

3. Rapid Impact Assessment summary report

Each of the numbered sections below must be completed

Interim report Final report (Tick as appropriate)

1. Title of programme being assessed.

NHS Lothian Take Home Naloxone Programme (THN)

Intranet links for the NHS Lothian Patient Group Directives for Supply of Take Home Naloxone for:

Community Addictions Service

<http://intranet.lothian.scot.nhs.uk/NHSLothian/Healthcare/A-Z/MedicinesManagement/PatientGroupDirections/Documents/Section%205%20-%20Other%20PGDs/PGD%20125Pv2%20-%20Naloxone%20-%20Supply%20to%20Patients.pdf>

Prison Healthcare

<http://intranet.lothian.scot.nhs.uk/NHSLothian/Healthcare/A-Z/MedicinesManagement/PatientGroupDirections/Documents/Section%205%20-%20Other%20PGDs/PGD%20165Pv1%20-%20Naloxone%20Supply%20-%20Prison%20Release.pdf>

2. What will change as a result of this proposal?

Increased availability of Naloxone to injecting drug users, their peers, friends, social networks, carers, families and communities

Aiming to reduce fatal overdose

To increase awareness of overdose risk within injecting drug user population

3. Briefly describe public involvement in this proposal

Informed by national user involvement work (by Scottish Drug Forum at behest of Scottish Government) Local user involvement meetings and practitioner forum meetings that service users contributed too. Some service users participated in National THN training pilot and feedback their experience to develop NHS Lothian THN programme

4. Date of RIA

10th May 2012

5. Who was present at the RIA? Identify facilitator and any partnership representative present

Name	Job Title	Date of RIA training	Email
Jim Sherval	Specialist in Public Health		All on NHS Lothian outlook address book

Andrew O'Donnell	THN Lead and specialist BBV prevention nurse		
Elaine Rankine	Substance Misuse Pharmacist		
Dave Carson	SHPS	RIA Facilitator Sept 2008	

6. Evidence available at the time of the RIA

Evidence	Available ?	Comments
Data on populations in need	yes	
Data on service uptake/access	yes	ISD and local reporting Scottish DRD review group data (12/08)
Data on quality/outcomes	yes	Client feedback/ re-supply
Research/literature evidence	yes	International and national
Patient experience information	yes	All material supporting THN have been developed in partnership with service users
Consultation and involvement findings	yes	Scottish DRD Group volunteer/ service user forum
Good practice guidelines	yes	See PDG's (above)
Other (please specify)		

7. Population groups considered

Target population is injecting drug users therefore a lot of groupings and sub-set below are already incorporated into everyday practice in addressing inequalities and exclusion experience by this population

	Potential differential impacts
Older people, children and young people	No discrimination against older people but CANNOT supply to those under the age of 16 in line with the PGD
Women, men and transgender people (include issues relating to pregnancy and maternity)	Outreach and fixed base sites such as the women's clinic – targeting vulnerable women THN – contraindication with pregnancy
Disabled people (includes physical disability, learning disability, sensory impairment, long term medical conditions, mental health problems)	Through referrals, outreach & fixed base sites. Experienced and adaptable clinicians – adapt practice to presenting needs

Minority ethnic people (includes Gypsy Travellers, non-English speakers)	Outreach, fixed base sites. Now have a multi-lingual trainer to overcome language barriers (incorporating homelessness) Through crisis centre and also street foot patrol
Refugees & asylum seekers	
People with different religions or beliefs	
Lesbian, gay, bisexual and heterosexual people	Through fixed base groups which target this group, outreach and referrals
People who are unmarried, married or in a civil partnership	PDG facilitates training of significant others
People living in poverty / people of low income	
People in different social classes	
Homeless people	Outreach, hostels, crisis centre
People involved in the criminal justice system	Training prison medical staff Training provided at Drug Testing and Treat Orders services (DTTO)
People with low literacy/numeracy	Adapt practice to presenting needs, repeating the key learning points, "teach back"
People in remote, rural and/or island locations	THN is Lothian wide and provide within mobile clinic facility
Carers	Through support groups and alongside service users
Staff (including people with different work patterns e.g. part/full time, short term, job share, seasonal)	All staff who work with those who are at risk of opiate overdose are now offered training in THN Also provided with abstinent treatment centre
OTHERS (PLEASE ADD):	Sex Industry workers via outreach and street contact and specialist clinical services

8. What positive impacts were identified and which groups will they affect?

Impacts	Affected populations
Reduction in drug related deaths due to overdose	All
Empowerment and capacity building within drug using communities	
Increased engagement into treatment options	

9. What negative impacts were identified and which groups will they affect?

Impacts	Affected populations
None identified	

10. What communications needs were identified? How will they be addressed?

All national THN materials are in English – address this via brief intervention and teach back – also have translation service and within some partner agencies access to indigenous speakers of various groups (Polish, Spanish)

11. Additional Information and Evidence Required

If further evidence is required, please note how it will be gathered. If appropriate, mark this report as interim and submit updated final report once further evidence has been gathered.

12. Recommendations

One point to consider is the national advice with regard to PGD and the requirement to teach “heartstart”/ basic life support skills which is a significant barrier - This is for cardiac arrest not for overdose arrest. This will hopefully be address at the THN is reviewed nationally by NHS Health Scotland

13. Specific to this RIA only, what actions have been, or will be, undertaken and by when? Please complete:

Specific actions (as a result of the RIA)	Who will take them forward (name and contact details)	Deadline for progressing	Review date
To monitor any cutbacks and budgetary constraints that impinge on THN programme	Andrew O'Donnell reporting to APD's and Jamie Megaw		In line with financial planning March/ April 2013

14. How will you monitor how this policy, plan or strategy affects different groups?

Locally - PGD review process

Nationally via DRD National Forum and Scottish Government

Manager's Name:

Jim Shanley, Harm Reduction Team

James.Shanley@nhslothian.scot.nhs.uk

Date:

24th May 2012

Please send a completed copy of the summary report to:

James Glover, Head of Equality and Diversity
James.Glover@nhslothian.scot.nhs.uk

Note that you **will** be contacted by a member of NHS Lothian's impact assessment group for quality control and/or monitoring purposes.