



Synthetic Opioids Incident Response Plan

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Approval Status: Prior to publication this plan is to be approved by the Leeds Drug and Alcohol Partnership Board and the Leeds Health Protection Board.

Background

Synthetic opioids, which include fentanyl, and a class of compounds called nitazenes, present a significant risk to people who use illegal drugs. Since June 2023, there has been a sustained level of nitazene detections in seizures and drug checking services across the UK and, as of April 2024, there has been more than 100 drug related deaths involving nitazenes¹.

Potent synthetic opioids have appeared primarily as an adulterant to, or replacement for heroin, putting those who use opiates, or who have an opiate dependency, most at risk. Figures estimate that there are more than 15,000 people in Leeds who have used an opiate in the last month and are therefore vulnerable to overdose or hospitalisation². However, increasingly there has been evidence of nitazenes appearing in other substances being sold as benzodiazepine and THC vapes, posing a threat to anyone who uses illegal drugs.

Objectives

The objectives of this report are;

1. To detail how the city is prepared for the appearance synthetic opioids in local drug markets, summarising existing processes and additional resources that have been applied to support those most at risk.
2. To provide the framework for an emergency response to an incident involving potent synthetic opioids, outlining the roles and responsibilities of council staff and partner organisations to ensure the timely and coordinated management of an incident.

The plan has been developed in line with national guidance and other local emergency planning documents including;

¹Letter from Rt Hon Chris Philp MP, Home Office, 17 April 2024

²Based on 2023 Crime Survey for England and Wales, National estimate of opiate use in the last month

- [OHID 2023 guidance](#) for local areas on planning to deal with potent synthetic opioids
- Leeds City Council Outbreak Plan
- Humankind Clinical Potent Synthetic Opioids Response June 2024

Synthetic Opioid Preparedness

In Leeds there are many established cross-system mechanisms and support services to help get people who use drugs into treatment or reduce harm from their drug use. To support those at risk from the threat of potent synthetic opioids the city will utilise these services alongside additional resourcing, which has been considered as part of the synthetic opioid preparedness plan.

This section describes actions we will take to :

- Prepare
- Monitor
- Treat
- Enforce

These actions will allow us to address the threat of synthetic opioids in Leeds and are outlined in detail below.

Prepare

- **Increasing Naloxone availability** – Leeds has an established Naloxone programme, managed by Forward Leeds, who supply naloxone to service users and deliver training to relevant professionals. All active opiate clients are offered Naloxone, and records show that 99.6% of clients recorded with opiate as their primary substance either possess or have been offered a Take-home Naloxone kit (figures provided by Forward Leeds October 2024). Training to administer Naloxone is offered to staff from drug and alcohol services, street support teams, Integrated Offender Management service teams, homelessness support teams and temporary accommodation providers. Training has been extended beyond third sector organisations to also include local businesses, including staff from cafes in hotspot areas, club night security staff, and members of the city centre church. Since April 2024, 289 staff have received training on how to respond to an overdose situation and been issued with a naloxone kit.

Responding to the national threat of synthetic opioids, training has been adapted to include up to date information regarding nitazenes and harm reduction advice for people who use opiates, benzodiazepines, and spice. The offer of naloxone has also been extended to those who use benzodiazepines and spice. In addition, harm reduction teams have distributed 124 naloxone kits (since April 2024) to those who are street homeless but do not use drugs, so that they are able to respond to an overdose on the streets. In response to reports that Nitazene-related overdoses require multiple doses to reverse, the Forward Leeds clinical team have changed their guidance, advising staff to offer 2 naloxone kits per person.

- **Providing nitazene testing strips to service users** – in June 2024, Forward Leeds secured funding for nitazene testing strips and initiated a pilot to offer tests to people who are buying illicit drugs, prioritising those buying illicit opioids and or illicit benzodiazepine. Protocol of the pilot

stated that test strips must be issued with training on how to use them, alongside tailored harm reduction advice and a handout leaflet. Any worker who issues a test kit is required to record the individuals contact details so that the Harm Reduction Social Support Team (HRSS) can contact them for a follow up.

- **Equipping local police teams with Naloxone** – Joint funded by Leeds City Council and Wakefield Council, using money from the Supplementary Substance Misuse Grant, a pilot is being trialled over period of 4 months with police officers who are First Aid trained. As of July 2024, Forward Leeds had delivered 4 training sessions reaching over 200 police officers, leading to around 60 officers volunteering to carry the kits.
- **Developing a Synthetic Opioid Incident Response Plan** - Co-produced by Leeds Drug and Alcohol Partnership Board, the city has developed a plan outlining the roles and responsibilities of partners across the system to ensure a timely, coordinated, and multiagency management of an incident involving potent synthetic opioids.
- **Collaborating with national and regional teams to develop a co-ordinated media response strategy** – the Forward Leeds marketing team have linked in with Waythrough’s (drug service provider) national media and communications team to develop a co-ordinated media response strategy including pre-prepared statements covering; key messages around nitazenes, key messages following an incident, and possible quotes for adaptation as required. In addition to this, the Forward Leeds marketing lead has joined a consortium of other Waythrough services from across Yorkshire (including Barnsley, Bradford, Calderdale, Sheffield, North Yorkshire) to ensure local areas are informed and co-ordinated on any media requests across the region. In August 2024 the group produced a joint press release to raise awareness of the increasing risks of potent synthetic opioids ahead of International Overdose Awareness Day.

Monitor

The Leeds Drug Alert System (LDAS) was established by Leeds City Council to support information sharing between professionals, to effectively respond to novel, potent, adulterated or contaminated drugs. The system is managed by the LDAS Coordinator, who is responsible for monitoring the drug alert inbox, validating any intelligence provided and escalating information that could be considered a potential threat to the LDAS Panel (see Annex A). The system is monitored 5 days a week/ 52 weeks of the year and business continuity arrangements are in place to ensure that the system remains up and running.

Local partners are encouraged to raise alerts of substances of concern that are being bought or used in Leeds. These include substance that are contaminated, adulterated or potent and are causing issues such as overdoses, hospitalisations, and fatalities. Partners who feed into the LDAS, known as the Professional Information Network (PIN), include representation from;

- Leeds City Council (Commissioning, Emergency Planning, Health Protection, Public Health, Safer Leeds, Street Support teams, Entertainment Licensing)
- Drug and alcohol treatment provider
- Rehabilitation/ detox service
- Street outreach teams
- Ambulance Service
- A&E Departments
- Police
- Prison service

- Probation service
- Accommodation providers
- Healthcare providers
- Sex worker support services
- Homeless charities
- Local businesses
- Controlled Drugs Accountable Officers
- Local Pubwatch
- WYP Leeds District Licensing Department
- Leeds Student Health and Wellbeing Partnership Board
- Local Drug Information Systems (LDIS) in neighbouring Local Authorities
- Regional Office for Health Improvement and Disparities (OHID) teams

Once a substance of concern has been identified, partners can report it to the LDAS by completing the LDAS form (see Annex B) and emailing this to the drug alert inbox. This will capture information on:

- Location of the incident
- Substance involved
- What the substance is being sold as/ intended purchase
- Effect of substance
- Appearance of the substance

If intelligence is received that qualifies as an incident, the LDAS Coordinator will immediately convene the LDAS Panel to review and agree further action to be taken. If the LDAS Coordinator is unavailable at the time of an incident (e.g. if on annual leave), individual panel members will take on their responsibilities, based on pre-agreed hierarchical replacement system. In the event a Panel member from Forward Leeds is unavailable to attend a LDAS panel meeting, colleagues can nominate representatives from their respective teams to act in their place. If a professional, such as an A&E consultant, has been involved with the incident triggering an LDAS Panel meeting, the professional may be invited to attend the meeting to contribute to the assessment of that incident.

Treat

Treatment is a protective factor in overdose prevention as those who are prescribed effective opioid substitution therapies such as methadone are less likely to use street drugs or to inject drugs, which are known factors for overdose (WHO, 2023³).

The cities drug and alcohol service, Forward Leeds, is a CQC rated outstanding service that has significantly expanded in recent years, following additional funding. This has included expanding harm reduction, outreach, making the service easier to access, etc. The offer for people who are seeking treatment includes;

1. A range of psycho-social interventions including motivational interviewing, cognitive behaviour coping skills and relapse prevention designed with a trauma informed approach throughout the treatment journey.
2. A framework to support individual needs including follow ups, treatment reviews, signposting and utilising a wider multi-disciplinary team approach where required.
3. Opiate Substitution Prescribing. At current Forward Leeds can offers 4 different prescription options to suit the needs of the individual - Methadone, Buprenorphine,

³ [Opioid overdose \(who.int\)](https://www.who.int)

Buvidal (where appropriate) and Espranor (appropriate for continuation of treatment from prison)

Continuity of treatment, from prison to community, is a priority in Leeds and recovery support is available for those newly abstinent and for recovery maintenance to avoid risks associated with relapse.

Enforce

Enforcement around controlled drugs in West Yorkshire is primarily driven through the West Yorkshire Police Force (WYPF) Intelligence Collection Plan. It collects intelligence from a variety of sources and actions it through Precision Teams and Neighbourhood Officers. In terms of synthetic opioid enforcement, the strategy is focused on identifying links to dealers, working through the drugs line to eliminate the threat using technical and investigative strategies and reporting any developing information to national meetings and structures.

To support this strategy intelligence is collected from;

1. Case details from any known nitazenes deaths in Leeds.
2. Recovered product identified to contain nitazenes through forensic testing.
3. Any intelligence received into West Yorkshire Police.

Using this strategy WYPF have carried out interventions that has led to the successful conviction of three dealers, eliminating their lines of supply, all of which were linked to a single Leeds Urban Street Gang. All three of these lines were identified through intelligence development from known nitazenes deaths. Development work continues under this function, with information developing from further arrests and supply lines being identified.

Synthetic Opioid Incident Response Plan

The Incident Response Plan provides the framework for how the city will respond to an incident involving potent synthetic opioids. It details a list of actions to help mitigate risk following an incident, outlining the roles and responsibilities of Leeds City Council teams and partner organisations.

For the purpose of this plan, intelligence involving potent synthetic opioids that would be classified as an incident and trigger an incident response would include;

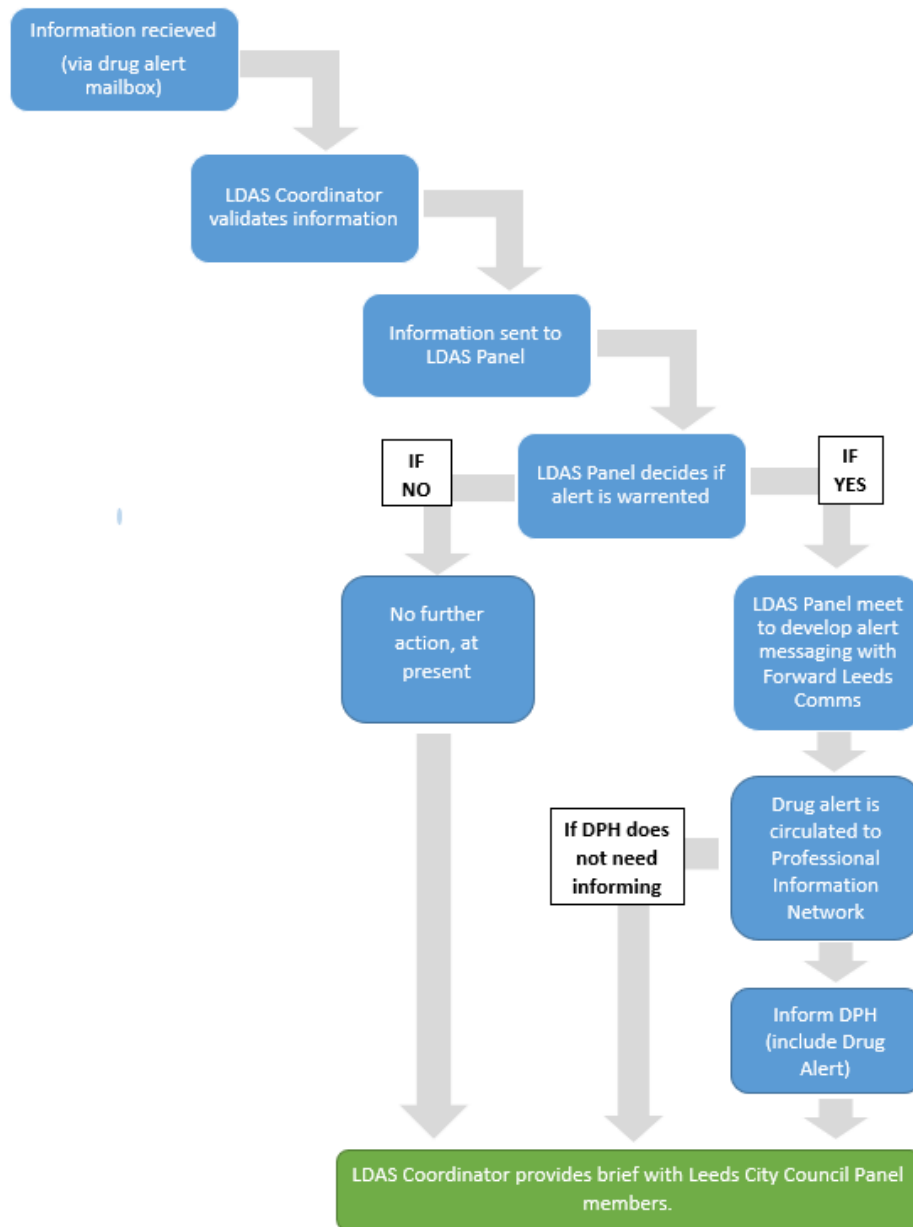
1. An unexpected increase in overdoses (fatal or non-fatal)
2. An unexpected increase in A&E hospital attendances from drug poisoning
3. A positive nitazene strip test from substances
4. A confirmed seizure of Nitazenes

Action	Task	Responsible team	SPOC
Communication of threat to professionals, drug users and the public	Circulate a city-wide alert highlighting key information and harm reduction advice to professionals (see Annex C for LDAS alert template).	LDAS Panel	Dan Burn LDAS Coordinator/ Health Improvement Principal, Leeds City Council
	Share any non-fatal overdose intelligence with the Partnership Intelligence Portal/Network (PIP/PIN)	LDAS Coordinator	Dan Burn LDAS Coordinator/ Health Improvement Principal, Leeds City Council
	Develop information and harm reduction advice for drug users.	Forward Leeds Social Media & Marketing Team	Mark Hindwell Marketing and Communications Officer, Forward Leeds
	Develop material to be used for any local media requests, providing a coordinated message and to avoid promoting 'hotspot' areas or stigma.	Forward Leeds Social Media & Marketing Team	Mark Hindwell Marketing and Communications Officer, Forward Leeds
Providing Support to those in Treatment	Provide nitazene/naloxone information to all service users.	Forward Leeds Harm Reduction Team	Helen Rodgers Harm Reduction Service Manager, Forward Leeds
	Offer nitazene testing strips to people who use opiates and benzodiazepines (and possibly those who use spice)		
	Request staff to report any disclosures of non-fatal overdoses and proactively ask service users whether they, or someone they know, has overdosed recently		

Providing support to those in the community (i.e. those not in treatment)	Carry out site visits to where overdoses have occurred, to meet with staff, residents, or service users to provide support and advice on nitazenes.	Forward Leeds Harm Reduction Team	Helen Rodgers Harm Reduction Service Manager, Forward Leeds
	Offer outreach information sessions to accommodation providers and commissioned services.		
Enforcement Action	Identify intelligence that links to the dealers of potent synthetic opioids and actioning early arrests and identification of the drugs.	West Yorkshire Police	Scott Hartley Detective Chief Inspector, Head of Leeds Reactive CID, Leeds District Senior Leadership Team, West Yorkshire Police
	Reporting potent synthetic opioid intelligence into national meetings and structures		

Annex A – Leeds Drug Alert System (LDAS) flow chart and membership


The Leeds Drug Alert System (LDAS) is managed by the LDAS Coordinator, who is responsible for monitoring the dedicated drug alert inbox, validating any intelligence provided and escalating any incidents that would warrant any action to the LDAS Panel (see flow chart).



Role	Staff Member
LDAS Coordinator	Dan Burn - LCC, Health Improvement Principle for Drugs and Alcohol
Deputy LDAS Coordinator	Ian Street - LCC, Commissioning Programme Lead for Drugs and Alcohol
LDAS Panel Members	Milly Slezak - LCC, Advanced Health Improvement specialist, for Drugs and Alcohol Nick Rank - Forward Leeds, Assistant Director Nicole Clark - Forward Leeds, Service Clinical Director Anne-Marie McMullan - Forward Leeds, Area Manager

Leeds Drug Alert System (LDAS) form

Please complete as much of the form as possible and return to Drug.Alerts@leeds.gov.uk

Your contact details: If appropriate role and service	
Click here to enter text.	
Location where incident occurred: Geographical area and location if known	
Home <input type="checkbox"/> Street <input type="checkbox"/> Nightclub <input type="checkbox"/> Hostel <input type="checkbox"/> Hospital <input type="checkbox"/> Other <input type="checkbox"/>	
Please provide further details; Click here to enter text.	
Name of drug: If known, brand name on packet, street name, chemical name, etc.	
Click here to enter text.	
Effect of drug: Drug effects as described to you	
Click here to enter text.	
Different effects than expected? (e.g. lasted longer, was more potent)	
Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>	If yes, please provide details: Click here to enter text.
Appearance (i.e. powder, pill, liquid), dosage of drug and how much was taken? If available, please attach photograph (next to a coin for scale)	
Click here to enter text.	
Please insert image below;	
	
Concern: Please specify concern the incident resulted in:	
Death <input type="checkbox"/> Adverse effect <input type="checkbox"/> Altered behaviour <input type="checkbox"/> Violence <input type="checkbox"/> Overdose <input type="checkbox"/> Other <input type="checkbox"/> please provide details: Click here to enter text.	
Did the incident involve a hospital admission?	
Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>	
Please provide further details of:	
Hospital: Click here to enter text.	
Dates when this occurred: Click here to enter text.	
Is it still ongoing? Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>	
Please provide any other information	
Click here to enter text.	

Date: Click here to enter text.

Version number: Click here to enter text.

DRUG ALERT

DANGEROUS SUBSTANCE ABOUT

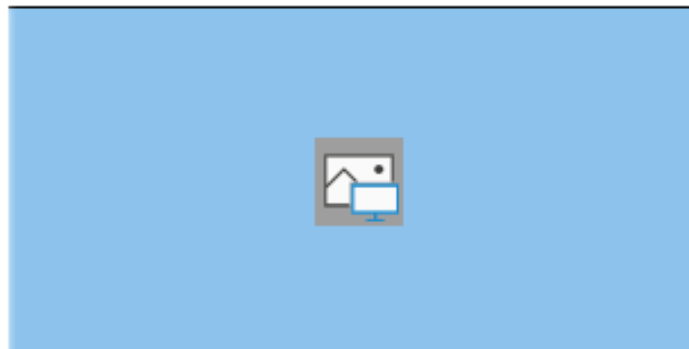
Brief warning about dangerous substance

*Provide details about what has happened.
Give example if for instance a local person is in hospital or dead.
State clearly if it has been tested and what it is.*

Explain what the consequences of taking this dangerous substance are

Describe what it looks like or how it can be identified.

Add photograph of the dangerous substance, if you have one, in the box [below](#)



Explain what can be done to avoid this dangerous substance

Give specific harm reduction advice

Explain what should be done if dangerous substance has been taken

Say where to go for help and give contact details