

Item No: 11

Meeting Date: Wednesday 25th November 2020

Glasgow City Integration Joint Board

Report By: Jackie Kerr, Assistant Chief Officer, Adult Services and North

West

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Glasgow City Alcohol and Drug Partnership Strategy 2020-23

Purpose of Report:	To advise and seek approval from the Integration Joint
	Board (IJB) of the Glasgow City Alcohol and Drug
	Partnership's strategy covering the period 2020-2023.

Background/Engagement:	The Scottish Government requested submission of a new
	ADP Strategy for 2020-2023 for September 2020.
	Consultation on this strategy has been more challenging
	than in previous years, but we have endeavoured to
	engage with all partners including those with lived
	experience and families and carers.

Recommendations:	The Integration Joint Board is asked to:					
	a) approve the Glasgow City ADP Strategy 2020-2023.					

Relevance to Integration Joint Board Strategic Plan:

The priorities identified in the ADP Strategy support the attainment 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 contribute to outcomes 1, 2,3,4,5, 6,7, 8 and 9
Personnel:	The necessary recruitment process has begun to support the delivery of planned activity.
Carers:	Family support and carers groups were consulted on the ADP Strategy and carer representatives are members of ADP the structure.
Provider Organisations:	The involvement of provider organisations in delivering the ADP strategic priorities will be key. The voluntary sector remain key members of the ADP.
Equalities:	Equality impact assessments will be undertaken for service developments as required.
Fairer Scotland Compliance:	The ADP Strategy 2020-2023 aims to reduce the harms and health inequalities caused by alcohol and drugs. Our strategic priorities will contribute to alleviating the socio-economic disadvantage experienced across the city.
Financial:	The planned investment is fully funded from ADP funding secured from the Scottish Government.
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Legal:	Further development of the planning for a Safer Drug Consumption Facility will require significant legislative change. This is an ongoing legal process.
Economic Impact:	The strategic priorities and planned activity will have a positive economic impact, reducing harms to communities, encouraging people into recovery and employment.
Sustainability:	The strategy covers 3 years, 2020 – 2023.
Oddiamamity.	The strategy covers o years, 2020 2020.
Sustainable Procurement and Article 19:	None
Risk Implications:	The impact of COVID 19 has been highlighted as a risk within the ADP Strategy and may impact on delivery of planned activity. However, we have also identified areas of development that will mitigate these risks, particularly around digital inclusion.

Implications for Glasgow City Council:	None	
Implications for NHS Greater	None	
Glasgow & Clyde:		
Direction Required to Council, Heal	Ith Board or Both	
Direction to:		
1. No Direction Required		\boxtimes
2. Glasgow City Council		
3. NHS Greater Glasgow & Clyde		
4. Glasgow City Council and NHS	Greater Glasgow & Clyde	

1. Purpose

1.1. To advise and seek approval from the Integration Joint Board (IJB) of the Glasgow City Alcohol and Drug Partnership's strategy covering the period 2020-2023.

2. Background

- 2.1. The Glasgow City Alcohol and Drug Partnership (ADP) is a multi-agency group tasked with addressing alcohol and drug issues through partnership working. The ADP is chaired by the Assistant Chief Officer for Adult Services and North West and had a broad and inclusive membership, including people with lived experience, families and carers, the voluntary sector and statutory partners.
- 2.2. The Scottish Government request an ADP Strategic Plan every 3 years. The last ADP Strategy was approved by the IJB in <u>June 2017</u>.
- 2.3. Previous strategies have involved a significant consultation process with stakeholders. This was not possible this year but we have endeavoured to ensure that our recovery communities and families and carers groups have had an opportunity to review and comment on early drafts.
- 2.4. The vision of the strategy 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.
- 2.5. We have 8 strategic priorities that will help us achieve our vision for the city-5 of these are national priorities
 - 1. Digital working and engagement
 - 2. Information sharing

- 3. Communications
- 4. A recovery orientated approach which reduces harms and prevents alcohol and drugs deaths
- 5. A whole family approach on alcohol and drugs
- 6. A public health approach to justice for alcohol and drugs
- 7. Education, prevention and early intervention on alcohol and drugs
- 8. A reduction in the attractiveness, affordability and availability of alcohol
- 2.6. The ADP Delivery Plan (Appendix1) details the activity associated with each of these priorities.
- 2.7. The ADP Strategy was considered and approved by the ADP on 21st October 2020.

3. Recommendations

- 3.1. The Integration Joint Board is asked to:
 - a) approve the Glasgow City ADP Strategy 2020-2023.



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
- 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 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
- 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 be reaved 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
- 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
- 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" This document sets out guidance for ADPs 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 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
- 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
- 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

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
- 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
- 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
- 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.

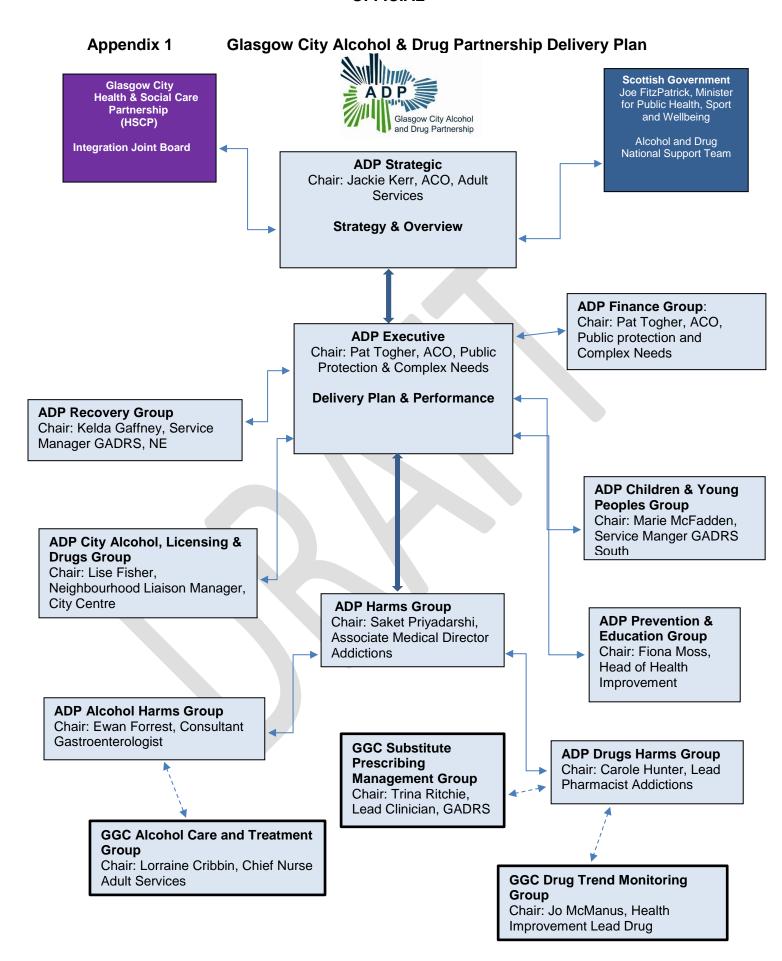
GCADP will create a new multi-agency data intelligence hub to enable a more informed partnership view of the impact of alcohol and drugs in the city. The Hub is expected to provide relevant and timely information for the ADP to allow more enhanced coordination and prioritisation of our collective resources 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.

References

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- 4 Greater Glasgow Division Drugs Strategy, Police Scotland Feb 2020
- 5 https://www.glasgowcpp.org.uk/CHttpHandler.ashx?id=41787&p=0
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- %20Drug%20Related%20Deaths%20Action%20Plan_1.pdf



ADP Delivery Plan 2020

Strategic Priority Digital Working and Engagement				
Objective	Actions	Identified Lead	Time Scale for delivery	Status
	 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 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 	Fiona Moss, Chair, Prevention and Education subgroup	2020/21	Assessment of digital needs has begun across the HSCP

Strategic Priority Information Sharing				
Objective	Actions	Identified Lead	Time Scale for delivery	Status
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 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.	Natalie Carr, Chief Inspector, Partnerships, Police Scotland (ADP Strategic)	2020/2021	ISA agreed by al statutory parties- sign off imminent Sept 2020. New ISA process to begin including the third sector.
	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.	Daniel Carter, Public Health Consultant, NHSGGC (ADP Strategic)	2020/21 Review in 12 months, funded for 2 years	Planning and recruitment underway

Strategic Priority Communications Strategy				
Objective	Actions	Identified Lead	Time Scale for delivery	Status
Glasgow City ADP will promote	Develop a comprehensive	Clare Holland,	2020/21	Webpages
the ongoing work of our partners	communications strategy	Public Relations Officer, GCC		under review. Activity for
in tackling drug and alcohol		(ADP Exec)		promotion has
issues in the city and the				been identified.
planned developments that we				
are working on to address the				
changing needs of the city.				

Strategic Priority Ministerial Priority 1 - A recovery orientated approach which reduces harms and prevents alcohol and drugs deaths				
Objective	Actions	Identified Lead	Time Scale for delivery	Status
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	Regular updates on activity and outcomes from all ADP partners, reviewed by ADP members including lived experience, families and carers	Jackie Kerr, Chair, ADP Strategic (ADP Strategic)	Ongoing	
Coordinate and integrate planning and delivery of services for those with complex needs	Implement the recommendations of the Homeless Services review	Pat Togher, Chair, ADP Exec	Ongoing	
	Create City Centre Risk oversight group, develop and monitor risk register	Pat Togher, Chair, ADP Exec	Ongoing	
Monitor and develop the work of the Drug Death Prevention Action Plan	Implement the model of assertive response for all people who have suffered non-fatal overdose	Lynn MacDonald, Service Manager ADRS, City Centre (ADP Harms Group)	2 years DDTF 2020/21 2021/22	Recruitment process underway. ISA near completion.
	Implementing the Medically Assisted Treatment (MAT) standards, increasing our capacity for same day prescribing	Trina Ritchie, Chair, Substitute Prescribing Management Group	Current	
	Developing the Enhanced Drug Treatment Service provision, increasing the capacity	Lynn MacDonald, Service Manager	3 years LIF funding	Plans for growth affected by

	and allowing more people who inject drugs to benefit from injectable opioid treatment Monitor and respond to incidences of public injecting in the city	ADRS, City Centre (ADP Harms Group) Saket Priyadarshi, Chair, ADP Harms group	2018/19 2019/20 2020/21 Ongoing	social distancing requirements- under review
Monitor and develop the work of the Alcohol Harms action plan	Improving access to alcohol support for patients from Primary Care with the PCANOS project Early detection of advanced alcohol-related liver disease through the use of Fibroscan in the ADRS	Lorraine Cribbin, Chief Nurse, Adult Services (ADP Alcohol Harms group) Dr Ewan Forrest, Chair, Alcohol Harms Group	3 years LIF funding 2018/19 2019/20 2020/21 Current in NE sector. Plan to roll out 21/22	PCANOS service currently in operation in all three sectors Current pilot in NE underway. Application to roll out across the city with additional 2 fibroscanners and associated staff. Dependent on clinical capacity.
	Continue to develop the work of the alcohol court and grow links to community supports	Jim McBride, Head of Homelessness and Criminal Justice (ADP Exec)	Ongoing	

Work with our Recovery communities to develop a sustainable model of investment, allowing further growth as recommended by the independent evaluation	Work in partnership with procurement and recovery communities to resolve ongoing funding issues, and allow sustainable investment.	Kelda Gaffney, Chair, Recovery Sub group	2021/22	Discussion have begun with procurement colleagues about the best way forward
Ensure continued access to independent advocacy for people who use alcohol and/or drugs	Contract in operation with the independent advocacy service in Glasgow.	Gillian Ferguson, ADP Coordinator (ADP Exec)	Funded by National Development Fund- 2 years 2019/20	Service currently in operation and reviewed by the ADP – additional investment agreed to increase capacity
Consult with and include people with lived experience in developing support services and reviewing existing models	Maintain and grow the lived experience involvement in the ADP in Glasgow city, including the commissioning of new services.	Gillian Ferguson, ADP Coordinator. (ADP Exec)	Ongoing	
	Build on the involvement of living experience in the ADP structure.	Gillian Ferguson, ADP Coordinator (ADP Exec)	2020/21	City Centre Engagement Group has been paused due to Covid 19. Plans to recommence are underway.
Investigate the benefits of and barriers to a drug testing service in partnership with key stakeholders	Work with DDTF in developing a bid for a scoping exercise for a drug testing service in Glasgow	Carole Hunter, Chair, Drug Harms group	2020/21	DDTF proposal to be submitted to DDTF Oct 2020

Improve access to laboratory drug testing for assessment and monitoring of GADRS service users	Work with NHSGGC to increase testing capability and capacity	Saket Priyadarshi, Chair, ADP Harms group	2020/21	Equipment purchased but service delayed due to covid 19
Monitor the provision of abstinence, maintenance and crisis residential treatment and evaluate the outcomes.	Monitor and review of purchased residential services.	Angela Dowdalls, Principle Officer, Vulnerable Children and Adult Team (ADP Exec)	Ongoing	Regular updates are brought to the ADP Strategic Group.
Continue to train service staff in trauma informed practice	Glasgow City ADP aims to train all service staff in trauma informed practice	Fiona Moss, Chair, Prevention and Education sub group		Due to Covid19 pandemic new methods of delivering training to staff are being considered.
Continue to support actions to identify BBV infections, engage people in treatment and reduce onward transmission of BBVs	Develop and continue to promote prevention and harm reduction measures Identify means to promote and increase uptake of testing Support individuals into treatment and care	John Campbell, IEP Manger and Julie Craik, Public Health Programme Manager- BBV (ADP Harms Group)	2020/21	WAND Initiative launched Sept 2020

Strategic Priority Ministerial Priority 2- A whole family approach on alcohol and drugs					
Objective	Actions	Identified Lead	Time Scale for delivery	Status	
Build on the success of the recovering families models, incorporating recovery support for parents and carers, developing sustained model of investment and support	Support the development of a Recovering Families Homework club in South sector	Marie McFadden, Chair, Children and Young Peoples Subgroup	2020/2021	Plans delayed due to Covid 19	
	Support the scoping of Families in Recovery model for the NW and NE of the city	Marie McFadden, Chair, Children and Young Peoples Subgroup	2020/2021- Challenge Fund	Underway - will be delivered by Children 1st	
Improve the alcohol and drug support offered in ante natal and post-natal care - review the assessment tool	Deliver staff training in the use of the revised assessment tool for ante natal and post-natal care	Barbara McMenemy, Acute Addiction Manager (ADP Children & Young Peoples Group)	2020/2021	Development delayed by Covid 19	
Build on our activity to address the needs of young people at risk through their alcohol and/or drug use including	Develop a service response pathway for youth intoxication presentations at Emergency Departments.	Fiona Moss, Chair, Prevention and Education sub group	2020-21 LIF funding		
	Build on the CRAFFT screening and intervention training for youth work staff	Fiona Moss, Chair, Prevention	Ongoing		

		and Education sub group		
Explore a model to support parents who have children removed from their care.	Consider different models nationally and develop bespoke service for women in Glasgow	Kelda Gaffney, Service Manager, NEADRS (ADP Children & Young Peoples Group)	2020-21	Proposal being developed in partnership with Children and Families and Tomorrows Women Glasgow
Provide training to Children's services staff and Scottish Reporters Administration, including an asset based whole family approach.	Training programme developed.	Marie McFadden, Chair, Children and Young people's subgroup	2020-21	Due to Covid19 pandemic, training delivery postponed.

Strategic Priority Ministerial Priority 3- A public health approach to justice for alcohol and drugs					
Objective	Actions	Identified Lead	Time Scale for delivery	Status	
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)	Support Public Health to develop the Director's report on alcohol and drug issues.	Daniel Carter, Public Health Consultant (ADP Strategic)	2020/21	Delayed due to covid 19	
Fully support implementation of Greater Glasgow Police Drug Strategy and Delivery Plan	Increase police referrals to support services for vulnerable people using drugs.	Natalie Carr, Chief Inspector, Partnerships, Police Scotland (ADP Exec)	2020/21		
	Enhance the Positive Outcomes Project (POP) capability, developing the outreach work of the peer mentors	Natalie Carr, Chief Inspector, Partnerships, Police Scotland (ADP Exec)	2020/21	Work in partnership with Criminal Justice Services	
	Support the programme of training and briefing for officers to increase awareness of addiction and tackle stigma	Natalie Carr, Chief Inspector, Partnerships, Police Scotland (ADP Exec)	2020/21		
Continue to be active members of Greater Glasgow Police Drug Strategy Group.	Maintain ADP membership of Police Drug Strategy Group ensuring continued alignment of strategic activity	Gillian Ferguson, Coordinator ADP (ADP Strategic)	Ongoing		
Support the delivery of recommendations arising from	Working towards the elimination of Hepatitis C and addressing an outbreak of HIV among people who inject drugs	Julie Craik, Public Health	Ongoing		

BBV strategies and strategic forums		Programme Manager- BBV (ADP Harms Group)		
	Promoting and undertaking activities designed to prevent new infections	Julie Craik, Public Health Programme Manager- BBV (ADP Harms Group)	Ongoing	
	Supporting early detection and treatment of BBVs which includes a commitment to opt put testing and annual testing	Julie Craik, Public Health Programme Manager- BBV (ADP Harms Group)	Ongoing	
Maintain our communication with the UK Government on the need for a Supervised Drug Consumption Facility in Glasgow city	Continue to gather evidence and liaise with partners across Scotland and the UK.	Susanne Millar, Interim Chief Officer, GCHSCP (ADP Strategic)	Ongoing	
Develop our plans for a ROSC in prisons, including developing a harm reduction programme.	Supporting prison based recovery worker posts	Kelda Gaffney, Chair, Recovery Subgroup	2019/20	Funding agreed. Progressing with 1 post and linking with SRC proposal
	Prison Health Care harm reduction team	Rhoda McLeod, Service Manager, Prison Health Care (ADP Harms Group)	Drug Death Task Force funding for 2years 2020/21	Planning and recruitment underway

	Prison based peer naloxone training	Rhoda McLeod, Service Manager, Prison Health Care (ADP Harms Group)	Drug Death Task Force funding for 2years 2020/21	Linking with SDF proposal to DDTF
	Develop a Nyxoid pilot in prison	Rhoda McLeod, Service Manager, Prison Health Care (ADP Harms Group)	Drug Death Task Force funding for 2years 2020/21	Planning underway
Support the implementation of the recommendations of the Community Justice Health Needs assessment	Commission the Community Justice Health Needs assessment.	Fiona Moss, Chair, Prevention and Education subgroup	2020/2021	Postponed due to Covid 19
Support Police Custody Healthcare staff develop a harm reduction programme	Promote Take Home Naloxone, One Hit Kit provision, BBV testing and maintaining continuity of Medically Assisted Treatment (MAT) in police custody.	Grant Scott, Professional Nurse Advisor, PHC and Police Custody (ADP Harms Group)	Ongoing	
Develop a sustainable programme of community justice and homelessness staff training on alcohol and drug issues and emerging trends.	Maintain links with city centre and complex needs working groups to identify need and coordinate training	Louise Gallagher, Health Improvement Lead, Community Justice, prevention and Education	Ongoing	

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Strategic Priority Ministerial Priority 4- Education, prevention and early intervention on alcohol and drugs					
Objective	Actions	Identified Lead	Time Scale for delivery	Status	
Improve public health surveillance by developing an ADP Intelligence hub	Coordinate current data analysis capacity Recruit to new posts Develop spec for the resource	Daniel Carter, Public Health Consultant (ADP Strategic)	DDTF funding for 2 years	Planning and recruitment underway	
Continue to develop our equalities based work to ensure needs are identified and addressed across protected equality groups in Glasgow	Build on the work of the BME Community Intelligence gathering project, share learning and consider gaps in support Continue to support the LBGTQ work and share learning	Fiona Moss, Chair, Prevention and Education Subgroup	Ongoing	Work has commenced but has been interrupted by Covid 19.	
Develop an anti-stigma campaign in partnership with lived and living experience representatives	Implement the recommendations of the Drug Death Task Force Stigma Policy and Strategy 10	Fiona Moss, Chair, Prevention and Education Subgroup	2020/21		
	Develop and roll out stigma staff training programme across care sectors	Fiona Moss, Chair, Prevention and Education Subgroup	2020/21		
Build on and develop our engagement and consultation with people with lived and living	Continue to develop the work of the Recovery subgroup	Kelda Gaffney, Chair, Recovery Subgroup	ongoing		
experience, families and communities.	Develop the City Centre Engagement Group as a forum for people with living experience of alcohol and drug use	Carole Hunter, Chair, Drug Harms subgroup	ongoing	The group has been interrupted by Covid 19 measures, but planning has begun to recommence	

Develop communications	Work with public health colleagues to	Fiona Moss,	2020/21	
campaign on blood borne virus	develop comms campaign targeting high	Chair Prevention		
transmission, reinfection, testing	risk drug users	and Education		
and treatment		subgroup		
Continue to deliver the activity	Monitor the changing issues in the city	Lise Fisher,	Ongoing	
focussed on reducing alcohol	centre for business, communities and	Chair, City,		
and drug related harms	individuals given lockdown measures and	Alcohol,		
associated with the night time	the new environment.	Licensing and		
economy		Drugs subgroup		
Continue to closely monitor the	Build on the awareness and links into the	Jo McManus,	Ongoing	
changing trends in drug use,	Drug Trend Monitoring Group, to ensure	Chair, Drug		
including stimulant use, and	new information causing concern is	Trend Monitoring		
develop the necessary harm	considered by partners and identified risks	Group		
reduction activity	and harms are shared across the system	(Drugs Harms		
	appropriately.	group)		
	Build on partnership with city centre			
	complex needs work to both gather			
	information and inform trends.			
Maintain membership of the	Sharing information on changing trends,	Jo McManus,	Ongoing	
Eurocities Substance Use	exploring funding and shared working	Chair, Drug		
Prevention Working Group	opportunities with European partners	Trend Monitoring		
		Group		
		(Drugs Harms		
		group)		

Strategic Priority Ministerial Priority 5 - A reduction in the attractiveness, affordability and availability of alcohol					
Objective	Actions	Identified Lead	Time Scale for delivery	Status	
Continue to deliver the programme of education and awareness raising on alcohol and drug issues in schools and broader settings	Delivery of alcohol and drug education programs to children and young people in transitional stages in both primary and secondary school settings.	Fiona Moss, Chair, Prevention and Education subgroup	Ongoing		
Build the GCADP influence on the licensing regime with detailed public health surveillance	Continue to gather data in relation to over- provision policy, review licensing approach annually and report and respond to joint city licensing forum and board. Develop the ADP Intelligence Hub	Fiona Moss, Chair, Prevention and Education subgroup	Ongoing		
Invest in the Navigators programme in the city, addressing alcohol related violence and crime	Navigator Peer support service is delivered in 2 Emergency Departments in Glasgow hospitals by Medics Against Violence	Fiona Moss, Chair, Prevention and Education subgroup.	Ongoing	Funding approved by IJB- sitting with procurement	
Continue to deliver Alcohol Brief Interventions as part of contact with health and social services	NHS staff to continue to deliver screening and Alcohol Brief Interventions (ABI) across the system	Trevor Lakey, Health improvement and Inequalities Manager (ADP Prevention & Education Group)	Ongoing	Delivery on hold due to Covid19	
Provide Best Bar None training and city centre steward training in harm reduction and safety	Maintain licensed premises training courses and expand number of premises taking part	Lise Fisher , Chair, CALD	Ongoing	Delivery on hold due to Covid19	

		(ADP City Alcohol, Licensing & Drugs Group)		
Continue to develop the civil contingency planning for major events	Continue to contribute to the development and planning of major events in the city with a view to reducing risk and harms from alcohol and drugs	Lise Fisher , Chair ADP City Alcohol, Licensing & Drugs Group	On hold due to Covid19 pandemic	Delivery on hold due to Covid19