

Glasgow City Alcohol and Drug Strategy 2020-2023



Approved by ADP 21/10/20



The Glasgow City Alcohol and Drug Partnership Strategy

2020- 2023

1. The Glasgow City Alcohol and Drug Partnership

The Glasgow City Alcohol and Drug Partnership (GCADP) was established in 2010 by the Scottish Government and tasked with tackling alcohol and drug issues for the individuals, families and communities of Glasgow through partnership working. Organisational membership includes Glasgow City Council, NHS Greater Glasgow and Clyde (NHSGGC), Police Scotland, lived experience representatives, carers representatives and voluntary sector representatives. It became the strategic planning group for addiction of the Glasgow City Health and Social Care Partnership (GCHSCP) in 2016.

2. Vision

Our vision is for the individuals, families and communities of Glasgow to live free from the harms of alcohol and drugs, to be treated with dignity and respect, able to easily access the support and recovery they seek.

3. Aim

We aim to

- work in partnership to promote and support prevention and early intervention with individuals, families and communities, tackling stigma and the health inequalities for those affected by alcohol and drug use
- improve the quality of our alcohol and drug services, ensuring a Recovery Orientated System of Care (ROSC), building on our relationships with lived and living experience groups and develop the role of advocacy

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- reduce the harms caused by alcohol and drugs by expanding the range, accessibility, availability and coordination of the interventions of all of our partners
- ensure a flexible, agile and effective response to emerging trends in alcohol and drug use and the changing environment experienced by our service users, services and people who use alcohol and drugs

4. Opportunities and Challenges

4.1 Partnership Working

The Glasgow City ADP is a well-established partnership, with excellent representation from a wide range of committed stakeholders. The ADP sub structure ensures that our agenda is wide ranging and challenging. The broad and inclusive membership ensures productive debate and transparent decision making. This allows us to continue to consider and develop innovative responses to the alcohol and drug related challenges the city faces.

4.2 System of Care

Treatment and care services in Glasgow city continue to adapt and respond to the changing needs of the population, delivering a Recovery Orientated System of Care (ROSC). Service leads are well linked into national developments, including close involvement in those being driven by the Drug Death Task Force. Glasgow Alcohol and Drug Recovery Services (GADRS) and our purchased services continue to work closely together to address identified barriers to engagement and lower the threshold of access to treatment and support.

4.3 Recovery Communities

The grass roots movement in Glasgow city that developed the recovery communities has achieved a significance and importance that has been acknowledged locally and nationally. The North East Recovery Community, South Community Recovery Network and North West Recovery Community continue to develop ambitious plans

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for growth, whilst working together to ensure their long term sustainability. They give meaningful representation for lived experience at the ADP, in its sub groups and within the purchasing and monitoring of commissioned services. The recovery communities are key partners and influencers in the development of Recovery Oriented Systems of Care for service provision across the ADP.

4.4 Covid 19

The global health crisis of 2020 has required the Glasgow City Alcohol and Drug Partnership (GCADP) to respond to new challenges quickly and flexibly. Partners have had to adapt their services, service users have had to learn to engage using unfamiliar technology and we have all had to navigate unknown territory with normal channels of information sharing and interaction unavailable. The GCADP will continue to monitor and evaluate our innovative responses and adapt to the changing environment and priorities.

Digital working and engagement has had to become the norm and there have been significant strengths and weaknesses in this model. The GCADP will identify and address these and continue to think imaginatively about how we further support those who are digitally excluded and for whom current digital interaction is not appropriate. The current changing environment in the lockdown status means that our contingency planning has never been more important. The GCADP will support partners in developing and improving their business continuity plans to ensure that interruptions in service delivery and reductions in service choice are mitigated as far as possible.

4.5 Population Challenges

Glasgow city has the largest population of all the HSCP areas and its social care needs are wide and diverse

- 19.9% of our population live in an income deprived area¹
- 21% have common mental health problems¹
- over a fifth of adults are estimated to drink harmful levels of alcohol ¹
- 13,000 people who use drugs problematically ¹

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- in 2018, 280 people died of a drug related death. This was a 47% increase on the previous year ².
- in 2018, 99 people died through suicide (71 male and 28 female). This was a 12.5% increase on the previous year ³.

All of these challenges will inform the ADP planning and development over the life of this strategy.

4.6 Forensic Toxicology

The planned closure of the Forensic Toxicology Service at Glasgow University is a further challenge at a time when information on drug related deaths, changes in drug trends, and the identification of new and emerging drugs is of huge importance. The long standing service that provided essential information within weeks is now dealing with a considerable backlog and this is a very significant challenge for the GCADP. Moreover, this time lag is causing huge distress to bereaved families of people whose death is suspected to be drug related. As the situation is resolved nationally, and once the provider is confirmed, the ADP must ensure that we maintain our positive relationship with the new toxicology service and the ability to access lab services, statistical information and their expertise in providing flexible and fast testing of substances to allow the identification of new drugs that are causing harm.

5. Shared Outcomes

Through the work of the partnership and the development of this strategy the ADP have identified where there are shared outcomes with other local strategic partnerships and national bodies. The ADP will develop shared arrangements to support the delivery of the common priorities with stakeholders supporting the

- Glasgow City Health and Social Care Partnership Strategic Plan 2019-2022 ¹
- Greater Glasgow Division Drugs Strategy, Police Scotland ⁴
- Community Justice Outcomes Improvement Plan 2018-23 ⁵
- Glasgow Integrated Children and Young People's Service Plan 2017-20 ⁶
- Glasgow HSCP Rapid Rehousing Transition Plan ⁷

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- NHS Greater Glasgow and Clyde Director of Public Health Report- currently under development
- NHS Greater Glasgow and Clyde Mental Health Strategy ⁸
- Drug Death Task Force – Emergency Response Strategies ⁹
- Drug Death Task Force- Strategy to Address the Stigmatisation of People and Communities Affected by Drug Use ¹⁰

6. Scottish Government Strategies

In 2018 the Scottish Government published two strategic documents to address alcohol and drug harms:

- Rights, Respect and Recovery¹¹
- The Alcohol Framework 2018¹²

These documents set out a series of outcomes and priority actions for Scotland, supporting the delivery of the Public Health Priorities.

In July 2019 the Minister set out five priorities and a series of improvement goals for 2020-21. The ADP will be asked to report progress against these improvement goals in the annual report.

The five ministerial priorities that the GCADP will be asked to report against are

- 1. A recovery orientated approach which reduces harms and prevents alcohol and drugs deaths**
- 2. A whole family approach on alcohol and drugs**
- 3. A public health approach to justice for alcohol and drugs**
- 4. Education, prevention and early intervention on alcohol and drugs**
- 5. A reduction in the attractiveness, affordability and availability of alcohol**

In Jan 2020 the Scottish Government, Drug Deaths Task Force published the document “Evidence-Based Strategies for preventing Drug-Related Deaths in Scotland. Our Emergency Response”⁹. This document sets out guidance for ADPs

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on the evidence based strategies that are required to provide an effective response to the drug death crisis.

7. Glasgow City ADP's Strategic Priorities

The GCADP has been focussed on the national strategic priorities since the launch of Rights Respect and Recovery in 2018 and will continue to build on this work, particularly in developing the activity in our Drug Death Prevention Action¹³ plan which addresses the six strategic priorities of the Drug Death Task Force⁹. The Glasgow City ADP Strategy 2020-2023 also describes additional, cross cutting priorities that will help us achieve our aims for the city and contribute towards our vision.

7.1 Cross Cutting Priorities

The following priorities are essential to achieving our aims and will positively impact across the breadth of activity overseen by the GCADP.

7.1.1 Digital Working and engagement

Glasgow City ADP will work with the GCHSCP and partners to gain a better understanding of the local strengths and weaknesses in our current digital working provision. We will map current supply, identify gaps and increase our understanding of the reasons why people are digitally excluded and how we can address the barriers for individuals, staff, services and support groups. The GCADP recognises the need for increased digital engagement with service users and will develop a GCADP Digital Engagement action plan to help improve digital engagement and access. Consideration will also be given to those for whom digital interaction is not appropriate.

7.1.2 Information sharing

Glasgow City ADP will improve how we collect, analyse, share and communicate data to be more responsive to need, changing trends and tackling future public health emergencies. We will build on our work with

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Police Scotland, the Scottish Ambulance Service, Glasgow City Council, Glasgow City Health and Social Care Partnership and NHS Greater Glasgow and Clyde in developing the non-fatal overdose Information Sharing Agreement. There is a recognition amongst our statutory and third sector partners that further work on information sharing, within the bounds of GDPR, will significantly improve the support we can offer people who use alcohol and drugs, their families, carers and communities. The GCADP will use the current momentum to tackle identified gaps in information sharing across complex needs. We have recently been granted funding from the Drug Death Task Force to develop a new multi-agency data intelligence hub to allow a more informed partnership view of the impact of alcohol and drugs in the city.

7.1.3 Communications

Glasgow City ADP will develop a comprehensive communications strategy, allowing us to promote the ongoing work of our partners in tackling drug and alcohol issues in the city and the planned developments that we are working on to address the changing needs of the city.

7.1.4 Ministerial Priority 1 - A recovery orientated approach which reduces harms and prevents alcohol and drugs deaths

Glasgow City ADP will

- a. continue to encourage partners to develop and extend the range of activity across the spectrum of recovery, from harm reduction interventions to abstinence based support
- b. coordinate and integrate planning and delivery of services for those with complex needs including
 - i. coordinating the street outreach teams in the city centre
 - ii. developing a GADRS out of hours, crisis response mental health team providing more timely access to alcohol and drug services and specialist mental health assessment for people presenting in crisis

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- c. monitor and develop the work of the Drug Death Prevention Action Plan ¹³, including
 - i. implementing the model of assertive response for all people who have suffered non-fatal overdose
 - ii. implementing the Medically Assisted Treatment (MAT) standards, increasing our capacity for same day prescribing
 - iii. developing the Enhanced Drug Treatment Service provision, increasing the capacity and allowing more people who inject drugs to benefit from injectable opioid treatment
- d. monitor and develop the work of the Alcohol Harms action plan, including
 - i. improving access to alcohol support for patients from Primary Care with the PECANOS project
 - ii. early detection of advanced alcohol-related liver disease through the use of Fibroscan in GADRS
 - iii. identifying patients with alcohol withdrawal in secondary care suitable for early discharge with community GADRS input and use of neuroprotective drugs
- e. work with our Recovery communities to develop a sustainable model of investment, allowing further growth as recommended by the independent evaluation
- f. ensure continued access to independent advocacy for people who use alcohol and/or drugs
- g. consult with and include people with lived experience in developing support services and reviewing existing models
- h. investigate the benefits of and barriers to a drug testing service in partnership with key stakeholders
- i. monitor the provision of abstinence, maintenance and crisis residential treatment and evaluate the outcomes
- j. continue to train service staff in trauma informed practice

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7.1.5 Ministerial Priority 2 - A whole family approach on alcohol and drugs

Glasgow City ADP will

- a. build on the success of the recovering families models, incorporating recovery support for parents and carers, developing sustained model of investment and support
- b. develop staff training in assessment and support for ante natal and post-natal care
- c. build on our activity to address the needs of young people at risk through their alcohol and/or drug use including
 - i. develop a service response pathway for youth intoxication presentations at Emergency Departments
 - ii. build on the CRAFFT screening and intervention training for youth work staff
- d. explore a model to support parents who have children removed from their care
- e. provide training to Children's services staff and Scottish Reporters Administration, including an asset based whole family approach

7.1.6 Ministerial Priority 3 - A public health approach to justice for alcohol and drugs

Glasgow City ADP will

- a. build on our partnership with Public Health and support the recommendations of the Director for Public Health Report on alcohol and drug issues (currently under development)
- b. fully support implementation of Greater Glasgow Police Drug Strategy and Delivery Plan
 - i. increasing police referrals to support services for vulnerable people using drugs
 - ii. enhancing the Positive Outcomes Project (POP) capability
 - iii. support the programme of training and briefing for officers to increase awareness of addiction and tackle stigma

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- c. continue to be active members of Greater Glasgow Police Drug Strategy Group
- d. support Public Health to reduce the public health threat that blood borne viruses pose by
 - i. working towards the elimination of Hepatitis C
 - ii. promoting activities designed to prevent new infections
 - iii. encouraging early detection and treatment
- e. maintain our communication with the UK Government on the need for a Safer Injecting Facility in Glasgow City
- f. develop our plans for a ROSC in prisons by
 - i. supporting prison based recovery worker posts
 - ii. developing a harm reduction programme including
 - 1. a Prison Health Care harm reduction team
 - 2. prison based peer naloxone training
 - iii. develop a Nyxoid pilot
- g. support the implementation of the recommendations of the Community Justice Health Needs assessment
- h. support Police Custody Healthcare staff develop a harm reduction programme, promoting Take Home Naloxone, One Hit Kit provision, BBV testing and maintaining continuity of Medically Assisted Treatment (MAT)
- i. develop a sustainable programme of criminal justice and homelessness staff training on alcohol and drug issues and emerging trends

7.1.7 Ministerial Priority 4 - Education, prevention and early intervention on alcohol and drugs

Glasgow City ADP will

- a. improve public health surveillance by developing an ADP Intelligence hub
- b. continue to develop our equalities based work to ensure needs are identified and addressed across protected equality groups in Glasgow

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- c. develop an anti-stigma campaign in partnership with lived and living experience representatives
 - i. Implement the recommendations of the Drug Death Task Force Stigma Policy and Strategy ¹⁰
 - ii. Develop and roll out stigma staff training programme across care sectors
- d. build on and develop our engagement and consultation with people with lived and living experience, families and communities
 - i. Evaluate the outcomes from our Alcohol and Drug Advocacy Service, and implement recommendations
- e. develop communications campaign on blood borne virus transmission, reinfection, testing and treatment
- f. continue to deliver the activity focussed on reducing alcohol and drug related harms associated with the night time economy
- g. continue to closely monitor the changing trends in drug use, including stimulant use, and develop the necessary harm reduction activity
- h. maintain membership of the Eurocities Substance Use Prevention Working Group, sharing information, exploring funding and shared working opportunities

7.1.8 Ministerial Priority 5 - A reduction in the attractiveness, affordability and availability of alcohol

Glasgow City ADP will

- a. continue to deliver the programme of education and awareness raising on alcohol and drug issues in schools and broader settings
- b. build the GCADP influence on the licensing regime with detailed public health surveillance
- c. invest in the Navigators programme in the city, addressing alcohol related violence and crime
- d. continue to deliver Alcohol Brief Interventions as part of contact with health and social services

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- e. provide Best Bar None training and city centre steward training in harm reduction and safety
- f. continue to develop the civil contingency planning for major events

8. Performance

The GCADP will continue to work with Scottish Government to implement DAISy across our statutory and purchase services, and looks forward to the benefits this will bring to performance reporting nationally and locally.

GCADP will create a new multi-agency data intelligence hub to enable a more informed partnership view of the impact of alcohol and drugs in the city. The Hub is expected to provide relevant and timely information for the ADP to allow more enhanced coordination and prioritisation of our collective resources to tackle areas of greatest concern and allow us to meaningfully measure, analyse and report locally on performance.

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The ADP is committed to involving those affected by alcohol and drugs and will ensure community voices and qualitative sources are integrated into the hub in its development. Improved public health surveillance will be crucial in enabling the ADP to predict and track trends, interventions and outcomes across all aspects of business.

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