DRUG RELATED DEATHS

This report is intended to provide an overview of drugrelated deaths (DRDs) in Fife in 2022 by analysing trends and themes which could be used to influence strategy development, action planning and quality improvement work with services and with people with lived and living experience for the prevention of drug-related deaths. This report complements and provides additional detail to national or local partner organisation analysis.

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DEFINING DRUG RELATED DEATHS

In 2001, the National Records of Scotland introduced a baseline definition of a drug-related death to support reporting for the UK Drug Strategy. This report uses the same definition and reports on calendar year rather than financial.

More information on the definition could be found below:

https://www.nrscotland.gov.uk/files/statistics/drug-related-deaths/20/drug-related-deaths-20-annex-a.pdf

STATS

In 2022 we observed the following key points through our analysis of the data:

- Fife had a total of 59 drugrelated deaths in 2022.
- Drug related deaths in males still remain higher than in women in Fife.
- The majority of drug-related deaths that happened in 2022 in Fife involved methadone.

KEY POINTS

- DRDs have decreased by 17% year on year from 70 in 2021.
- In Scotland the age profile of drug use deaths has become older over time, the average age of people who died from drug use [EB1] deaths has slowly increased over time from 32 in 2000 to 45 in 2022
- Fife has a higher rate of drug related deaths in the 15 to 24year-old age bracket than the national average.



INTERPOLIC DU CATALON DE LA CONTRACTOR D

In 2022, Fife ADP has continued to address the national Drug Related Death crisis and has worked closely with the national Drug Death Taskforce and Scottish Government Drug Mission Policy Unit to align provision to the new evidence-based recommendations. This regalvanised the approach across Fife to focus on its strategic priorities through the lens of delivering interventions to focus on addressing the drug related deaths crisis.



The Work of the ADP

Aligned with the overarching themes of the 2020-2023 ADP strategy, the ADP commissioned a suite of services to provide the people of Fife with harm minimisation, prevention and recovery services for those suffering from problematic drug and/or alcohol use. Going into the new strategy, there will be a continued focus on reducing drug deaths with the ultimate goal being to irradicate these completely.

The Work of the ADP Cont.

Currently, Fife ADP is undertaking a lot of work with our partners aimed at preventing drug related deaths in young people as well as building a communication strategy to inform the people of Fife about all of the services that are available to them.



Fife ADP take an active role in all of the MAT Standards working groups to ensure that they remain focused and forward thinking in order to provide an opportunity to improve the lives of those living in Fife.

We have also set up and supported numerous sub-groups including:

- Joint Commissioning Group
- Lived Experience Group
- Addressing Alcohol Specific Deaths Group
- ADP Psychology and Trauma Workforce Development Group

Multidisciplinary Drug Death Review Group

This report focuses on the detailed and complex work carried out by the Multidisciplinary Drug Death Review Group (MDDRG) and the current Expert Development Group (MDDRG EDG). Previous data including that of 2022 has been methodically reviewed to identify any gaps in service provision, support provided and communication.

Each individual case is reviewed thoroughly with a pack compiled on each case which includes the death report, toxicology, GP chronology and ME4. An ME4 is a Medical Examiners Form. This gives the group details of the drugs that were implicated in, or potentially contributed to, the cause of death and which drugs were present, but not considered to have had any direct contribution to the death. These are not issued for deaths relating to paracetamol only.

The ME4 is sometimes delayed but the cases can still go ahead for review based on the other papers available for the group to review.

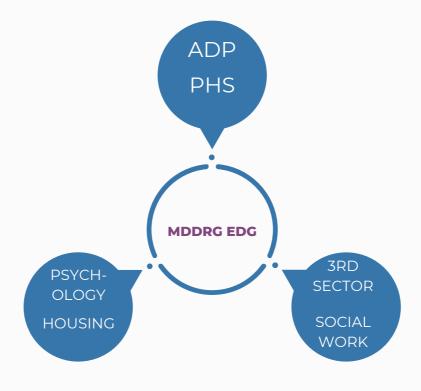


The MDDRG EDG Main Themes

Having utilised multi-disciplinary input, feedback and experience, the MDDRGs worked to review all drug related deaths. They worked to identify where systems/supports could have been improved and therefore where deaths had been preventable. These findings were collated and 6 main themes emerged which were:

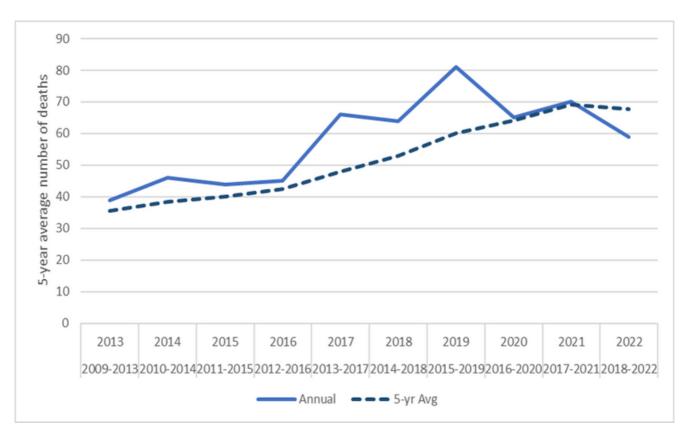
- Additional Proactive Support and Co-ordination of Care
- Communication
- Care of Vulnerable Adults
- Overdose Awareness
- **COVID Affective Service Response/Engagement**
- Access to services

The MDDRG EDG was then established to review each of these themes and create a joint action plan for services across Fife to implement and improve outcomes for those using drugs. It encompasses the following services as a minimum:



In Fife, 59 people lost their lives to a drug related death in 2022. Drug-related deaths (deaths due to drug use) in Fife fell to 59 in 2022 compared to 70 in 2021 and a high of 81 in 2019.

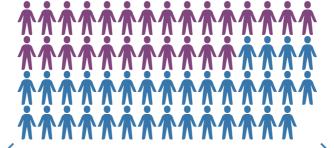
Five-year averages show that an increasing trend in drug related deaths has stabilised and then slightly fallen for the first time since 2015.

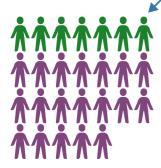


Annual and Five-year average number of drug-related deaths in Fife

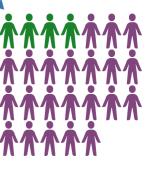
Health conditions were reported on the ME4s of 26 people who died of drug related death (44%), as a contributory factor in the death. These included conditions directly associated with substance toxicity or underlying health conditions. Most commonly, Bronchopneumonia or pneumonia was included in the cause of death for 7 people and coronary artery atheroma was included as a cause of death for 4 people. Where a health condition was also reported the average (mean) age at death was 46 years. Where a health condition was not reported, the average (mean) age at death was 39 years.

26 individuals out of 59 had a health condition





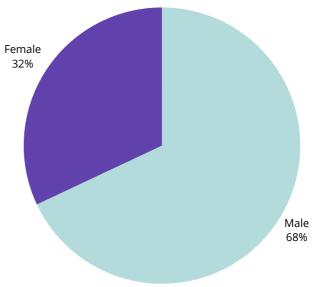
Bronchopneumonia/
Pneumonia



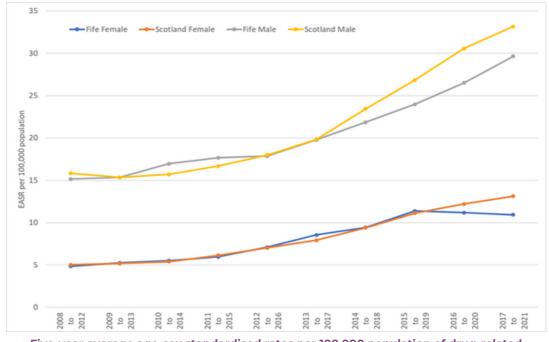
Coronary Artery
Atheroma

Source: NHS Fife Drug Related Death Analysis

A higher proportion of deaths continue to be seen in males compared to females. In 2022, 32% of deaths in Fife were of females compared to 68% of males. Taking a ten-year average shows that of drug related deaths, 29% were female and 71% were male. Scotland has the same ten-year average (29%F/71%M) but less variation is seen between years, most probably due to larger numbers.



Both males and females in Fife and Scotland have seen increased five-year average rates of drug-related deaths. In 2018-21 average drug-related death rates among females in Fife were more than three times those in 2008-12 and among males' rates have more than doubled. Since 2014-18 Fife has had lower average rates of male drug-related deaths than Scotland and lower rates in females in the last two time periods.



Five-year average age-sex standardised rates per 100,000 population of drug-related deaths by Fife SIMD Quintiles 2008-12 to 2017-2021 Source: NRS



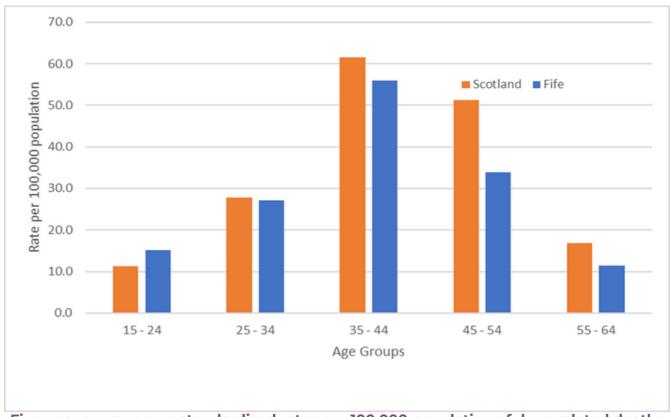
In 2021, Fife ADP commissioned the Scottish Drugs Forum (SDF) to conduct and evaluation on women's experiences of accessing and completing treatment in drug and alcohol services. This was due to a steady increase in women's drug related deaths in Fife as identified in the previous section. The evaluation aimed to:

- identify both treatment barriers and facilitators for women accessing and completing treatment in alcohol and drug services.
- gather the views of women who currently, or could, benefit from Fife ADP funded services.

SDF has now completed its lived experience led evaluation of women's experience of alcohol and drug services in Fife in partnership with Fife Violence Against Women Partnership. This was included in the first-year analysis of the MAT Standards and proved they should form the basis of an improvement approach across FVAWP, SW, NHS HSCP & ADP. This is to engage more women in support and treatment earlier and retain in provision use.

Discussions are progressing with regard to a co-production approach and plans are still in place for this to be undertaken with women with lived experience to deliver the recommendations. Safe and Together training is planned across the ADP service to increased knowledge of domestic violence and it is thought early 2024 would be the appropriate time to engage this training.

Further work involves collaborating with Children Services and Child Health Services to support families with a child under 4. Time is being taken over developing the correct approach and ensuring that everyone has the appropriate knowledge and skillsets to make a meaningful impact through the work. The average age for drug related deaths in Fife was 42 in 2022. This is slightly higher compared to 40 in 2021. Across Scotland the age profile of drug-related deaths has become older. Since 2000 the average age of drug misuse deaths has increased from 32 to 45. 63% of drug-related deaths were in those aged 35-54 in 2022 compared to 29% on 2000. The below graph shows the age categories specifically in Fife compared to Scotland in 2022:



Five-year average age-standardised rates per 100,000 population of drug-related deaths by age group 2018-2022; Fife and Scotland

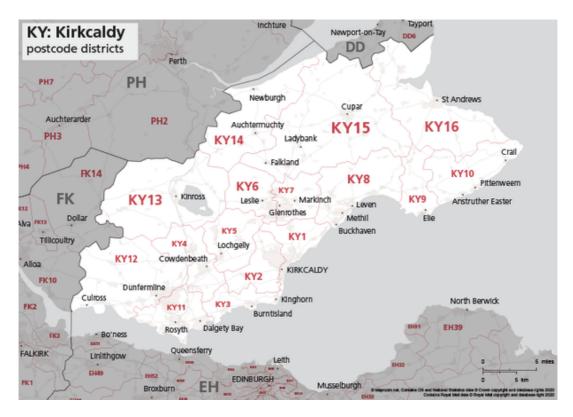
Five-year average age-specific rates for 2018-2022 show that the highest rates are seen in the 35-44 age groups for both Fife and Scotland.

Fife has a higher rate per 100,000 population for the youngest (15-24) age group, 15.1 per 100,000 population compared to 11.2 for Scotland. Lower rates were seen in the 45-54 and 55-64 age groups in Fife compared to Scotland.



The top 5 postcode areas in 2022 where people resided at the time of death were KY8 (12), KY 1(11), KY7(6), KY11 (6), KY2 (5) and total number of deaths is provided in brackets for each postcode area. These postcodes represent the following areas:

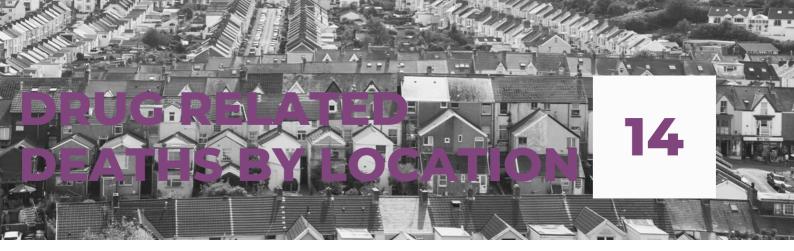
- KY8 Leven
- KY1 Kirkcaldy North
- KY7 Glenrothes
- KY11 Dunfermline South
- KY2 Kirkcaldy South



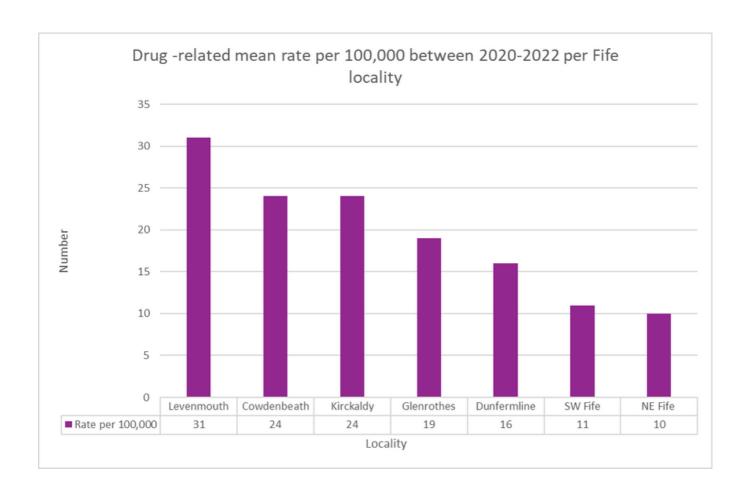
Consideration was given to the last known home address of individuals although it is worth highlighting that home addresses were not always the same as the location of deaths. The top 5 locus postcode areas where deaths occurred were the same as for the residences, but the distribution is different.

- kY1 Kirkcaldy North
- kY11 Dunfermline South
- kY7 Glenrothes
- kY2 Kirkcaldy South
- kY8 Leven

This indicates that these are important areas to ensure services and outreach are available as well as harm reduction and prevention activities are focused.



The below graph demonstrates the mean rate per 100,000 between 2020-22 in Fife per locality area. Levenmouth continues to track as having the highest rate of drug related deaths followed by Cowdenbeath and Kirkcaldy (source: Fife ADP drug related death analysis).

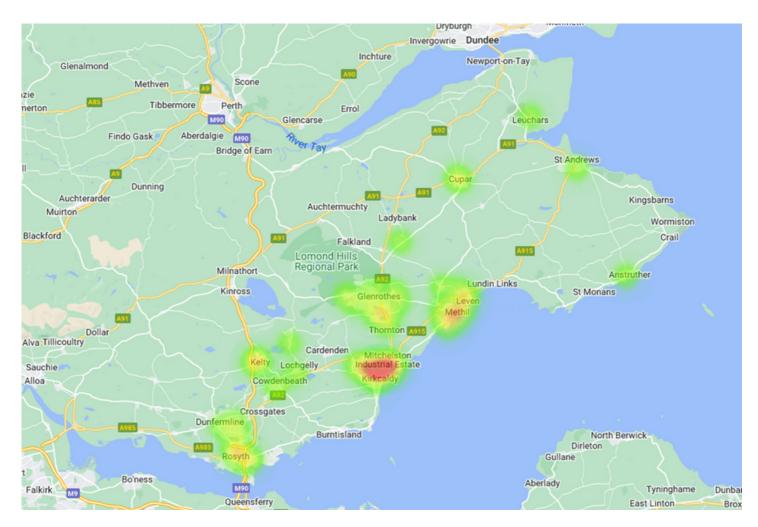


Consideration was given to the last known home address of individuals although it is worth highlighting that home addresses were not always the same as the location of deaths.

The heatmap provided below, shows the locations where a drug related death has occurred in Fife in 2022. Kirkcaldy had the largest number of deaths per locality in 2022 followed by Levenmouth.



Note that this is by location and not by population as stated above.



Requests have been made to Police Scotland for discussions around intelligence gathered regarding source of distribution within Fife as well as the points of likely entry into the area. Police Scotland have advised that intelligence will be shared whenever appropriate and is not putting any ongoing police investigations at risk.

Collaboration with Criminal Justice Social Work may prove fruitful in identifying the age groups of people distributing drugs within the area. Discussions with Police Scotland around perpetrators of criminal activity associated directly and non-directly have highlighted a young population. In line with ADP Fife priorities, a preventative approach may include trying to reach those young people that are dealing drugs and trying to support them to make positive steps forward by accessing gainful employment.



Those living in the most deprived areas of Scotland are almost 16 times more likely to die from drug use compared to those people living in the least deprived areas. In Fife, the picture is even more stark with more people dying of a drug death in areas of high deprivation. Data on inequalities is not available at the time of writing at a Fife level incorporating the 2022 figures but five-year average data up to 2017-2021 showed persistent and widening inequalities in drug-related deaths.

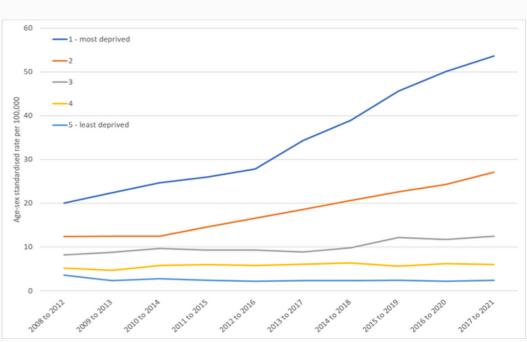
The Scottish Index of Multiple Deprivation is a relative measure of deprivation. SIMD is the Scottish Government's standard approach to identify areas of multiple deprivation in Scotland. If an area is identified as 'deprived', this can relate to people having a low income but it can also mean fewer resources or opportunities. SIMD looks at the extent to which an area is deprived across seven domains: income, employment, education, health, access to services, crime and housing.

In the most deprived areas in Fife (SIMD Quintile 1) drug-related deaths have increased since 2008-12 but far more sharply from 2012-16. In 2017-21 drug-related death rates in the most deprived areas in Fife were 152% higher than the Fife average and 22 times greater than in the least deprived areas.

Rates in areas that are within SIMD Quintile 2 are also increasing and are significantly higher than in the other three quintiles (SIMD quintile 3 to least deprived). Combined residents of the most deprived areas and SIMD quintile 2 accounted for 59% of all drug-related deaths in 2017-21.

Nationally death rates in the most deprived SIMD quintile in 2022 were almost 16 times higher than the least deprived SIMD quintile, 52.4 per 100,000 population in SIMD Q1 compared to just 3.3 in SIMD Q5 and 19.8 for the whole population.

Five-year average age-sex standardised rates per 100,000 population of drug-related deaths by Fife SIMD Quintiles 2008-12 to 2017-2021 and source: SCOTPHO



Due to the small numbers, the number and proportion of deaths associated with individual substances fluctuates year on year. In 2022 the most prevalent groups of substances present in drug related deaths were as follows:

Opioids

81%

The proportion of deaths with any opiate or opioid implicated in 2022 in Fife (81%) was similar to in Scotland (82%). The proportion of deaths with any opiate or opioid implicated in 2021 and 2022 was lower than in the 2 prior years. Between 2019 and 2022 deaths where methadone was implicated was slightly higher than in Scotland overall.

Benzodiazepines

56%

The number and proportion of deaths associated with benzodiazepine use was lower in 2022 compared to the 3 prior years in Fife (56%) and in Scotland (57%). The majority of drug related deaths with benzodiazepines implicated, are associated with street benzodiazepines in 2022 (particularly etizolam), but the number and proportion of street benzodiaepine related deaths is less in 2022 than in the prior 3 years. It will be important to monitor the longer-term trend in relation to benzodizepine deaths.

Stimulants

46%

The proportion of Fife drug related deaths which have included cocaine is higher in 2022 (41%) compared to 2019 (19%), compared to in Scotland where levels have remained fairly similar over the same period (29% in 2019; 35% in 2022). Figures prior to 2018 were recorded differently and cannot be directly compared. It will be important to understand the drivers for this apparent increase in cocaine in drug related deaths (only cocaine and amphetamine analysed).

Gabapentin/Pregabalin

36%

In Scotland, gabapentin or pregabalin have been implicated in approximately one third of drug misuse deaths between 2019 and 2022. In Fife, in 2022 approximately one third of drug related deaths had gabapentinoids implicated which was similar to in Scotland. This was fewer than in previous years in Fife where on average gabapentinoids were implicated in 51% of drug related deaths.

The distribution of substances implicated in drug related deaths in Fife in 2022 was broadly similar to what was implicated in Scotland over the same year. The proportion of stimulants implicated in drug related deaths was however higher in Fife.

In 2022 the most prevalent selected substances (prescribed and nonprescribed) present in drug related deaths were as follows:

Methadone

47%

Methadone is a man-made opioid (also known as an opiate). Other opioids include codeine, morphine, fentanyl and diamorphine (heroin). Methadone is used to help you stop taking heroin. It reduces your withdrawal symptoms, such as shaking, shivering and other flu-like symptoms.

Heroin and Morphine Heroin is from the opioid

44%

Heroin is from the opioid family of drugs includes natural, synthetic and semi-synthetic opioids. Opiates, such as morphine and codeine, are natural opioids found in the opium poppy.

Cocaine

41%

Cocaine is a tropane alkaloid that acts as a central nervous system (CNS) stimulant. As an extract, it is mainly used recreationally, and often illegally for its euphoric and rewarding effects.

Gabapentin and/or Pregabalin

36%

Gabapentin is used to treat epilepsy. It's also taken for nerve pain, which can be caused by different conditions.

Pregabalin is also used to treat epilepsy and nerve pain but also anxiety. Nerve pain can be caused by different conditions including diabetes and shingles, or an injury.

Etizolam

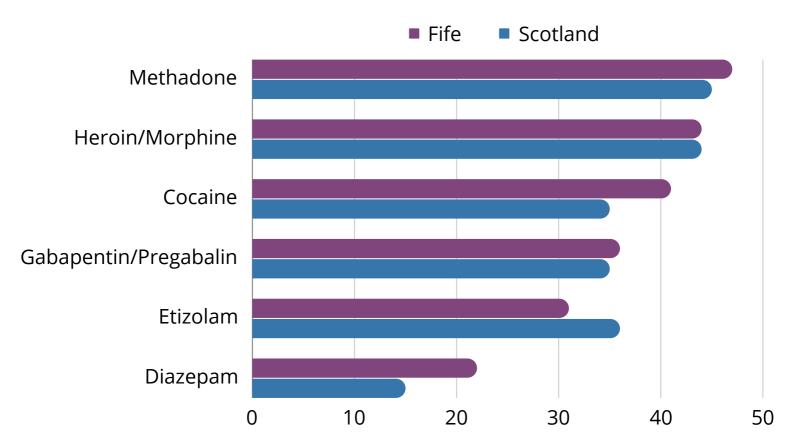
36%

Etizolam is a benzodiazepine analogue from a class of drugs known as thienodiazepines and, like most drugs similar to benzodiazepines, it has amnesic, anxiolytic, anticonvulsant, hypnotic, sedative and muscle-relaxing properties. It's most closely related to the benzodiazepine triazolam.

The number of drug related deaths in Fife where ecstasy have been involved have been small between 2019 and 2022.

DRUG RELATED DEATHS BY SUBSTANCE NATIONAL COMPARISON

19



Above shows the 2022 comparison of the top 6 implicated substances in drug related deaths as a comparison between Fife and the wider population of Scotland.

A formal drug surveillance process being rolled out by Fife ADP and NHS Public Health may help to track specific trends in a more timely manner. Collaborative work with SDF RADAR team will also help to identify dangerous substances at an earlier point.

Polypharmacy is traditionally defined as an umbrella term to describe the simultaneous use of multiple medicines by a patient for their conditions. This has since widened to include non-prescribed drug use also which in turn is classed as problematic polypharmacy'. The Royal Pharmaceutical Society states that 'Polypharmacy is often linked to the taking of multiple medicines in older people. Yet, it can also affect a wider group including children and young adults, those from deprived backgrounds, people with mental health problems and those with learning difficulties.'

Drug related deaths in Fife usually involve more than 1 substance. The average (mean) number of substances implicated in each death was over 3. Where 2 or less substances were implicated (19 deaths), these were most commonly:

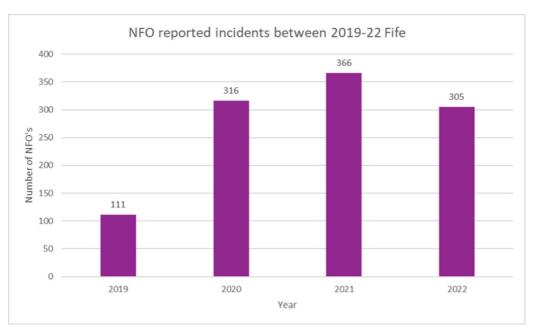
- cocaine (4)
- morphine/heroin (4)
- methadone (3)
- tramadol (3).

The vast majority of causes of deaths recorded on the Medical Examiner form 4 included reference to multi-substance toxicity contributing to the death (49).

Where the cause of death was not related to multi-substance toxicity, it was most often toxicity associated with cocaine use (5). In 3 of the cocaine related deaths, a health condition was also indicated as a secondary case of death.

The near-fatal overdose service continues its partnership with the Scottish Ambulance Service (SAS) and ADAPT, a third sector ADP commissioned service in Fife. Following the attendance of SAS at an NFO anywhere in Fife, a referral is made to ADAPT for follow up, individuals must opt out if they do not require the service. Support is offered to individuals who have had an NFO such as harm reduction advice, support into treatment and phycological support.

During the year 2022, 305 individual NFO incidents were reported to by ADAPT. Of the 305 cases reported, 208 of those were males and 93 females, with 4 not known. Both female and male NFO's in Fife in 2022 had the largest proportion reported in the age bracket 25-40 followed by 41-50.



The above graph demonstrates the number of reported NFO incidents where a member of SAS had attended in Fife between 2019-2022. Since the project began in 2019, the rate of NFOs attended by SAS has increased for two years before declining slightly in 2022.

AWARENESS AND TAKE-HOME NALOXONE

22

During the year, Fife ADP conducted an audit of Take-Home Naloxone (THN) overdose reversal medication. This looked at performance amongst its statutory and commissioned services, identifying barriers to distribution and working collegiately on a recovery plan to reach the target of 1400 needed across Fife to make an improvement.

In addition, Fife ADP has commissioned a harm reduction trainer within We Are With You, a third sector harm reduction specialist service. This role will ensure that initial and refresher training including overdose awareness are rolled out amongst our services and a plan has been developed to mainstream this training with partners working with people at risk and their families.

An extremely positive outcome for the ADP over the year 21/22- 22/23 is an increase in THN distribution of 88% moving significantly closer to the local target. As the figures for naloxone are collated for every quarter, in 23/24 the target has already surpassed the following and Fife ADP are on track to meeting the 1,400 THN target.

Of the drug deaths it is important to note that naloxone was offered and accepted by 24 people, not offered to 7 people and not known if an offer was made to 28 people. This is at odds with the data captured around the issuing of naloxone which shows that 18 kits were issued 13 kits were not issued and it is not known for a further 28 people.

The table below highlights distribution performance so far:

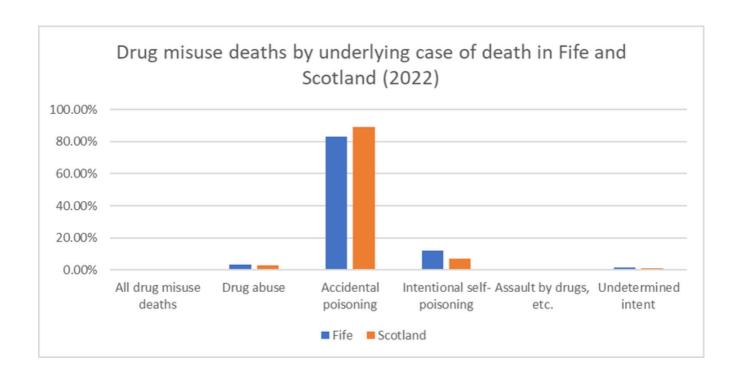
Indicator	Target	2021 - 2022	2022 - 2023	2023-2024 (Q1 +Q2 thus far)	Performance Indicator
Take Home Naloxone (THN)	1400	585	1098	1108	

ACCIDENTAL NON-ACCIDENTAL DRUG DEATHS

23

Accidental poisoning was the most common cause of death in 2022 for both Fife and Scotland, 83% of deaths in Fife and 89% in Scotland. This was however, lower than the two previous years (91% for both in 2021 and 92% in Fife and 93% in Scotland in 2020).

Intentional self-poisonings/suicide showed a higher number in Fife to 11.9% compared to 7-8% in the previous two years, however, the total numbers for Fife are not large (59 in 2022) so variation between years would be expected and more years of data would be required to see is this was a trend or just inter-year variability. Fife has had a higher percentage of suicides than Scotland as a whole for the last three years (Scotland 6.9% in 2022, 5.1% in 2021 and 4.3% in 2020).



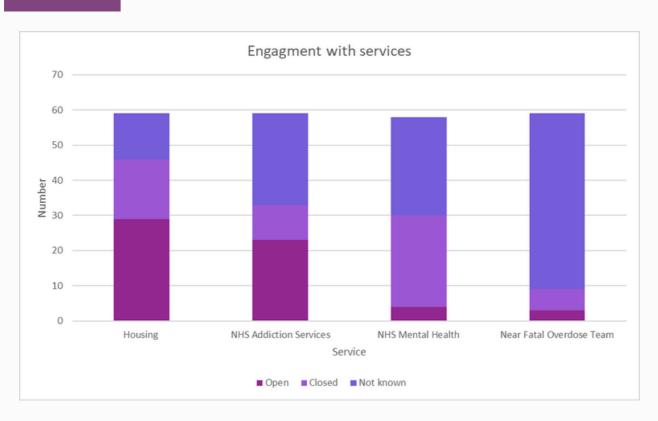
Further data is required when analysing drug related deaths within custody and prisons. Upon research it was found that the data was either not being captured or was not made available in order to get a full picture of all the facts surrounding drug deaths in custody and prison. This means that only the limited information below can be presented.

- In 2022, 13 people who had died had been in police custody in the 12 months prior to their death.
- At least 3 people were known to have died within 6 months of prison release.

Despite the limited data available, this still acts to highlight the importance of throughcare and support after prison release which is a known high risk time for overdose and drug related death.

Work is being planned for 2023 by the ADP to develop stronger links and referral pathways in order to address and reduce these risks. It is essential in continuing resilience whilst undergoing reform and establishing links within their local communities as they reintegrate into 'normal' life.

The graph below shows the number of people who were open, closed or not known to the four main services in Fife. These include Housing (mainstream), NHS addictions, NHS mental health and the Near Fatal Overdose Team (NFO). In 2022, 49% of people were still actively open to housing and 39% were open to NHS addiction services at time of death. This is a significantly lower when compared to previous years. A large number of people were not known to any of our services. For example, 70% of people that had died in 2022 were not known to the NFO team despite the Scottish Ambulance Service being in attendance.

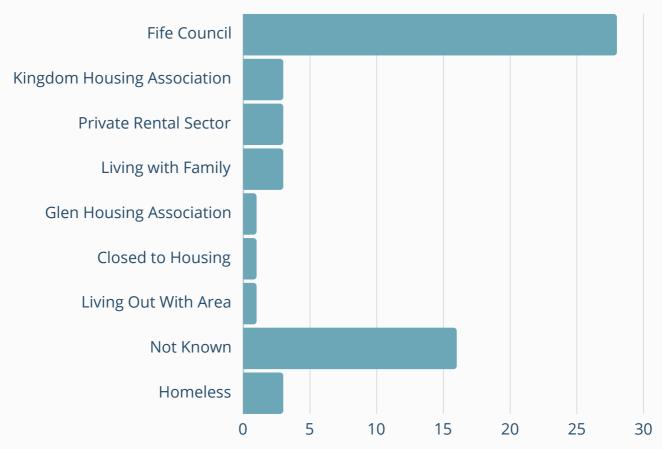


48 (81%) of cases were currently 'open' to at least one of the services involved with the MDDRG (there are, however that means that 11 (19%) were not currently open to any of the 21 services who feed into the MDDRG (commissioned by ADP or other services). The services people were most likely to be 'open' to at time of death were Housing (49%), NHS addictions (39%), Scottish Prison Service (14%) and FASS (10%). 5-9% of the people were open to NFO, ADAPT, CJSW, SW and mental health. Fewer than 5% of people were open to WAWY/ IEP or other 3rd sector services including FIRST, DAPL, RESTORATION, Frontline Fife, Phoenix futures. 0% were open to Barnardo's, Clued Up, Frontline Fife, Phoenix Futures, SACRO, VIP, Police custody health.

39% of people were in contact with NHS addiction services but relatively few were open to WAWY/ IEP or other third sector services which may have provided additional support and harm reduction.

CONTACT WITH 26 HOUSING

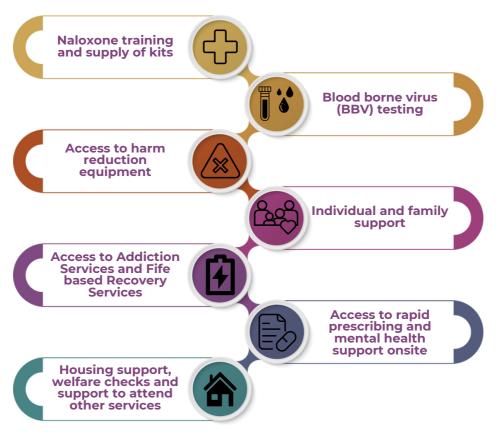
As mentioned in the previous section, the service people were most likely to be 'open' to at time of death was Housing (49% of all cases). This really highlights the important role of housing in contact with people who use substances. However few areas for learning have been identified in relation to housing from the MDDRG which gives another aspect to consider. The following chart indicates security of tenure for each of the drug related deaths within Fife.



In line with this it has also been explored as to other people present within the locus. It was identified that someone else was present at the locus in 27 (46%) of the deaths. This indicates the importance of overdose awareness and what to do in an emergency for associates and family members. It should be noted however, that often the people at the same locus are not in the same room at the time of death.

2022 saw the successful integration and operation of the ADAPT-KY8 Community Hub, so much so that it has been identified that other localities could utilise this model within their locality. Following further analysis, strategic planning and engagement with people with lived and living experience, Fife Alcohol and Drug Partnership agreed a new set of locality based strategic priorities.

It was identified that KY2 and KY5 (Kirkcaldy and Cowdenbeath) were amongst the next priority areas that could utilise a community hub. It was further assessed that access to similar services/targeted support would be beneficial to provide, such as:



As seen in KY8, people attend to have a chat, get a bite to eat and meet with service providers and professionals to learn more about what is available to them. We aim to replicate this within KY2 and KY5 community hubs, focussing on an informal and relaxed atmosphere and an overall psychologically informed environment.

NHS Fife Public Health conducted an evaluation of the planning involved with this approach to inform future locality-based provision in other areas of Fife where its inclusion is required to address inequalities. A copy has been attached (see Appendix 1).

MATSTANDARDS FOR THOSE MOST AT RISK

28

The Medication Assisted Treatment Standards were published in June 2021 by the Scottish Government with an expectation of full implementation in all ADP areas by the end of that financial year. The standards form part of the National Drug Mission policy response to address the high levels of drug related deaths in Scotland, declared a national public health crisis by the First Minister. In Fife drug related deaths have increased by 86% over the last ten years reaching 81 deaths in 2019 and 65 deaths in 2020 and increasing again to 70 deaths in 2021.



Commitment to the implementation of the standards was adopted very early by Fife ADP and as such the standards aligned with work already underway to improve assertive outreach, harm reduction, advocacy and increasing participation and engagement with people with lived and living experience. They are also strategically aligned with early intervention and whole family support and family inclusive practice service redevelopment.



The ten standards are clear, human rights based statements intended to be understood by those who use the system of care and drug and alcohol services. They are presented with evidence and rationale for their inclusion in the framework. The framework represents a safe, effective and consistent means of providing medication, psychosocial and psychological interventions. The NHS Board, ADP and HSCP responsibilities for each standard are detailed with process, numerical and experiential measures required to be submitted to Public Health Scotland and Scottish Government on an annual basis.



The MAT Standards are:

- All people accessing services have the option to start MAT from the same day of presentation.
- All people are supported to make an informed choice on what medication to use for MAT and the appropriate dose.
- All people at high risk of drug-related harm are proactively identified and offered support to commence or continue MAT.
- All people can access evidence-based harm reduction at the point of MAT delivery.
- All people receive support to remain in treatment for as long as requested.
- The system that provides MAT is psychologically informed (tier 1); routinely delivers evidence-based low intensity psychosocial interventions (tier 2); and supports individuals to grow social connections
- All people have the option of MAT shared with Primary Care.
- All people have access to independent advocacy as well as support for housing, welfare, and income needs.
- All people with co-occurring drug use and mental health difficulties can receive mental health care at the point of MAT delivery.
- All people receive trauma informed care.

MAT STANDARDS 30 IMPLEMENTATION

In August 2022, a programme improvement plan was submitted to Public Health Scotland and the Scottish Government based on feedback from the first year of assessment. This aimed to further enhance the services and system delivery moving Fife close to full implementation of the MAT Standards and to comply with reporting, benchmarking, and assessment criteria for the end of year assessment.

Specific deliverables were identified and agreed by the MAT Standards Implementation subgroup, the ADP Committee and both Chief Executives for the Local Authority and NHS. Fife ADP continued its aim to invest the majority of the funding with the NHS Addiction Service due to the focus of the first five standards on health board provision. Although longer-term funding was not confirmed until July 2022, causing some delay to implementation and recruitment.

An additional £204k from the ADP's drug mission funding was also allocated to the to increase capacity in the service. This will be sufficient to achieve the "Numbers in opiate replacement treatment target" linked to MAT Standards. This will be measured centrally by PHS and reported and published on a quarterly basis. The target will measure a planned and sustained increase in the numbers of people receiving opiate replacement treatment in the area to decrease the prevalence of problematic drug use and improve the number of people receiving OST treatment. This is currently an estimation and thus all boards have been given a universal 9% target (154 patients for Fife) increase over the next 2 years.

Fife ADP have monitored and managed progress towards the standards via quarterly reports submitted to the Scottish Government indicating completion of milestones and through their risk assessment. These have been shared with all partners and used as a mechanism for assurance and redirection, if necessary, though the ADP has recognised that a more robust performance framework is required for the remaining three years of the implementation plan to measure impact, improvement, and progress.

In April 2023, Fife ADP was externally assessed by Public Health Scotland on the first five standards by process, numerical and experiential evidence and MAT 6 to 10 on process and experiential evidence as partial implementation was expected. For 2023/24, the ratings for all 10 standards are detailed in the next section with plans for further improvements over 2023/24.



MULTIDISCIPLINARY DRUG DEATH REVIEW GROUP

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The MDDRG

The Multidisciplinary Drug Death Review Group (MDDRG) is a Public Health Surveillance Group focused on a full review and real time learning of each suspected drug related death in Fife. Established by the ADP support group in 2021 in partnership with Public Heath Scotland and NHS Fife Addiction Services the group aims to analyse each suspected drug-related death in real time for learning, immediate improvement and highlighting systematic and commissioning gaps to the ADP Committee. The subgroup has representation from NHS Addiction Services, Pharmacy Services, A&E, Police Scotland, Third Sector, Adult Support and Protection Committee, Harm Reduction services and Social Work Criminal Justice Teams and receives feedback on the contact with people who died from 21 services

Progress Made

Since commencing the group there have been significant service developments and improvements within the ADP, some of which have been influenced by or have direct relevance to the findings from the MDDRG including the assertive outreach and retention services; overdose prevention work including naloxone training and provision, and commissioning of the COMPASS social works service. There are also clear overlaps with the MAT standards work.

- Communication- This includes instances where there were deficiencies in communication and information sharing across multiple agencies, spanning primary care, secondary care, A&E, mental health, addictions services (including third sector), housing, police, security providers, social work and out of area services.
- Access to services- This includes access to addiction services and non-addiction services. Nondrug treatment services where access could have been improved or facilitated included mental health, housing, health, social work, psychology, family support and bereavement support. Needs to ensure 'no wrong door' of access to addiction services and to support awareness and access to non-stigmatising addiction services to all members of the community was identified. The need for pathways between addiction services and mental health was a strong theme
- Additional proactive support and coordination of care- This includes the need for a
 coordinated case management approach as well as assertive outreach for people
 not engaging with services, proactive action to maintain service engagement
 (retention), and provision of additional support during high-risk times.
- Adult protection- This includes providing vulnerable adults with support including referral to adult protection; services being able to engage in adult protection processes; and support for people who did not meet the adult protection criteria.
 The need to consistently follow up people following presentation to Accident and Emergency in crisis was also identified.
- Lack of overdose awareness This includes cases where overdose signs were not recognised by those present, including the observation that cases were snoring, indicating scope for further education and training for recognising and reacting to overdose signs.
- COVID effective service response/ engagement- This includes cases where people were unable to meet face to face due to COVID-19 restrictions or shielding, where this may have supported better engagement. In particular there were several cases where home visits would have provided a better understanding of living conditions.





While the core MDDRG group remains in place, In 2023, the MDDRG Expert Development Group was established by Fife ADP. The purpose of the group is to make recommendations for improvements to the systems of care and support accessed by people at risk of drug related harm and premature mortality. This might include changes to processes, the flow of information, the workforce and to services. The recommendations will be reported to the ADP committee, where implementations will be considered to develop quality improvement processes across systems and directorates. Key representation from this group includes; NHS addiction services, Scottish Drugs Forum, NHS Pharmacy Services, Public Health, Nursing, Third Sector Representation and Social Work.



In 2021, Fife ADP, as part of the implementation of the Whole Family Support and Family Inclusive Practice Framework (2021), explored the impact of drug related deaths on children in Fife from a child protection perspective, but also as part of understanding the correlation of adverse childhood events and care experience for future risk of drug related death. For those who died in Fife in 2022, information was gathered on:

- Number of adults who had been Care Experienced.
- Number of adults who had been parents.
- Number of adults who were actively parenting at time of death.
- Number of adults who were known to Criminal Justice services.

A search undertaken in AIS, the Social Work service recording system, identified 52 adults were known to Social Work services in Fife. Data found that:

- 7% of men were recorded as having been care experienced
- 35% of the people known to Social Work were female, of which;
- 56% were parents
- 70% had children who had become care experienced
- 10% of women were actively parenting at time of death
- 42% of women had been known, or were currently known, to Criminal Justice services
- 75% of men had been known, or were currently known, to Criminal Justice services

The examination of available data currently evidences that the majority of adults, who were parents and who died as a consequence of drugs, were not actively parenting at time of death. Given the relatively low numbers of children who were 'Looked After', it is likely that these children were looked after by another parent or other family members.

The examination of available data currently evidences an extremely high correlation (64%) between the death of an adult due to drug use and involvement in the Criminal Justice system.

It is worth noting that 88% of the adults, whose death was reported, were known to the Social Work service.

CONCLUSION 36

This report has presented an overview of current trends in drug-related deaths in Fife in 2022. In 2022, Scotland overall had the lowest number of drug-related deaths since 2017. In Fife the number of deaths were also the lowest since 2016. However, it should be noted that figures fluctuate on an annual basis.

Fife ADP will continue to address the national Drug Related Death crisis and will keep working closely with the national Drug Death Taskforce and Scottish Government Drug Mission Policy Unit to align provision to the new evidence-based recommendations.

In doing so, the ADP will continue working with partners as well as establishing new and innovative approaches to tackling drug-related deaths in Fife. All learnings from the MDDGR process will be captured in an action plan to be taken forward over the next year to implement positive, measurable changes with the ultimate goal to continue to reduce drug related deaths in Fife.

Findings and outcomes from this report and the wider scope of drug and alcohol use data in Fife in 2022 will be reflected in the updated Fife ADP Strategy. Themes will correlate with reducing harm, empowering vulnerable groups to strive for positive outcomes and live healthier lives.



Key Stats:

- 59 people in Fife lost their lives to a drug related death in 2022.
- Drug related deaths were 17% lower in 2022 compared to 2021, when there were 70 drug related deaths.
- Most deaths involved multiple substances, usually more than 3 substances were implicated in the death.

Key Ares to Highlight:

- Opioids were implicated in the vast majority of deaths (81%).
- · Methadone (either prescribed or illicit) was the most commonly implicated Opioid in drug related death.
- Benzodiazepines were implicated in over half of deaths in Fife (56%).
- Drug related deaths where opioids, benzodiazepines and gabapentinoids were implicated were all lower in 2022 compared to the previous year.
- Cocaine was implicated in a greater proportion of deaths in Fife (41%) compared to Scotland (35%) and cocaine related deaths in Fife were higher in 2022 compared to previous years
- Drug related deaths are more common in men, but drug related deaths in women in Fife have increased over time.
- In Scotland, the age profile of drug use deaths has become older over time. 35-44 year olds are the most at risk age group of death associated with substance use.
- Fife has a higher rate of drug related deaths in the 15-24 year-old age bracket than the national average.
- Health conditions also contribute to drug related deaths, most commonly respiratory or heart conditions.
- There are huge inequalities in drug related deaths the drug related death rates in the most deprived areas were 22 times greater than the rates in the least deprived areas (2017-2021) and these inequalities are widening in Fife.
- Just over a third of people who died had been 'open' to NHS addiction services at the time of their death (39%) and very few were 'open' to third sector services at time of death.
- The service people were most likely to be 'open' to at the time of death was housing (49%)
- Almost half of people who died had someone present at the locus at the time of death.

GLOSSARY OF TERMS

Alcohol &
Drug
Partnership

Medication Assisted Treatment

Drug Death Taskforce

Take Home Naloxone Drug Related Death

Blood Borne Virus

Multidisciplin ary Drug Death Review Group

MDDRG

Near Fatal Overdose The Scottish
Index of
Multiple
Deprivation

