

Item No: 15

Meeting Date: Wednesday 30th November 2022

Glasgow City Integration Joint Board

Report By:Jacqueline Kerr, Assistant Chief Officer, Adult Services and
North WestContact:Gillian Ferguson, Alcohol and Drug Partnership CoordinatorPhone:07770 276127

Glasgow City Alcohol and Drug Partnership Annual Report 2021/2022

Purpose of Report:	To advise the Integration Joint Board (IJB) of the Glasgow City Alcohol and Drug Partnership (GCADP) Annual Report 2021/22.
	To give IJB members an understanding of national plans for a Performance Framework for ADPs and update on local progress on a performance framework.

Background/Engagement:	The Glasgow City Alcohol and Drug Partnership is required to complete and submit an annual report based on a Scottish Government template. The form is designed to capture progress during the financial year 2021/2022 against the national Rights, Respect and Recovery strategy including the Drug Deaths Task Force emergency response paper and the Alcohol Framework 2018.		
	The GCADP annual report is completed and reviewed by members of the relevant ADP sub-groups, including individuals with lived experience and families. The ADP performance framework has been developed with all ADP partners, including those with lived experience, with a view to aligning with current and future Scottish Government National Mission Performance reporting requirements.		

Governance Route:	The matters contained within this paper have been previously considered by the following group(s) as part of its development.
	HSCP Senior Management Team 🛛
	Council Corporate Management Team 🛛
	Health Board Corporate Management Team
	Council Committee
	Update requested by IJB
	Other 🖂
	Glasgow City Alcohol and Drug Partnership
	Not Applicable

Recommendations:	The Integration Joint Board is asked to:			
	 a) note the contents of the Glasgow City ADP Annual Report 2021/22; and b) note the development of a GCADP Performance Framework aligned with Scottish Government reporting requirements on the National Mission. 			

Relevance to Integration Joint Board Strategic Plan:

The detail captured in the ADP Annual Report and performance Framework contributes towards priority 1 of the Glasgow City IJB/HSCP for health and social care- prevention, early intervention and harm reduction (p27, sect 1)

Implications for Health and Social Care Partnership:

Reference to National Health	The ADP activity contributed to outcomes 1, 2, 3, 4, 5,		
& Wellbeing Outcome(s):	6, 7, 8 and 9.		
	0,7,0 414 0.		
Personnel:	None		
	·		
Carers:	None		
Provider Organisations:	None		
Equalities:	None		
Fairer Scotland Compliance:	None		
Financial:	None		
Legal:	None		
Economic Impact:	None		

None
None
None
None
None

Direction Required to Council, Health 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 the Integration Joint Board of the Glasgow City Alcohol and Drug Partnership Annual Report 2021/22.
- 1.2. To give IJB members an understanding of national plans for a Performance Framework for ADPs and update on local progress on a performance framework for the GCADP

2. Background

- 2.1 The GCADP is required to complete and submit an annual report based on a Scottish Government template (Appendix 1). The form is designed to capture progress during the financial year 2021/2022 against the national Rights, Respect and Recovery strategy including the Drug Deaths Task Force emergency response paper and the Alcohol Framework 2018.
- 2.2 The GCADP annual report is completed and reviewed by members of the relevant ADP subgroups, including individuals with lived experience and families.
- 2.3 The GCADP Annual report 2021/22 was approved by the ADP Executive on 19th August 2022. The template includes some financial reporting and details of some key services but does not report on the effectiveness of services, investment and innovations for the city.
- 2.4 Glasgow ADP recognise that a bespoke performance framework is necessary to facilitate IJB scrutiny of outputs and outcomes of investments in services, to

inform strategic decision making and to allow effective planning and coordination of statutory, commissioned and third sector ADP partners. This will support the strategic identification of gaps in service provision and review the effectiveness and impact of services being delivered aligned to local and national strategic plans.

2.5 The ADP performance framework has been developed with all ADP partners, including those with lived experience, with a view to aligning with current Scottish Government National Mission Performance reporting requirements.

3. Scottish Government reporting requirements on the National Mission

- 3.1 In June 2022, the Minister for Drugs Policy wrote to all Chief Officers requiring quarterly Improvement Plans and Financial Reporting, to allow the Scottish Government Drug Policy team to monitor progress and implementation of the MAT Standards and service delivery against the National Mission priorities.
- 3.2 This letter also introduced the new Outcomes Framework underpinning the National Mission priorities with 19 outcomes, set out in Appendix 2.
- 3.3 The ADP team have been advised that the National Mission priorities as set out by the Minister should take precedence over, but remain linked to, the previous national priorities of the Rights, Respect and Recovery strategy (2018). Appendix 3 details these.

4. Proposed performance reporting of the Glasgow City ADP

- 4.1 There are a number of wide-ranging activities across the city designed to contribute to national and local outcomes, delivered by statutory and third sector ADP partners. The scale of the activity and complexity of the outcomes cannot be fully represented by a standard performance report.
- 4.2 The ADP Executive has approved the following proposal for ADP performance reporting.
 - An ongoing, quarterly mapping of activity illustrating the six priority areas of the National Mission, their outcomes, local indicators and local performance will be developed. This will be a high-level infographic designed to be easily and quickly understood
 - The quarterly performance infographic will align with the quarterly MAT Improvement Plan update and biannual Finance Report required by the Scottish Government, giving context to the complex and evolving landscape within which the ADP is working
 - Individual project evaluations will be collated and mapped against the Scottish Government National Priorities, ADP priorities and national outcomes and national indicators (Appendix 4). We await further information on national indicators from the Scottish Government.

5. Recommendations

- 5.1. The Integration Joint Board is asked to:
 - a) note the contents of the Glasgow City ADP Annual Report 2021/22; and
 - b) note the development of an GCADP Performance Framework aligned with Scottish Government reporting requirements on the National Mission.

Appendix 1

ALCOHOL AND DRUG PARTNERSHIP ANNUAL REPORTING TO THE SCOTTISH GOVERNMENT 2021/22:

- I. Delivery progress
- II. Financial framework

This form is designed to capture your **progress during the financial year 2021/22** against the of the <u>Rights, Respect and Recovery strategy</u> including the Drug Deaths Task Force <u>emergency response paper</u> <u>and the Alcohol Framework 2018</u>. This will not reflect the totality of your work but will cover those areas which you do not already report progress against through other processes, such as the MAT Standards.

We recognise that each ADP is on a journey of improvement and it is likely that further progress has been made since 2021/22. Please note that we have opted for a tick box approach for this annual review but want to emphasise that the options provided are for ease of completion and it is not expected that every ADP will have all options in place. We have also included open text questions where you can share details of progress in more detail. Please ensure all sections are fully completed. <u>You should include any</u> additional information in each section that you feel relevant to any services affected by COVID-19.

The data provided in this form will allow us to provide updates and assurance to Scottish Ministers around ADP delivery. We do not intend to publish the completed forms on our website but encourage ADPs to publish their own submissions as a part of their annual reports, in line with good governance and transparency. All data will be shared with PHS to inform drugs policy monitoring and evaluation, and excerpts and/or summary data from the submission may be used in published reports. It should also be noted that the data provided will be available on request under freedom of information regulations.

In submitting this completed Annual Reporting you are confirming that this partnership response has been signed off by your ADP, the ADP Chair and Integrated Authority Chief Officer.

The Scottish Government copy should be sent by **Friday 5 August 2022** to: alcoholanddrugsupport@gov.scot

NAME OF ADP:	Glasgow City ADP
Key contact:	
Name:	Gillian Ferguson
Job title:	ADP Co-ordinator
Contact email:	Gillian.ferguson@glasgow.gov.uk

I. DELIVERY PROGRESS REPORT

1. Education and Prevention

1.1 In what format was information provided to the general public on local treatment and support services			
available within the ADP?			
Please select those that apply (please note that	this question is in reference to the ADP and not individual		
services)			
Leaflets/ take home information	\boxtimes		
Posters			
Website/ social media			
Apps/webchats			
Events/workshops			
Two ADP events focussed on services that mitigate the harms caused by alcohol and drugs			
Accessible formats (e.g. in different languages)			
Please provide details			
Other			

1.2 Please provide details of any specific education or prevention campaigns or activities carried out during 2021/22 (E.g. Count 14 / specific communication with people who alcohol / drugs and/or at risk).

Campaign theme

International

National Local

General Health		\boxtimes
Overdose Awareness		\boxtimes
Seasonal Campaigns		
Mental Health	\boxtimes	\boxtimes
Communities		
Criminal Justice		\boxtimes
Youth	\boxtimes	
Anti-social behaviour		
Reducing Stigma		
Sexual Health		
Other		\boxtimes
Please specify		

Click or tap here to enter text.

Justice social work continue to lead on both the Drug Court and the Alcohol Court with a strong emphasis on harm reduction with the promotion of naloxone and peer mentoring support. The Youth Court was introduced in Glasgow in 2021 with a focus on early and effective intervention with its use of Structured Deferred Sentence. Again, this problem-solving approach works closely with young people to develop bespoke action plans to address a number of complex needs including emerging and established drug and alcohol use.

1.3 Please provide details on education and prevention measures/ services/ projects provided during the year 2021/22, specifically around drugs and alcohol (select all that apply).

Teaching materials	\boxtimes	
Youth Worker materials/training	\boxtimes	
Promotion of naloxone	\boxtimes	
Peer-led interventions	\boxtimes	
Stigma reduction	\boxtimes	
Counselling services		\boxtimes
Information services		
Wellbeing services		
Youth activities (e.g. sports, art)	\boxtimes	

Other Definition of ABIs within wider settings.

1.4 Please provide details of where these measures / services / projects were delivered.			
Formal setting such as schools			
Youth Groups	\boxtimes		
Community Learning and Development	\boxtimes		
Via Community/third Sector partners or services			
Online or by telephone			
Other	\boxtimes	Please provide detailsA&E, Youth Health	

1.5 Was the	ADP represented at the alcohol Licensing Forum?
Yes No	

1.6 What proportion of license applications does Public Health review and advise the Board on?

All	
Most	
Some	\boxtimes
None	

1.7 If you would like to add any additional details in response to the questions in this section on Education and Prevention, please provide them below (max 600 words).Ripple Effect Community Activity funding provided a number of different approaches supporting prevention including delivery of cookery classes by food hub project to families impacted by alcohol harm as well as numerous youth focused activities.

The ADP has a number of partners on the Local Licensing Forum who are also members on ADP subgroups. This has facilitated constructive discussions on cross-cutting issues for the ADP and Forum such as spiking, alcohol free events and spaces in hospitality venues.

The follow up from this has resulted in the production of harm reduction training for hospitality venues, as well as collaborating on evidencing impacts on these topics.

Responses to licensing applications have been limited due to capacity issues in 2021-22. Of the 5 responses submitted 1 remains to be considered and 2 had a positive outcome.

2. Treatment and Recovery

2.1 What treatment or screening options were in place to add	ess <u>alcohol</u> harms? (select all that apply)
Fibro scanning	\boxtimes
Alcohol related cognitive screening (e.g. for ARBD)	\boxtimes
Community alcohol detox	\boxtimes
Inpatient alcohol detox	\boxtimes
Alcohol hospital liaison	\boxtimes
Access to alcohol medication (Antabuse, Acamprase etc.)	
Arrangements for the delivery of alcohol brief interventions	
in all priority settings	
Arrangements of the delivery of ABIs in non-priority settings	\boxtimes
Psychosocial counselling	\boxtimes
Other	Harm reduction approach used to
address alcohol harms including Pabrinex prescribing to those	e still drinking

2.2 Please indicate which of the following approaches services used to involve lived experience / family members (select all that apply).

For people with lived experience:

Feedback / complaints process	\boxtimes
Questionnaires / surveys	\boxtimes
Focus groups / panels	\boxtimes

Lived experience group / forum	\boxtimes	
Board Representation within services		
Board Representation at ADP	\boxtimes	
Other	\boxtimes	Lived experience are included in the commissioning and
contract monitoring of our purchased ser	vices	
For family members:		
Feedback/ complaints process	\boxtimes	
Questionnaires/ surveys	\boxtimes	
Focus groups / panels	\boxtimes	
Lived experience group/ forum	\boxtimes	
Board Representation within services		
Board Representation at ADP	\boxtimes	
Other		Please provide details

2.3 How do you respond to feedback received from people with lived experience, including that of family members? (max 300 words)
Issues raised regarding individual care plans are resolved with service staff in the first instance and by the complaints procedure if this is not possible. All Service users are encouraged to use the Alcohol and Drug Advocacy. Feedback on wider issues comes via our LLE Reference groups and feeds directly to the GADRS Senior management Team and ADP Strategic meetings.

2.4 Please can you set out the areas of delivery where you have	ad eff	ective arrangements in place to involve
people with lived experience?		
Planning, I.E. prioritisation and funding decisions		\boxtimes
Implementation, I.E. commissioning process, service design	\boxtimes	
Scrutiny, I.E. Monitoring and Evaluation of services	\boxtimes	
Other		Please provide details

Please give details of any challenges (max 300 words)

New Senior officer post in the ADP support team has lived experience as essential criteria

2.5 Did services offer specific volunteering and employment opportunities for people with lived/				
living experience in the delivery of alcohol and drug services?				
a) Yes ⊠ No □				
b) If yes, please select all that apply:				
Peer support / mentoring				
Community / Recovery cafes				
Naloxone distribution				
Psychosocial counselling				
Job Skills support	\boxtimes			
Other		Please provide details		

2.6 Which of these settings offered the following to the public during 2021/22? (select all that apply)				
Sotting	Supply Naloxone	Hop C Tooting	IEP Provision	Wound care
Setting:		Hep C Testing		
Drug services Council				
Drug Services NHS	\boxtimes	\boxtimes	\boxtimes	\boxtimes
Drug services 3rd Sector	\boxtimes	\boxtimes	\boxtimes	\boxtimes
Homelessness services	\boxtimes		\boxtimes	
Peer-led initiatives	\boxtimes		\boxtimes	
Community pharmacies	\boxtimes	\boxtimes	\boxtimes	\boxtimes
GPs	\boxtimes	\boxtimes		
A&E Departments		\boxtimes		
Women's support services	\boxtimes			
Family support services				
Mental health services		\boxtimes		
Justice services	\boxtimes			
Mobile / outreach services	\boxtimes	\boxtimes	\boxtimes	

Other (please detail)	\boxtimes			
HIV testing has been a priority in the city- this is provided by GADRS, some purchased drug services, some community pharmacies, GPs, mobile IEP van and city centre outreach teams. Our commissioned Recovery Hub services also supplied Naloxone. We run an IPED clinic from the Crisis Centre.				
2.7 What protocols are in place to	support pe	ople with co-occurrin	a drug use and mer	ntal health difficulties
to receive mental health care? (ma		•	gg	
Click or tap here to enter text.		,		
Is mental health support routinely	available fo	r people who use dru	ugs or alcohol but d	o not have a dual
diagnosis (e.g. mood disorders)?				
Yes				
No				
Please provide details (max 300 w	vords) Proto	cols exist with menta	al health support av	ailable within
GADRS treatment and care teams and pathways from GADRS into mental health services when				
necessary, with a plan to review a	nd improve	the interface in deve	elopment with HIS .	

2.8 Please describe your local arrangements with mental health services to enable support for people with co-occurring drug use and mental health (max 300 words)

Click or tap here to enter text.

2.9 Did the ADP undertake any activities to support the development, growth or expansion of a recovery community in your area?

Yes

 \boxtimes

No

2.10 Please provide a short description of the recovery communities in your area during the year 2021/22 and how they have been supported (max 300 words)

Glasgow city has 3 commissioned Recovery Communities (RCs), 1 in each sector of the city. These run a number of recovery cafes, specific support groups (eg women only groups) and family initiatives across their area. The RCs are commissioned to allow them to become more secure, sustainable and to apply for funding in their own right- which has resulted in their Corra awards to support Recovery Outreach Teams. There are also independent Recovery Cafes established by grass roots community groups that further support individuals into recovery.

2.11 What proportion of services have adopted a trauma-informed approach during 2021/22?

All services	\boxtimes
The majority of services	
Some services	
No services	

Please provide a summary of progress (max 300 words)

Trauma informed practice is embedded in the GADRs delivery. Training programme being developed for HSCP staff across the system.

2.12 Which groups or structures were in place to inform surveillance and monitoring of alcohol and drug harms or deaths? *(mark all that apply)*

Alcohol harms group	\boxtimes
Alcohol death audits (work being supported by AFS)	
Drug death review group	\boxtimes
Drug trend monitoring group / Early Warning System	\boxtimes
Other	☑ Drug Harms Group and ADP Intelligence Hub
development	

2.13 Please provide a summary of arrangements which were in place to carry out reviews on <u>alcohol</u> <u>related deaths</u> and how lessons learned are built into practice. If none, please detail why (max 300 words)

A rapid alert is done for every death of a service user. Every death is reviewed by the team and learning shared through management structures. Having commissioned a comprehensive review and case note analysis of Alcohol related deaths (ARD), ARD data is now collected on an annual basis, utilising information from the National Records of Scotland. The Glasgow City alcohol related death research assistant provides an analysis and summary report of the key characteristics of those who have died in Glasgow City of an alcohol related death. The report is disseminated and discussed at the Alcohol Harms Group which has a focus on alcohol death prevention and harm reduction activity. The Harms Group's objectives are to co-ordinate, monitor and report on the work identified in the Alcohol & Drug Death Prevention Action Plan, this action plan is directly informed by the alcohol related death review information

2.14 Please provide a summary of arrangements which are in place to carry out <u>reviews on drug related</u> <u>deaths.</u> how lessons learned are built into practice, and if there is any oversight of these reviews from Chief Officers for Public Protection. (max 300 words)

A rapid alert is done for every death of a service user. Every death is reviewed by the team and learning shared through management structures. Reviews of drug related death trends are led by the requirement to complete and contribute to the National Drug Related Deaths Database (NDRDD) which collects detailed information regarding the nature and social circumstances of individuals who have died of a drug related death. Updates are provided for every Dug Harms group meeting and a comprehensive report is provided annually to the Glasgow City ADP Harms Group and informs the Drug Death Prevention Action Plan. Furthermore information on drug related deaths and trends have been monitored by the Drug Death Research Associate in close collaboration with Police Scotland, the Procurator Fiscal and The Department of Forensic Medicine, Glasgow University. This has allowed the Drug Harms Group to prioritise activity based on the evidence.

2.15 If you would like to add any additional details in response to the questions in this section on
Treatment and Recovery, please provide them below (max 300 words).

Click or tap here to enter text.

3. Getting it Right for Children, Young People and Families

3.1 Did you have specific treatment and support services for children and young people (under the age of				
25) with alcohol and/or dru	gs problems?			
a) Yes				
No				
b) If yes, please select all	that apply below	:		
	0-5	6-12	12-16	16+
Setting:	0-5	0-12	12-10	/0+
Community pharmacies				
Diversionary Activities		\boxtimes	\boxtimes	\boxtimes
Third Sector services		\boxtimes	\boxtimes	\boxtimes
Family support services		\boxtimes	\boxtimes	\boxtimes
Mental health services		\boxtimes	\boxtimes	\boxtimes
ORT			\boxtimes	\boxtimes
Recovery Communities				
Justice services				\boxtimes
Mobile / outreach				
Other				
Please provide details				

3.2 Did you have specific treatment and support services for children and young people (under the age of 25) <u>affected</u> by alcohol and/or drug problems of a parent / carer or other adult?

a)	Yes	\boxtimes
	No	

b) If yes, please select all that apply below:

Setting: Support/discussion groups	0-5 ⊠	6-12 ⊠	12-16 ⊠	16+ ⊠
Diversionary Activities	\boxtimes	\boxtimes	\boxtimes	\boxtimes
School outreach	\boxtimes	\boxtimes		
Carer support				
Family support services	\boxtimes	\boxtimes	\boxtimes	\boxtimes
Mental health services	\bowtie	\boxtimes	\boxtimes	\boxtimes
Information services	\boxtimes	\boxtimes	\boxtimes	\boxtimes
Mobile / outreach				

Other				
Please provide details				
3.3 Does the ADP feed int	o/ contribute towa	rd the integrated child	dren's service plan?	
Yes 🗵				
No 🗆				
Please provide details on	how priorities are I	reflected in children's	s service planning e.g	. collaborating with
the children's partnership				5
The Assistant Chief Office	r for Children's se	rvices sits on the AD	P and links to all child	dren's services
structures, including the CPC. The Children, Young People and Families subgroup of the ADP has a				
broad membership from across children's services and CPC ensuring alignment of planning and				
priorities.				

3.4 How did service	3.4 How did services for children and young people, with alcohol and/or drugs problems, change in the		
2021/22 financial ye	2021/22 financial year?		
Improved	\boxtimes		
Stayed the same			
Socied book			
Scaled back			
No longer in place			

3.5 How did service	3.5 How did services for children and young people, <u>affected</u> by alcohol and/or drug problems of a parent		
/ carer or other adult, change in the 2021/22 financial year?			
Improved	\boxtimes		
Stayed the same			
Scaled back			
No longer in place			

3.6 Did the ADP have specific support services for adult family members?

a) Yes ⊠ No □	
b) If yes, please select all	that apply below:
Signposting	
One to One support	
Support groups	
Counselling	\boxtimes
Commissioned services	\boxtimes
Naloxone Training	\boxtimes
Other	Family Addiction Support Service (FASS) is the purchased support
service for families affected	d by a loved one's alcohol/drug use

3.7 How did services for adult family members change in the 2021/22 financial year?		
Improved		
Stayed the same		
Scaled back		
No longer in place		

3.8 The Whole Family Approach/Family Inclusive Framework sets out our expectations for ADPs in relation to family support. Have you carried out a recent audit of your existing family provision?

a) If yes, please answer the following:

Last year SG provided an additional £3.5m to support the implementation of the framework. Please provide a breakdown and a narrative of how this was used in your area. (max 300 words)

This funding is being used to extend and develop the existing provision of Young Persons ORT service. Family support and a recognition of the changing drug trends in young people are informing this planning.

Please detail any additional information on your progress in implementing the framework in 2020/21 (max 300 words)

Glasgow city have established a support to birth parents project named Martha's mammies. The Children First, Recovering Families project is being extended to all three localities.

b) If no, when do you plan to do this?Click or tap here to enter text.

3.9 Did the ADP area provide any of the following adult services to support family-inclusive practice?				
(select all that apply)				
Services:	Family member in treatment	Family member not in treatment		
Advice	\boxtimes	\boxtimes		
Mutual aid	\boxtimes	\boxtimes		
Mentoring	\boxtimes	\boxtimes		
Social Activities	\boxtimes	\boxtimes		
Personal Developm	ent 🛛	\boxtimes		
Advocacy	\boxtimes	\boxtimes		
Support for victims of gender				
based violence	\boxtimes	\boxtimes		
Other				
Support provided to family members is not dependant on their engagement with treatment services.				

4. A Public Health Approach to Justice

4.1 If you have a prison in your area, were satisfactory arrangements in place, and executed properly, to ensure ALL prisoners who are identified as at risk were provided with naloxone on liberation?

Yes

 \boxtimes

No	
No prison in ADP area	

Please provide details on how effective the arrangements were in making this happen (max 300 words) Nyxoid is provided to all prisoners the day before liberation by the Health Improvement Harm Reduction team and trained peers

4.2 Has the ADP worked with community justice partners in the follow	ving ways? (select all that apply)
Information sharing	\boxtimes
Providing advice/ guidance	\boxtimes
Coordinating activities	\boxtimes
Joint funding of activities	\boxtimes
Access is available to non-fatal overdose pathways upon release	\boxtimes
Other	Please provide details

4.3 Has the ADP contributed toward community justice strategic plans (e.g. diversion from justice) in the following ways? (select all that apply)

Information sharing	\boxtimes
Providing advice/ guidance	\boxtimes
Coordinating activities	\boxtimes
Joint funding of activities	\boxtimes
Other	□ Please provide details

4.4 What pathways, protocols and arrangements were in place for individuals with alcohol and drug treatment needs at the following points in the criminal justice pathway? Please also include any support for families.

a) Upon arrest (please select all that apply)					
Please provide details on what was in place and how well this was executed					
Diversion From Prosecution					
Exercise and fitness activities	\boxtimes				
Peer workers	\boxtimes				
Community workers	\boxtimes				
Other	□ Please provide details…				
b) Upon release from prison (please sele	ct all that apply)				
Please provide details on what was in pla	ce and how well this was executed				
Diversion From Prosecution					
Exercise and fitness activities	\boxtimes				
Peer workers	\boxtimes				
Community workers	\boxtimes				
Naloxone	\boxtimes				
Other	□ Please provide details…				
Glasgow has a developed and embedded	d Diversion from Prosecution scheme and is in the process of				
rolling out a pilot to co-locate a social wor	k member of staff at our local Police Marking Hub. We have				
commissioned a 3 rd sector provider to deliver a lived experienced mentor service for those subject to					
criminal justice orders. We have enhanced our bail and supervised bail services to ensure service users					
out with treatment are supported to access appropriate support and an action plan is put in place to					
ensure wider needs are met. The Glasgow Youth Court has developed since its introduction in June					

Youth Court has developed since its introduction in June 2021, to include a number of partners who offer young people a wide range of activities including a partnership with Venture Trust.

Glasgow has developed a prison throughcare pilot which uses SPS data to identify those due to be released from custody to ensure they have DWP, housing and addiction support in place. Referrals are made to established justice service such as Tomorrows Women Glasgow and the Positive Outcomes Project.

4.5 If you would like to add any additional details in response to the questions in this section on Public Health Approach to Justice, please provide them below (max 300 words).

GCADP have funded a prison Harm Reduction Team delivering harm reduction advice and support to people in prison. This team links closely with the Prison recovery worker funded by GCADP, delivered by WAWY, providing recovery support in prison and a link to RCs on liberation.

II. FINANCIAL FRAMEWORK 2021/22 (Should be completed by Chief Financial Officer)

Your report should identify all sources of income (excluding Programme for Government funding) that the ADP has received, alongside the funding that you have spent to deliver the priorities set out in your local plan. It would be helpful to distinguish appropriately between your own core income and contributions from other ADP Partners.

It is helpful to see the expenditure on alcohol and drug prevention, treatment & recovery support services as well as dealing with the consequences of problem alcohol and drug use in your locality. You should also highlight any underspend and proposals on future use of any such monies.

A) Total Income from all sources

Funding Source	£
(If a breakdown is not possible please show as a total)	
Scottish Government funding via NHS Board baseline allocation to Integration Authority	£10,309,065
2021/22 Programme for Government Funding and National Mission Funding	£ 6,659,891
Additional funding from Integration Authority	£30,706,296
Funding from Local Authority	
Funding from NHS Board	
Total funding from other sources not detailed above	
Carry forwards	£ 1,856,748
Other	
Total	£49,532,000

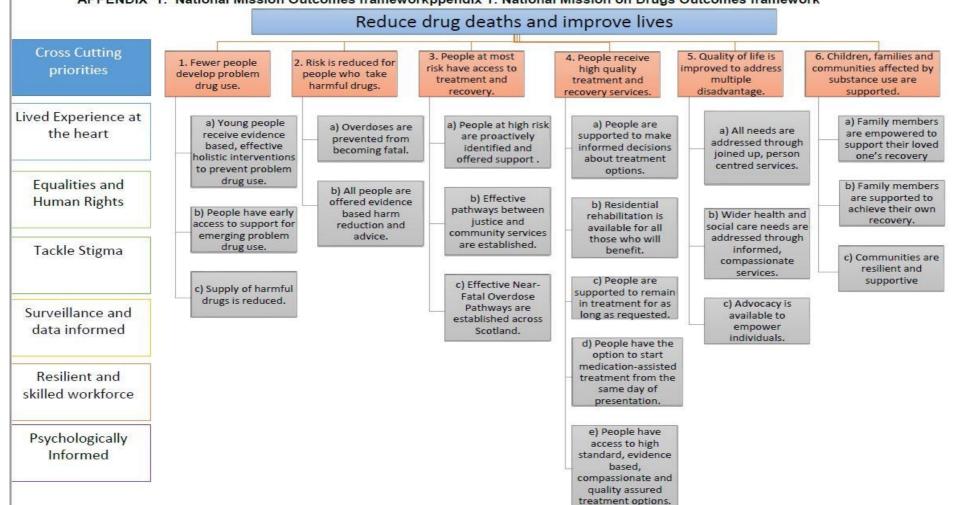
B) Total Expenditure from all sources

	£
Prevention including educational inputs, licensing objectives, Alcohol Brief Interventions)	£ 970,900
Community based treatment and recovery services for adults	£21,557,301
Inpatient detox services	£ 2,376,100
Residential rehabilitation (including placements, pathways and referrals)	£ 5,339,995
Recovery community initiatives	£ 2,216,979
Advocacy services	£ 109,300
Services for families affected by alcohol and drug use (whole family Approach	£ 206,336
Framework)	
Drug and alcohol treatment and support services specifically for children and	£ 133,000
young people	
Drug and Alcohol treatment and support in Primary Care	£ 7,711,900
Outreach	£ 2,056,400
Other	
Total	
	£42,678,211

Additional finance comments

Full year 21.22 underspend £6.853m which includes £4.287m of SG funding earmarked to IJB reserves for national priorities which will not be completed until future years, and further underspend mainly due to staff turnover with nursing workforce in Community & Specialist services.

Appendix 2



APPENDIX 1: National Mission Outcomes frameworkppendix 1: National Mission on Drugs Outcomes framework

Appendix 3

National Strategic Priorities

NAT	IONAL MISSION OUTCOMES FRAMEWORK 2022			
1	Fewer people develop problem drug use			
2	Risk is reduced for people who take harmful drugs			
3	People most at risk have access to treatment and recovery			
4	People receive high quality treatment and recovery services			
5	Quality of life is improved to address multiple disadvantage			
6	Children, Families and Communities affected by substance use are supported			
NAT	IONAL MISSION PRIORITIES 2021			
	Providing fast and appropriate access to treatment and support through all			
1	services			
2	Improving frontline drugs services (including the third sector)			
3	Ensuring services are in place and working together to react immediately for people who need support and maintain that support for as long as is needed			
4	Increasing capacity in and use of residential rehabilitation			
5	Implementing a more joined-up approach across policy and practice to address underlying issues.			
RIG	HTS RESPECT RECOVERY 2018			
	A recovery orientated approach which reduces harms and prevents alcohol			
1	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			

Appendix 4

National Mission Priorities – Glasgow ADP Outcomes Framework

National Mission Priority	National Outcomes	Glasgow ADP Activities and Investment	Indicators (Additional to Public Health Scotland KPIs)	National Indicators (expected late 2022)
	1 a) Young people receive evidence based, effective holistic interventions to prevent problem drug use	Youth Health Service Includem Service GADRS Young Peoples teams GADRS Young person's service	Numbers of referrals Numbers of Interventions Courses delivered	
1. Fewer people	1 b) People have early access to support for emerging problem drug use	Advocacy Service Recovery Communities	Numbers of referrals Numbers of Interventions	
develop problem drug use	1 c) Supply of harmful drugs is reduced	Police Scotland Activity National Crime Agency /. Borders Drug Trend Monitoring RADAR Drug Checking Service development	Cases, seizures and activity ID of dangerous substances & public messaging	

National Mission Priority	National Outcomes	Glasgow ADP Activities and Investment	Indicators (Additional to Public Health Scotland KPIs)	National Indicators (expected late 2022)
2. Risk is reduced for people who take harmful drugs	2 a) Overdoses are prevented from becoming fatal 2 b) All people are offered evidence based harm reduction and advice	Naloxone Activity Crisis Outreach Service WAND Pilot roll out EDTS WAND initiative / expansion GADRS Recovery Outreach teams Simon Community Outreach – city centre Complex Needs Services	Number of Naloxone / Nyxoid Kits distributed Number of individuals trained in overdose prevention and Naloxone / Nyxoid delivery Locations of overdose prevention in community Delivery of Harm Reduction guidance and advice – Families and across Community IEP distribution and number of unique clients using service Volume of individuals given advice Availability of HR advice across community / city centre Online resources activity / clicks	

National Mission Priority	National Outcomes	Glasgow ADP Activities and Investment	Indicators (Additional to Public Health Scotland KPIs)	National Indicators (expected late 2022)
	3 a) People at high risk are proactively identified and offered support	Crisis Outreach Service WAND Interactions Acute Addiction Liaison team EDTS – activity Complex Needs Team PCANOS	PCANOS evaluation	
3. People at most risk have access to treatment and recovery	3 b) Effective pathways between justice and community services are established	Positive Outcomes Project Tomorrows Women / 218 Drug Court activity Alcohol Court Prison Harm Reduction team Prison Recovery worker- WAWY SISCO		

	nal Mission Priority	National Outcomes	Glasgow ADP Activities and Investment	Indicators (Additional to Public Health Scotland KPIs)	National Indicators (expected late 2022)
		3 c) Effective near overdose pathways are established across Scotland	Crisis Outreach Service SAS links into COS, ED, ARDS Police referrals		
high treat	ole receive quality ment and very services	 4 a) People are supported to make informed decisions about treatment options 4 b) Residential Rehabilitation is available for all those who will benefit 	GADRS- MAT Implementation Complex Needs Team FASS Advocacy Recovery Communities Recovery Hubs ADRS review of pathways Increased bed capacity- Phoenix, Rainbow House GADCS Stabilisation Service Prehab / posthab support team	MIST RAG Status	

National Mission Priority	National Outcomes	Glasgow ADP Activities and Investment	Indicators (Additional to Public Health Scotland KPIs)	National Indicators (expected late 2022)
	4 c) People are supported to remain in treatment for as long as requested	ADRS Review Crisis Outreach Service Acute Addiction liaison Complex needs team	MIST RAG Status	
	4 d) People have the option to start medication assisted treatment from the same day of presentation	MAT Standards implementation across all GC prescribing services	MIST RAG Status	
	4 e) People have access to high standard, evidence based, compassionate and quality assured treatment options	GADRS review Recovery Communities x 3 Recovery Outreach teams Recovery hubs Tomorrows Women Martha's mammies		

National Mission Priority	National Outcomes	Glasgow ADP Activities and Investment	Indicators (Additional to Public Health Scotland KPIs)	National Indicators (expected late 2022)
5. Quality of life is improved to address multiple disadvantage	5 a) All needs are addressed through joined up, person centred services 5 b) Wider health and social care needs are addressed through informed and compassionate services	Crisis outreach GADRS Housing First HIS Mental Health Pathways Community Justice see Scot Gov doc Complex Needs team POP Recovery Communities ADRS / ADRS review Lived Experience Recruitment Housing First Complex Needs Team Tomorrows Women Martha's mammies	Unplanned discharges / re- engagement	

National Mission Priority	National Outcomes	Glasgow ADP Activities and Investment	Indicators (Additional to Public Health Scotland KPIs)	National Indicators (expected late 2022)
	5 c) Advocacy is available to empower individuals	Advocacy Service Recovery Communities FASS Martha's mammies		
6. Children, Families and Communities affected by	6 a) Family members are empowered to support their loved one's recovery	FASS Learning Hubs Children's 1 st Recovering Families ADRS Review Advocacy Service Whole Family Approach		
substance use are supported	6 b) Family members are supported to achieve their own recovery	FASS Learning hubs Children's 1 st Recovering Families ADRS Review Advocacy Service		

National Mission Priority	National Outcomes	Glasgow ADP Activities and Investment	Indicators (Additional to Public Health Scotland KPIs)	National Indicators (expected late 2022)
	6 c) Communities are resilient and supportive	Recovery Communities		
		Recovery outreach teams		
		FASS		