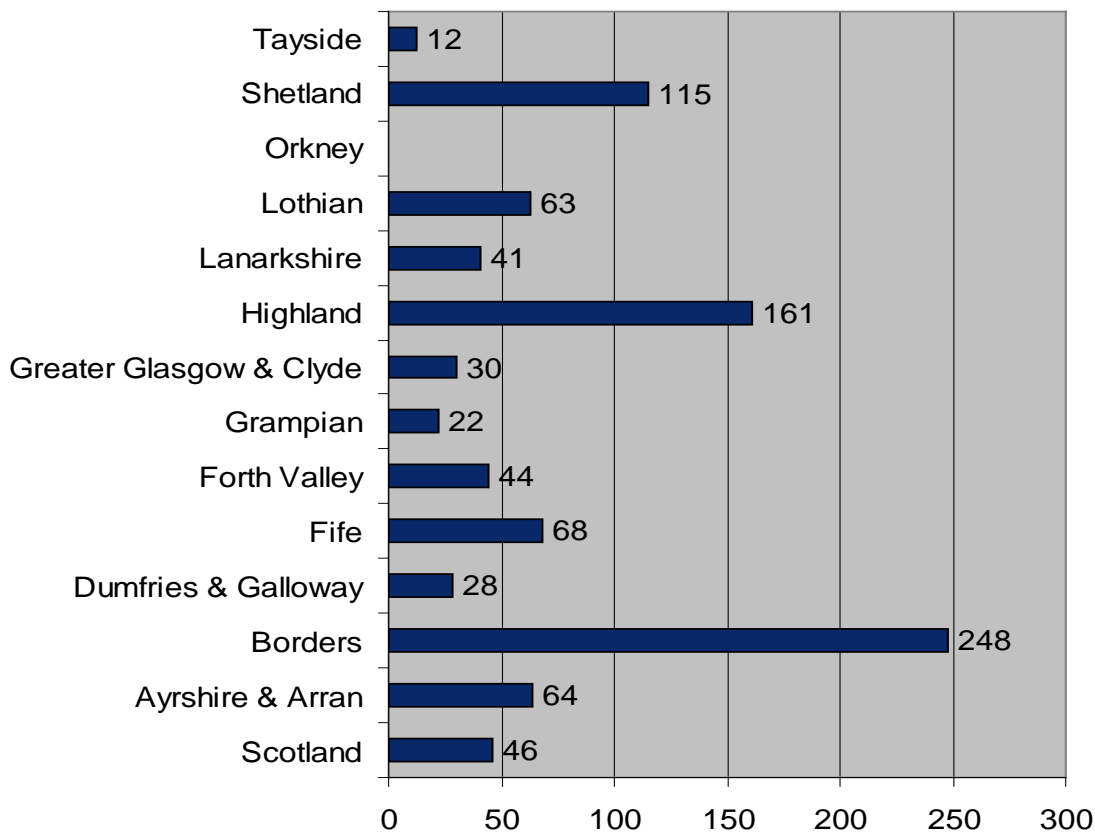


Figure 1.4 and [table 1.3](#) provide estimates of the number of ‘take-home’ naloxone kits issued in the community in 2011/12 per 1,000 people with problem drug use (PDUs) aged 15-64 in each NHS board. These figures have been produced using the naloxone kits supply figures above along with the most recent estimates (2009/10) of the prevalence of problem drug use in Scotland (Redpath, A., et al 2011⁵). Borders NHS board had the highest number of kits issued per 1,000 estimated people with drug use problems (248 per 1,000) followed by Highland with 161 per 1,000 (Scotland figure 46 per 1,000).

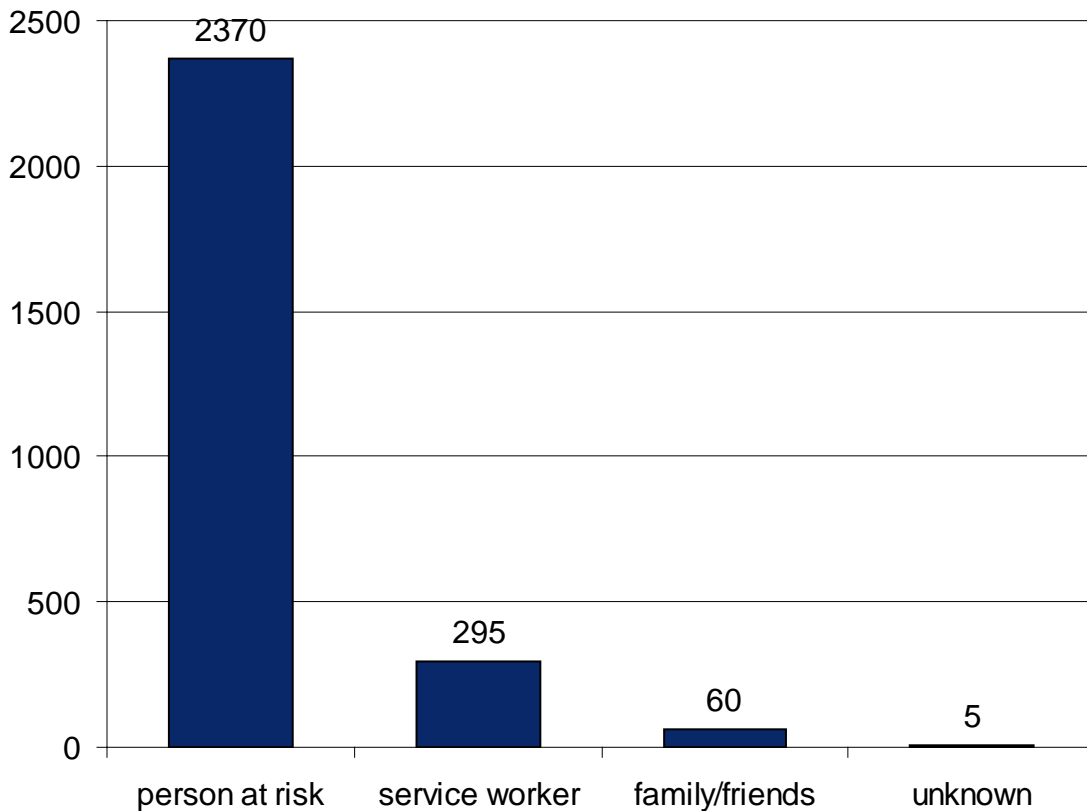
Figure 1.4 : Number of ‘take-home’ naloxone kits issued in the community in 2011/12, per 1,000 estimated PDUs aged 15-64, Scotland and NHS boards



1.2 Whom kits were issued to

The ‘take-home’ naloxone kits issued in the community may be issued to either: the person at risk of opioid overdose, to family/friends (with the recorded consent of the person at risk) or to a service worker. Figure 1.5 shows, for the total 2,730 kits issued in the community in Scotland in 2011/12, who received the kit. The majority of kits (2,370 or 87% of the total) were issued to persons at risk, 295 (11%) to a service worker, 60 (2%) to family/friends and <1% ‘unknown’ who distributed to (note: the latter will include cases where the recipient was recorded as ‘unknown’ as well as cases where recipient details were missing). [Table 1.4](#) provides a quarterly breakdown of kits issued, by who distributed to (Scotland level in 2011/12), whilst [table 1.5](#) shows the numbers at NHS board level for the whole year. The latter shows that for three of the 13 participating boards kits were distributed only to ‘persons at risk’.

Figure 1.5 : ‘Take-home’ naloxone kits supplied in the community in 2011/12 – to whom they were issued

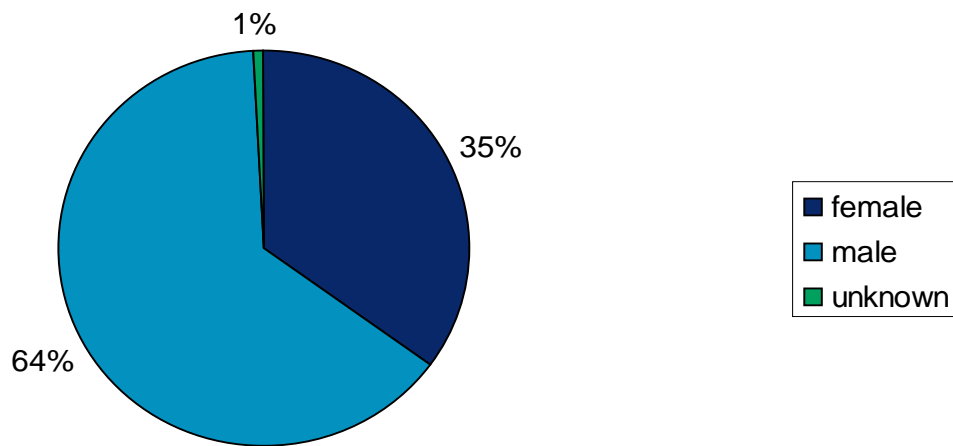


1.3 Kits supplied to ‘persons at risk’ – gender and age of recipient

The agreed national naloxone supply dataset includes a question asking whether the person receiving the kit has consented to the sharing of their personal data for monitoring purposes. If the person does consent, then the following ‘personal data’ should be recorded: forename and surname (initials only are submitted to ISD for monitoring purposes), gender, date of birth/age and postcode sector of residence (see Appendix A1.2 for full list of Dataset Items).

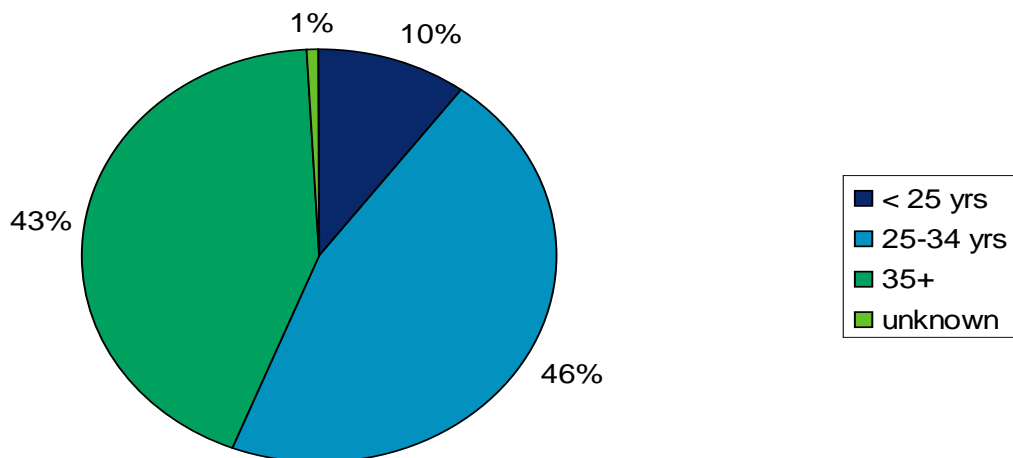
As noted above, there were 2,370 kits supplied in the community in 2011/12 to a ‘person at risk’. In 2,055 (87%) of these cases the person consented to the sharing of their personal data for monitoring purposes and in 315 cases (13%) they did not consent. Note: a key reason for non-consent in the initial months of 2011/12 was boards who had been involved in the supply of naloxone kits prior to the National Programme continuing to use their original data collection forms, which did not include an option for ‘consent to sharing personal data for monitoring purposes’. Once they switched to using the agreed national monitoring dataset, consent rates increased (see [table 1.6](#) ‘notes’). According to the numbers consenting to share their personal data in 2011/12, further personal data should be available for 2,055 cases of kits supplied to a person at risk, however there were a small number of cases where consent was granted, but the data was not recorded, see ‘unknown’ category below.

Figure 1.6 : ‘Take home’ naloxone kits supplied to persons at risk in the community in 2011/12 – gender of recipient (n=2,055)



Almost two-thirds (64%) of ‘take home’ naloxone kits supplied to a ‘person at risk’ in the community in Scotland in 2011/12 were supplied to a male, over one third (35%) to a female and in 1% of cases gender was ‘unknown’ (i.e. not recorded), figure 1.6 and [table 1.7](#). Note: kits may have been issued as a ‘first’ or a ‘repeat’ supply (see section 1.4). Whilst the naloxone dataset includes a number of data items that may aid the calculation of the number of ‘individuals’ who were supplied kits, due to gaps in data and/or variations in how data are recorded between records (e.g. recording of slightly different initials, postcode sector information and/or date of birth) it is not possible to identify for definite the number of individuals involved. For comparison, according to the latest estimates of the number of people with problem drug use in Scotland (in 2009/10), 71% were male and 29% female.

Figure 1.7 : ‘Take home’ naloxone kits supplied to persons at risk in the community in 2011/12 – age group of recipient (n=2,055)



Ten per cent of ‘take home’ naloxone kits supplied to a person at risk in the community in 2011/12 were supplied to an individual < 25 years of age, 46% to someone aged 25-34 years, 35 years and over 43% and in 1% of cases age was ‘unknown’, see Figure 1.7. [Table 1.7](#) also provides breakdowns by both gender and age for all-Scotland in 2011/12.

1.4 First supply or repeat supply?

Naloxone kits may be issued as a ‘first’ supply or as a ‘repeat’ supply. Figure 1.8 and [table 1.8](#) show the number of kits issued in the community in 2011/12 (Scotland-level) according to whether these were a ‘first’ or a ‘repeat’ supply (based on self-report). Of the total 2,730 kits issued in 2011/12, 2,287 (84%) were reported to be a ‘first’ supply, 348 (13%) were a ‘repeat’ supply and in 95 cases (3% of the total) it was ‘unknown’ whether this was a first or a repeat supply. (note: the latter will include cases where a response of ‘unknown’ was recorded as well as cases where information was missing).

Figure 1.8 : ‘Take-home’ naloxone kits supplied in the community in 2011/12 – ‘first’ supply or ‘repeat’ supply

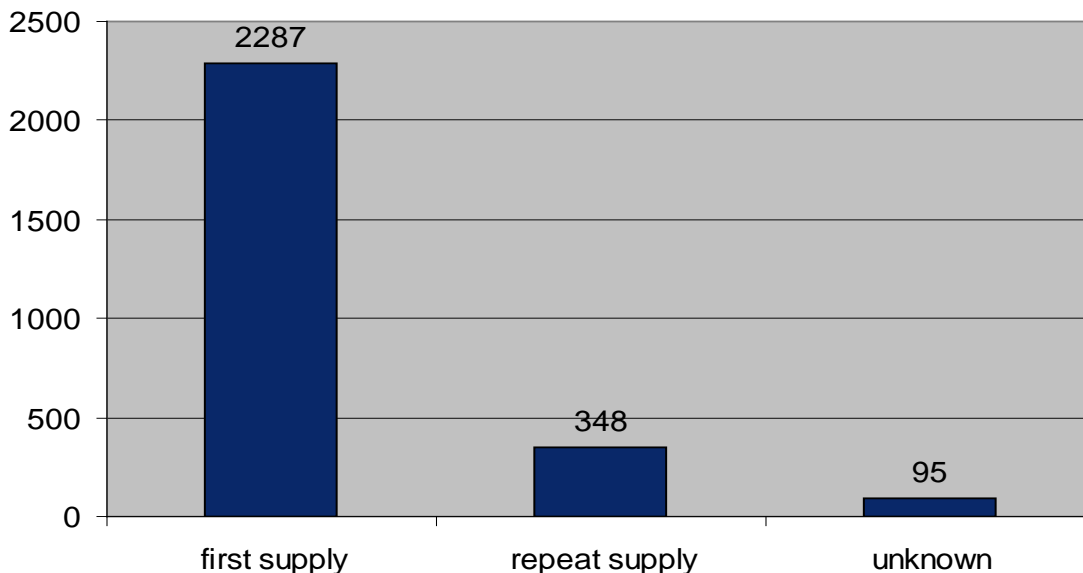
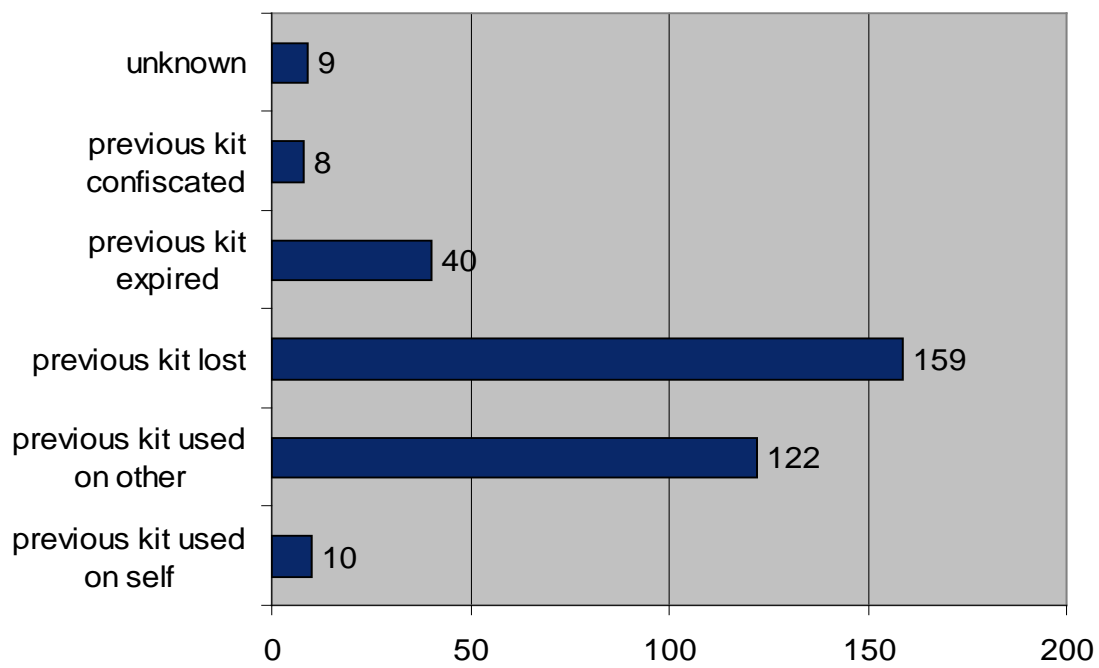


Figure 1.9 provides a breakdown of the reasons for ‘repeat’ supply of naloxone (based on self-report). Of the 348 cases noted as ‘repeat’ issue of a kit in the community in 2011/12, the largest number of these (159, or 46%) were reported to be due to ‘previous kit lost’, 122 cases (35%) ‘kit used on other’, 40 cases (11%) ‘previous kit expired’ (i.e. the naloxone, as a pharmaceutical product, had expired), 10 cases (3%) ‘previous kit used on self’ (note: where administered to ‘self’ or to ‘another’, it is not recorded in either case who administered the injection), eight cases (2%) ‘previous kit confiscated’ and nine cases ‘unknown’ reason for repeat supply. In 132 cases ‘repeat’ supply was due to use of the previous kit on a person at risk of opioid overdose. [Table 1.8](#) also provides information on kits issued as ‘repeat’ supply and the reason for ‘repeat’ supply, including breakdowns according to the recipient of the kit.

Figure 1.9 : 'Repeat' supplies of naloxone in the community in 2011/12 – reported reason for 'repeat' supply



2. Supply of ‘take-home’ naloxone kits by prisons

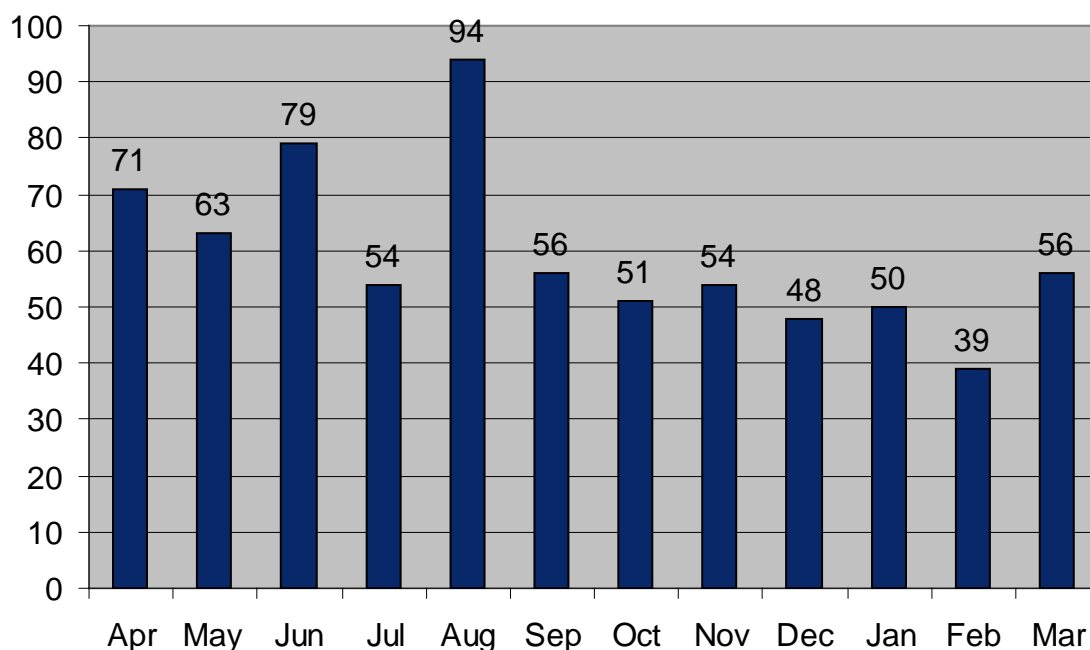
This chapter presents information on the number of ‘take-home’ naloxone kits issued by prisons in Scotland in 2011/12, including breakdowns by month and by prison establishment. Note: the ‘take-home’ naloxone kit is issued to the prisoner on release. Presented also, for those cases where the person agreed to the sharing of their personal data for monitoring purposes, are data on prisoner gender and age. There are data too on numbers of ‘first’ and ‘repeat’ supplies and reasons for ‘repeat’ supply.

2.1 Participation across prisons

SPS developed an intervention to provide naloxone to prisoners at risk of opioid related overdose on release from prison, as part of the National Naloxone Programme, in recognition of the increased risk of overdose in the first four weeks following release from prison custody. The naloxone is packed in with their personal belongings, which are stored at reception, then supplied to the prisoner on release from custody.

The supply of ‘take-home’ naloxone kits by prisons was introduced, incrementally, from February 2011 and by June 2011 all Scottish prisons were participating in the programme. Approximately 100 prison staff participated in training during the introduction and implementation phase (note: HMP Inverness, along with the Inverness area of NHS Highland, as noted earlier, commenced supply of ‘take home’ naloxone from July 2009). The data presented in this report, however, relate simply to the 2011/12 calendar year.

Figure 2.1: Number of ‘take-home’ naloxone kits issued each month by prisons in Scotland, in 2011/12



1. The source of the data for months April through to June is aggregate figures supplied to ISD from SPS HQ. Data from 1st July onwards are based on individual monitoring returns submitted to ISD.

Figure 2.1 and [table 2.1](#) show the number of ‘take-home’ naloxone kits issued each month in 2011/12 by prisons in Scotland. The largest number supplied in any one month was 94

in August 2011 and the lowest 39 in February 2012. Quarterly figures show the largest number of kits supplied to be in quarter one (April to June 2011) - 213 kits, 204 kits in July to September, 153 in October to December 2011 and 145 in January to March 2012, see [table 2.2](#). The total number of kits issued by prisons during the year was 715.

In chapter 1 there is reference to some of the factors that may have influenced the numbers of naloxone kits supplied in the community in 2011/12. Some of the issues highlighted by NHS boards such as: staff resource shortages and also the difficulties in engaging with clients and getting them to admit to having injected drugs, or to be around those who inject and therefore in need of a naloxone supply have been mentioned too in a prisons context. Note: in the 2011 Prisoner Survey (Carnie, J, and Broderick, R., 2011 ⁶) 1% of prisoners reported having injected drugs in prison in the month prior to the survey, down from 3% in the previous survey, in 2009.

In respect of the supply of kits by prisons, a factor of particular significance was the transfer of responsibility for prisoner health care from SPS to the NHS, from 1st November 2011. It has been commented on that this major service change has had a huge impact on the implementation of the National Naloxone Programme in prisons and has led to the programme not advancing as had been anticipated. During 2011/12 there have also been major prisoner population changes across the prison estate, including the transfer of prisoners across establishments (for example, over 100 women offenders transferred from HM Young Offenders Institution (YOI) Cornton Vale to HMP Edinburgh), the closure of HMP Noranside in November 2011 and the opening of HMP Low Moss in March 2012.

Chapter 1 includes estimates of the number of 'take home' naloxone kits issued in the community in 2011/12 per 1,000 estimated people with problem drug use aged 15-64, however, to produce similar estimates of the 'reach' of the National Naloxone Programme in Scottish prisons in 2011/12 is more complex.

Naloxone is issued to prisoners only on release. Prison statistics show that in 2011/12 there were 19,792 liberations from Scottish prisons (Scottish Government, 2012 ⁷). Combined with results from the 2010/11 Addiction Prevalence Testing in Scottish prisons, where opioids were detected in 36% of prisoners tested on reception (ISD Scotland, 2012 ⁸), this produces an estimate of 7,125 liberations in 2011/12 of prisoners using opioids on admission to custody. When compared with the 715 'take home' naloxone kits issued by prisons in Scotland in 2011/12 as part of the National Naloxone Programme, this gives an estimate of approximately 100 kits issued per 1,000 such liberations, in 2011/12.

2.2 Whom kits were issued to

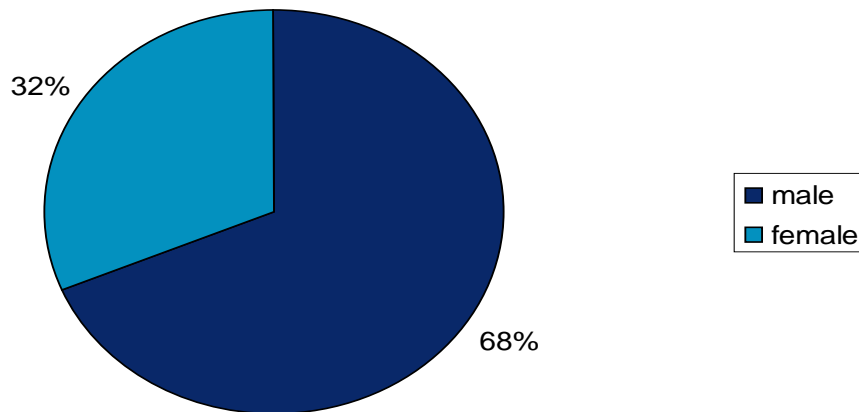
Whilst the 'take home' naloxone issued in the community may be issued to either: the person at risk of opioid overdose, to family/friends or to a service worker, all 715 kits issued by prisons in Scotland in 2011/12 were issued to 'a person at risk'.

2.3 Kits supplied to 'persons at risk' – gender and age of recipient

As noted above, the source of the prisons data for months April to June is aggregate figures supplied to ISD from SPS HQ. Data from 1st July onwards are based on individual monitoring returns submitted to ISD. The figures presented in this section are based on the nine months from 1st July 2011 (age and gender breakdowns are not available from the first quarter aggregate figures). The figures also exclude any cases where the person at risk did not consent to the sharing of their personal data for monitoring purposes.

There were 502 'take home' naloxone kits supplied by prisons in the nine months from 1st July 2011 to 31st March 2012 and in 498 of these cases the recipient consented to the sharing of their personal data for monitoring purposes.

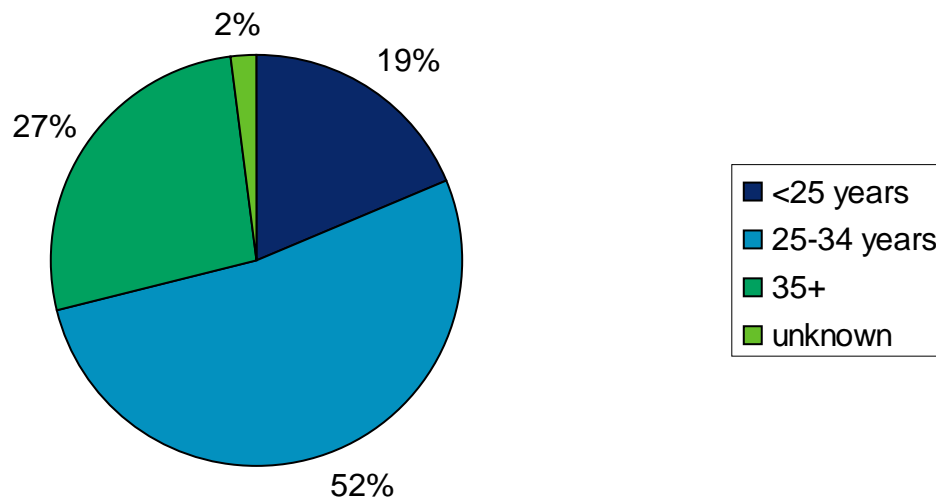
Figure 2.2 : 'Take home' naloxone kits supplied to persons at risk, by prisons in Scotland, between July 2011 and March 2012 – gender of recipient (n=498)



For over two thirds (68%) of kits issued to persons at risk of opioid overdose by prisons in Scotland in 2011/12, the recipient was a male and almost one third (32%) female, figure 2.2. The comparable figures for kits supplied to persons at risk in the community in 2011/12 (see Figure 1.6) were 64% male, 35% female and 1% unknown.

According to Scottish prison statistics for 2011/12 (Scottish Government, 2012 ⁷), females make up approximately 6% of the prison population in Scotland. The 32% of kits supplied by prisons to females points to a relatively higher uptake of the kits by female prisoners, when compared with males. The majority of kits supplied by prisons to females were by Scotland's only all-female establishment at HMP Cornton Vale. The higher than expected percentage of kits supplied to females may be partly explained by the high level of engagement in the Naloxone Programme at HMP Cornton Vale (see [table 2.2](#)). It is also the case, however, that 39% of kits supplied to female prisoners between July 2011 and March 2012 were issued by other prison establishments including, in particular, HMP Edinburgh and HMP Greenock. The kit supply figures from these other establishments, along with those from HMP Cornton Vale, suggest that perhaps there is also a greater willingness among females in prisons to engage with the Naloxone Programme.

Figure 2.3 : ‘Take home’ naloxone kits supplied to persons at risk, by prisons in Scotland, between July 2011 and March 2012 – age group of recipient (n=498)



In terms of age breakdown, 19% of kits issued by prisons in 2011/12 were issued to someone under 25 years of age, 25-34 years 52%, 35 years and over 27% and age ‘unknown’ 2%, see figure 2.3 and [table 2.4](#). The comparable figures for persons at risk who were supplied kits in the community (see figure 1.7) were: 10%, 46%, 43% and 1% respectively. The age profile, therefore, of recipients in prisons was relatively younger than those in the community (although Scottish prison statistics also show that the age profile of prisoners is relatively younger).

2.4 First supply or repeat supply?

Naloxone kits may be issued as a ‘first’ supply or as a ‘repeat’ supply. Figure 2.4 and [table 2.5](#) show the number of kits issued by prisons in 2011/12 (Scotland-level) according to whether these were a ‘first’ or a ‘repeat’ supply (based on prisoner self-report). Of the total 715 kits issued in 2011/12, 679 (95%) were recorded as a ‘first’ supply and 36 (5%) as a ‘repeat’ supply. Where the supply was noted as a ‘repeat’ supply this could be following initial supply in the community, or it could be that the previous supply was made on release from a previous stay in prison (i.e. issued by a prison). It is not possible, using the current naloxone monitoring dataset, to determine where the previous supply was made. Note: the highest number of ‘repeat’ supplies recorded was for HMP Inverness. As noted earlier, the Inverness area of NHS Highland and HMP Inverness began supplying naloxone kits in July 2009 and therefore the higher number of ‘repeat’ supplies here would not be unexpected.

Figure 2.4 : ‘Take home’ naloxone kits supplied by prisons in Scotland in 2011/12 – ‘first’ supply or ‘repeat’ supply

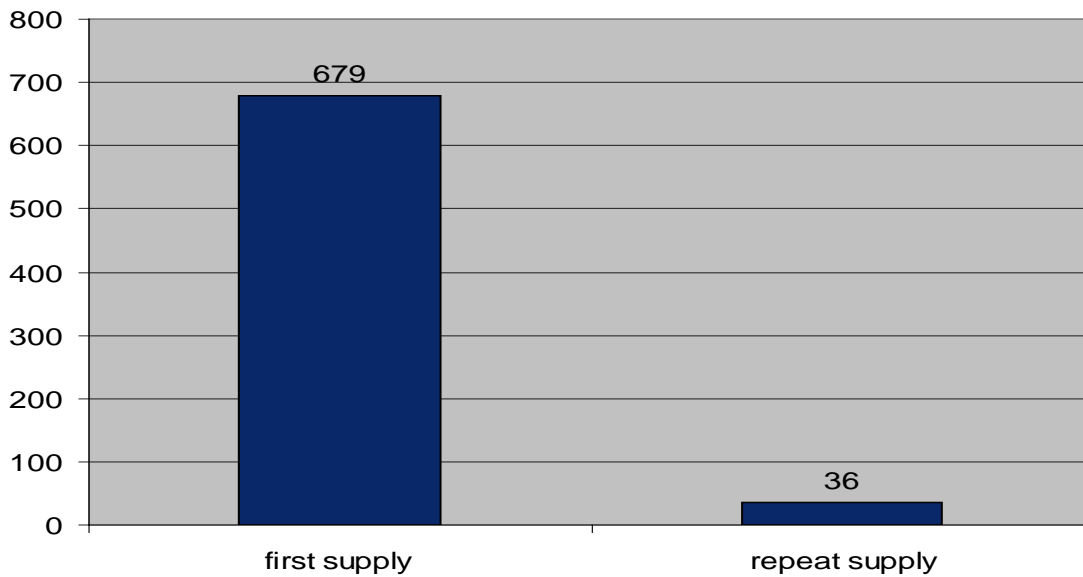
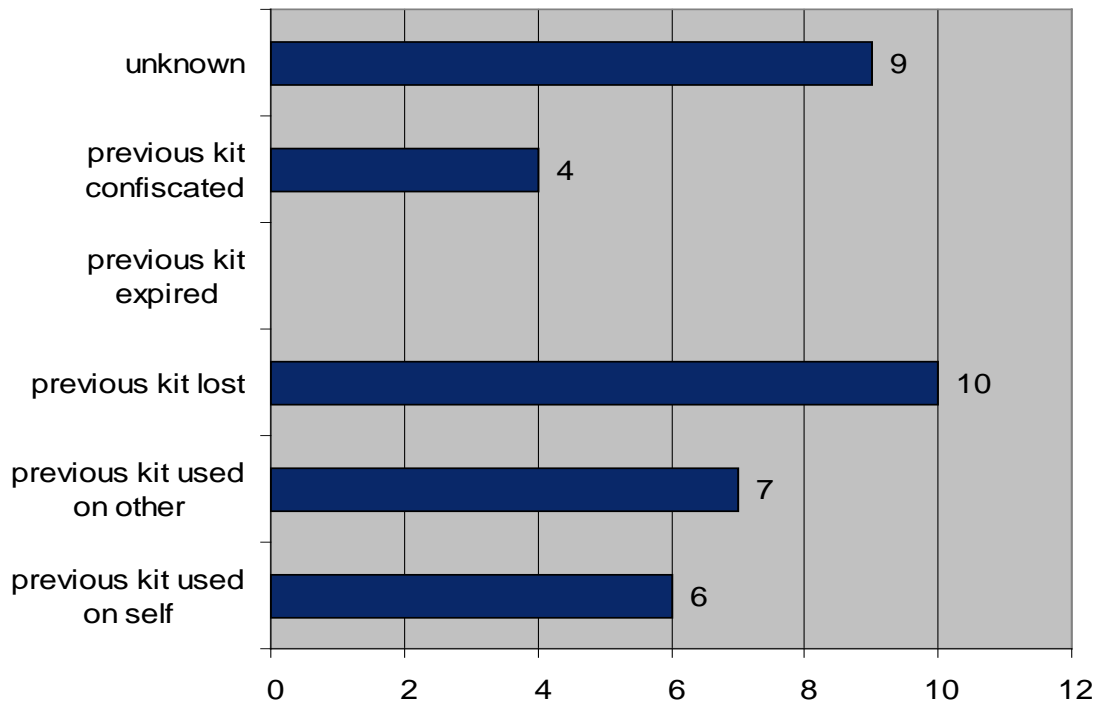


Figure 2.5 and [table 2.5](#) provide a breakdown of the reasons for ‘repeat’ supply of naloxone by prisons. Of the 36 cases noted as ‘repeat’ issue of a kit by a prison in 2011/12, 10 were reported to be due to ‘previous kit lost’, seven cases ‘kit used on other’, six cases ‘previous kit used on self’, four cases ‘previous kit confiscated’ and nine cases ‘unknown’ reason for repeat supply. As noted above, where the supply was recorded as a ‘repeat’ supply this could be following initial supply in the community, or it could be that the previous supply was made on release from a previous stay in prison (i.e. issued by a prison). It is not possible, using the current naloxone monitoring dataset, to determine where the previous supply was made. In either case, what should also be borne in mind is that kits supplied by prisons are issued on prisoner release, not ‘in prison’, therefore any reference to loss of the previous kit, use of the previous kit on self or on another, kit confiscated etc... would not have occurred ‘in prison’.

Figure 2.5 : ‘Repeat’ supplies of naloxone by prisons in Scotland in 2011/12 – reason for ‘repeat’ supply



3. Conclusions

There were a total of 3,445 ‘take home’ naloxone kits issued in Scotland in 2011/12 through the National Naloxone Programme. This comprised kits issued in the community and also kits issued by prisons, prior to prisoner release. 2011/12 was the first full year of the programme in Scotland and, as has been described above, this first year saw an incremental rollout of the programme across Scotland, both in the community and across prisons. As a first annual release of monitoring information from the National Naloxone Programme in Scotland this report provides a baseline against which future years can be measured. It may assist also in the further refinement of the Monitoring Dataset, to best meet the needs of the National Naloxone Programme Monitoring.

In this report, figures are presented separately for kits issued in the community and for kits issued by prisons, in 2011/12. It may be possible, however, at ‘individual’ level, for someone to receive a ‘take home’ naloxone kit in the community and also to receive a kit in prison, if they move from community to prison or vice versa. It may be helpful in future monitoring analyses to further explore the linkages between the two.

Glossary

ISD	Information Services Division of NHS National Services Scotland
DRD	Drug Related Death
GROS	General Register Office for Scotland
NRS	National Records Scotland
PDU	Person with Problem Drug Use
SPS	Scottish Prison Service

List of Tables

Table No.	Name	Time period	File & size
1.1	Number of 'take home' naloxone kits issued each month in the community; Scotland: 2011/12	2011/12	Excel
1.2	Number of 'take home' naloxone kits issued each quarter in the community; NHS boards: 2011/12	2011/12	Excel
1.3	Number of 'take home' naloxone kits issued per 1,000 estimated PDUs; NHS boards: 2011/12	2011/12	Excel
1.4	Number of 'take home' naloxone kits issued each quarter in the community, by recipient; Scotland: 2011/12	2011/12	Excel
1.5	Number of 'take home' naloxone kits issued in the community, by recipient; NHS boards: 2011/12	2011/12	Excel
1.6	Number of 'take home' naloxone kits issued in the community to people at risk of opioid overdose, where the person consented to share their personal data for monitoring purposes; Scotland: 2011/12	2011/12	Excel
1.7	Number of 'take home' naloxone kits issued in the community to people at risk, by gender and by age; Scotland: 2011/12	2011/12	Excel
1.8	Number of 'take home' naloxone kits issued in the community, by whether 'first' or 'repeat' supply and by recipient; Scotland: 2011/12	2011/12	Excel
2.1	Number of 'take home' naloxone kits issued each month by prisons; Scotland: 2011/12	2011/12	Excel
2.2	Number of 'take home' naloxone kits issued each quarter by prisons in Scotland; by prison establishment: 2011/12	2011/12	Excel
2.3	Number of 'take home' naloxone kits issued by prisons to people at risk of opioid overdose, where the person consented to share their personal data for monitoring purposes; Scotland: 2011/12	July 2011- March 2012	Excel
2.4	Number of 'take home' naloxone kits issued by prisons to people at risk, by gender and by age; Scotland: July 2011 to March 2012	July 2011- March 2012	Excel
2.5	Number of 'take home' naloxone kits issued by prisons, by whether 'first' or 'repeat' supply; Scotland: 2011/12	2011/12	Excel
3.1	Number of drug related deaths, opioid related deaths and opioid related deaths within four weeks of prison release, by gender and by age; Scotland: 2007-2009	2007-2009	Excel
3.2	Percentage of drug related deaths opioid related deaths and opioid related deaths within four weeks of prison release, by gender and by age; Scotland: 2007-2009	2007-2009	Excel

Contact

Linsey Galbraith

Principal Information Analyst

linsey.galbraith@nhs.net

0131 275 6227

07767 322170

Diane Stockton

ISD ScotPHO lead

diane.stockton@nhs.net

0131 275 6817

Further Information

Further information can be found on the [ISD website](#)

Rate this publication

[Click here](#) to provide feedback and rate this publication.

Appendix

A1 – Background Information

A1.1 Policy Context

Scotland's national drugs strategy [The Road to Recovery: A New Approach to Tackling Scotland's Drug Problem](#) was launched in May 2008 and includes specific actions required to address Drug-Related Deaths (DRDs) in Scotland.

In 2010, there were 485 DRDs registered in Scotland (National Records of Scotland, 2011⁹), 60 fewer than in 2009 and 89 less than the 574 recorded in 2008 - the highest figure recorded to date. In spite of the decreases seen in 2009 and 2010, the number of DRDs has risen in six of the past ten years and it is too early to say whether the long-term upward trend over the last decade has been reversed. Statistics for 2011 will be published in August 2012.

In response to the long-term trend in DRDs in Scotland, a National DRD Database was set up to aid understanding of the circumstances surrounding DRDs and the individuals vulnerable to them. To date, ISD Scotland have published two annual reports from the National DRD Database (for calendar years 2009 and 2010). These confirm the findings from earlier research that those most vulnerable to a DRD are male, living in the most deprived areas, and aged 25 to 44 years. Also, the majority of deaths take place in a home environment where there is often someone nearby, thus offering an important window of opportunity for someone to intervene and potentially save a life.

Findings from the National Database in 2010 also showed that two-thirds of those who died had been in contact with a drug treatment service, thus identifying opportunities to engage with and support those vulnerable to a DRD. Information and training for practitioners, service users and family/friends in how to identify and respond to overdose situations may help bring about a reversal in the upward trend in DRDs.

Following the recommendations from two independent expert forums and the successful outcomes of local 'take-home' naloxone pilots in Scotland, the Scottish Government has supported the rollout of a National Naloxone Programme in Scotland, since the 1st November 2010.

Naloxone is an opioid antagonist which can temporarily reverse the effects of an opioid overdose. Under this national programme, naloxone is provided to those at risk of opioid overdose once they have undergone training. This training is also available to family and friends and to service workers.

The Scottish Government is supporting the rollout of this programme with central resources which include:

- Specific support to the Scottish Prison Service, in recognition of the increased risk of overdose following release from prison custody;
- A national naloxone training resource to support the development of local take home naloxone programmes.
- National naloxone information materials;

- A national monitoring and evaluation programme to assess the reach and impact of the naloxone programme.

A1.2 National Naloxone Programme Supply Monitoring – Dataset Items

Detailed below are the dataset items that comprise the agreed national dataset for the National Naloxone Programme monitoring. Questions one to seven apply to all instances of a kit being supplied (community supply or prison supply). Question seven asks if consent has been given to the sharing of the individual’s personal data. If yes, then questions eight to 13 should be completed. Questions 14 and 15 apply only to the supply of kits by prisons.

During 2011/12, quarterly data returns were submitted to ISD, via secure data transfer (to a designated nhsnet email address), from the Naloxone Lead in each NHS board and a Lead Officer in each prison establishment. Data were supplied in the form of a completed Excel spreadsheet, for subsequent storage and analysis at ISD.

Data item	Notes
1a. Service name/location Code (applicable to supply of kits in the community)	This is the location of the service provider. Your local naloxone contact/lead will agree with you what should be entered in this field to ensure that your service activity is being identified. This data item will be used to monitor returns for each service participating in the National Naloxone Programme.
1b. Prison Location Code (applicable to supply of kits in prisons)	This is the location code of the prison where the naloxone is issued. This data item will be used to monitor returns for each prison participating in the National Naloxone Programme.
2. Date of Issue	This is the date on which the kit was issued and should be entered in the format DD/MM/YYYY. This data item will be used to monitor if there is a demand for kits on particular days. The dates of issue, together with other data items will also be used to quality assure the data. E.g. Date of issue, name and date of birth will help identify possible duplicate entries.
3. Naloxone is provided to:	This records whether the kit is provided to the person at risk, family members, friends, partners etc or a service/prison worker. The drop down list gives the options:- <ul style="list-style-type: none"> · Person at risk · Family/Friends · Service/Prison Worker Please note this is from the person’s perspective. It is not expected that the option for Family/Friends or Service/Prison Worker will be used within the SPS.
4. Naloxone is provided as:	This records whether the kit is the person’s first supply or if they have previously been provided with a supply of naloxone. The drop down list gives the options:- <ul style="list-style-type: none"> · First Supply · Repeat Supply · Not Known Please note this is from the person’s perspective.

<p>5. Last naloxone supply:</p>	<p>If you have recorded that this is a 'repeat supply' to the person you should record what the previous supply was used for. If this is the person's first supply please select 'Not applicable' from the drop down box. The drop down list contains the options:-</p> <ul style="list-style-type: none"> . Used on Self . Used on Other . Lost Kit . Confiscated . Expired . Not Applicable – First Supply . Not Known <p>Please note this is from the person's perspective.</p>
<p>6. Have you supplied this person before?</p>	<p>This records whether this is the first time this person has been provided with a naloxone kit by this service/prison.</p> <p>The drop down list contains the options:-</p> <ul style="list-style-type: none"> . Yes . No . Not Known <p>Analysis of this data item will allow us to monitor if the same person has previously been issued with naloxone from another service e.g. community service.</p> <p>This information should be available from the electronic medical record systems but if not easily obtainable and the person does not know please record 'Not Known'.</p>
<p>7. Consent to Data Recording</p>	<p>A Yes/No field indicating whether consent to share their personal data has been given.</p> <p>If yes, continue to record all data items. The personal information provided will only be used for the purpose of monitoring and evaluating the use and supply of naloxone and for no other purposes.</p> <p>If No, although the remaining data items may be recorded locally they should not be submitted for central analysis.</p> <p>We would ask that you encourage the person to consent to the recording of the personal information as the data will be invaluable in monitoring how many repeat supplies an individual receives throughout the duration of the Naloxone Programme. A FAQ sheet has been prepared to assist you with this. A hard copy of the written consent should be placed in the medical record.</p>
<p>8. Forename</p>	<p>Person's forename. The person's initials only for ISD purposes.</p>
<p>9. Surname</p>	<p>Person's surname. The person's initials only for ISD purposes.</p>
<p>10. Date of Birth</p>	<p>The person's date of birth should be entered in the format DD/MM/YYYY</p>

11. Age	If the person's exact date of birth is not known please enter the person's age.
12. Postcode of Residence	The postcode of the person's usual private residence. This should be recorded to sector level only. If only 3 characters in length please include a space directly after the 3 rd character, e.g. EH5 3, EH10 4
13. Gender	This records person's gender. The drop down list contains the options:- <ul style="list-style-type: none"> . Not Known . Male . Female . Not Specified
14. Prison Release Date (if applicable)	If known, the prisoner's 'Earliest Date of Liberation' should be recorded.
15. Court Date	The date of court appearance if liberation/release date not known.

A1.3 Baseline Survey and Measure

The National Naloxone Advisory Group have agreed that the impact of the Naloxone Programme will be assessed by measurement of the number of (opioid) drug related deaths before and after the implementation of the programme. Further, they recognised that the four week period following prison release is a crucial period for former prisoners with regard to risk of death from overdose and it was agreed that figures for this vulnerable sub group would also be monitored.

The indicator was as defined:

“Of the total number of drug-related deaths (including suicides), as reported by NRS:

- o What number and proportion of these were opioid related (as defined by presence of heroin/morphine and/or methadone and/or buprenorphine);
- o What number and proportion of these were opioid related and occurred within the first four weeks following release from prison custody.

broken down by gender and age groups (as per NRS drug related death reporting). The baseline indicator will be produced for calendar years 2007, 2008 and 2009.”

The indicator is being collected as follows:

NRS supply ISD with an extract of drug related death records for each year with ‘opioid’ deaths flagged (as defined by presence of heroin/morphine and/or methadone and/or buprenorphine). These are securely sent to SPS in accordance with ISD data security procedures. Two ISD members of staff, with appropriate clearance from SPS, then undertake a manual search of the prison record system (PR2) to match those who have died a drug related death with those who had been released from prison four weeks previously (or less). Note: the involvement of two members of staff is for data checking/quality assurance purposes.

ISD has currently collected information for the baseline years, 2007-2009, and following publication of the 2011 DRDs data by NRS, due August 2012, will commence reporting on performance against the baseline for the years 2011-2013.

A1.4 References

- 1 UK Focal Point on Drugs (2011) United Kingdom Drug Situation 2011
<http://www.nwph.net/ukfocalpoint/writedir/userfiles/file/FOCAL%20POINT%20REPORT%202011%20FINAL%20HR.pdf>
- 2 Zador, DA., et al., (2005) National Investigation into Drug Related Deaths in Scotland, 2003 <http://www.scotland.gov.uk/Publications/2005/08/03161745/17507>
- 3 Graham, L., et al., (2011) The National Drug Related Deaths Database (Scotland) Report 2009 ISD 2011
http://www.drugmisuse.isdscotland.org/publications/local/NDRDD_2009.pdf
- 4 Graham, L., et al (2012) The National Drug Related Deaths Database (Scotland) Report 2010 ISD 2012
<http://www.isdscotland.org/Health-Topics/Drugs-and-alcohol-misuse/Publications/2012-02-28/2012-02-28-NationalDrugRelatedDeathsDatabase2010-Report.pdf>
- 5 Redpath, A., et al., (2011) Estimating the National and Local Prevalence of Problem Drug Use in Scotland 2009/10
http://www.drugmisuse.isdscotland.org/publications/local/prevalence2009_10.pdf
- 6 Carnie, J, and Broderick, R., (2011) Prisoner Survey 2011
<http://www.sps.gov.uk/Publications/Publication-3696.aspx>
- 7 Scottish Government (2012) Prison statistics and population projections Scotland: 2011-12 <http://www.scotland.gov.uk/Resource/0039/00396363.pdf>
- 8 ISD Scotland (2012) Drug Misuse Statistics Scotland 2011
<http://www.isdscotland.org/Health-Topics/Drugs-and-Alcohol-Misuse/Publications/2012-02-28/2012-02-28-dmss2011-report.pdf>
- 9 National Records of Scotland (2011) Drug related deaths in Scotland in 2010
<http://www.gro-scotland.gov.uk/files2/stats/drug-related-deaths/2010/drug-related-deaths2010.pdf>

A2 – Publication Metadata (including revisions details)

Metadata Indicator	Description
Publication title	National Naloxone Programme Scotland Monitoring Report – kits issued in 2011/12.
Description	Data are presented on the supply of naloxone ‘take home’ kits in Scotland. Data are presented separately for kits issued in the community and kits issued by prisons. This includes information on the numbers of kits issued each month, the number issued in each NHS board/prison establishment, whom the kits have been issued to and whether issued as a first or a repeat supply (and reasons for repeat supply).
Theme	Health and Social Care
Topic	Lifestyles and Behaviours
Format	PDF report
Data source(s)	Information provided by services to Naloxone leads in NHS boards. Also, information provided from prison establishments.
Date that data are acquired	April 2012
Release date	31 st July 2012
Frequency	Annual
Timeframe of data and timeliness	The timeframe for this publication is the financial year 2011/12.
Continuity of data	This is the first year of release of these data.
Revisions statement	No revisions to this publication are planned, however, revised 2011/12 statistics will be included in July 2013 report.
Revisions relevant to this publication	None.
Concepts and definitions	See A1 – Background information.
Relevance and key uses of the statistics	The national naloxone monitoring analyses presented in this report provide vital evidence of the reach of the National Naloxone Programme’s ‘take home’ kits initiative in Scotland.
Accuracy	The naloxone lead in each NHS board was given the opportunity to check their community supply figures for 2011/12. Prisons supply data for the first quarter of 2011/12 was provided direct from SPS HQ. Figures for July-October 2011 were QA’d with prisons via the SPS Throughcare and Substance Misuse Manager. Prisons supply figures for November 2011 onwards (post transfer of responsibility for prisoner healthcare from SPS to NHS) were provided to naloxone leads in NHS boards, and contacts in prisons, for checking prior to publication.
Completeness	Community supply data were provided by the Naloxone lead in each NHS board. See above regarding QA of data. Prisons-based data were supplied by SPS HQ for the first quarter of the year and by individual prison establishments for July 2011 onwards. Again see above regarding QA of the figures. The data presented in this report include a small number of ‘late-submitted’ records, as a result of missing cases identified during the QA process.
Comparability	No comparable published data outwith Scotland.
Accessibility	It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines .

Coherence and clarity	The report is available as a PDF file.
Value type and unit of measurement	Count – numbers and percentages. Also, rates per 1,000 people with problem drug use.
Disclosure	The ISD protocol on Statistical Disclosure Protocol is followed.
Official Statistics designation	Official Statistics
UK Statistics Authority Assessment	Awaiting assessment by UK Statistics Authority.
Last published	n/a
Next published	30 th July 2013
Date of first publication	31 st July 2012
Help email	linsey.galbraith@nhs.net
Date form completed	17 th July 2012

A3 – Early Access details (including Pre-Release Access)

Pre-Release Access

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access and, separately, those receiving extended Pre-Release Access.

Standard Pre-Release Access:

Scottish Government Health Department
NHS Board Chief Executives
NHS Board Communication leads
Chair of the National Naloxone Advisory Group
National Naloxone Programme Coordinator
Director of Health and Care, Scottish Prison Service

Extended Pre-Release Access

Extended Pre-Release Access of 8 working days is given to a small number of named individuals in the Scottish Government Health Department (Analytical Services Division). This Pre-Release Access is for the sole purpose of enabling that department to gain an understanding of the statistics prior to briefing others in Scottish Government (during the period of standard Pre-Release Access).

Scottish Government Health Department (Analytical Services Division)
Scottish Government Justice Department (Analytical Services Division)

Early Access for Quality Assurance

These statistics will also have been made available to those who needed access to help quality assure the publication:

National Naloxone Advisory Group - monitoring sub-group
Naloxone leads in NHS boards
Scottish Prison Service Throughcare and Substance Misuse Manager

A4 – ISD and Official Statistics

About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

Purpose: To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

Mission: Better Information, Better Decisions, Better Health

Vision: To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of 'Official Statistics'. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

ISD's statistical publications are currently classified as one of the following:

- National Statistics (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (ie legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (ie still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD's statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the [ISD website](#).