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Chair  
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c/o University of Stirling  
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FK9 4LA

17 March 2020

Mr Calum Steele  
General Secretary  
Scottish Police Federation  
5 Woodside Place,  
Glasgow,  
G3 7QF

Dear Mr Steele

**Naloxone – Carriage and Administration by Police Scotland**

I am writing with regards to the recent circular (dated 17 February) issued by the Scottish Police Federation concerning the carriage and administration of naloxone by Police Scotland officers.

The Drug Death Taskforce has recommended that optimising the availability and distribution of naloxone is one of the most important steps that can be taken in our efforts to reduce the number of drug related deaths in Scotland. A particular focus of this work has been to ensure that all emergency first responders should have access to naloxone. As such, the Taskforce was very encouraged to hear about Police Scotland's proposals to develop a test of change on the carriage of naloxone. Such a move would be a clear demonstration of the commitment which Police Scotland has made on prevention and community wellbeing.

The Taskforce is fully committed to taking an evidence based approach to our actions and recommendations, and we are clear that this step would undoubtedly help in our efforts to tackle the drug death emergency. I am sure you are aware that there are other examples in the UK where Police officers have been allowed to carry naloxone, whilst there are numerous other international examples of this practice as well that have been shown to be beneficial. In all of these cases any potential barriers or challenges have been overcome in recognition of the fact that this is about saving the lives of some of the most vulnerable and at risk in society.

Given this positive development announced by Police Scotland, one which I feel is long overdue, I was concerned to read some of the statements included in the circular issued by the Federation. This was particularly in relation to comments concerning the clinical advice that has been provided to Police Scotland, and the suggestion that other agencies and public bodies will be inclined to step back from their own responsibilities "due to a belief the police will simply fill the void".

Firstly, I would strongly challenge the clinical advice that you have received as this is clearly out of line with other clinical expertise. I would be happy to provide further details on this, or to discuss further, if that would be helpful.

Secondly, I strongly believe your concerns about other public bodies and agencies stepping back from their own duties are unfounded. The drug death crisis impacts on all aspects of society, and to tackle it we must ensure input and commitment from all those who can help reduce the number of deaths. The membership of the Taskforce reflects this, and there has been a clear commitment from those on the Taskforce, and others outwith, to do all they can to help tackle this emergency. This includes Scottish Ambulance Service who you also raise concerns about. A fundamental aspect of the role of police officers is to protect life. Police officers are often amongst the first to respond to an overdose and as such it is the view of the Taskforce that they should be given the best tools to save lives.

As I have already said, I would be more than happy to provide additional details in response to a number of your concerns, or to meet with the Federation in order to discuss this matter further.

Yours Sincerely,



**Catriona Matheson**

Professor in Substance Use  
and  
Chair of the Drug Death Task Force

On behalf of the Ministerial Drug Death Task Force for Scotland