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Our ref: FOI/18/00799  
5 April 2018

## REQUEST UNDER THE FREEDOM OF INFORMATION (SCOTLAND) ACT 2002 (FOISA)

Dear Ms Miller,

Thank you for your request dated 15 March under the Freedom of Information (Scotland) Act 2002 (FOISA).

### Your request

You asked for:

- the number of people in Scotland off methadone from drug recovery programmes set up in the past 10 years.
- how many people from 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016 and 2017 are off methadone from drug recovery programmes the government has set up.
- the amount of money spent in each year that goes into running these programmes paid for by taxpayers money.
- the current number of people still on methadone as of January 1st, 2018.
- the number of drug recovery programmes succeeding and failing in all of those years and also done in the same layout.

### Response to your request

With regards the first 4 points above, while our aim is to provide information whenever possible, in this instance the Scottish Government does not have the data on the number of unique individuals prescribed methadone in any given year. The reason why we don't have the information is explained in the Annex to this letter.

However, all the historical volume and costs data associated with Prescribing for Opioid Dependency are already in the public domain through the ScotPHO website. These can be found using the following link:

<http://www.scotpho.org.uk/behaviour/drugs/data/treatment-for-drug-misuse/>

On this page there is a section on *Opioid Replacement Therapy (ORT) Drug Prescribing* which includes a link to an EXCEL workbook ([Drug Prescribing Scotland 2016/17](#)) detailing dispensing volume and drug, supervision and safe dispensing costs for the last 10 years of available data – ie 2007-08 to 2016-17.

The Excel file lists all drugs used for Opioid Replacement Therapy (ORT). Table 1 shows, for each of the drugs, the number of dispensed items, gross ingredient costs, defined daily doses (see definition under the 'Introduction' tab of the excel file), and the defined daily doses per 1,000 population per day for each year from 2007/08. Table 2 provides a similar breakdown by NHS Board. Table 3 shows costs and fees associated with methadone prescribing at Scotland and NHS Board level. Table 4 shows the quantities of methadone hydrochloride dispensed at Scotland and NHS Board level. Controlled drug fees and the costs associated with the supervised consumption of methadone and are agreed locally and the way in which these payments are shown in Table 3 may vary between NHS Boards. Therefore comparison of methadone costs across NHS Boards is not appropriate.

On the final piece of information you requested, again the Scottish Government does not have that information. Since 2009, the Scottish Government has provided funding towards Scotland's Alcohol and Drug Partnerships (ADPs), embedded within existing Community Planning Structures (CPPs). ADPs have clear responsibility for developing local strategies and to make sure there is access to a range of appropriate treatment services to promote recovery according to local need and in line with the evidence base for effective treatment provision.

Information on the number of people receiving drug treatment is published in the Scottish Drug Misuse Database which is available on the ISD website at the following link.

<http://www.isdscotland.org/Health-Topics/Drugs-and-Alcohol-Misuse/Drugs-Misuse/>

Drug services are delivered by alcohol and drug partnerships at the local level. Details of these partnerships and the funding they receive are on the following link:

<http://www.gov.scot/Topics/Health/Services/Alcohol/treatment>

You can also find a wealth of data and information relating to drug misuse in Scotland on the Scottish Public Health Observatory (ScotPHO) website at the following link:

<http://www.scotpho.org.uk/behaviour/drugs/introduction/>

We are also working closely with Information Services Division (ISD) Scotland, national commissioned organisations, Alcohol Drug Partnerships (ADPs) and services on the development of a new data collection system (Drug and Alcohol Information System (DAISy)). This will be a secure national information system that will collect and report on drug and alcohol treatment and outcomes information, enabling the reporting of the numbers of individuals in receipt of Opiate Replacement Therapies (ORT) and fully assessing the effectiveness of these treatments.

Under section 25(1) of FOISA, we do not have to give you information which is already reasonably accessible to you. If, however, you do not have internet access to obtain this information from the websites listed, then please contact me again and I will send you a paper copy.

#### Your right to request a review

If you are unhappy with this response to your FOI request, you may ask us to carry out an internal review of the response, by writing to Dr Andrew Scott, Director of Population Health

Improvement (1E.15, St Andrews House, Regent Road, Edinburgh, EH1 3DG,  
[andrew.scott2@gov.scot](mailto:andrew.scott2@gov.scot)).

Your review request should explain why you are dissatisfied with this response, and should be made within 40 working days from the date when you received this letter. We will complete the review and tell you the result, within 20 working days from the date when we receive your review request.

If you are not satisfied with the result of the review, you then have the right to appeal to the Scottish Information Commissioner.

More detailed information on your appeal rights is available on the Commissioner's website at:

<http://www.itspublicknowledge.info/YourRights/Unhappywiththeresponse/AppealingtoCommissioner.aspx>.

Yours sincerely,

Michael Crook  
Substance Misuse Unit, Scottish Government

## REASONS FOR NOT PROVIDING INFORMATION

### The Scottish Government does not have the information

The Scottish Government does not have the information you have asked for because there are differences in prescribing practices between NHS Boards. Issues with the completeness of personal identifiers in prescribing data mean that such changes may not equate straightforwardly with increases or decreases in the number of individuals receiving methadone for the treatment of drug misuse.

The number of individuals prescribed specific drugs can be estimated using the Community Health Index (CHI) numbers captured on prescriptions. However, issues associated with CHI capture for methadone prescriptions means it is not possible to provide a robust count of the number of individuals prescribed methadone as an ORT in Scotland. While the national CHI capture for methadone increased from 64.1% in 2011/12 to 77.3% in 2016/17, it remains below the agreed threshold of reliability (individual analysis is usually reported only when CHI completeness is above 85-90%). However, as a result of ongoing public interest in methadone prescribing, these statistics are published as management information.

More information on this is available here - <http://www.scotpho.org.uk/behaviour/drugs/data/treatment-for-drug-misuse/> (under methadone patient estimates).

This is a formal notice under section 17(1) of FOISA that the Scottish Government does not have the information you have requested.