SPS STRATEGY FRAMEWORK FOR THE MANAGEMENT OF SUBSTANCE MISUSE IN CUSTODY

VISION:
To contribute to a reduction in reoffending and drug related deaths by adopting the principles of recovery to reduce the supply and demand of illicit substances and the harm caused by substance misuse.

PURPOSE:
To provide staff with strategic direction and guidance in the management of prisoners with substance misuse problems. The Scottish Prison Service (SPS) will take all reasonable measures to reduce the availability of illicit substances and provide services broadly equivalent to those available in the community, whilst recognising that prisoners require different routes to recovery.

STRATEGIC AIMS:
The SPS will ensure that:

- a comprehensive range of security measures are in place to reduce the availability and supply of illegal substances and associated paraphernalia entering Scotland's prisons;
- recovery will be the explicit aim of all services providing treatment and rehabilitation for prisoners with drug and alcohol problems;
- a range of appropriate treatment and rehabilitation services will be available since individual prisoners will require different routes to recovery;
- treatment services will integrate effectively with a wider range of prison based services to address fully the complex needs of prisoners with problematic drug and alcohol use;
- addiction testing will be deployed with clearly defined purposes to support clinical prescribing, risk management, prisoner progression, and to identify the prevalence of illegal drug use;
- a range of services and support will be provided to encourage prisoners to reduce or cease smoking;
- a range of Blood Borne Virus prevention, treatment, care and support services will be available in all prisons;
- access to information will take into consideration the diversity of prisoners with substance misuse problems, including low ability in reading and comprehension; and
- the principles of recovery will be reflected in training for staff and service providers to support the continuous development of a competent, confident, valued and responsive workforce.
Core Principles in the Management of Substance Misuse in Custody

1. SPS will ensure that a comprehensive range of security measures are in place to reduce the availability and supply of illegal substances and associated paraphernalia entering Scotland’s prisons by:
   1.1 working with other Law Enforcement Agencies to target any individual introducing illegal substances and disrupt drug trafficking routes into prisons;
   1.2 maintaining and developing the use of technology that will assist establishments in preventing the introduction of controlled drugs;
   1.3 engaging in intelligence led searches of cells, prisoners, property and visitors;
   1.4 raising intelligence awareness amongst staff and service providers where relevant, and others who work in the prison or with prisoners, to be competent to report all drug related incidents; and
   1.5 maximising and targeting the use of the Tactical Dog Operations Unit as both a prevention and enforcement strategy.

2. SPS will ensure that recovery is the explicit aim of all services providing treatment and rehabilitation for prisoners with drug and alcohol problems by:
   2.1 providing equity of access to treatment and rehabilitation services, which are broadly equivalent to those available in the community;
   2.2 adopting an evidence-based approach to planning, designing and delivery of services to promote recovery;
   2.3 continuing to develop systems to enable effective communication and information sharing protocols, ensuring prisoner consent;
   2.4 ensuring prisoner needs are central to the care planning process and are regularly reviewed to reflect progress made towards recovery;
   2.5 encouraging family involvement in the care planning and case conference decision-making process, where appropriate; and
   2.6 liaising with relevant organisations to ensure that drug-related deaths are reduced following release from prison.

3. SPS will ensure a range of appropriate treatment and rehabilitation services will be available since individual prisoners will require different routes to recovery by:
   3.1 offering prisoners an assessment in order that appropriate services can be provided to meet their identified needs, including the specific needs of vulnerable prisoners, linking with wider SPS strategies relating to women, young people and high risk offenders;
   3.2 providing clinical treatment and care in accordance with SPS Health Care Standards;
   3.3 providing prisoners with information at induction on how to access addiction services whilst in prison and also on release;
   3.4 adopting a multi-disciplinary approach in the provision of substance misuse services with access to wraparound care;
   3.5 providing access to addiction related in-reach services and peer led organisations;
   3.6 delivering education and awareness, approved activities and prisoner programmes, linking with the SPS Intervention Strategy;
   3.7 including prisoners in public awareness campaigns where appropriate; and
   3.8 providing a safe and supportive environment to promote recovery where services can be concentrated and delivered to motivated prisoners; for example, an Addiction Support Area may be considered.
4. **SPS will ensure treatment services will integrate effectively with a wider range of prison based services to address fully the complex needs of prisoners with problematic drug and alcohol use by:**
   4.1 offering prisoners an integrated package of care based on their individual assessed need;
   4.2 encouraging prisoners to participate in the Integrated Case Management process to address their problematic drug and alcohol use and offending behaviour issues;
   4.3 adopting the SPS Integrated Addictions Process as the model of care by joining up medical treatment with addiction services; whilst linking individuals to wider wraparound support and vital throughcare services to assist the recovery process and successful community integration;
   4.4 making appropriate referrals to relevant child protection agencies;
   4.5 ensuring a consistent approach to service delivery and the provision of continuity of care across the prison estate;
   4.6 continuing to work with NHS Boards, Local Authorities and Throughcare Addiction Services to achieve closer integration and a seamless transition from prison to the community; and
   4.7 optimising links with criminal justice partners, including Community Justice Authorities, Alcohol and Drugs Partnerships (ADPs), and the National Support function, to ensure that prisoners' needs are recognised and addressed in the community.

5. **SPS will ensure that addiction testing will be deployed with clearly defined purposes to support clinical prescribing, risk management, prisoner progression, and to identify the prevalence of illegal drug use by:**
   5.1 health management testing for the purpose of clinical treatment in accordance with Health Care Standards;
   5.2 prisoner management voluntary testing to support prisoner progression and determine the levels of prevalence of illegal drugs; and
   5.3 prisoner management mandatory testing for the purpose of risk assessment and suspicion, as defined by Section 107 of the Prisons and Young Offenders Institutions (Scotland) Rules 2006 and associated legislation.

6. **SPS will ensure that a range of services and support will be provided to encourage prisoners to reduce or cease smoking by:**
   6.1 providing opportunistic brief advice to all prisoners who smoke;
   6.2 providing prisoners aged 16 to 18 years old, who cannot purchase tobacco in custody, with Nicotine Replacement Therapy free on prescription;
   6.3 providing support services to prisoners aged 16 to 18 years who wish to stop smoking, irrespective of sentence length; and
   6.4 providing specialist 'Stop Smoking' services, including Groupwork and Nicotine Replacement Therapy, to eligible prisoners.

7. **SPS will ensure that a range of Blood Borne Virus prevention, treatment, care and support services will be available by:**
   7.1 offering immunisation against Hepatitis A and B to all prisoners on admission and ensuring any course of treatment will continue throughout their sentence and after release;
   7.2 providing prisoners with information at induction on how to access blood borne virus services and highlight associated risk behaviours;
   7.3 providing blood borne virus services in accordance with Health Care Standards and the National Memorandum of Understanding/Service Level Agreements between SPS and NHS Boards; and
   7.4 offering a range of harm reduction measures to reduce the transmission of blood borne viruses.
8. **SPS will ensure that access to information will take into consideration the diversity of prisoners with substance misuse problems, including low ability in reading and comprehension by:**
   8.1 providing access to information in different languages for prisoners who either do not use English as a first language or have difficulty understanding written English, for example, Induction, education and awareness;
   8.2 supporting prisoners with learning difficulties and disabilities which prevents them from understanding verbal or written information; and
   8.3 appropriately managing cases with recognised and specific requirements regarding individual faith and religious observance, within the context of security and treatment.

9. **SPS will ensure that the principles of recovery will be reflected in training for staff and service providers to support the continuous development of a competent, confident, valued and responsive workforce by:**
   9.1 continuing to develop a motivated and flexible workforce to respond confidently to the concept of recovery in the delivery of services;
   9.2 participating in effective, high quality national addictions training to enable all staff and service providers to carry out their role;
   9.3 encouraging service providers to develop ways of multi-agency working, which maximises awareness of each other’s roles and responsibilities to support referrals and information exchange;
   9.4 identifying skills gaps through regular training needs analysis, addressed through Continuous Professional Development (CPD) and Personal Learning and Development Plans; and
   9.5 facilitating evaluation and research that supports the aims of the strategy.

**OUTCOMES:**
- Achievement of Key Performance Indicator to evidence a reduction in the number of prisoners misusing drugs;
- Work with partners to develop integrated care pathways for prisoners with alcohol problems, supported by information protocols;
- Contribution towards national datasets to inform wider evidence base and improve outcome data;
- Reduced prevalence of smoking amongst the prisoner population;
- Increase in the numbers of prisoners being initiated on Hepatitis C treatment;
- Increase in the number of prisoners attending community appointments following release from prison;
- Reduced the number of Drug-Related Deaths soon after release from prison;
- Contribution towards achieving the national indicator to decrease the estimated number of problem drug users in Scotland; and
- Contribution towards achieving the national indicator in reducing the overall re-conviction rates as outlined in the National Performance Framework ‘Scotland Performs’.