

Drug Death Prevention (Scotland) Bill

About You

Q1. Are you responding as:

An individual

Q2. Which of the following best describes you? (If you are a professional or academic, but not in a subject relevant to the consultation, please choose "Member of the public".)

Academic with expertise in a relevant subject

Optional: You may wish to explain briefly what expertise or experience you have that is relevant to the subject-matter of the consultation:

Was a lead addiction psychiatrist but also as a Minister with responsibility for Drug policy

Q3. Please select the category which best describes your organisation:

No Response

Q4. Please choose one of the following:

I am content for this response to be published and attributed to me or my organisation

Please provide your name or the name of your organisation. (Note: The name will not be published if you have asked for the response to be anonymous or "not for publication".)

Richard Simpson

Q5. Please provide a way in which we can contact you if there are queries regarding your response. Email is preferred but you can also provide a postal address or phone number. (Note: We will not publish these contact details.)

[REDACTED]

Q6. Data protection declaration

In order to proceed, please confirm that you have read and understood the Privacy Notice contained on Page 1

I confirm that I have read and understood the Privacy Notice to this consultation which explains how my personal data will be used.

Q7. If you are under 12 and making a submission, we will need to contact you to ask your parent or guardian to confirm to us that they are happy for you to send us your views.

No Response

Your Views On The Proposal

Q8. Which of the following best expresses your view of the proposed Bill? (please note this is a compulsory question)

Fully supportive

Please explain the reasons for your response.

There is good evidence that drug consumption rooms are valuable.

- a/ in reducing harmful paraphernalia in the community
- b/ in giving users confidence in connection to treatment services
- c/ in harm reduction and education of users in safer practices
- e/ reducing overdoses [even the recent scottish DCR/OPC rescued nine overdoses in 8 people in the short time it ran with very limited volunteers and little resourceful
- f/ the Swiss experience apart from confirming all the above succeeded in helping some to return to productive lives

Q9. Do you think legislation is required, or are there other ways in which the Bill's aims could be achieved more effectively? Please explain the reasons for your response.

If legislation is possible it should be used but if it is ruled out by the current UK wide law then the Lord advocate should provide the necessary advice as has been done for almost every advance in the provision of support to users eg sterile water needles citrus etc where addiction workers often in the voluntary sector stretched the law until a legal basis was created

Q10. Which of the following best expresses your view of the proposal to establish overdose prevention centres?

Partially opposed

Q11. Which of the following best expresses your view of the proposal for a licensing regime to enable the establishment of overdose prevention centres?

Fully supportive

Please provide reasons for your response, including on the proposed conditions for licensing (see pages 12 to 14 of the consultation document) and on the proposal that health and social care partnerships are responsible for licensing and scrutinising OPCs?

It is important that the operation of DCRs should be fully scrutinised and licensing them is a practical solution

Q12. Which of the following best expresses your view of the proposal for a new body, the Scottish Drugs Deaths Council?

Partially supportive

Please provide reasons for your response, including views on the proposed functions of the SDDC (see pages 14 to 16 of the consultation document) and on how it should operate in practice.

As Minister I set up the original Drug deaths review my successor made it a standing committee. A return to this would be acceptable but its continuation should be enshrined in legislation so it can't be terminated again without Parliament amending the law.

Financial Implications

Q13. Any new law can have a financial impact which would affect individuals, businesses, the public sector, or others. What financial impact do you think this proposal could have if it became law?

some increase in costs

Please explain the reasons for your answer, including who you would expect to feel the financial impact of the proposal, and if there are any ways you think the proposal could be delivered more cost-effectively.

Relative to the total budget the costs would not be nearly as high as the recent Heroin assisted treatment centre [Enhanced Drug Treatment Service (EDTS)] in Glasgow [£1.2m set up] whose function appears to have been poorly adapted to the realities of homeless users. Has there been an independent review or Care inspectorate/NSS report of the EDTS?

Equalities

Q14. Any new law can have an impact on different individuals in society, for example as a result of their age, disability, gender re-assignment, marriage and civil partnership status, pregnancy and maternity, race, religion or belief, sex or sexual orientation.

What impact could this proposal have on particular people if it became law? If you do not have a view skip to next question.

Please explain the reasons for your answer and if there are any ways you think the proposal could avoid negative impacts on particular people.

None

Sustainability

Q15. Any new law can impact on work to protect and enhance the environment, achieve a sustainable economy, and create a strong, healthy, and just society for future generations.

Do you think the proposal could impact in any of these areas? If you do not have a view then skip to next question.

Please explain the reasons for your answer, including what you think the impact of the proposal could be, and if there are any ways you think the proposal could avoid negative impacts?

Evidence eg Swiss that It will reduce the impact on the community of both discarded paraphernalia
It will also mean less visual episodes of users shooting up in public
Surprisingly initial neighbour opposition to centres became supportive once these benefits became evident, but initial consultation would be important with presentations from other centres perhaps best from centres in similar cultures like Australia.