



Item No: 8

Meeting Date: Wednesday 12th December 2018

Glasgow City Integration Joint Board

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ALCOHOL AND DRUG PARTNERSHIP: PRIORITIES FOR ADDITIONAL INVESTMENT

Purpose of Report:

The purpose of the report is to advise the Integration Joint Board on the development of plans for investing £2,054,677 of Scottish Government funding for alcohol and drug services.

This follows support from the IJB following submission of a paper in May 2018 outlining the development process in anticipation of funds and guidance:

<https://glasgowcity.hscp.scot/publication/item-no-8-alcohol-and-drug-partnership-adp-priorities-additional-investment>

Background/Engagement:

In September 2017 the Scottish Government published 'A Nation with Ambition Programme' and within this there was a commitment to "invest an additional £20m in alcohol and drug services".

In anticipation of local funding, The Alcohol and Drug Partnership (ADP) commenced a process to develop early plans to invest potential funding, utilizing a partnership approach including lived experience, carers and voluntary sectors members of the ADP.

In August 2018 the Scottish Government confirmed that £17m would be distributed as a 'local improvement fund' via ADPs/IJBs. £3m has been allocated to 2 national programmes; these involves separate application processes.

Recommendations:	<p>The Integration Joint Board is asked to:</p> <ol style="list-style-type: none"> a) note the proposals outlined in this report; b) approve the plans for the use of the additional Scottish Government funding; and c) expect an annual report on progress and outcomes.
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Relevance to Integration Joint Board Strategic Plan:

The development of proposals supports the attainment of a number of aspects of the stated vision of the IJB, including:

- Striving for innovation
- Designing and delivering services around the need of individual carers and communities
- Focussing on being responsive to Glasgow's population and where health is poorest
- Supporting vulnerable people and promoting social well being

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	The proposed developments relate to outcomes 1,3,4,7 and 9
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Personnel:	There are staffing implications in some of the major proposals which involve both the use of new Scottish Government funding as well as re-alignment of current funding. Such changes would be managed in partnership with Staff Side Partnership representatives and professional bodies and in accordance with organisational change policies.
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Carers:	Early and on-going engagement with carer representatives has led to better informed prioritisation process with the new funding and support for the balance of investments.
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Provider Organisations:	Enhancing the future role of provider organisations in support of new models of care will be key to implementation of the overall package of developments. These proposals ensure that our engagement with the voluntary sector is a vital part of the implementation of the plans.
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Equalities:	Inequality, alcohol and drug issues, mental health and human rights are inextricably linked. As part of the development work for the implementation of the proposals, Equalities Impact Assessment will be undertaken for all aspects of the service development.
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Financial:	The programme of proposals mainly link to the new Alcohol and Drug funding announced by the Scottish Government on 23 rd August 2018 and has linkages to other sources of funding, in particular, Homelessness funding. There are also ongoing
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	<p>attempts to match in funding with other funding streams, such as primary care funding.</p> <p>The IJB has previously committed to supporting key elements of the proposed development areas. Utilisation of new funding for the Safer Drug Consumption Facility (SDCF) and Heroin Assisted Treatment (HAT) should help mitigate any need to use IJB reserves.</p>	
Legal:	The SDCF will require significant legal changes. The HAT will require approval from both the Home Office and Scottish Government to meet existing standards.	
Economic Impact:	A positive impact is expected with the creation of new or enhanced services and a reduction in public nuisance and littering.	
Sustainability:	The Scottish Government funding is secure for 3 years to allow the system wide transformation to be developed.	
Sustainable Procurement and Article 19:	None	
Risk Implications:	As the process of developing proposals continues to evolve, a full risk register for each bid will be developed. In terms of the major investments in the SDCF and HAT, these have already been considered by the IJB.	
Implications for Glasgow City Council:	None	
Implications for NHS Greater Glasgow & Clyde:	None	
Direction Required to Council, Health Board or Both	Direction to:	
	1. No Direction Required	
	2. Glasgow City Council	
	3. NHS Greater Glasgow & Clyde	
	4. Glasgow City Council and NHS Greater Glasgow & Clyde	✓

1. Purpose

- 1.1 The purpose of this report is to update the Integration Joint Board on the development and implementation of the plans to utilise an additional investment of £2,054,677 from Scottish Government.
- 1.2 To seek approval from the IJB on the investment plans for the use of the new funding.

1.3 To note the IJB supported the general direction of travel of the development process in May 2018 (<https://glasgowcity.hscp.scot/publication/item-no-8-alcohol-and-drug-partnership-adp-priorities-additional-investment>).

1.4 To note that the ADP has followed guidance in Scottish Government letters of 31st May, 23rd August and 5th November 2018.

2. Background

2.1 In September 2017 the Scottish Government published 'A Nation with Ambition Programme' and within this there was a commitment to "invest an additional £20m in alcohol and drug services".

2.2 In anticipation of local funding, the ADP began a process to develop early plans from March 2018 to invest potential funding, utilizing a partnership approach including lived experience, carers and voluntary sectors members of the ADP.

2.3 Following recommendations from the ADP, the IJB supported three main priorities and eight additional priorities:

- Safer Drug Consumption Facility
- Heroin Assisted Treatment
- Multiple and Complex Needs

Additional priority areas:

- Peer Support Services for the Naloxone programme
- Recovery services including third sector and recovery communities
- Development of a 'test of change' service to target young people using Heroin
- Further development of the 'constructive connections programme'
- Prevention activities with a focus on targeting prevention to mitigate Adverse Childhood Experiences
- Support training programme for licensed premises
- Mobile Injecting Equipment Provision
- Consideration of deep-end support for groups of GP practices.

2.4 It should be noted that, in June 2017, the IJB committed £2,355,680 for both Heroin Assisted Treatment and the Safer Drug Consumption Facility. This included funding re-directed from existing funding (£885,290) with the remainder from contingency funding (£1,470,390). The proposal includes use of the 'additional investment' to cover the amount originally expected from contingency funding.

2.5 On 23rd August 2018, the Scottish Government issued guidance on the £17m 'local investment funds': resources for this allocated to NHS Boards for onward distribution to, and decision making by, IJBs and ADPs. Glasgow City ADP/IJB was allocated £2,054,677.

2.6 Within the Scottish Government letter of 23rd August, seven investment areas were highlighted as follows:

- Increased involvement of those with lived experience of addiction and recovery in the evaluation, design and delivery of services
- Reduced waiting times for treatment and support services. Particularly waits for opioid substitution therapy (OST) including where these are reported as secondary waits under the LDP standard
- Improved retention in treatment, particularly those detoxed from alcohol and those accessing OST
- Development of advocacy services
- Improved access to drug/alcohol treatment services amongst those accessing inpatient hospital services
- Whole family approaches to supporting those affected by problem drug/alcohol use
- Continued development of recovery communities

3. **Proposals**

3.1 In order to respond to the Scottish Government's additional funding allocation Glasgow City ADP has developed a range of proposals that takes forward key national, IJB Strategic Plan, ADP Strategy priorities as well as historical commitments made by the ADP and IJB. Some of the bids involve aligning ADP funding with other funding streams, such as primary care and mental health.

3.2 Glasgow City ADP were required to submit a completed template by 26th October 2018, identifying or areas of additional investment (see Appendix 1).

3.3 Glasgow City ADP additional funding investments are in the following areas:

- Harm Reduction
- Children and Young people
- Prevention
- Recovery

4. **Harm Reduction**

4.1 **Development and delivery of Safer Drug Consumption Facility.**

Increased engagement and retention in treatment. Reduction in drug related harms for individual high risk drug users. This innovate proposal has been endorsed by the IJB. The proposal will be implemented when there is a change in the law. ADP investment over 3 years: £0, £100,000, £1,000,000.

4.2 **Development and delivery of Heroin Assisted Treatment.**

Enhanced access to treatment with reduced time to initiation (or re-initiation) of ORT for vulnerable populations. This innovate proposal has been endorsed by the IJB and would be supplemented by realignment of funding from existing HSCP resources. ADP investment over 3 years: £400,000, £400,000, £470,390.

4.3 Multi-disciplinary outreach teams to support engagement and retention of vulnerable service users in care and treatment in Glasgow City.

Demonstrate improved outcomes for vulnerable service users who are alcohol /opiate dependent or both. Successfully engage and retain group of vulnerable service users with Care and Treatment services. Target women, people with mental health co-morbidity, and patients who frequently attend acute hospitals. Potential employment opportunities for people with lived experience. Note that the third year total below may change if the SDCF (see 4.1) is fully implemented. ADP investment over 3 years: £155,856, £642,127, £661,391.

4.4 Peer Harm Reduction Project

Increase in naloxone training to individuals, families, communities and services. Increase targeted coverage of naloxone provision in line with local and national targets including hard to reach population. Programme aimed at reducing drug related deaths. ADP investment over 3 years: £8,600, £53,432, £54,495.

4.5 Roll out of specialist alcohol care and treatment services in GP practices.

To increase the levels of engagement and retention to alcohol care and treatment. To reduce: acute admissions, alcohol related harms and levels of deaths from liver disease and other related causes. To increase recovery from alcohol harm. ADP investment over 3 years: £57,795, £238,115, £245,259.

4.6 Screening for Early Fibrotic Liver Disease in Alcohol Misusers in NE Glasgow.

Increase the early identification of alcohol-related liver disease. Create the opportunity for addiction and medical services to engage with patients prior to the development of life-threatening complications. ADP investment over 3 years: £10,665, £43,940, £45,258.

5. Children and Young People

5.1 Homework Groups for Children affected by Parental Substance Use.

There is a need to engage with children and young people at risk from the impact of parental substance use. This aims to reduce the impact of parental substance misuse on children and young people's educational attainment and social/emotional development. Recruitment to commence for tutor support workers. Purchase of the necessary materials for home work groups to function. ADP investment over 3 years: £40k, £60k, £60k.

5.2 Young Person Alcohol and Drug Recovery Team

Successfully engage group of vulnerable young people with Care and Treatment services. Engage and support young people with recovery interventions and reduce the need for ORT interventions. ADP investment over 3 years: £15,242, £62,798, £64,682.

5.3 **Family Support**

The ADP plan to align new investment with Action 15 Mental Health monies to develop an understanding of the current landscape and then jointly commission a third sector organisation to deliver on an agreed model. This will be an invest to release approach. Details will come to the IJB at a later date.

ADP investment over 3 years: £150k, £0k, £0k.

5.4 **Supporting vulnerable children and young people – Multiple risk and mental health**

Provide better understanding of the health needs and health care usage of CJ service users. Test a model for primary school aged children displaying behavioural issues – will inform future service delivery.

ADP investment over 3 years: £0, £75,444, £78,137.

6. **Prevention and Education**

6.1 **Health Needs Assessment, Constructive Connections, Recruit with Conviction, Cannabis/ NPS resources.**

The ADP is seeking to respond to identified need for further training on key areas such as cannabis, NPS, mental health, routine sensitive enquiry.

There is requirement for a combination of dedicated staff capacity and commissioned providers to develop and deliver range of training programmes. Funding will be aligned with other partner contributions.

ADP investment over 3 years: £38,150, £109,180, £100,757

7. **Recovery**

7.1 **Investment in Glasgow City Recovery Communities**

To inform investment in Recovery Communities, the ADP agreed to establish a 'real time' co-produced independent evaluation. This will enable Recovery Communities and the ADP to make informed choices about future planning and investment. This was commissioned at a cost of £10k in August with the final report expected in late November.

Following receipt of the report, the ADP will continue to engage with stakeholders and then agree areas for investment. The recommended investment areas will come to a future IJB.

ADP investment over 3 years: £250k, £250k, £250k.

8. **Other**

8.1 **Advocacy, Licensing and Drugs Conference Event and Cities with Ambition Event**

The ADP have been investigating the best approach to advocacy work and plan to include this either as an element of the recovery approach (see 7.1) or as an application to one of the Scottish Government's National Programmes. A meeting will take place in November to agree the approach.

The ADP are planning a 'Licensing and drugs' event for 2019-20 and a 'Cities with Ambition' event in 2020-21 to align with the development of the SDCF. The latter event is subject to slippage/ budget availability/ progress with the SDCF development.

9. Recommendations

9.1 The Integration Joint Board is asked to:

- a) note the proposals outlined in this report;
- b) approve the plans for the use of the additional Scottish Government funding;
and
- c) expect an annual report on progress and outcomes.



DIRECTION FROM THE GLASGOW CITY INTEGRATION JOINT BOARD

1	Reference number	121218-8-a
2	Date direction issued by Integration Joint Board	12 December 2018
3	Date from which direction takes effect	12 December 2018
4	Direction to:	Glasgow City Council and NHS Greater Glasgow and Clyde jointly
5	Does this direction supersede, amend or cancel a previous direction – if yes, include the reference number(s)	No
6	Functions covered by direction	Glasgow City ADP
7	Full text of direction	Glasgow City Council and NHS Greater Glasgow and Clyde are directed to implement the plans outlined in this report.
8	Budget allocated by Integration Joint Board to carry out direction	As outlined in this report.
9	Performance monitoring arrangements	In line with the agreed Performance Management Framework of the Glasgow City Integration Joint Board and the Glasgow City Health and Social Care Partnership.
10	Date direction will be reviewed	October 2019



**PROGRAMME FOR GOVERNMENT 2018-19:
ADDITIONAL INVESTMENT IN SERVICES TO REDUCE PROBLEM DRUG AND ALCOHOL USE**

**2018-19 INVESTMENT PLANS REPORTING TEMPLATE
26th October 2018**

This funding is for the purposes set out in Scottish Government letter of 31st May 2018 and to support investment in the seven areas listed in the Scottish Government letter 23rd August 2018.

1. Increased involvement of those with lived experience of addiction and recovery in the evaluation, design and delivery of services
2. Reduce waiting times for treatment and support services. Particularly waits for opioid substitution therapy (OST) including where these are reported as secondary waits under the LDP standard
3. Improved retention in treatment, particularly those detoxed from alcohol and those accessing OST
4. Development of advocacy services
5. Improved access to drug/alcohol treatment services amongst those accessing inpatient hospital services
6. Whole family approaches to supporting those affected by problem drug/alcohol use
7. Continued development of recovery communities.

Investment Area	Key Challenge	Proposal & Intended Outcome	Anticipated Investment £	Anticipated Investment Measure - Progress
1,2,3,5	Public injecting Rise in HIV rates Drug detritus Public Health issues Drug deaths	<p>Development and delivery of Safer Drug Consumption Facility.</p> <p>Increased engagement and retention in treatment.</p> <p>Reduction in drug related harms and early recovery for individual high risk drug users.</p> <p>With additional funding for city centre- enhanced response to complex needs of vulnerable drug users would include meeting broader physical health, mental health and social care needs.</p>	Year 1: £0 Year 2: £100,000 Year 3: £1,000,000	Requires legal changes to implement.
1,2,3,5	Public Injecting Rise in HIV rates Drug detritus Public Health issues Drug deaths	<p>Development and delivery of Heroin Assisted Treatment Programme.</p> <p>Enhanced access to treatment with reduced time to initiation (or re-initiation) of ORT for vulnerable populations.</p>	Year 1: £400,000 Year 2: £400,000 Year 3: £470,390	Requires Home Office approval. Requires changes to clinic site to facilitate service

		<p>Outreach to vulnerable populations not presenting to drug services Outreach to engage vulnerable drug users who have defaulted from follow up.</p> <p>Improved retention in treatment.</p> <p>Reduction in drug related harms and early recovery for individual high risk drug users.</p> <p>With additional funding for city centre- enhanced response to complex needs of vulnerable drug users would include meeting broader physical health, mental health and social care needs.</p>		
1,2,3,5,7	<p>Public injecting Rise in HIV rates Drug detritus Public Health issues Drug deaths</p>	<p>Delivery of new peer harm reduction programme</p> <p>Increase in naloxone training to individuals, families, communities and services.</p> <p>Increase targeted coverage of naloxone provision in line with local and national targets.</p>	<p>Year 1: £8,600 Year 2: £53,432 Year 3: £54,495</p>	<p>Recruitment to commence for co-ordinator and volunteers</p>

		Increase engagement of, and harm reduction interventions to, hard to reach population		
1,2,3,5,6,7	<p>The retention of vulnerable service users in alcohol care and treatment services. Reduce alcohol related harm Improve the overall physical and mental health of service users. Reduce alcohol related deaths.</p>	<p>Roll out of specialist alcohol care and treatment services in Glasgow City GP practices.</p> <p>To increase the levels of engagement and retention to alcohol care and treatment.</p> <p>To cause a reduction in the following areas:</p> <ul style="list-style-type: none"> • levels of deaths associated with liver disease • in acute admissions • Reduction in alcohol related harm. • Reduction in alcohol related deaths. <p>To increase recovery from alcohol harm and addiction.</p>	<p>Year 1: £57,795</p> <p>Year 2: £238,115</p> <p>Year 3: £245,259</p>	<p>Recruitment to commence for FTE Band 6 & Band 5 specialist addiction nurses attached to one Deep End GP practice cluster within each of the 3 sectors of the Glasgow City, namely Possilpark (North West Sector), Easterhouse (North East Sector) and Govan (South Sector) where collectively 72% of practice population live in the 15% most deprived areas in Scotland.</p>
2,3,5,7	<p>To identify pre-symptomatic chronic liver injury (fibrosis) in patients with evidence of alcohol use disorder.</p> <p>To determine the acceptability of Fibro-scanning in the</p>	<p>Screening for Early Fibrotic Liver Disease in Alcohol Misusers in NE Glasgow.</p> <p>Increase the early identification of alcohol-related liver disease.</p>	<p>Year 1: £10,665</p> <p>Year 2: £43,940</p> <p>Year 3: £45,258</p>	<p>One off purchase required of a fibro-scanner.</p> <p>Training to be under taken by nurses in order to use the Fibro-scanner.</p>

	<p>community for this vulnerable patient group</p> <p>Direct medical treatment in a preventative form to reduce hospital admissions with alcohol-related liver disease Focus alcohol treatment interventions upon those at greatest risk of alcohol-related death</p> <p>To reduce deaths from alcohol-related liver disease</p>	<p>Create the opportunity for addiction and medical services to engage with these patients prior to the development of life-threatening complications.</p> <p>Effective intervention to reduce alcohol-related deaths, the majority of which are due to alcohol-related liver disease.</p>		
1,4,7	<p>A request to the ADP Executive Group for funding to resource an evaluation into the city's recovery communities.</p> <p>The request was made by recovery volunteers following city wide discussions about possible new ADP monies.</p> <p>There is a lack of research evidence on the positive impact of recovery communities on individuals, families and communities and this proposal would provide an</p>	<p>Glasgow City Recovery Communities.</p> <p>Establish an evidence base that will allow for targeted investment in recovery, by enabling Recovery Communities to make informed choices about future planning and investment decisions.</p>	<p>Year 1: £250,000</p> <p>Year 2: £250,000</p> <p>Year 3: £250,000</p>	<p>An independent evaluation report will be delivered to agreed timescales that will include an executive summary, extensive report and a set of recommendations</p> <p>This report will allow both the ADP Recovery Sub-group and the Recovery Communities to make informed choices about future plans and investment decisions informed by independent evidence</p>

	opportunity to consider the impact and future provision.			
1,2,3,5,7	<p>There is a need to develop multi- disciplinary outreach teams to engage and retain vulnerable people with alcohol and drug use in care and treatment within locality areas and to target the most complex population within Glasgow City Centre.</p> <p>Recommendations from the 2013 Alcohol Death profile report action plan, identified vulnerable sub populations who were particularly difficult to engage in treatment services, namely females, individuals with co-morbid mental health and older males with complex health and social care needs. These individuals typically had a higher rate of unscheduled and crisis contact with acute and social work services.</p> <p>Taking away the chaos (2016) report highlighted that although Glasgow had good</p>	<p>Multi-disciplinary outreach teams to support engagement and retention of vulnerable service users in care and treatment in Glasgow City.</p> <ul style="list-style-type: none"> • Demonstrate improved outcomes for vulnerable service users who are alcohol /opiate dependent/or both. • Successfully engage group of vulnerable service users with Care and Treatment services • Target women, people with mental health co morbidity, and patients who frequently attend acute hospitals. • Potential employment opportunities for people with lived experience. • Retention of service users in treatment With additional funding for city centre-enhanced response to complex needs of vulnerable drug users 	<p>Year 1: £155,856</p> <p>Year 2: £642,127</p> <p>Year 3: £661,391</p>	<p>Recruitment to commence of 12 WTE Band 3 Healthcare Support Workers (HCSW) are employed, fixed term 18 months(3 South, 3 North West, 4 North East, 2 City Centre) and working under supervision of our trained nurses to support the engagement and retention of vulnerable service users.</p> <p>This recruitment could prioritise individuals with lived experience creating employment opportunities for people in recovery.</p>

	<p>drug treatment services, there were areas for service improvements and new service developments such as SIF and HAT. A gap identified was the reach of services to high risk drug using populations, and effective engagement and retention of these vulnerable and complex drug users. More recent intelligence and data suggests there continues to be an at-risk population not engaged or retained in treatment.</p>	<ul style="list-style-type: none"> • Engage vulnerable service users with Recovery focussed interventions • Successfully support vulnerable service users to achieve and sustain Recovery • Reduce both alcohol and drug related deaths. 		
2,3,4,5,6	<p>There is an identified gap in provision for young people using heroin and requiring Opiate Replacement Therapy (ORT). Within Care and Treatment services there are currently Young Person's workers (Social Care) who provide support. Young people within the service are unable to access health professionals other than GP's as the service is delivered on the basis of an adult population.</p> <p>There is often difficulty linking with external mental health</p>	<p>Young Person Alcohol and Drug Recovery Team.</p> <p>Demonstrate need for on-going care and treatment for group of vulnerable young people.</p> <p>Successfully engage group of vulnerable young people with Care and Treatment services. Engage young people with Recovery focussed interventions.</p> <p>Successfully support young people to achieve and sustain Recovery.</p> <p>Reduce the harm to young people</p>	<p>Year 1: £15,242</p> <p>Year 2: £62,798</p> <p>Year 3: £64,682</p>	<p>Recruitment to commence for a Band 6 Nurse; CAMHS Psychiatrist; SCW – young people and Research Assistant</p>

	<p>agencies such as CAMHS due to the addiction issues being seen as primary diagnosis.</p> <p>There are no inpatient facilities for under 18's within Alcohol and Drug Recovery Services.</p>	<p>Reduce the need for young people to receive ORT</p> <p>Improve the physical and mental health of young people</p>		
1,6,7	<p>A need has been identified with children who are looking after/affected by a significant others alcohol/drug problem, who due to parental alcohol/drug problems.</p> <p>The overall aim is to provide support and reduce the need for looked after and accommodated status.</p>	<p>Family support</p> <p>Work is underway within the HSCP to address actions within the Scottish Government Mental Health Strategy. This includes mapping children and young people spending across the city.</p> <p>The ADP plan to align new investment with Action 15 funding to enable a more co-ordinated approach and model to deliver family support to children affected by parental substance use. This will allow commissioning of a third sector organization to deliver on a broader model. Specific proposals will come to the ADP/IJB at a later date.</p>	<p>Year 1: £150,000</p> <p>Year 2: £0</p> <p>Year 3: £0</p>	<p>Invest to release approach to allow for change once mapping has been completed.</p>
1,6,7	<p>There is a need to engage with children and young people assessed at being at risk from</p>	<p>Recovery Homework Groups for Children affected by Parental Substance Use.</p>	<p>Year 1: £40,000</p> <p>Year 2: £60,000</p>	<p>Recruitment to commence for tutor support workers. Purchase required of the</p>

	<p>the impact of parental substance use.</p> <p>To reduce the impact or parental substance misuse on children and young people's educational attainment, and social and emotional development.</p> <p>To engage individuals and families in recovery.</p> <p>Work with others to reduce the impact of adverse events in childhood on future well-being.</p>	<p>It is anticipated that the homework clubs will improve educational attainment, self-esteem and ability to form positive peer relationships.</p> <p>At the same time engage parents in recovery support and minimise risks of substance use.</p> <p>Provide support to Kinship carers who can also access family support, assisting their understanding of children's needs.</p> <p>To increase the confidence and skills of parents.</p> <p>To strengthen protective factors for children and improve resilience.</p>	<p>Year 3: £60,000</p>	<p>necessary materials for Home work groups to function.</p>
1,6,7	<p>There is a need to provide a range of targeted services for children and vulnerable young people where multiple risk and poor mental health are an issue.</p> <p>Key programmes identified a being required:</p>	<p>Supporting vulnerable children and young people – Multiple risk and mental health.</p> <p>Provide better understanding of the health needs and health care usage of CJ service users.</p> <p>Test a model for primary school aged children displaying</p>	<p>Year 1: £0</p> <p>Year 2: £75,444</p> <p>Year 3: £78,137</p>	<p>Process started in aligning costs with partners over the following areas:</p> <ul style="list-style-type: none"> • Health Needs Assessment of those using Community Justice Services

	<ul style="list-style-type: none"> • Health Needs Assessment – Community Justice Service Users. • Behavioural pilot in schools (early intervention and ACES services) • Youth Justice Mental Wellbeing and Support • Extension of multiple risk service alongside additional mental health support 	<p>behavioural issues – will inform future service delivery.</p> <p>Provision of support services to vulnerable children and young people as an early intervention and prevention approach.</p>		<ul style="list-style-type: none"> • Behavioural pilot in primary schools – commissioned service • Youth Justice Scoping exercise and development of service delivery • Multiple risk/ youth mental health contracts
1,2,3	<p>There is a high demand and necessity for additional training and capacity building for the wider workforce e.g. prison healthcare staff (100+staff) Community Payback Order providers (100 staff), education, FE colleges.</p> <p>Glasgow City ADP is seeking to respond to identified need for further training on key areas such as cannabis, NPS, mental health, routine sensitive enquiry.</p> <p>There is requirement for a combination of dedicated staff capacity and commissioned</p>	<p>Prevention and Education. Workforce Development Programme.</p> <p>Increase knowledge, understanding of mental health and SRE.</p> <p>Signposting and support options for staff working in a range of services which will develop confidence in responding to and supporting service users with their health and access to services.</p> <p>Enhance partnership working with other agencies.</p>	<p>Year 1: £38,150</p> <p>Year 2: £109,180</p> <p>Year 3: £100,757</p>	<p>Process started in aligning costs with partners, including staff recruitment, initial development of training/resources.</p>

	providers to develop and deliver range of training programmes.			
1,2,3,4,5	<p>Due to the preparatory work undertaken by Glasgow city and partners, the ADP feels it would be beneficial to host a 'UK/ROI' event around SDCF and complex needs.</p> <p>Enhance awareness of three of the ADP key concerns (Drugs and Alcohol Harm Reduction and Suicide Prevention) in a licensing context</p> <p>Update attendees on current policy and practice matters.</p>	<p>Harm Reduction.</p> <ul style="list-style-type: none"> • Cities with Ambition • Licensing and Drugs training event. <p>This will be an opportunity to prepare the ground for the delivery of SDCF and assist communities/ professional and politicians to fully understand intentions.</p> <p>Enable licensees to learn the most up to date information and techniques to inform their premises Operational Plan and upskill their staff members</p> <p>Improved practice, networking, discussions between premises staff</p>	<p>Year 1: £4,600</p> <p>Year 2: £10,000</p> <p>Year 3: £30,000</p>	<p>Process started in aligning costs with partners</p>
1,2,3,4,5,6,7	<p>Independent advocacy to help people by supporting them to express their own needs and make their own informed decisions.</p> <p>Address the need for advocacy services in Glasgow to ensure everyone can access the</p>	<p>Advocacy</p> <p>Demonstrate improved outcomes for vulnerable service users who are alcohol /opiate dependent/or both.</p>	<p>Year 1: TBC</p> <p>Year 2: TBC</p> <p>Year 3: TBC</p>	<p>Process has started with partners about both the resourcing and structure of an advocacy service.</p> <p>However this will also be dependent on the Outcomes from the Independent</p>

	<p>standard of support they are entitled to.</p> <p>To ensure that all services meet both the Quality principles (2014) and the Health and Social Care standards (2018)</p>	<p>Successfully engage group of vulnerable service users within Care and Treatment services</p> <p>To use Independent advocates to support people to gain access to information and explore and understand their options.</p> <p>To speak on behalf of people who are unable to speak for themselves, or choose not to do so.</p> <p>They will safeguard people who are vulnerable or discriminated against or whom services find difficult to support.</p>		<p>Evaluation into Glasgow City Recovery Communities.</p>
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In submitting this completed Investment Plan, we are confirming that this has been signed off by both the ADP Chair and Integration Authority Chief Officer. This plan is accurate at the time of submission but subject to further changes on the advice of the ADP and IJB.