

Proposed Edinburgh Safer Drug Consumption Facility

Consultation response from RCGP Scotland

3.1. Do you support a Safer Drug Consumption Facility (SDCF) in Edinburgh? (tick one)
(Required)

☒ I strongly support it

☐ I support it

☐ I neither support nor oppose it

☐ I oppose it

☐ I strongly oppose it

3.2 Please tell us why (free text) [1200 characters max]

RCGP Scotland welcomes the opportunity to respond to this consultation. As the membership body for general practitioners in Scotland, we exist to promote and maintain the highest standards of patient care.

We recognise that Scotland's drug death crisis remains one of the country's most pressing public health issues. After adjusting for age, the rate of drug misuse deaths were 4.2 times as high in 2021 than in 2000. Scotland's level of drug misuse deaths consistently ranks among the highest in Europe.

We note that the Scottish Affairs Committee previously acknowledged, "Safe consumption facilities are proven to reduce the immediate health risks associated with problem drug use. These facilities do not come without their challenges..."

We recognise the huge potential for harm reduction of such facilities, given the potential lethality of untreated overdose. Other outcome measures include reviews of injecting practice, peer support, referral to rehabilitation services, public health outcomes such as reductions in ambulance call outs, A&E attendances, uptake of testing for BBVs and take-home naloxone.

3.3. Do you support a Safer Drug Consumption Facility (SDCF) being in the Old Town?
(tick one)

☐ I strongly support it

☐ I support it

☒ I neither support nor oppose it

☐ I oppose it

☐ I strongly oppose it

3.4 Please tell us why (free text) [1200 characters max]

RCGP Scotland notes the findings of the needs assessment and feasibility study for a SDCF in Edinburgh, which states that, “Rates of drug-related harm in Edinburgh and the NHS Lothian region have consistently been above the national average... Edinburgh does not have a single, geographically specific ‘open drug scene’, and there is not one outstanding location which obviously presents itself as the natural site for a standalone SDCF.”

Considering these findings, we would welcome consideration of whether Edinburgh could benefit from an SDCF with a permanent base complemented by mobile outreach services. While the Old Town has been identified as the area experiencing the highest levels of drug-related harm, consideration should also be given to how people experiencing harm in other parts of the city can access support.

During a visit to The Thistle in Glasgow, RCGP Scotland heard from service providers that people were willing to travel from outside the city to access the facility. Similar considerations should be given in Edinburgh, including how best to support access for individuals travelling from across the city and wider region.

3.5. What concerns (if any) do you have about the facility being located in the Old Town?

free text [1200 characters max]

It is RCGP Scotland's view that any SDCF in Edinburgh should be closely linked to robust, sustainable recovery pathways, and appropriate health prevention and promotion services.

As stated previously, harmful substance misuse is spread across the geographical area of Edinburgh and further afield, and consideration should be given as to how to make the SDCF in the Old Town as accessible as possible for users who may benefit from the service.

3.6. What benefits (if any) do you think the facility could bring to the Old Town?

free text [1200 characters max]

We note the consultation FAQ's findings that the Old Town is the area of Edinburgh most affected by public injecting, with high levels of overdoses and ambulance callouts. International evidence indicates that SCDFs can significantly reduce overdoses and ambulance callouts.

SCDFs should also provide wider health promotion/prevention services. We welcome the fact that The Thistle offers reviews of injecting practice to reduce infection risk, BBV testing, take-home naloxone, and pathways into rehabilitation services. These interventions would provide important benefits for people who inject drugs in the Old Town area.

We also note the proposal's view that supervised inhalation facilities would be desirable. This would be particularly beneficial given the shift in Scotland towards inhalation as a mode of drug consumption. During a visit to The Thistle, RCGP Scotland noted that supervised inhalation and the provision of safer smoking equipment were not available because of the Smoking, Health and Social Care (Scotland) Act 2005 and the Misuse of Drugs Act 1971. Delivering this aspect of the service would therefore require legislative change from both the Scottish and UK Governments.

3.7. What other changes would make the area better and safer for everyone?

Please tick all that apply

More support for people on the streets or in public places

Better access to drugs treatment

Better access to residential drug rehabilitation

Better access to other support and healthcare

Better access to accommodation options

Needle disposal bins

More street cleaning

More law enforcement

Other (free text) [1200 characters max]

RCGP Scotland believes that all the services listed should be improved to deliver a better and safer area for everyone - and that these services would deliver most benefit for people who misuse substances. We are supportive of the Scottish Government's move to introduce a drug checking pilot to monitor emerging trends such as highly dangerous synthetic opioids - the SDCF in Edinburgh may benefit from having a similar service co-located onsite or nearby.

We note that former Lord Advocate Dorothy Bain KC issued a statement on prosecution policy in relation to a pilot of a safer drugs consumption facility in Glasgow, namely that it would not be in the public interest to prosecute drug users for simple possession offences committed within the facility. We would support such a measure for a SDCF in Edinburgh.

Questions remain regarding service users travelling to and from the facility. Consideration should be given as to how to approach this from a policing perspective ensuring consistency of application, and in keeping with the spirit of the former Lord Advocate's statement.