Cabinet Secretary Health and Social Care Neil Gray MSP



T: 0300 244 4000

E: scottish.ministers@gov.scot

Clare Haughey, Audrey Nicoll, Collette Stevenson Conveners Cross-Committee: Tackling Drug Deaths and Drug Harm Scottish Parliament

6 March 2025

Dear Conveners

At the Cross-Committee meeting on the 20 February I committed to providing the following information:

- a) Details on the progress being made on the implementation of the proposed 'single shared assessment' for the NHS and third sector.
- b) Details on a proposed Naloxone campaign.
- c) Details about whether GPs have access to and, are accessing the MAT standards information and training available online.

This letter provides information to answer the points stated above.

a) Details on the progress being made on the implementation of the proposed 'single shared assessment' for the NHS and third sector.

During the second weekend of the People Panel (15-17 November 2024) the group discussed data sharing between services, with witnesses highlighting the 2022 document: Substance use and mental health concerns — The Way Ahead: rapid review recommendations. There is not a recommendation in this document regarding 'single shared assessments' but it does recommend that: "The Scottish Government should ensure that each area has an agreed protocol in relation to the operational interfaces between mental health services and substance use services."

The Clerk to the People Panel has confirmed that: the concept of "single shared assessments" was raised by third sector provider witnesses stating that they'd seen [single shared assessments (SSAs)] between (statutory and 3rd sector) services implemented in some areas but not implemented nationwide.

Scottish Ministers, special advisers and the Permanent Secretary are covered by the terms of the Lobbying (Scotland) Act 2016. See www.lobbying.scot







Therefore there is no recommendation for the Scottish Government to report against on single shared assessments specifically. However, regarding operational interfaces between mental health services and substance use services, MAT standards 6 (psychologically informed MAT services and availability of appropriate psychological interventions) and 9 (mental health care at the point of MAT delivery) require mental health and drug services to be joined up. At the moment both of these standards are in the process of implementation. Public health Scotland publish an assessment of implementation progress in June or July every summer (the MAT Benchmarking Report). As at 2024 97% of areas had achieved provisional implementation and for Mat standard 6 and 86% for MAT standard 9.

b) Details on a proposed Naloxone campaign.

We will continue to consult with key stakeholders, including the Scottish Drugs Forum, who supported the previous naloxone campaign, to assess the current situation and ensure the next steps for the naloxone programme are effective and present best value. Our primary focus remains on ensuring naloxone reaches those most at risk of experiencing or witnessing an overdose, including emergency services, outreach services, family members, and peers.

As highlighted in the People Panel report, naloxone distribution has been a major success of the National Mission, with significant increase in distribution driven by the funding allocated to the project. According to the latest statistics (PHS quarterly report, 4 March 2025) nearly 8 out of 10 people at risk of opioid overdose have received naloxone. We continue to work to ensure that those most at risk have access to naloxone.

Naloxone remains available to the general public through the click-and-deliver service, ensuring access for those who need it. While a new campaign may be beneficial, we will carefully consider associated costs before making any further decisions on the next steps.

c) Details about whether GPs have access to and, are accessing the MAT standards information and training available online.

GPs are not responsible for disclosing to the Scottish Government what training they are undertaking, however all GP Registrars will undertake training on addressing alcohol and drugs harms as part of the curriculum requirements within GP Specialty Training. Alongside this, training on substance use and trauma and information on the MAT Standards is available for GPs on TURAS.

GPs which have signed up to provide Enhanced Drug Services will be involved in treatment and support, and will know what the MAT standards mean for their patients. Other GPs, who have not signed up to provide Enhanced Drug Services, will not be contracted to provide these services and so will routinely refer patients to specialist services where they will be supported in line with the MAT standards.

Where someone's GP Practice is involved in treatment this is often provided through the Practice Nurse or Mental Health Nurse which helps provide joint support for substance use and mental health care.

Scottish Ministers, special advisers and the Permanent Secretary are covered by the terms of the Lobbying (Scotland) Act 2016. See www.lobbying.scot







The Royal College of General Practitioners Scotland delivers the Certificate in Management of Problem Drug Use. This supports primary care professionals within Scotland to provide care for people who experience problem drug use.

The Scottish Government also currently funds the delivery of the Humanising Healthcare Conversation Café Project. This project provides medical students with insight into substance use from the perspective of people with lived and living experience through interactive round-table guided conversations. The project began in the University of Glasgow in 2021, and since then over 300 future doctors have participated across several Scottish Universities.

I hope these answers are sufficient for committee members.

Yours sincerely

NEIL GRAY

Manha



