



Item No: 11

Meeting Date: Wednesday 26th November 2025

Glasgow City Integration Joint Board

Report By: Kelda Gaffney, Depute Chief Officer, Operations and Governance and Chief Social Work Officer

Contact: Gillian Reilly, Head of Service, Glasgow City HSCP
Dr Saket Priyadarshi, Associate Medical Director, Alcohol and Drugs Recovery Services (ADRS)

Phone: 0141 303 8948

Safer Drug Consumption Facility – Inhalation Business Case

Purpose of Report:

The purpose of this report is to update the IJB on the progress of the Thistle Service (Safer Drug Consumption Facility) and to seek approval to develop a Business Plan for the implementation of a Smoking/Inhalation space on the site.

Background/Engagement:

The Thistle became operational on 13th January 2025. The IJB received an update on the service in [June 2025](#). Further activity data is provided in the report.

The original Business Case for a Safer Drug Consumption Facility presented to Glasgow City IJB on [15th February 2017](#) included a Smoking/Inhalation space - a purpose-built environment to reduce harm for individuals who consume drugs via smoking / inhalation. It was not possible to include such a space in The Thistle due to concerns about limitations of space in the Hunter Street site, ventilation requirements, additional costs and potential delays whilst legal issues were explored.

Since the service became operational, it has become evident that the addition of a smoking/inhalation space is critical in order to realise the full benefit of a SDCF. The Thistle Oversight Board approved progressing the proposal to develop a business case to Glasgow City IJB regarding the implementation of a smoking / inhalation space at the Thistle.

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	This paper sets out the case for including such a space at The Thistle and describes steps necessary to implement this.
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Governance Route:	<p>The matters contained within this paper have been previously considered by the following group(s) as part of its development.</p> <p>HSCP Senior Management Team <input type="checkbox"/></p> <p>Council Corporate Management Team <input type="checkbox"/></p> <p>Health Board Corporate Management Team <input type="checkbox"/></p> <p>Council Committee <input type="checkbox"/></p> <p>Update requested by IJB <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p> <p>Not Applicable <input checked="" type="checkbox"/></p>
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Recommendations:	<p>The Integration Joint Board is asked to:</p> <p>a) Note the contents of this report;</p> <p>b) Approve development of a full business plan for the implementation of a Smoking/Inhalation space through The Thistle Oversight Board, exploring legal and property actions described in the report; and</p> <p>c) Seek an update when a Full Business Case is available.</p>
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Relevance to Integration Joint Board Strategic Plan:

The implementation of the Safer Drug Consumption Facility supports the IJB/HSCP to meet the partnership priorities laid out within the Strategic Plan 2023-28. In particular, the SDCF will support the priorities of prevention, early intervention and well-being, supporting greater self-determination and informed choice, supporting people in their communities and strengthening communities to reduce harm.
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Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome(s):	<p>The SDCF contributes to meeting the following health and wellbeing outcomes for health and social care services: People who use health and social care services have positive experiences of those services, and have their dignity respected; Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services; Health and social care services contribute to reducing health inequalities; People who use health and social care service are safe from harm.</p>
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Personnel:	<p>Initial analysis suggests the proposal can be delivered within current staffing levels; SOPs and Staff training would be developed; Staff will be protected from secondary smoking by appropriate build design.</p>
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Carers:	Family member and carer representatives will continue to be consulted through current Alcohol and Drug Partnership facilitated reference groups, as well as a Community Engagement Forum.
Provider Organisations:	Provider organisations operating with the proximity of the SCDF have been invited to participate in the engagement efforts. This includes local providers of services which are not contracted to deliver health and social care services by Glasgow City HSCP. Interfaces and plans for joint working between SDCF and key relevant services are being developed.
Equalities:	An EQIA has been completed and published. EQIA - Safer Drug Consumption Facility - Updated Glasgow City Health and Social Care Partnership . This will be reviewed in line with process.
Fairer Scotland Compliance:	In seeking to offer a safer environment for drug consumption, co-located with a range of associated services and advice, the facility will contribute to supporting people to make choices that will help offset the impacts of socio-economic disadvantage often associated with this service user group.
Financial:	Potential costs will need to be explored as part of the full business case. Capital costs relating to building work are anticipated. Maintenance costs require further investigation but are anticipated to be relatively minor.
Legal:	<p>The Smoking, Health and Social Care (Scotland) Act 2005 makes it an offence to permit smoking in no-smoking premises, and the SDCF currently meets that definition.</p> <p>The Prohibition of Smoking in Certain Premises (Scotland) Regulations 2006 definition of 'smoke' would include the substances likely to be used in a smoking / inhalation space.</p> <p>It is currently beyond the powers of a public authority to implement such a service.</p> <p>The SDCF currently operates with a Statement of Prosecution Policy (SoPP) from the Lord Advocate for the possession, on the part of the service user, of substances within a defined footprint of the Hunter Street site. If additional space is created for a smoking / inhalation room, then this footprint and the SoPP may require to be</p>

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	<p>amended. This would require further liaison with the Crown Office and formal communication with the Lord Advocate.</p> <p>In the development of a full Business Case, officers would explore legal issues and options in more detail with Crown Office and Scottish Government.</p>
Economic Impact:	Economic impact will be considered as part of the independent evaluation.
Sustainability:	None.
Sustainable Procurement and Article 19:	None.
Risk Implications:	Risks are monitored and reported through GCHSCP governance structures.
Implications for Glasgow City Council:	<p>There are a number of implications for both the Council and Health Board, including political and reputational impacts, positive impacts on the local community and media attention.</p> <p>There may also potentially be increased demand for additional services as a result of successful sustained engagement with health and social care supports for a cohort of individuals who historically may be engaged on a sporadic and unscheduled basis with these services. Resource implications of an increased uptake in consistent and preventative health and social care supports may be offset by a reduction in demand for unscheduled care services such as acute health services and crisis / emergency social care services.</p>
Implications for NHS Greater Glasgow & Clyde:	<p>There are a number of implications for both the Council and Health Board, including political and reputational impacts, positive impacts on the local community and media attention.</p> <p>There may also potentially be increased demand for additional services as a result of successful sustained engagement with health and social care supports for a cohort of individuals who historically may be engaged on a sporadic and unscheduled basis with these services. Resource implications of an increased uptake in consistent and preventative health and social care supports may be offset by a reduction in demand for unscheduled care services such as acute health services and crisis / emergency social care services.</p>

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Direction Required to Council, Health Board or Both	
Direction to:	
1. No Direction Required	<input checked="checked" type="checkbox"/>
2. Glasgow City Council	<input type="checkbox"/>
3. NHS Greater Glasgow & Clyde	<input type="checkbox"/>
4. Glasgow City Council and NHS Greater Glasgow & Clyde	<input type="checkbox"/>

1. Purpose

- 1.1. The purpose of this report is to update the IJB on the progress of the Thistle Service (Safer Drug Consumption Facility) and to seek approval to develop a Business Plan for the implementation of a Smoking/Inhalation Space on the site.

2. Background

- 2.1. The Thistle became operational on 13th January 2025. The IJB received an update on the service in [June 2025](#).
- 2.2. By 31st October 2025, 494 unique individuals had registered to use the service. There were 8,236 visits to use the service, with 5,552 recorded injecting episodes. The staff had managed 69 medical emergencies. The service had made over 360 referrals on behalf of service users, most often to housing services but also to Alcohol and Drug Recovery Services and other clinical services. Substance use recorded indicates that Cocaine continues to be the most prominent drug injected by a significant margin.
- 2.3. Primary Care, Blood Borne Virus Services and a mobile Dental Unit are all now in place and providing additional assessment and treatment for service users accessing Hunter Street Health and Care Centre.
- 2.4. The original Business Case for a Safer Drug Consumption Facility presented to Glasgow City IJB on [15th February 2017](#) included a Smoking/Inhalation space. It was not possible to include such a space in The Thistle at the point of design and implementation due to concerns about limitation of space in the Hunter Street site, ventilation requirements, additional costs and potential delays whilst legal issues were explored.
- 2.5. Since the service became operational, it has become evident that the addition of a smoking/inhalation room is critical to realise the full benefit of a SDCF for the community, public health and for service users. The Thistle Oversight board approved the development of a business case for submission to Glasgow City IJB regarding the implementation of a smoking / inhalation area at the Thistle.
- 2.6. This paper sets out the case for including such a space at The Thistle and describes steps necessary to implement this.

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3. Business Case

- 3.1 Drug Consumption Rooms / Facilities (DCRs / DCFs) provide a safe supervised environment for individuals to consume drugs. Whilst some of these facilities offer injection only consumption, often referred to as Safer Injection Facilities, there is a growing recognition of the need to accommodate those who also smoke / inhale drugs in response to evolving drug use patterns.

3.2 Purpose and Function of Safer Smoking / Inhalation Rooms

- 3.2.1 A safer smoking / inhalation space within a safer drug consumption facility is a purpose-built environment to reduce harm for individuals who consume drugs via smoking / inhalation.
- 3.2.2 To ensure the safety of both service users and staff, inhalation rooms consist of individual enclosed booths that have a ventilation system designed to remove smoke and vapour. The individual booths and room are set at a negative air pressure compared to the adjoining spaces, this ensures air flows into the room and then into the enclosed booths and prevents the escape of smoke into surrounding areas from the booths.

3.3 Changes in Drug Trends

- 3.3.1 Data for Glasgow City and Scotland in respect of drug trends and changing patterns is collated and reported through various sources.
- 3.3.2 The Thistle is now able to contribute to local and national intelligence gathering and inform responses.
- 3.3.3 Thistle data has been consistent in reported drug trends, with the main drug of use consistently reported as cocaine. On average since opening the service, cocaine is reported as 67% of substances injected.
- 3.3.4 Data from the Assessment of Injecting Risk (AIR) tool and the WAND initiative (Wound Care, Assessment of Injecting, Naloxone and Dry Blood Spot Testing), used across the city by third sector organisations, highlights the significant increase in cocaine use with between 60-70% of substances used reported as cocaine.
- 3.3.5 Injecting Equipment Provision data has shown a decrease in the quantity of injecting equipment supplied. For example, in the city centre there was an 18% reduction in Jan-March 2025 compared to the same period in the previous year.
- 3.3.6 Reports to the ADP Drug Harms Group and GGC Drug Trends Monitoring Group from services, partner organisations and outreach teams consistently provide anecdotal evidence of a shift to smoking/inhalation of drugs, particularly cocaine, and changes in the composition of discarded litter with an increase in the level of foil being observed.

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- 3.3.7 Recent Over Dose (OD) clusters in Glasgow city have been linked to increase smoking / inhalation of crack cocaine which has been contaminated with other substances. Cocaine is implicated in 47% of drug related deaths in Scotland in 2024 [Drug-related deaths in Scotland, 2024 - National Records of Scotland \(NRS\)](#) and 52% of such deaths in Glasgow.

3.4 Feedback from People with Lived/Living Experience

- 3.4.1 A Service User Forum for people who use The Thistle is supported by the ADP Senior Officer with Lived Experience. Feedback about the service provision and the staff has been overwhelmingly positive, however the lack of inhalation space has been consistently raised as the main barrier to using the service.
- 3.4.2 The majority of service users report using a variety of drugs via different administration routes. Many individuals report often wanting to inject one drug and smoke/inhale a different drug in the same using episode – they are unable to do this at The Thistle.
- 3.4.3 Service users also report that they sometimes choose to inhale substances for harm reduction purposes, reducing the risk of overdose, Blood Borne Virus (BBV) transmission and skin and soft tissue damage. This would be a recommended harm reduction intervention in community teams. They will alternate routes of administration depending on the condition of their veins. Current service users risk further harm if there is no space to inhale.
- 3.4.4 People report wanting to inject drugs in the vicinity of people who smoke/inhale their drugs. People often purchase their drugs together but use different administration routes. This is an issue that has been highlighted as a particular barrier for women in relationships where one partner injects and the other smokes/inhales.
- 3.4.5 Service users have reported that fluctuating availability of substances can result in only crack cocaine being available, and not powdered cocaine, limiting people to inhalation/smoking.
- 3.4.6 People who use the service recognise the benefits of the safer drug consumption facility and would benefit from a safer space to smoke/inhale drugs. They also report that other people who use drugs would attend The Thistle if a smoking area was available.

3.5 Harm Reduction

- 3.5.1 Route transition encourages people who use drugs to move from more risky / harmful methods of administration to less harmful ones, for example from injecting to smoking/inhalation.
- 3.5.2 The creation of a smoking / inhalation space would enable staff to encourage clients to transition from injection to smoking. It would also enable staff to engage with a group who do not currently frequent The Thistle and so providing the opportunity to potentially engage with the wider treatment services.

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3.6 Legal

- 3.6.1 The Smoking, Health and Social Care (Scotland) Act 2005 makes it an offence to permit smoking in a no smoking premises, the SDCF currently meets that definition. The Prohibition of Smoking in Certain Premises (Scotland) Regulations 2006 definition of 'smoke' would include the substances likely to be used in a smoking / inhalation space. It is currently beyond the powers of a public authority to implement such a service since it would encourage / facilitate offences under the above acts.
- 3.6.2 There may be a solution that would require discussions with Scottish Government in respect of the possibility of amending the regulations associated with the Act and Ministerial powers to define the Thistle as an exempt service.
- 3.6.3 The SDCF currently operates with a Statement of Prosecution Policy (SoPP) from the Lord Advocate for the possession, on the part of the service user, of substances within a defined footprint of the Hunter Street site. Should additional space be required for a smoking / inhalation room, then further discussions would be required with the Crown Office, with a formal proposal made to the Lord Advocate.
- 3.6.4 In the development of a full Business Plan, officers would explore legal issues and options in more detail with Crown Office and Scottish Government.

3.7 Building Needs / Options

- 3.7.1 Initial scoping work has considered the possibility of locating a smoking / inhalation space either within the current footprint of the SDCF i.e. internal alterations, or as an add on to the current space i.e. an external extension which would be out with the current SDCF footprint.
- 3.7.2 The aim would be to create a space as close to the existing injecting area as possible, this will ensure the flow of clients through the service is maintained and minimise impact on staffing, and maximise the number of smoking / inhalation booths, whilst minimising disruption to the existing service.
- 3.7.3 Two options appear to be viable to be included as part of an options appraisal, including the use of existing space which would reduce the overall footprint of the existing service, or an extension to the existing building.
- 3.7.4 It is therefore recommended that an options appraisal is commissioned by the service alongside the HSCP Property team. Further meetings would be required with NHS Facilities and Capital Planning.

3.8 Workforce

- 3.8.1 The management team have considered the implications of an inhalation space, current capacity and staffing levels and initial analysis is that no further staffing would be required. However, this will be fully assessed and reported within a Business Plan.

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- 3.8.2 Additional Standard Operating Procedures and staff training analysis would be developed to support implementation. The Thistle is currently linked to international networks of SDCFs and has access to expertise and other services' procedures and protocols, to support the development of such for Glasgow City HSCP.
- 3.8.3 Consideration to the impact on staff and protecting staff from secondary smoke inhalation would be considered in the build design and ventilation.
- 3.8.4 Staffside and trade union consultation and engagement will take place as part of the business plan.

3.9 Financial Framework

- 3.9.1 A financial framework for capital costs and potential operational costs would be developed and reported as part of the full Business Case.

3.10 Community and Service User Engagement

- 3.10.1 The development of a smoking/inhalation space within the service will be designed to attract additional people who currently use drugs outside in the community into the service to access support.
- 3.10.2 Local residents and businesses are well represented at The Thistle Community Engagement Forum and will be invited to participate in the planning of the service. Additional community fora will also be invited to engage on the development of a smoking/inhalation space, where service leads will respond to concerns and answer questions.
- 3.10.3 People with lived and living experience from a range of services and groups will be invited to co-produce the inhalation spaces within the service to ensure it responds to the feedback from current service users and attracts those who are currently not attending The Thistle.
- 3.10.4 The SDCF continues to report to the IJB's Public Engagement Committee on its ongoing engagement activity. The latest update was provided to the Committee's meeting on [20th August 2025](#).

4 Recommendations

- 4.1 The Integration Joint Board is asked to:
 - a) Note the contents of this report;
 - b) Approve development of a full business plan for the implementation of a Smoking/Inhalation space through The Thistle Oversight Board, exploring legal and property actions described in the report; and
 - c) Seek an update when a full Business Case is available.