

Cross Party Working Group on New Psychoactive Substances

A Report Summarising the Work of the
Group and Recommendations for Further
Action

March 2016

ACKNOWLEDGEMENTS

The Minister for Community Safety and Legal Affairs, Paul Wheelhouse, MSP, would like to thank members from each of the political parties for their time, commitment, and continued support in this challenging area and for their helpful contributions to how further work could be taken forward.

The Cross Party Working Group would like to thank the individuals and organisations who presented evidence, information, practical insight, and shared the experience gained from working in the New Psychoactive Substances field. This helped facilitate constructive discussion, conclusions to be developed, and supported the production of this report.

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1. EXECUTIVE SUMMARY

1.1 This report summarises the themes discussed and conclusions drawn by the Cross Party Working Group (CPWG) on New Psychoactive Substances (NPS). This report should be read in conjunction with the presentation materials and minutes which are available on the Scottish Government website.

1.2 The CPWG was established and chaired by the Minister for Community Safety and Legal Affairs, Paul Wheelhouse MSP, following his Statement to Parliament on 26 February 2015.

1.3 Membership of the CPWG was drawn from each of the five main political parties in Scotland which included the Scottish Labour Party, the Scottish Conservative and Unionist Party, the Scottish National Party, the Scottish Green/Independent Party and the Scottish Liberal Democrats.

1.4 The CPWG were asked to build upon the existing cross party consensus and work together to address the challenges NPS present to communities across Scotland. The CPWG heard from a range of experts in the field, examined the work currently underway, developed a shared understanding of the problem, and oversaw and contributed ideas to the range of themed work already underway on NPS.

1.5 The CPWG concluded that there are a number of options on how NPS could be addressed further in Scotland. These are outlined below:

1. Improved NPS related communication is needed across each of the health boards in Scotland to assist clinicians and staff to better understand NPS, raise awareness of symptoms of patients who may have consumed NPS and to share knowledge and best practice across the healthcare profession.
2. The Scottish Government should continue to engage with stakeholders to consider how to improve data collection on NPS for Emergency Department attendances and hospital admissions.
3. Further engagement with mental health services is required to better understand the challenges in relation to NPS particularly in the area of dual diagnosis.
4. Progress on the aspirations for a Forensic Centre for Excellence should be monitored on a regular basis to ensure this work does not lose momentum.
5. Further steps should be taken to better embed the term 'NPS' within wider society.
6. A peer-led approach should form part of the process in designing, developing and disseminating NPS information to young people.
7. Work with youth workers to increase knowledge of NPS, awareness of the associated health risks and how these can be minimised. This work should also

include confidence raising techniques to assist youth workers in providing support to young people using NPS.

8. Steps should be taken to further promote the range of educational initiatives and resources within the school setting including engagement with Directors of Education and Parent and Teacher Associations.

9. Social media tools should be exploited more fully in relation to NPS education.

10. Ensure wide dissemination of the findings from the *Understanding the Prevalence, Motivations and Harms of NPS use in Scotland* research, when published, and ensure appropriate action is taken to address the areas for improved practice. This evidence should be embedded into the next steps of interventions.

11. The recent action taken by Trading Standards Services should be highlighted as a model of good practice and should be used as an example to other local authority trading standards in tackling NPS.

12. Support should be provided to Alcohol and Drug Partnerships in preparing for the challenges the introduction of the Psychoactive Substances Act will bring in relation to those who use NPS. Support should also be provided on how to treat their needs and associated health harms due to withdrawal or potential bulk buying and overdosing.

2. BACKGROUND

2.1 NPS, misleadingly referred to as ‘legal highs’, is a description of a set of substances designed to mimic the effects of controlled drugs such as cannabis, ecstasy or cocaine but do not, by definition, fall within the current legal framework that prohibits the possession, sale or supply of drugs controlled under the Misuse of Drugs Act 1971. The contents and chemical composition of these substances can vary greatly and there is often no clear relationship between what and how substances are sold and the actual products being consumed. Some substances can be more potent and volatile than others and have different effects on those taking them, sometimes with fatal consequences. NPS are normally sold as powders, pills or capsules and can be smoked, snorted, swallowed, imbibed or injected.

Prevalence of NPS in Scotland

2.2 Overall, reported use of NPS in the general adult population in Scotland is relatively low compared with use of illicit drugs. In the most recent Scottish Crime and Justice Survey (SCJS), 0.5 per cent of all adults reported taking ‘new drugs’ in the year prior to the survey (conducted between April 2012 and March 2013). This compares to 6.2 per cent of adults who reported having used one or more illicit drugs over the same time period¹.

2.3 However, reported rates of use amongst younger age groups and some sub-sections of the population are higher^{2,3}. Four per cent of 15 year olds reported having used one or more NPS at least once in their lifetime in the most recent Scottish Schools Adolescent Lifestyle and Substance User Survey (SALSUS). Of these, 2 per cent reported having taken at least one NPS in the month prior to completing the survey (conducted between September 2013 and March 2014⁴).

2.4 Stakeholders across Scotland have also raised concerns about the use of these substances amongst vulnerable young people, adults with mental health issues and injecting drug users. These groups are unlikely to be captured by national household or school surveys such as SCJS or SALSUS. Anecdotal reports suggest NPS use is on the increase amongst these groups, and there are concerns that the consequences of NPS use in these vulnerable subgroups may be more severe.

¹ Robertson, L. and Bates, E. (2014) Scottish Crime and Justice Survey 2012-13: Drug Use, Edinburgh: Scottish Government, available at: <http://www.gov.scot/Resource/0045/00455131.pdf>

² Ibid

³ Winstock, A (2014) The Global Drug Survey 2014 Findings, accessed 3 February 2015, available at: <http://www.globaldrugsurvey.com/facts-figures/the-global-drug-survey-2014-findings/>

⁴ NHS National Services Scotland (2014) Scottish Schools Adolescent Lifestyle and Substance Use Survey 2013: Drug Use among 13 and 15 year olds in Scotland, available at: http://www.isdscotland.org/Health-Topics/Public-Health/Publications/2014-11-25/SALSUS_2013_Drugs_Report.pdf

Harms

2.5 There are challenges in responding to the emergence of NPS which means that evidence on the harms of NPS use is currently limited⁵. However, there are indications that NPS can cause a range of physical and psychological symptoms, ranging from cardiovascular problems, hyperthermia, kidney failure and seizures to psychological disorders such as anxiety, agitation, memory loss, depression and psychosis⁶. These health risks vary depending on the manner, method and quantity of NPS consumed. There are increased risks where NPS are consumed with other products, such as alcohol, controlled drugs or prescribed medication⁷. Given the complexity of substances and the constantly evolving NPS market, it is difficult to predict the medium and long term harms associated with their use, particularly if combined with other substances, and where there are underlying medical conditions.

2.6 The Scottish Government has commissioned research to address some of the most important gaps in knowledge about NPS use in Scotland. The aim of the research is to provide data on the use, motivations and harms of NPS amongst a range of vulnerable groups. It is expected that the findings will be available in June 2016. This is covered in further detail in the Research chapter of this report.

Drug-related Deaths

2.7 There were 613 drug-related deaths registered in Scotland in 2014, 86 more than in 2013⁸. The number of deaths where NPS was present in the body has increased from 4 in 2009, (when the first Scottish deaths involving NPS were registered), to 114 in 2014. NPS were implicated in 62 of the 114 deaths registered in 2014. However, almost all deaths with NPS present in the body at time of death had co-presence of other drugs: NPS were the only substances present in 7 out of the 62 deaths in which NPS was implicated⁹. These figures highlight the risks when NPS are taken alongside other substances such as alcohol, controlled drugs and prescribed medication.

Report of the Expert Panel

2.8 The Home Office conducted a review into the effectiveness of the UK's current legislative and operational response to NPS and the ongoing challenges. The report of the Expert Panel¹⁰ was published on 30 October 2014 and recommended a general prohibition on the distribution of NPS.

⁵ McAuley, A., Hecht, G., Barnsdale, L., Thomson, C., Graham, L., Priyadarshi, S., and Robertson, R. (2014) Mortality related to novel psychoactive substances in Scotland, 2012: An exploratory study; *The International Journal of Drug Policy*, available at: <http://dx.doi.org/10.1016/j.drugpo.2014.10.010>

⁶ Scottish Government (2014) New Psychoactive Substances Evidence Review, available at: <http://www.scotland.gov.uk/Resource/0045/00457682.pdf>

⁷ Ibid

⁸ National Records of Scotland (2015) Drug-related Deaths in Scotland in 2014, available at: <http://www.nrscotland.gov.uk/files/statistics/drug-related-deaths/drd14/drugs-related-deaths-2014.pdf>

⁹ Ibid

¹⁰ Home Office (2014) New psychoactive substances review: report of the expert panel, available at: <https://www.gov.uk/government/publications/new-psychoactive-substances-review-report-of-the-expert-panel>

NPS Expert Review Group

2.9 The Scottish Government established a similar group of experts to examine the powers currently available in Scotland to tackle the sale and supply of NPS. The NPS Expert Review Group report¹¹ was published on 26 February 2015 and made six key recommendations, one of which was for the Scottish Government to work in partnership with the Home Office to create new UK-wide legislation that will be effective in Scotland.

Scottish Government Debate

2.10 The Minister for Community Safety and Legal Affairs, Paul Wheelhouse MSP, led a parliamentary debate on 29 September 2015, where an update was given on progress to implement the recommendations of the NPS Expert Review Group. Members supported the motion¹².

The Psychoactive Substances Bill

2.11 The UK-wide Psychoactive Substances Bill was published on 29 May 2015¹³. The legislation will create a blanket ban across the UK. The legislation will make it an offence to produce, supply, offer to supply, possess with intent to supply, import and export psychoactive substances. The Bill will also create an offence for possession of a psychoactive substance within a custodial setting.

2.12 The ban aims to help protect people from the risks posed by taking untested, unknown and harmful substances openly sold on the internet, high street in head shops and other commercial outlets. The Scottish Government have been working closely with the Home Office on the detail of the Bill to ensure it will work in the best interests of Scotland. The Bill has concluded its Parliamentary passage and is expected to become law from Spring 2016.

Cross Party Working Group

2.13 The Minister for Community Safety and Legal Affairs, Paul Wheelhouse, MSP, welcomed the publication of the NPS Expert Review Group report in a Ministerial Statement to Parliament on 26 February 2015, and updated members on the latest developments on NPS. He said that the report showed that in some areas, the necessary powers to tackle NPS are available, but yet even these can be made more effective. In others, some new suggestions were made and that the Scottish Government will work closely with our agencies to identify how best to take them forward. He also announced his intention to establish and chair a CPWG to oversee the response to NPS. This included, amongst others, some of the work required to respond to the recommendations made by the NPS Expert Review Group.

¹¹ Scottish Government (2015) New Psychoactive Substances Expert Review Group: Review of the Current Legal Framework Available to Govern the Sale and Supply of New Psychoactive Substances, available at: <http://www.gov.scot/Publications/2015/02/3802>

¹² Scottish Parliament Official Report of the Meeting of the Parliament 29 September 2015, accessed February 2016, available at: <http://www.scottish.parliament.uk/parliamentarybusiness/report.aspx?r=10118>

¹³ The full text of the Psychoactive Substances Bill is available at: http://www.publications.parliament.uk/pa/bills/cbill/2015-2016/0063/cbill_2015-20160063_en_2.htm#pb2-1g2

Remit

2.14 The overall purpose of the CPWG was to build on the existing cross party consensus and to work together to address the challenges NPS present to communities across Scotland. It examined the work that is underway, built a shared understanding of the problem, and contributed ideas to work as it unfolded.

2.15 The group was an arena to discuss in more detail the range of work that is being carried out and to look for contributions and ideas from members to further inform work that could be done to tackle NPS. The group:

- Gained an overview of the range of work on NPS under identified themes;
- Received updates on the work being undertaken by the Scottish Government and partners on NPS across a wide range of areas including progress on the recommendations of the NPS Expert Review Group;
- Heard evidence from experts in the field on various strands of work; and
- Discussed and shared ideas on how NPS could be addressed further in Scotland.

Approach

2.16 The first meeting of the group was held on 17 June 2015. In approaching the work, members agreed that they should focus on specific themes where they would receive updates from Scottish Government officials and hear evidence from experts working in the field. The themes included information sharing, education and prevention, research, and trading standards. The CPWG met a total of five times through which members developed a greater understanding of each of the themes and engaged in constructive discussions resulting in the CPWG identifying areas where further action could be taken to tackle the challenges of NPS across Scotland. At its final meeting members considered this report.

Membership

2.17 The membership of the CPWG was drawn from each of the five main political parties in Scotland, which included the Scottish Labour Party, the Scottish Conservative and Unionist Party, the Scottish National Party, the Scottish Green Party and the Scottish Liberal Democrats. The CPWG was chaired by the Minister for Community Safety and Legal Affairs, Paul Wheelhouse, MSP.

2.18 Expert evidence was heard from a range of organisations. A full list of the membership and speakers can be found on page 10. Secretariat for the CPWG was provided by the Scottish Government.

Cross Party Working Group

Paul Wheelhouse MSP (Chair) – Minister for Community Safety and Legal Affairs
Hugh Henry MSP/Elaine Murray MSP – Scottish Labour Party
Margaret Mitchell MSP/Alex Johnstone MSP – Scottish Conservative and Unionist Party
Graeme Dey MSP – Scottish National Party
John Finnie MSP – Scottish Green/ Independent Party
Alison McInnes MSP – Scottish Liberal Democrats

Scottish Government

Beverley Francis – Drugs Policy Unit
Vicky Carmichael – Drugs Policy Unit
Isla Wallace – Drugs Research Team
Stella Fulton – Safer Communities Directorate

Speakers

Katy MacLeod – Scottish Drugs Forum
Dr Hazel Torrance – Forensic Toxicology Service, University of Glasgow
Dr Richard Stevenson – NHS Greater Glasgow and Clyde
Barry James – Scottish Police Authority Forensic Services
Detective Inspector Michael Miller – Police Scotland
Dr Lucy Pickering – University of Glasgow
Jordan Linden – Scottish Youth Parliament Chair
Katie Burke – Scottish Youth Parliament vice Chair
Ben McKendrick – Scottish Youth Parliament Chief Executive
Craig McClue – Trading Standards Scotland
Chief Inspector Gordon Milne – Police Scotland
Sergeant Grace Morrison – Police Scotland
Constable Michael Anderson – Police Scotland

3. SETTING THE SCENE

3.1 The first theme of the CPWG focused on setting the scene to ensure members were apprised of the main issues and challenges NPS present. Members heard from experts from the Scottish Drugs Forum (SDF) and the Scottish Government. Members were encouraged to ask questions and were given the opportunity to shape the content and themes of future meetings.

Overview of New Psychoactive Substances

3.2 Katy MacLeod, National Training and Development Officer, SDF, provided an overview of NPS. This included what NPS are, what they look like, how they are taken, and where they can be purchased. Information was also provided on the populations that use NPS and some of the motivations for use.

3.3 Some of the harms associated with NPS use were also highlighted to members. Some drug users are known to inject NPS which can lead to risky

behaviour, and cause severe skin irritation and wounds. There are also a range of clinical issues associated with NPS use including psychosis, showing that early intervention and harm reduction messages are key to reducing these risks.

Overview of the Evidence

3.4 Isla Wallace, Social Researcher, Scottish Government, presented an overview of the evidence base. This included a summary of the number of new NPS identified through European and UK Early Warning Systems, as well as data on the prevalence of NPS use in Scotland. This showed there has been an unprecedented increase in the number, type and availability of new psychoactive substances in Europe over the last five years, but only a very small number of these new substances have been identified in the UK. In addition, reported use in the general adult population in Scotland is relatively low compared with use of other illicit drugs. However, use in younger age groups and some sub-sections of the population are somewhat higher.

3.5 Some of the gaps in evidence relating to the prevalence and motivations for NPS use among vulnerable groups were also described. These included the extent of online purchasing of NPS and the acute and long term health harms of use. In addition, there are challenges in strengthening the evidence base due to the changing market, the multitude of NPS products, and the different definitions of NPS.

3.6 In terms of next steps, work is on-going to capitalise on existing data and information, carry out further research into motivations and harms amongst vulnerable groups, and to improve the collection and sharing of data on NPS.

Key Observations and Conclusions

3.7 The CPWG observed that the figures for drug-related deaths where NPS was the only substance implicated were relatively low. However, it was noted that the proportion of NPS recorded within toxicology has increased over time. This raises concerns about NPS use alongside other substances including alcohol.

3.8 There are limitations in the current available data, including challenges in detecting and attributing specific substances to a death. Gaps in knowledge, particularly around longer term harms of NPS use amongst vulnerable groups make it important to keep this issue on the agenda. Evidence on why younger age groups in particular use NPS is needed.

3.9 Chem-sex is a term used to describe 'sex while using drugs' and is a growing concern as this can be associated with high risk sexual behaviour. Work is underway to address this issue. One of the key challenges is that those engaged in the chem-sex scene do not necessarily perceive themselves as 'illicit drug users' and do not necessarily want to be associated with traditional drug treatment or needle exchange services.

4. INFORMATION SHARING

4.1 The CPWG examined the work being taken forward in relation to NPS and information sharing. Members heard from experts from NHS Greater Glasgow and Clyde, University of Glasgow and the Scottish Police Authority (SPA) who shared some of the challenges NPS present from an Accident & Emergency (A&E), toxicology and forensics perspective. In addition, the group reviewed a mindmap created by the Scottish Government that illustrated the complex relationship between stakeholders, information held and information shared.

Information Sharing within the NHS

4.2 The CPWG heard evidence from Dr Richard Stevenson, an Emergency Consultant from Glasgow Royal Infirmary, and Dr Hazel Torrance from the Toxicology Service at the University of Glasgow, who outlined the challenges NPS present to the NHS and work being taken forward to tackle these issues.

4.3 Technology to test for NPS agents does not form part of routine toxicology testing provisions within the NHS. Due to the changing nature of the market and the emergence of new substances, new analytical methods need to be devised and validated. This reinforced the need for a NPS Forensic Centre for Excellence to assist in the development of reference standards that the NHS could access.

4.4 There are challenges facing the NHS in capturing and sharing data on NPS. A key issue is that NHS Scotland patient recording systems do not currently include a code to capture NPS use. Collecting data on NPS prevalence and harms within the NHS is therefore limited. These problems are not restricted to Scotland, but are common across Europe and internationally, where the systematic collection of data on NPS in healthcare settings is scarce. In part, this reflects challenges in identifying NPS and the limitations of self-reported use, as well as the difficulty of establishing standardisation across different systems of data capture. Approaches to tackling these barriers to improved data collection are not straightforward, as data capture systems are influenced by local, national and international pressures.

4.5 Nonetheless, in Scotland, positives steps are being taken to improve information sharing through network building, educating clinicians and staff, and adopting a multi-agency approach, such as through Drug Trend Monitoring Groups. Within NHS Greater Glasgow and Clyde three hospitals are taking part in a study to identify NPS that have been consumed by those presenting at A&E Departments. The purpose of the study is to enhance the knowledge base of the use and impact of NPS locally. The findings will be disseminated both locally and nationally with a view to improving information sharing on NPS. However, while the CPWG noted this work was a step forward, more needs to be done at a national level.

4.6 Additional challenges faced by A&E departments are caused by users consuming NPS and consequently presenting in a manner typically consistent with severe mental health conditions. This can lead to a misdiagnosis of the patient and result in subsequent pressures on A&E and mental health professionals in managing the care of the patient.

Forensics

4.7 Barry James, Forensic Scientist from SPA Forensic Services, provided an overview of the SPA response to NPS. He explained that the increase in NPS cases began in 2008. This growing trend has continued and now represents a significant proportion of forensic casework. There are challenges in identifying through existing instrumentation whether a substance is controlled as many new drugs have a similar chemical structure which Gas Chromatography Mass Spectrometry (GCMS) struggles to identify without reference standards. To assist in the identification of NPS a Nuclear Magnetic Resonance (NMR) instrumentation was recently procured by SPA and the Scottish Government to enable the breakdown of and identification of previously unidentifiable NPS's. This will provide greater confidence in analytical results on NPS.

4.8 The SPA is a key stakeholder in sharing information about the substances present in Scotland with the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). The EMCDDA provides regular warnings and legislative updates to SPA and partners and in turn, SPA ensures this information is shared with appropriate stakeholders. This relationship is fundamental as it provides a robust evidence base to support decisions taken in relation to drugs and NPS.

Mindmap of Key Stakeholders

4.9 The Scottish Government presented a mindmap to illustrate to the CPWG the key stakeholders and the data and information being collected and shared on NPS in Scotland. This illustrated the complexity of the landscape and highlighted the gaps to be filled. A copy of the mindmap can be found on the Scottish Government website.

Consultation on the Forensic Centre for Excellence

4.10 In response to some of the issues raised above, a consultation on NPS had been shared with an extensive range of stakeholders through the NPS Evidence Group, and others, including the Crown Office and Procurator Fiscal Service, Border Force and the National Crime Agency. The consultation covered three of the recommendations of the NPS Expert Review Group, these included; the development of a definition of NPS; proposals to establish a Forensic Centre for Excellence; and improving data collection and information sharing of NPS. A summary of the results was published on 18 February 2016¹⁴.

Key Observations and Conclusions

4.11 In considering the evidence presented on information sharing the CPWG acknowledged the significant challenges in this area, particularly within the NHS and A&E. It was agreed that further work was needed to improve communication in relation to NPS across each of the health boards in Scotland to assist clinicians and staff to better understand NPS, raise awareness of symptoms of patients who may have consumed NPS and to share this knowledge across the healthcare profession.

¹⁴The results of the questionnaire can be found at: <http://www.gov.scot/Publications/2016/02/3588>

4.12 It was also acknowledged by the CPWG that further work needed to be done to improve data collection within the NHS both at a local and national level. It was recommended that the Scottish Government build on the work commenced by the NPS Evidence Group and engage further with stakeholders to consider how to improve data collection on NPS for Emergency Department attendances and hospital admissions.

4.13 The CPWG noted the impact of NPS on mental health and the associated complexities. Further engagement with mental health professionals was recommended to better understand the challenges in relation to NPS.

4.14 The CPWG also noted the potential the NPS Forensic Centre for Excellence could bring to alleviate some of the pressures and gaps experienced by the health and justice sector, particularly in relation to improving data collection and sharing, and improving access to reference standards to assist in the identification of psychoactive substances. Progress on the development of the Forensic Centre for Excellence should be monitored on a regular basis to ensure this work does not lose momentum.

5. EDUCATION AND PREVENTION

5.1 In considering Education and Prevention, the CPWG heard from a number of experts including the Scottish Youth Parliament (SYP), Police Scotland and the Scottish Government. The focus was on initiatives including a NPS Discussion Day Event, the 'Choices for Life' education programme, the 'Know the Score' website, and a Social Influence Education Project.

NPS Discussion Day Event

5.2 On 26 September 2015, the SYP held an event in conjunction with the Scottish Government. The aim of this event was to engage directly with young people from a range of backgrounds to gain a better understanding of their awareness of NPS and to give them the opportunity to shape the Scottish Government's approach.

5.3 The event combined innovative and traditional youth work techniques. The discussions centred on a number of areas including what participants already knew about NPS, their perceptions, and how information should be targeted at young people. The SYP produced the report *Tackling New Psychoactive Substances - A report on the views of young people* from the findings of the event. A copy of the report can be found on the Scottish Government website.

5.4 Jordan Linden, Ben McKendrick, and Katie Burke, from the SYP, presented this report to the CPWG. Key points included a lack of knowledge and awareness of NPS amongst young people, the term 'NPS' was too confusing, the tone of the information should be neutral and based on fact and young people should be involved in the design, development, dissemination of information. A further point from the event was the potential positive impact of a peer-led approach. There was strong consensus that young people were more likely to respond better to advice and information from their peers.

Choices for Life

5.5 Choices for Life¹⁵ is a substance misuse education programme which is delivered by Police Scotland in partnership with the Scottish Government, Young Scot and Education Scotland. The drugs, alcohol and tobacco education programme for schoolchildren includes an information website.

5.6 Detective Inspector Michael Miller, National Drug Co-ordinator, Police Scotland, explained that the core ethos of the programme is delivered nationally via the internet. Messages are also delivered locally through a series of community events, festive safety campaigns and festival safety initiatives.

Know the Score

5.7 The Scottish Government's Know the Score¹⁶ website and helpline provides comprehensive information and advice on drugs and emerging trends. It helps those who access it to understand the consequences of their use, and signposts services and sources of help if required. The target audience is 16-25 year olds, specifically those who are thinking about experimenting with drugs.

5.8 Vicky Carmichael, Policy Manager, Scottish Government, outlined a range of specific resources that had been developed in partnership with a range of stakeholders to provide factual information on NPS. The resources include Facebook adverts, feature articles, posters, pocket guides, and an interactive quiz. Information is provided in plain English in a range of formats that is accessible and appealing to the Know the Score audience.

5.9 The increase in NPS material and information has led to a rise in traffic to the website and NPS pages. In addition, there has also been an increase in the duration of time spent on the website. The Scottish Government will be continuing to invest in the NPS resources and are currently developing new resources that will build on the growing numbers accessing NPS information.

Forth Valley ADP Social Influence Programme

5.10 Vicky Carmichael also introduced the CPWG to an approach developed by Forth Valley Alcohol and Drug Partnership (ADP) which challenges thinking and behaviour using social norms theory. The 'Forth Valley ADP Social Influence' programme is funded by a range of partners including the Tobacco Action Group and the Robertson Trust and is designed to challenge differences between perception and reality.

5.11 The theory predicts that, over time, negative behaviours will increase. This results as a consequence of pupils feeling pressure to conform to a false peer group norm. The theory explains how the minority who regularly engage in negative behaviours do so believing that they are just like everyone else; suggesting that the greatest potential for change exists within this group. Further information about this

¹⁵ The Choices for Life website is available at: <http://young.scot/choices-for-life/>

¹⁶ The Know the Score website is available at: <http://knowthescore.info/>

project and a link to a film that provides more detail, can be found on the Social Services Knowledge Scotland website¹⁷.

Key Observations and Conclusions

5.12 In reviewing the findings of the SYP event, the CPWG concluded a number of the recommendations were closely aligned and should be linked together. The CPWG agreed there was a range of educational initiatives and resources available within secondary schools and that steps should be taken to further promote these with the school setting.

5.13 The CPWG noted the SYP point in relation to the term 'NPS' was confusing. However, the term has been widely adopted across academia, research, health, enforcement and the third sector at a national and international level. The CPWG agreed it was necessary to ensure consistency and therefore it would not be appropriate to change the term. The CPWG did agree that more needed to be done to ensure the term NPS was better embedded within society and that further efforts should be made to ensure this.

5.14 The CPWG also agreed there was a gap in relation to communication and that further action should be taken to engage more appropriately with young people in ways that meet their needs. It is important that those working with young people conduct themselves in a non-judgemental manner. In particular, the CPWG agreed that social media tools should be utilised more in relation to NPS and education and that a peer-led approach should form part of the process in the design, development and dissemination of information to young people.

5.15 A further conclusion of the CPWG was that there is a gap in relation to youth workers awareness of NPS. It was recommended further engagement is made with this group to increase knowledge of NPS, the health risks and how these can be minimised. A further recommendation was to work with youth workers to increase their confidence to support young people who are using NPS.

5.16 A Ministerial letter should be sent to Directors of Education and Parent/Teacher Association to promote current education initiatives within the school setting.

5.17 The Scottish Government should encourage stakeholders to fully exploit Social Media tools in education and prevention messaging.

6. RESEARCH

6.1 The CPWG heard evidence on the NPS research the Scottish Government has commissioned in order to progress understanding of the ways in which vulnerable groups make choices about whether to use NPS, and manage harms which may emerge as a result of NPS use. This work will help to inform Scottish Government policy making in this field.

¹⁷ Social Services Knowledge Scotland website, available at: <http://www.ssk.org.uk/topics/drugs-and-alcohol/innovation-and-ways-of-working.aspx>

Understanding the Prevalence, Motivations and Harms of NPS use in Scotland

6.2 Katy MacLeod from the SDF, and Dr Lucy Pickering, from the University of Glasgow, were commissioned by the Scottish Government to carry out mixed methods research on NPS use amongst vulnerable groups in Scotland.

6.3 In order to address the gaps identified by the Scottish Government, the study asks the following questions:

- What is the prevalence of use of different categories of NPS amongst target populations in Scotland?
- What are the stated motivations for experimenting with and continued use of NPS among target populations in Scotland?
- How are the harms associated with the use of NPS understood by those who use them and those who provide specialist services to target populations in Scotland?

6.4 Homeless people, injecting drug users, mental health services, men who have sex with men and 'at risk' young people are the focus for this study.

6.5 The first part of the study will identify harms and motivations for NPS use among the five target groups using interviews and focus groups. The second stage will capture data on NPS use, harms and motivations using a survey.

6.6 The study will include 32 semi-structured one to one interviews and 4 focus groups with front line staff along with surveys with the target populations and front line staff working with NPS users. A peer research model, which has been used successfully in previous projects, aims to encourage greater involvement from hard to engage populations.

Key Observations and Conclusions

6.7 The study focuses on vulnerable groups as NPS use amongst these groups has been identified as a gap in knowledge¹⁸.

6.8 The research evidence should inform the next steps of interventions along with wider dissemination of the findings. Appropriate action should be taken to address the issues identified in the research and the evidence should be used to inform next steps.

6.9 The study concludes in June 2016 and members looked forward to the conclusions. The CPWG welcomed further updates.

¹⁸ Gillies, Allan (2014) Closing Evidence Gaps on the Prevalence and Harms of New Psychoactive Substances in Scotland, Scottish Government, available at: <http://www.gov.scot/Resource/0047/00474313.pdf>

7. TRADING STANDARDS

7.1 Members heard from Craig McClue, Trading Standards Scotland, on the range of work being taken forward by Trading Standards Services to tackle the sale and supply of NPS through the use of General Product Safety Regulations 2005, Operation Alexander and partnership working. The CPWG also heard from members of Police Scotland who outlined the work being undertaken in the Angus area.

Trading Standards and Operation Alexander

7.2 The NPS Expert Review Group recommended a tool-kit and operational guidance should be developed with appropriate stakeholders to assist frontline trading standards staff tackle NPS. By applying the General Product Safety Regulations 2005, Trading Standards Services can place sellers of NPS on notice that the products they are selling fail the legislation's main rule, known as 'the general safety requirement'.

7.3 In December 2015, 19 local authorities across Scotland participated in Operation Alexander, co-ordinated enforcement action led by Trading Standards Services against NPS suppliers. The operation was a partnership between Trading Standards Scotland, the Society of Chief Officers of Trading Standards in Scotland, Police Scotland and the Scottish Government.

7.4 Trading Standards and enforcement partners made initial visits to 53 suspected NPS suppliers using powers of entry and inspection. The suppliers were placed on notice that the products they were selling were suspected as being NPS and officers were seeking co-operation in removing them from the market. Follow-up visits were carried out by Trading Standards officers and suppliers were urged to voluntarily surrender any stocks of 'unsafe' products for destruction. Where they failed to do so powers were used to seize the stock and a legal suspension was placed on further supply.

7.5 This action resulted in over £150,000 worth of NPS products being either seized or surrendered to local authority Trading Standards Services. The testing of these products by the SPA Forensic Services identified over 50 new compounds.

7.6 Officers also gathered intelligence on the NPS market through data capture forms to allow a comprehensive picture to be formed. An intelligence report will be shared with appropriate stakeholders to help inform enforcement actions in the run up to the change in legislation.

Police Scotland and Tackling NPS in Angus

7.7 Operation Carinate is an on-going initiative created to target individuals and premises that sell NPS and discourage people from buying and using these substances. It has seen officers utilising a range of police powers at commercial premises across Angus. This has led to shops in the Angus area selling NPS to close down.

7.8 Police Scotland also work closely with the Tayside Intensive Support Service project, which identifies reoffenders involved in drugs and NPS, and supports them into services. It helps them to make positive changes to their behaviour, often by addressing lifestyle issues. The participants voluntarily sign up to an agreement that gives them access to multi-agency support to help steer them away from substance abuse and other negative influences in their lives.

Key Observations and Conclusions

7.9 In considering the action taken by Trading Standards Services the CPWG agreed that the use of the General Product Safety Regulations 2005, Trading Standards tool-kit and a coordinated partnership approach has resulted in a reduction in NPS suppliers on the high street in Scotland. This work should be commended and Operation Alexander should be highlighted as a model of good practice and used as an example to other local authorities in tackling NPS.

7.10 The CPWG also complimented the work taken forward in Angus by Police Scotland. Members recognised that the closure in head shops in the Angus area has resulted in an apparent reduction in the number of younger NPS users. However, it was noted that there is still concern in the numbers of older NPS users and the number of calls received in relation to this group.

7.11 Members concluded that this action should continue in the lead up to the new legislation coming into effect. Support should be provided to ADPs in preparing for the challenges the introduction of the UK-wide Psychoactive Substances Act will bring. Support on how to treat service user needs and associated health harms, due to withdrawal symptoms or potential bulk buying and overdosing, should be provided.



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