



Item No: 10

Meeting Date: Wednesday 29th November 2023

Glasgow City Integration Joint Board

Report By: Susanne Millar, Chief Officer

Contact: Kelda Gaffney, Head of Adult Services (Specialist Mental Health Services and Alcohol and Drug Recovery Services)
Dr Saket Priyadarshi, Associate Medical Director and Senior Medical Officer, Glasgow Alcohol and Drug Recovery Services

Phone: 0141 201 6626
0141 303 8948

Safer Drug Consumption Facility Engagement Strategy

Purpose of Report:

The purpose of the report is to present for approval a draft Engagement Strategy in relation to implementation of the Safer Drug Consumption Facility in Glasgow City, as approved by the IJB at its meeting in September 2023.

The paper and attached draft Strategy outlines the approach to engagement proposed and provides an update on engagement activity undertaken since the IJB approved progressing implementation plans.

Background/Engagement:

In [September 2023](#) a report was presented to the IJB seeking approval to progress with implementation if the Safer Drug Consumption Facility (SDCF) pilot in Glasgow City. That report provided a summary of the background to proposals for the new service since [2016](#), including the delays in being able to progress development of the service due to the absence of support from the Crown Office in relation to prosecution policy in the absence of changes required to the Misuse of Drugs Act 1971, responsibility for which rests with the Westminster UK Parliament.

Glasgow City HSCP submitted a revised proposal to the Lord Advocate in 2022 requesting further consideration to a public statement of prosecution policy that would support

	<p>the implementation of a Safer Drug Consumption Facility (SDCF). The Lord Advocate communicated with Glasgow City HSCP on 11th September 2023, confirming that she would be prepared to publish a statement of prosecution policy to the effect that it would not be in the public interest to prosecute users of that facility in terms of section 5(2) of the Misuse of Drugs Act 1971 for simple possession offences committed within the confines of the Safer Drug Consumption Facility.</p> <p>The Lord Advocate has requested robust evaluation of the pilot phase of the SDCF, and significant engagement across the community to inform implementation.</p> <p>The Communications and Engagement short-life working group referred to in the IJB report in September, with membership inclusive of Glasgow City HSCP, Glasgow Alcohol and Drug Partnership, Police Scotland, Scottish Government and Crown Office, has been meeting regularly to discuss the approach to engagement in order to provide assurance to the Lord Advocate in relation to engagement with key stakeholders. A draft Engagement Strategy was approved by the SDCF Implementation Board on Monday 13th November. An Engagement Plan, outlining specific activity to be carried out in line with the overall Strategy is now being prepared.</p>
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 checked="" type="checkbox"/></p> <p>Glasgow City IJB Public Engagement Committee</p> <p>Safer Drugs Consumption Facility Implementation Board</p> <p>Not Applicable <input type="checkbox"/></p>
Recommendations:	<p>The Integration Joint Board is asked to:</p> <ol style="list-style-type: none"> Note the contents of the report; Approve the Engagement Strategy; and Note the engagement activity that has taken place to this point and details of engagement activity being planned.

Relevance to Integration Joint Board Strategic Plan:

The implementation of the Safer Drug Consumption Facility will support the IJB/HSCP to meet the Partnership Priorities laid out within the Strategic Plan 2023-26. 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.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome(s):	The SDCF will contribute to meeting the following health and well being 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 services are safe from harm.
Personnel:	The Engagement Strategy and Plan will be implemented by officers working within the HSCP and in partnership with key stakeholder partners operating within the city.
Carers:	None
Provider Organisations:	Provider organisations operating within the city in services related to addictions, whether on a contracted basis or due to their proximity to the service location, are identified as a key stakeholder group and will be part of the priority engagement activity.
Equalities:	Due to the highly specific nature of the service and proposed users of it, and the requirement to focus engagement activity on key groups who live or operate within the immediate proximity of the service as a matter of urgency, an equality impact assessment has not been prepared in relation to the strategy. An EQIA in relation to the implementation of the service has been prepared and is has been published on the HSCP website . The EQIA will inform engagement activity and will be reviewed to take into account feedback from engagement.
Fairer Scotland Compliance:	None
Financial:	Funding for engagement activity will be provided via existing budgets.

Legal:	None
Economic Impact:	None
Sustainability:	None
Sustainable Procurement and Article 19:	None
Risk Implications:	<p>Failure to approve and successfully implement and Engagement Strategy and Plan will place at risk the prospect of the Lord Advocate having the assurances sought to enable her to publish a statement of prosecution policy to the effect that it would not be in the public interest to prosecute users of the facility. This would fundamentally undermine the ability to implement the service and realise the benefits set out in the September IJB report and SDCF Business Case.</p>
Implications for Glasgow City Council:	<p>Failure to deliver the Engagement Strategy and Plan, and subsequently a successful service informed by engagement will bring to bear possible political and reputational impacts for the Council and negative media attention. It may also prevent the realisation of the positive impacts on the local community.</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.</p> <p>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>Failure to deliver the Engagement Strategy and Plan, and subsequently a successful service informed by engagement will bring to bear possible political and reputational impacts for the Council and negative media attention. It may also prevent the realisation of the positive impacts on the local community.</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.</p>

	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.
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Direction Required to Council, Health Board or Both	
Direction to:	
1. No Direction Required	<input 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 the report is to present for approval a draft public engagement strategy in relation to implementation of the Safer Drug Consumption Facility in Glasgow City, as approved by the IJB at its meeting in September 2023. The paper and draft Strategy outlines the approach to engagement proposed and provides an update on engagement activity undertaken since the IJB approved progressing implementation plans.

2. Background

- 2.1. In [September 2023](#) a report was presented to the IJB seeking approval to progress with implementation if the Safer Drug Consumption Facility (SDCF) pilot in Glasgow City. That report provides a full summary of the background to proposals for the new service since 2016, including the delays in being able to progress development of the service due to the absence of support from the Crown Office in relation to prosecution policy in the absence of changes required to the Misuse of Drugs Act 1971, responsibility for which is reserved to the Westminster UK Parliament.
- 2.2. Glasgow City HSCP submitted a revised proposal to the Lord Advocate in 2022 requesting further consideration to a public statement of prosecution policy that would support the implementation of a Safer Drug Consumption Facility (SDCF). The Lord Advocate communicated with Glasgow City HSCP on 11th September 2023, confirming that she would be prepared to publish a statement of prosecution policy to the effect that it would not be in the public interest to prosecute users of that facility for simple possession offences committed within the confines of the facility.
- 2.3. The Lord Advocate, Dorothy Bain KC, has requested robust evaluation of the pilot phase of the SDCF, and significant engagement across the community to inform implementation.
- 2.4. The Communications and Engagement short-life working group referred to in the IJB report in September, with membership inclusive of Glasgow City HSCP, Glasgow Alcohol and Drug Partnership, Police Scotland, Scottish Government and

Crown Office, has been meeting regularly to discuss the approach to engagement in order to provide assurance to the Lord Advocate in relation to engagement with key stakeholders. A draft Engagement Strategy (see Appendix 3) was approved by the SDCF Implementation Board on Monday 13th November and an Engagement Plan, outlining specific activity to be carried out in line with the overall Strategy is now being prepared.

3. Engagement Strategy

- 3.1. The Engagement Strategy has been developed in conjunction with the Communications Strategy and has adopted the same key messages that form the basis of engaging with stakeholders on implementation of the SDCF. This is designed to ensure the engagement activity is consistent with the communications activity that will be run in parallel.
- 3.2. Engagement activity during the planning and implementation for delivery of the SDCF will consider and be compliant with the IJB's [Consultation and Engagement Good Practice Guidelines](#). The Strategy also outlines that engagement activity will take account of the features of meaningful engagement outlined within the IJB's [Strategic Plan 2023-26](#) and the following national standards and best practice guidelines:

[National Standards for Community Engagement](#)
[Planning with People: community engagement and participation guidance](#)
[Healthcare Improvement Scotland's Engaging People and Communities](#)

- 3.3. Engagement activity will broadly be split into two phases. The first phase will see significant engagement activity with priority stakeholders, i.e. those people, groups, businesses and organisations that live or work in the immediate vicinity of the service and/or whose level of interest or impact in/from the service is considered to be highest. This activity will take place during Autumn/Winter of 2023, specifically between September 2023 and February 2024. The level and frequency of engagement will be prioritised according to proximity geographically to the SDCF and expected level of interest/impact. Stakeholders living/operating within the most immediate proximity and/or where the impact is considered to be greatest will have more targeted and more frequent opportunities to engage.
- 3.4. Whilst the phase 1 priority stakeholder engagement is taking place, the Communications and Engagement Group will develop a detailed plan for phase 2 engagement activity with other stakeholders that will be implemented from February 2024 onwards. This will bring in stakeholder groups from outwith the immediate vicinity and will satisfy the Lord Advocate's requirement for wider engagement.
- 3.5. Whilst the first phase of engagement will be highly targeted and responsive to requests from groups/people/organisations to be involved as a priority, consideration will be given to recurring/repeat engagement with specific groups, both priority stakeholders and other stakeholders. This will be considered and planned as part of the ongoing work of the Communications and Engagement Group and will be subject to clarity on the date the service will become operational. Clearly the views of stakeholders prior to implementation may change over time,

and the output from repeat/recurring engagement will be useful in relation to ongoing evaluation to demonstrate the impact of the service, another key aspect of the Lord Advocate's position.

3.6. Engagement activity will seek to reach a wide range of audiences and stakeholders. The main groups to be considered for engagement include:

- people who inject drugs and recipients of associated services
- local communities
- families, carers and their representatives
- local businesses
- housing associations/registered social landlords
- GCHSCP, GCC and NHSGGC staff
- Integration Joint Board Members, Council Elected Members, Community Councils and Health Board Members
- providers and contractors of health and social care services – independent and third sectors
- partner organisations
- other third sector and voluntary organisations who may have an interest.

3.7. The methods used to reach stakeholders will be developed on the basis of what we know about engagement preferences of those stakeholders, the access to existing engagement channels from both within the HSCP and outwith and with due consideration to the requirement to be inclusive in order to encourage the views of those who have an interest. Some of the engagement routes that will be considered include the following:

- Bespoke in person discussions and Q&A sessions (targeted and drop in)
- HSCP engagement fora (e.g. Locality Engagement Forums, Recovery Communities, ADP Lived and Living Experience Reference Groups)
- Strategic Planning Groups
- Online discussions (targeted and drop in) via Teams, Smartcrowds etc
- HSCP website – dedicated SDCF webpage to leave comments, ask questions, read information etc
- In person and online briefings
- ADP, HSCP, NHSGGC and Glasgow City Council social media - Twitter (X) and Facebook
- Use of surveys to seek views and inform consideration of options.

3.8. Engagement activity undertaken by the HSCP and partners as part of the implementation of the service will be captured within an Engagement Plan. The Plan will also capture information on the nature/method of engagement, target stakeholder, purpose, attendee numbers, output and any associated considerations or actions as a result of the engagement. The HSCP and partners will seek to ensure it reduces/avoids overlap with the stated aims and responsibilities of community groups in relation to engagement with their communities. For example, where Community Councils have a role in engaging with local residents, groups, organisations etc the HSCP will seek not to duplicate effort to ensure it guards against engagement fatigue.

- 3.9. The specific focus of engagement with stakeholders is being considered on a case by case basis, subject to the group in question and the nature of their interest. Alongside the reiteration of the key messages outlined within the Strategy the main elements of engagement have been/will be to listen to what stakeholders have to say, understand their concerns, anxieties and views on the possible benefits of the service and seek where possible to address and allay any fears they have. Whilst some of the key decisions on the service have already been taken (e.g. site location, service description and access arrangements), wherever possible stakeholders will be able to influence the ultimate design of the service and evaluation arrangements.
- 3.10. Engagement activity will take place throughout the period of planning for implementation of the SDCF, from September 2023, and will continue throughout the implementation and evaluation phase.

4. Engagement activity

- 4.1. Due to the requirement to progress engagement to inform implementation as a matter of urgency, and due to the high level of interest in the service since its announcement, engagement has already commenced. It is acknowledged that ideally engagement would not commence until after approval of the Engagement Strategy but in this instance, it was felt that it was important to begin to address the concerns, anxieties, and questions of stakeholders groups who live or operate within the area of the site as quickly as possible. It has been useful in terms of developing the Engagement Strategy and Plan to hear the initial feedback from early engagement activity and it is shaping the engagement activity yet to come.
- 4.2. Appendix 1 contains details of the engagement activity captured within the Engagement Plan that had occurred at the time of writing. Much of the engagement focussed on providing background to the service and listening and responding to questions and concerns. Officers are working to collate any relevant feedback from sessions to inform future engagement and identify any actions that may have arisen. It is possible that some activity was expected to have taken place at the time of writing and therefore if any subsequently did not take place it will be added to the planned activity and the Plan updated accordingly.
- 4.3. At the time of writing, activity had taken place or was scheduled to have been completed with:
- Service users representing the injecting population and their families
 - Calton Community Council
 - Registered Social Landlords
 - Elected Members
 - Staff working in the services
 - Local businesses
 - Area Partnerships

- 4.4. Appendix 2 provides an insight into some of the activity planned for the first phase engagement. This is still a work in progress, with details to be confirmed as to dates, focus of engagement, format arrangements and attendees. As additional activity is identified it will be added to the Plan, and feedback/output recorded. Further activity is in the planning stages that will cover the following stakeholders:
- Locality Engagement Forum (North East)
 - Staff, service users and families
 - Recovery Communities
 - Local provider organisations
 - Alcohol and Drugs Partnership member organisations
 - Registered Social Landlords
 - Elected Members
 - Local businesses
 - Area Partnerships
- 4.5. As noted above, planning for engagement with the wider city and specific stakeholder groups, including a social media campaign and public drop in sessions, is underway and will be developed over the period of engagement currently underway. Wherever possible details of upcoming opportunities to engage will be posted on our website to enable interested stakeholders to get involved.
- 4.6. The Engagement Strategy was presented to the IJB Public Engagement Committee on 15th November where Members were invited to comment on the Strategy and provide suggestions for the development of the detailed Engagement Plan. Comments and suggestions from the Committee are being incorporated into the working draft Plan. Regular updates on the engagement activity will be provided to the Public Engagement Committee to discuss plans and report progress.

5. Evaluation

- 5.1. The SDCF will be subject to a robust independent evaluation studying the impact on service users, staff, local communities and businesses, and whether anticipated wider societal benefits such as cost reductions in other services are realised.
- 5.2. A planning group for the evaluation, led by NHS GGC Public Health and involving colleagues from Scottish Government, Public Health Scotland and academia, has been established and is developing costed plans for pre-implementation data collection. Public Health Scotland is providing funding for the necessary pre-implementation preparation and baseline data collection for the evaluation. Funding for the remainder of the evaluation has yet to be secured.
- 5.3. The evaluation will be commissioned by the Alcohol and Drug Partnership, and updates will be reported within agreed timescales. The Communications and Engagement Group and SDCF Implementation Board will consider how engagement activity can inform and support the work of the evaluation team to ensure best use of any data collected.

6. Recommendations

6.1. The Integration Joint Board is asked to:

- a) Note the contents of the report;
- b) Approve the Engagement Strategy; and
- c) Note the engagement activity that has taken place to this point and details of engagement activity being planned.

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Appendix 1: Engagement activity completed

Stakeholder Group(s)	Audience/Group	Engagement Opportunity/Event	Date	Format
Phase 1 Engagement: November 2023 to February 2024				
Other	Bergen SDCF	Visit to facility	06/10/2023	Face to face
Other	Transform and SDCF	Meeting	25/10/2023	Online
Integration Joint Board Members, Council Elected Members, Community Councils and Health Board Members	Ward 9 Elected Members	Meeting	26/09/2023	Online
Integration Joint Board Members, Council Elected Members, Community Councils and Health Board Members	Calton Community Council inc. MSP/MP attendance	Meeting	28/09/2023	Face to face
Local businesses	Property developer	Meeting	12/10/2023	Online
Local businesses	Property developer	Meeting	23/10/2023	Face to face
GCHSCP, GCC and NHSGGC staff	SDCF Staff	SDCF Staff Newsletter	20/10/2023	Written Newsletter
Other third sector and voluntary organisations who may have an interest	Harm Reduction Action Group Meeting a network of third sector providers and organisations	Meeting	02/11/2023	In person

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Stakeholder Group(s)	Audience/Group	Engagement Opportunity/Event	Date	Format
People who inject drugs and recipients of associated services	People that receive addictions-related services and their families	ADP Reference Group (Mixed) face to face engagement session	15/11/2023	Face to face discussion
People who inject drugs and recipients of associated services		ADP Reference Group (Women's) face to face engagement session 1	13/11/2023	Face to face discussion
GCHSCP, GCC and NHSGGC staff		ADP Reference Group (Staff) engagement session	16/11/2023	Face to Face drop in
Local communities	Glasgow City Council Area Partnerships	East Centre Area Partnership	08/11/2023	Meeting attendance
Local communities	Glasgow City Council Area Partnerships	Calton Area Partnership	15/11/2023	Meeting attendance
Housing associations/registered social landlords.	Milnbank HA, Thenue Housing, Molendinar	Meeting and site visit	01/11/2023	Face to face
Other	Scottish Parliament cross-committee on tackling drug deaths and drug harm	Committee attendance	02/11/2023	Face to face
Other	Copenhagen DCR H17, Copenhagen DCR	Meeting	07/11/2023	Online
Local communities	Local Engagement Forum (North East)	Public meeting	16/11/2023	Meeting attendance
GCHSCP, GCC and NHSGGC staff	Staff working with people and families in receipt of services	GADRS Staff Engagement Session 1	17/11/2023	Online

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Appendix 2: Planned engagement

Stakeholder Group(s)	Audience/Group	Engagement Opportunity/Event	Date	Format
Phase 1 Engagement: November 2023 to February 2024				
Integration Joint Board Members, Council Elected Members, Community Councils and Health Board Members	Ward 10 (Anderston city) and 22 (Dennistoun) Elected Members	Meeting	TBC	Online
Integration Joint Board Members, Council Elected Members, Community Councils and Health Board Members	Merchant City/Trongate & Dennistoun Community Councils	Meetings	Nov/Dec	Meeting attendance
Other third sector and voluntary organisations who may have an interest	Calton Area Association	TBC	TBC	TBC
Local businesses	Bell street vicinity: Pram Centre, Morrisons, Scottish Fire & Rescue	Meeting	TBC	Face to face
People who inject drugs and recipients of associated services	People that receive addictions-related services	ADP Reference Group (Women's) face to face engagement session 2	22/11/2023	Face to face discussion
Families, carers and their representatives	Families of people that receive addictions-related services	ADP Reference Group (Families) face to face engagement session	23/11/2023	Face to face discussion
Families, carers and their representatives	Families of people that receive addictions-related services	ADP Reference Group (Families) face to face engagement session	27/11/2023	Drop in
GCHSCP, GCC and NHSGGC staff	Staff working with people and families in receipt of services	Glasgow Alcohol & Drug Recovery Services staff engagement session 1	20/11/2023	Online
GCHSCP, GCC and NHSGGC staff	Staff working with people and families in receipt of services	Glasgow Alcohol & Drug Recovery Services staff engagement session 2	21/11/2023	Online

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Stakeholder Group(s)	Audience/Group	Engagement Opportunity/Event	Date	Format
Providers and contractors of health and social care services – independent and third sectors	3rd sector provider organisations working in the addictions field	Online engagement session 1	20/11/2023	Online
Providers and contractors of health and social care services – independent and third sectors		Online engagement session 2	21/11/2023	Online
Partner organisations	ADP Members	Online engagement session 1	TBC	Online
Partner organisations	ADP Members	Online engagement session 2	TBC	Online
People who inject drugs and recipients of associated services	NE Recovery Community	Face to face engagement session	TBC	Face to face discussion
People who inject drugs and recipients of associated services	NW Recovery Community	Face to face engagement session	TBC	Face to face discussion
People who inject drugs and recipients of associated services	South Community Recovery Network	Face to face engagement session	TBC	Face to face discussion
People who inject drugs and recipients of associated services	City Centre Engagement Group	TBC	06/12/2023	Meeting attendance
People who inject drugs and recipients of associated services	Mobile Harm Reduction Units	Mobile Harm Reduction Units: TBC	TBC	TBC
Local communities	Glasgow City Council Area Partnerships	East Centre and Anderston/City Area Partnerships	Feb 2024	Meeting attendance
Local communities	Local Engagement Forum (North East)	Public meeting	23/11/2023	Meeting attendance
Local communities	Residents living within immediate vicinity, not attached to Community Council or LEF	Options: Social media, via Community Council, via LEF, door to door	TBC	TBC
Housing associations/registered social landlords	RSLs-All East	Meeting	06/12/2023	TBC

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Safer Drug Consumption Facility Engagement Strategy

1. Purpose

- 1.1 The purpose of this document is to outline the Engagement Strategy for the implementation of a Safer Drug Consumption Facility (SDCF) for Glasgow City. It includes:
- background
 - engagement aims
 - core messages
 - timescales
 - standards
 - governance
 - audience/stakeholders and channels and
 - engagement plan

2. Background

- 2.1 A SDCF was first proposed in 2016 and was approved by the Glasgow City Integration Joint Board (IJB) in 2017. Following an outbreak of HIV, it was a recommendation from the “Taking Away the Chaos” a public health needs assessment of people who use drugs in public places in Glasgow city centre. Since then, there has been a national (including in Glasgow) emergency of drug related deaths and local evidence and data suggests that public injecting and drug related harms remain at very high levels in Glasgow city centre.

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- 2.2 In 2017 Glasgow City Health and Social Care Partnership (HSCP) sought legal exemptions from Scotland's Lord Advocate. In January 2018, an update to the IJB reported this request was declined and advice was to pursue discussion with the Scottish Government. In 2022 the HSCP was invited by the Scottish Government Drugs Minister to submit a new proposal that could be delivered through existing legislation, without the need for primary legislation changes, most importantly the Misuse of Drugs Act 1971 which is reserved to the UK Government. Following discussions between the HSCP, Crown Office, Police Scotland and Scottish Government officials, a revised proposal with a range of Operational Policies were submitted to the Crown Office for consideration in line with the request for a Public Statement of Prosecution Policy.
- 2.3 On 11 September 2023, the Lord Advocate for Scotland made public that they would be prepared to publish a Statement of Prosecution Policy to the effect that it would not be in the public interest to prosecute users of a SDCF for simple possession of illegal drugs. On 27 September 2023 the IJB noted and supported the revised plan and for the HSCP to plan for the implementation of a SDCF.
- 2.4 SDCFs are supervised and controlled healthcare settings where people can consume their own drugs, obtained elsewhere, under the supervision of trained health professionals, in clean, hygienic and safe environments reducing the risk of overdose and infectious diseases whilst offering support and access to healthcare and social care services. They offer a compassionate, person-centred service that focuses on reducing the harms associated with injecting drug use and helps people access appropriate services to meet their needs. By doing so, they can reach an extremely vulnerable group who often do not engage with our existing services.
- 2.5 Local public health intelligence tells us that Glasgow city centre has a high concentration of people who inject drugs in outdoor places, away from home, especially in the South East sector. A large body of high-quality research suggests that a SDCF will help reduce the health and social consequences of public injecting in this area.
- 2.6 The SDCF will be implemented in Hunter Street Health and Social Care Centre and is well known to the target population and key partners. The site offers a discrete base closely located to the city centre and the previous implementation of the current Enhanced Drug Treatment Service within the centre has not caused significant challenges for the local community.

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3. Aims

- 3.1 Engagement activity will aim to support the implementation of the proposed SDCF in the following ways:
1. complement, promote and inform the communications activity and key messages
 2. give a voice to key stakeholders and interested communities of interest, place and identity in relation to implementation of the SDCF
 3. understand the engagement preferences of key stakeholders throughout implementation
 4. identify, understand and address the concerns and anxieties of stakeholders re' implementation of the SDCF
 5. support political engagement and buy-in for the SDCF
 6. encourage and facilitate involvement in the design, planning and implementation of the SDCF (subject to the prior approvals of the IJB in relation to the service description and scope)
 7. identify, understand and address the barriers to accessing the SDCF
 8. support the evaluation of the SDCF.

4. Core Messages

- 4.1 Engagement activity will seek to reiterate and promote the following core messages of the wider Communications Strategy for the SDCF:
- On 11 September 2023, the Lord Advocate made public that she would be willing to make a Statement of Prosecution Policy to the effect that it would not be in the public interest to charge users of such a facility for possession of drugs. This allows the HSCP and IJB to consider the implementation of a SDCF and was agreed at the IJB on 27 September 2023.
 - Outdoor drug injecting is a particular issue in the city centre, with some local communities and business reporting a large number of discarded needles in public areas
 - Safer injecting facilities are welcoming, hygienic, supportive environments where people can inject drugs that are obtained elsewhere, (not provided or purchased on site) under clinical supervision. They provide sterile needles to reduce the risk of infections, and assistance in the event of an overdose. They also give people the opportunity to link

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into other on-site health and social care services, including hosting drop-in GP clinics, alcohol and drug treatment and care, sexual health services, advocacy services

- There is a substantial body of evidence from other cities around the world that safer injecting facilities:
 - reduce outdoor injecting and discarded needles
 - reduce the sharing of needles and other injecting equipment
 - improve uptake of addictions care and treatment
 - result in cost savings overall, due to reduced ill-health and health care usage among users
- There is no international evidence to show that safer consumption facilities increase rates of crime and anti-social behaviour in the local area.
- This is a pilot SDCF and will be thoroughly evaluated to better understand its impact and allow for sharing of best practice.
- Further core messages will be agreed on service delivery, onsite support and staffing as the model develops within the available finance.

5. Timescales

- 5.1 Engagement activity will take place throughout the period of planning for implementation of the SDCF, from September 2023, and will continue throughout the implementation and evaluation phase.
- 5.2 Engagement activity will broadly be scheduled in two phases. The first phase will see significant engagement activity with priority stakeholders (i.e., those people, groups, businesses and organisations that live or work in the immediate vicinity of the service and/or whose level of interest or impact in/from the service is considered to be highest). This activity will take place during Autumn/Winter of 2023, specifically between September 2023 and February 2024. Whilst the priority stakeholder engagement is taking place, the Communications and Engagement Group will develop a detailed plan for engagement activity with other stakeholders that will be implemented from February 2024 onwards.

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- 5.3 The Engagement Plan will consider the requirement for recurring/repeat engagement with specific groups, both priority stakeholders and other stakeholders, as part of the ongoing work of the Communications and Engagement Group and subject to clarity on the date the service will become operational.

6. Standards

- 6.1 Engagement activity during the planning and implementation for delivery of the SCDF will consider and be compliant with the IJB's [Consultation and Engagement Good Practice Guidelines](#). Engagement activity will adopt and ensure adherence to the following standards of good consultation and engagement outlined within the guidelines:

- have a **clear and concise plan** with a purpose, including defined aims and objectives, areas/options being considered and planned arrangements, processes and timescales for consultation activity
- have **focus and be targeted**, where the individuals, groups, communities and/or organisations who may be affected by or have an interest in the proposed policy/service change or development being engaged with are defined and targeted if appropriate
- be **needs-led**, where the engagement activity (particularly its methods) is tailored to take account of the needs and circumstances of those involved
- take steps to be **accessible and support stakeholders** to participate, not create barriers
- also be **inclusive**, ensuring people who have been traditionally less represented or engaged with are enabled to participate (for example, people with protected characteristics, people who are affected by social or economic factors or people who have the greatest need of a service but whose circumstances can have an impact on participation)
- have **integrity** where there is honest intent and strong relationships built with individuals, groups, communities and organisations, demonstrating that public and stakeholder views and input are valued and taken into account in decision making
- be **informative** with appropriate information made available to stakeholders so that they can more fully participate
- have **clear, accessible and inclusive communications** so that there is greater awareness and understanding of what is being engaged about, and likewise stakeholders are more informed to participate in full
- consider **a number of methods** to make it more inclusive and maximise participation and
- be **transparent**, where the views of individuals, groups, communities and organisations are made available with fair interpretation, and there is evidence on how they are considered in decision making processes.

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- 6.2 Engagement activity undertaken by the HSCP in relation to implementation of the SDCF will further be influenced by the following national standards and best practice guidelines:

[National Standards for Community Engagement](#)

[Planning with People: community engagement and participation guidance](#)

[Healthcare Improvement Scotland's Engaging People and Communities](#)

- 6.3 Engagement activity will also be focussed on following the principles of meaningful involvement that are outlined within the IJB's [Strategic Plan 2023-26](#). These include the following:

- Meaningful involvement is a two-way process
- To be meaningful involvement should be defined by partners
- Services should be co-produced and the power to influence change must be shared
- Stakeholders must be involved in gathering and reviewing feedback on services to inform planning processes
- Involvement must occur at an appropriate time to enable maximum influence
- Decisions about services must be informed by staff and individuals with experience of receiving or delivering services (including relatives, family members and those with an interest in them)
- Access to involvement should be equitable by identifying and overcoming barriers, and being informed by a commitment to equalities and human rights
- Involvement should be empowering and should influence change
- Involvement should include transparency about expected outcomes, with feedback provided on the outcomes of involvement.

7 Governance

- 7.1 The SDCF Implementation Board will be the main governance group for the implementation of the service, and through which any decisions or escalations in relation to the engagement strategy and plan will be driven. The Board will be jointly chaired by the Chief Officer Finances and Resources and the Assistant Chief Officer Adults Services and North West Operations/Chief Social Work Officer.

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- 7.2 Planned engagement and the findings and output from any engagement activity will be the responsibility of and reported to the SDCF Communications and Engagement Group, Stuart Notman (Programme Manager) and the IJB Public Engagement Committee/Integration Joint Board as required.
- 7.3 The review and approval of any engagement activity will be Saket Priyadarshi. Sensitive communications will be approved by Sharon Wearing, Chief Officer Finance and Resources, GCHSCP and/or Jackie Kerr, Assistant Chief Officer Adult Services and North West Operations/Chief Social Work Officer, GCHSCP and/or Susanne Miller, Chief Officer GCHSCP where required.

8 Audience/Stakeholders

- 8.1 Engagement activity will seek to reach a wide range of audiences and stakeholders. The main groups to be considered for engagement include:
1. people who inject drugs and recipients of associated services
 2. local communities
 3. families, carers and their representatives
 4. local businesses
 5. GCHSCP, GCC and NHSGGC staff
 6. Integration Joint Board Members, Council Elected Members, Community Councils and Health Board Members
 7. providers and contractors of health and social care services – independent and third sectors
 8. partner organisations
 9. other third sector and voluntary organisations who may have an interest
 10. housing associations/registered social landlords.

9 Engagement approach

- 9.1 Level and frequency of engagement will be prioritised according to proximity geographically to the SDCF and expected level of interest/impact. Stakeholders living/operating within the most immediate proximity and/or where the impact is considered to be greatest will have more targeted and more frequent opportunities to engage. Other stakeholders with a lower level of interest or expected impact will have less targeted opportunities to engage.

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- 9.2 The timing of engagement will be managed on the same basis as above, in that engagement with those priority stakeholders will take place first. This will ensure that key stakeholders will have the earliest opportunity to engage and feedback on the plans to implement the service, so that their feedback can be used to develop engagement activity with other stakeholders in later phases and so that wider engagement activity corresponds with the proposed announcement from the Lord Advocate on the approach to prosecution.
- 9.3 Engagement activity will broadly be split into two main strands. The first strand includes engaging with patients, service users and families of those who may access the service and associated services and organisations/providers working in addictions services. This strand of engagement will be co-ordinated by the Alcohol and Drugs Partnership. The second strand will relate to other relevant stakeholders and will be carried out by a combination of the HSCPs existing engagement networks and structures, and wherever available, support from partners involved in implementation of the service. For all engagement activity, decisions will be made as to the most effective, appropriate and accessible method of engagement and the most appropriate personnel to facilitate/lead engagement, subject to the audience, the method of the engagement and the purpose of any opportunity to engage.
- 9.4 Engagement activity will include a mixture of targeted engagement and opportunities for stakeholders/interested parties, irrespective of their proximity to the SCDF, to engage in “drop in”, less formal engagement. To reach the required range of audiences and stakeholders and according to their level of interest and engagement needs and preferences, a variety of engagement channels will be used to encourage and facilitate involvement. Engagement channels will include using the established engagement routes with the HSCP, as outlined within the Strategic Plan, and routes utilised/suggested by partners where appropriate. Engagement routes available include:
- Bespoke in person discussions and Q&A sessions (targeted and drop in)
 - Locality Engagement Forums
 - Strategic Planning Groups (including relevant community representation)
 - Online discussions (targeted and drop in) via Teams, Smartcrowds etc
 - HSCP website – dedicated SDCF webpage to leave comments, ask questions, read information etc
 - In person and online briefings
 - ADP, HSCP, NHSGGC and Glasgow City Council social media - Twitter (X) and Facebook
 - Use of surveys to seek views and inform consideration of options.

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- 9.5 Engagement activity will further take into consideration the likelihood of strong feelings and potentially opposition to the SDCF from large sections of the community. In order to ensure the vocal majority does not impede the ability of other voices to be heard we will seek to identify where such issues may arise and target certain groups to ensure their views are heard. This will include consideration of whether larger community events should be reduced in size.
- 9.6 Engagement activity undertaken by the HSCP and partners as part of the implementation of the service will be captured within an Engagement Plan. The Plan will also capture information on the nature/method of engagement, target stakeholder, purpose, attendee numbers, output and any associated considerations or actions as a result of the engagement. The HSCP and partners will seek to ensure it reduces/avoids overlap with the stated aims and responsibilities of community groups in relation to engagement with their communities. For example, where Community Councils have a role in engaging with local residents, groups, organisations etc the HSCP will seek not to duplicate effort to ensure it guards against engagement fatigue.
- 9.7 We will also seek to ensure that whilst following and reiterating the key messages as set out in the Communications Strategy engagement activity will seek to balance the requirement to promote the benefits to local communities the facility will bring, as well as the benefits to users of the service and the general public health benefits. This will mitigate what might be strong and fundamental opposition to services for the particular target service user group.

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Engagement Matrix

Stakeholder	Engagement channels	Lead Officer/ resource	Main Aims
People who inject drugs Recipients of associated services	Bespoke in person discussions and Q&A sessions (targeted and drop in). Online discussions (targeted and drop in) via Teams, Smartcrowds etc. HSCP website – dedicated SDCF webpage to leave comments, ask questions, read information etc. In person and online briefings. ADP, HSCP, NHSGGC and Glasgow City Council social media - Twitter and Facebook Use of surveys to seek views and inform consideration of options.	To be identified in the Engagement Plan	Aims of each engagement opportunity will be tailored to the audience.
Local communities/ residents Wider citizens	Bespoke in person discussions and Q&A sessions (targeted and drop in). Locality Engagement Forums. Online discussions (targeted and drop in) via Teams, Smartcrowds etc. HSCP website – dedicated SDCF webpage to leave comments, ask questions, read information etc. In person and online briefings. ADP, HSCP, NHSGGC and Glasgow City Council social media - Twitter and Facebook. Use of surveys to seek views and inform consideration of options.	To be identified in the Engagement Plan	Aims of each engagement opportunity will be tailored to the audience.

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Stakeholder	Engagement channels	Lead Officer/ resource	Main Aims
Families, carers and their representatives	Bespoke in person discussions and Q&A sessions (targeted and drop in)	To be identified in the Engagement Plan	Aims of each engagement opportunity will be tailored to the audience.
Local businesses	<p>Bespoke in person discussions and Q&A sessions (targeted and drop in).</p> <p>Locality Engagement Forums.</p> <p>Online discussions (targeted and drop in) via Teams, Smartcrowds etc</p> <p>HSCP website – dedicated SDCF webpage to leave comments, ask questions, read information etc.</p> <p>In person and online briefings.</p> <p>ADP, HSCP, NHSGGC and Glasgow City Council social media - Twitter and Facebook.</p>	To be identified in the Engagement Plan	Aims of each engagement opportunity will be tailored to the audience.
GCHSCP, GCC and NHSGGC staff	<p>Bespoke in person discussions and Q&A sessions (targeted and drop in).</p> <p>Online discussions (targeted and drop in) via Teams, Smartcrowds etc.</p> <p>HSCP website – dedicated SDCF webpage to leave comments, ask questions, read information etc.</p> <p>In person and online briefings.</p> <p>Use of surveys to seek views and inform consideration of options.</p>	To be identified in the Engagement Plan	Aims of each engagement opportunity will be tailored to the audience.

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Stakeholder	Engagement channels	Lead Officer/ resource	Main Aims
Integration Joint Board Members Council Elected Members Community Councils Health Board Members	Bespoke in person discussions and Q&A sessions (targeted and drop in) Online discussions (targeted and drop in) via Teams, Smartcrowds etc In person and online briefings	To be identified in the Engagement Plan	Aims of each engagement opportunity will be tailored to the audience.
Providers and contractors of health and social care services – independent and third sectors partner organisations other third sector and voluntary organisations who may have an interest	Bespoke in person discussions and Q&A sessions (targeted and drop in) Strategic Planning Groups (including relevant community representation) Online discussions (targeted and drop in) via Teams, Smartcrowds etc HSCP website – dedicated SDCF webpage to leave comments, ask questions, read information etc ADP, HSCP, NHSGGC and Glasgow City Council social media - Twitter and Facebook.	To be identified in the Engagement Plan	Aims of each engagement opportunity will be tailored to the audience.