

Item No: 14

Meeting Date: Wednesday 25th June 2025

Glasgow City Integration Joint Board

Report By: Pat Togher, Chief Officer

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Update on the Implementation of the Safer Drug Consumption Facility

Purpose of Report:

The purpose of this report is to update the IJB on the progress of the Thistle Service (Safer Drug Consumption Facility) since it became operational on 13th January 2025. The paper outlines service activity to date, service user and community engagement work and continuing governance arrangements.

Background/Engagement:

The IJB last received a written update on the progress of the implementation of a Safer Drug Consumption Facility (SDCF) in Glasgow City in [September 2024](#). The paper outlined governance arrangements and provided updates from a range of workstreams reporting to the SDCF Implementation Board. The completion of building works at the end of 2024 and a formal Statement of Prosecution Policy from the Lord Advocate published on 9th January 2025 allowed the service to become operational on 13th January 2025.

In [September 2023](#) a report was presented to the IJB seeking approval to progress with implementation of the Safer Drug Consumption Facility (SDCF) pilot in Glasgow City. That report provided a summary of the background to proposals for the new service dating back to 2016. The report describes 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 and required changes to the Misuse of Drugs Act 1971, responsibility for which rests with the 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 interests 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. The IJB approved progress to implementation on 27th September 2023. The Lord Advocate requested reassurance in relation to evaluation of the pilot phase of the SDCF, and that community engagement is undertaken prior to implementation. The Engagement Strategy was presented to, and approved by, the IJB in November 2023 and engagement activity has continued to be reported to the Public Engagement Committee on a quarterly basis. An update on evaluation is provided within the report.</p> <p>A further update on implementation was presented to the IJB on 24th January 2024, seeking approval to approach the Lord Advocate for the formal Statement of Prosecution Policy at a suitable time, to support full implementation of the SDCF.</p> <p>This paper seeks to update IJB on progress to date.</p>
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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 checked="" type="checkbox"/></p> <p>Other <input type="checkbox"/></p> <p>Not Applicable <input 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>
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Relevance to Integration Joint Board Strategic Plan:

<p>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.</p> <p>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.</p>

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome(s):	<p>The SDCF will contribute to meeting the following health and wellbeing outcomes for health and social care services:</p> <p>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>
Personnel:	<p>Alcohol and Drug Recovery Services recruit, train and manage the workforce required to deliver a Safer Drug Consumption Facility. Staffside and Unison have been involved in the workforce planning for new posts.</p>
Carers:	<p>Family member and carer representatives have been consulted as part of the engagement strategy.</p>
Provider Organisations:	<p>Provider organisations operating with the proximity of the SDCF have been invited to participate in the engagement efforts. This includes local providers of services that are not contracted to deliver health and social care services by Glasgow City HSCP. Implications for provider organisations are considered through the SDCF Implementation Board.</p>
Equalities:	<p>An EQIA was published in February 2024 and has informed engagement activity to date. An update has been completed since the opening of the service and is due to be published in the coming month.</p>
Fairer Scotland Compliance:	<p>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.</p>
Financial:	<p>The financial framework for the operational costs for the facility have been agreed with Scottish Government, and operational costs will be delivered within this financial envelope. Funding is made available by Scottish Government until March 2027 for the initial stages of the pilot with a commitment that funding confirmation for future years will be made available subject to outcomes of evaluation and review of pilot work. It should be noted that the IJB would be required to consider the impact on wider alcohol and drug recovery services and efficacy of the service should funding not be provided from April 2027.</p>

	<p>As per previous papers in September 2023 and January 2024, the implementation of an SDCF is likely to result in reduced costs to other parts of the health, social care and criminal justice system.</p> <p>The IJB previously agreed to earmark funds for the redesign works required to the Hunter Street Health and Care Centre to accommodate these services. Costs were met from within this allocation.</p>
Legal:	<p>Legal advice and Counsel opinion has been sought to ensure that NHS Greater Glasgow and Clyde and Glasgow City Council staff can deliver the facility within existing legislation. The SDCF will be delivered alongside other Alcohol and Drug treatment services aimed at reducing harms and providing pathways into treatment, care and recovery. Operational policies should be strictly adhered to and will be monitored closely.</p> <p>The Lord Advocate provided a public statement of prosecution policy, so that service users will not be prosecuted for possession of drugs whilst using the SDCF.</p>
Economic Impact:	<p>It is anticipated that there may be economic benefits to the city as a result of the reduction of the visibility of drug misuse in public places and the reduction of drug-related litter being visible on the streets. Any economic impacts experienced will be considered as part of the evaluation.</p>
Sustainability:	None.
Sustainable Procurement and Article 19:	None.
Risk Implications:	<p>The implementation within Glasgow of the first facility of its kind in Scotland, carries with it a degree of reputational risk for Glasgow City Council, NHS Greater Glasgow and Clyde and Glasgow City IJB. Such risks are identified, monitored and mitigated through the SDCF Oversight Board, and will continue to be monitored via appropriate governance routes following implementation of the facility.</p>
Implications for Glasgow City Council:	<p>There are a number of implications for both Glasgow City Council and NHS Greater Glasgow and Clyde, including political and reputational impacts, positive impacts on the local community and media attention.</p> <p>There may also 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/or unscheduled basis. Resource implications of an increased uptake in preventative health and social care</p>

	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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Implications for NHS Greater Glasgow & Clyde:	<p>There are a number of implications for both Glasgow City Council and NHS Greater Glasgow and Clyde, including political and reputational impacts, positive impacts on the local community and media attention.</p> <p>There may also 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/or unscheduled basis. 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="" 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) since it became operational on 13th January 2025. The paper outlines service activity to date, the legal framework, service user and community engagement work and continuing governance arrangements.

2. Background

- 2.1. In [September 2023](#), a report was presented to the IJB seeking approval to progress with implementation of the Safer Drug Consumption Facility (SDCF) pilot in Glasgow City. That report provides a full summary of the evidence for such facilities and background to proposals from 2016.
- 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, Dorothy Bain KC, confirmed in September 2023 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. The Lord Advocate indicated an expectation that the facility would be subject to robust evaluation, and also wished to be re-assured that public engagement would take place. She further noted that the exact terms of the statement of prosecution policy would be confirmed when such a facility becomes operational.

- 2.3. In [January 2024](#), the IJB noted progress to date in the implementation of the service, and approved the request to make a further approach to the Lord Advocate detailing governance arrangements, evidence of community engagement, evaluation plans and a final legal position for Glasgow City Council and NHS Greater Glasgow and Clyde.
- 2.4. In [September 2024](#), the IJB was updated on progress towards implementation, with specific assurances in relation to property works, workforce and governance, community engagement and evaluation plans.
- 2.5. Engagement activity took place over three phases and included 12 community drop-in sessions, attendance at community councils, area partnerships and local engagement forums, and engagement with local residents, elected members, people with lived and living experience of injecting drug use, family members, housing providers, local businesses, third sector providers, and HSCP services. The Safer Drug Consumption Facility webpage was developed (<https://glasgowcity.hscp.scot/sdcf>) with information for service users, family members and community members, videos, FAQs and a *You Said We Did*. The site was visited 3,841 times between December 2023 and July 2024. Further engagement activity has been undertaken following operationalisation of the service, summarised below.
- 2.6. The extensive property works and testing regime at Hunter Street Health and Care centre were completed and signed off by the end of 2024.
- 2.7. NHSGGC, alongside independent academic partner institutions, submitted a research grant bid for the comprehensive evaluation, which has since been awarded. The aim is to evaluate the impact of the UK's first Safer Drug Consumption Facility on people who inject drugs, local residents and businesses, and on public services.
- 2.8. The Lord Advocate published the necessary Statement of Prosecution Policy on 9th January 2025. [Drug consumption room statement of prosecution policy | COPFS](#) and the service opened on 13th January 2025.

3. Governance and Performance

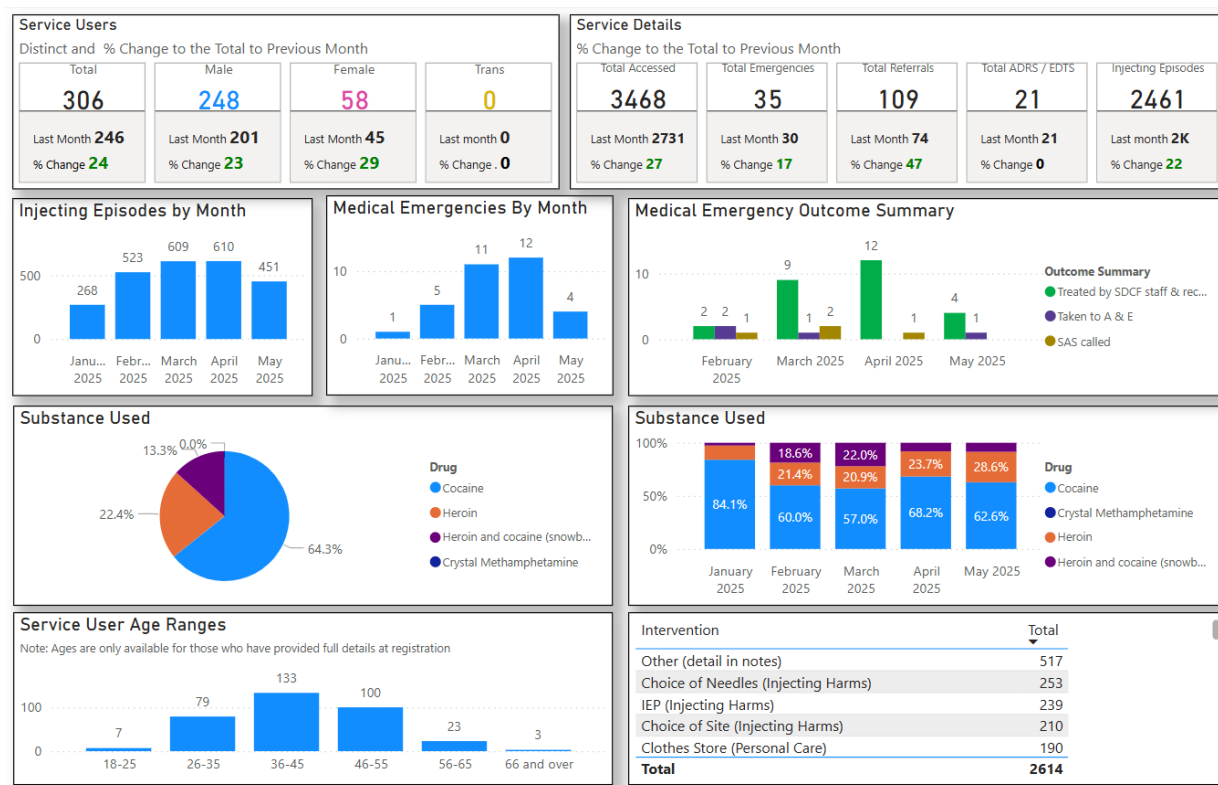
- 3.1 As noted in previous reports, there is a robust governance structure in place to monitor and review performance, consider operational issues, respond to changes in need and demand, ensure ongoing community engagement and report on evaluation progress. The Safer Drug Consumption Facility Oversight Board is chaired by the Chief Officer, with reporting structures on Performance and Governance, Engagement and Communications and Evaluation. Membership includes a wide range of local and national stakeholders including Glasgow Alcohol and Drug Partnership (ADP) and HSCP representatives, Scottish Government, Lived experience representation, Community representation, Registered Social Landlord representation, Third Sector, NHSGGC Public Health, and Staffside. Crown Office attend as an observer.
- 3.2 Since the Thistle opened in January 2025, there has been a steady rise in the numbers of people registering to use the service, with most days seeing new registrants. Data up to 31st May 2025 highlights that a total of 306 individuals

have used the facility, across 3468 visits – 248 males and 58 females, most commonly between the age of 36-45 years. The excerpt below provides detail on month by month activity, which is now published on the website regularly.

- 3.3 There have been 2,461 injecting episodes inside the facility. The most commonly injected drug are cocaine (64.3%), followed by heroin (22.4%), followed by cocaine and heroin together (13.3%). Crystal methamphetamine has also been used occasionally (0.04%).
- 3.4 The variation in number of attendances and injecting episodes represents the number of individuals who visit the service and use other facilities such as the lounge area, shower and laundry areas and engage with staff with other harm reduction interventions. Once individuals feel comfortable with the service, they often return to use the injecting room. Staff take a trauma-informed and non-judgemental approach with people to encourage full use of the service, to reduce harms.
- 3.5 There can be significant day to day fluctuations in numbers of presentations from a high of 45 to low of 7. There is no obviously discernible pattern to these variations however this will continue to be monitored. Thistle staff undertake outreach visits to local areas known to be frequented by people injecting outdoors to engage with individuals and encourage use of the Thistle.
- 3.6 There have been 35 medical emergencies managed within the service. These are almost exclusively overdoses that range in severity from those requiring supportive airway management and oxygen, to rapid onset severe overdoses requiring a full medical response and use of multiple doses of naloxone. The vast majority of these have been managed by the Thistle staff. Ambulance service support and transfer to hospital have been required on 4 occasions. All individuals affected have recovered and returned to the Thistle. The wider support available from Alcohol and Drug Recovery Services ensures that those individuals at the highest risk receive assertive follow up through the Crisis Outreach Service.
- 3.7 To date, there have been 130 recorded referrals from Thistle staff to other treatment and care services. This is likely to be under-representative of the actual activity due to the recording systems, which are being improved to ensure more accurate reporting on onward referrals. Data shows that the most common referrals relate to housing and Housing First, Blood Borne Virus (BBV) follow up, and drug treatment and care needs. Co-located services are the most effective in engaging this population providing an immediate response to needs, but there have been very positive examples of flexibility shown by area teams and third sector partners, creating new pathways into treatment and care.
- 3.8 The most common interventions other than injecting equipment and advice have been wound care, psychosocial interventions and the use of clothing store, laundry, and shower facilities in the Thistle. Many individuals, particularly women, visit the service to use these additional supports a number of times before using the injecting booths. Staff encourage these visits to allow service users the space and time to develop trust with the team. As noted above, the social workers and harm reduction workers are outreaching into the local area to talk to people and address concerns and misinformation.

3.9 In recent weeks a co-located BBV clinic and sexual reproductive health clinic have been established, and sessions from an acute consultant will be in place in the near future to provide a focus on improving physical health and further avoid emergencies requiring hospital admission. Primary care input through a Service level agreement with a GP practice is being explored.

3.10 The Thistle Dashboard data (3rd June 2025) highlighting monthly activity is shown below:



4. Legal Framework

- 4.1 The Statement of Prosecution issued by the Lord Advocate on the 9th January ([Drug consumption room statement of prosecution policy | COPFS](#)) allowed the service to become operational shortly afterwards. The Lord Advocate confirmed that it would not be in the public interest to prosecute an individual attending the Facility for an offence in terms of section 5(2) of the Misuse of Drugs Act 1971, where the controlled substance is intended for personal consumption. The statement makes it clear that this applies only to the Safer Drug Consumption Facility and excludes the other areas of Hunter Street Health and Care Centre and the surrounding locale.
- 4.2 Staff have received significant training on the operational policies and rules of the service, all of which are explained to people using the service on arrival. Potential breaches of the Misuse of Drugs Act 1971 have been avoided through strict adherence to the policies and procedures.
- 4.3 The current legal framework does not allow the provision of tourniquets, the sharing of drugs or an inhalation/smoking area within the facility.

5. Financial Framework

- 5.1 As detailed in previous reports to the IJB, Glasgow City HSCP received confirmation from Scottish Government on 20th September 2023 of allocation up to £2,347,000 per annum from 2024/25, based on actual spend.
- 5.2 The allocation letter notes commitment from Scottish Government throughout the initial phase of the pilot until March 2027.
- 5.3 The allocation letter notes that funding confirmation for future years will be made available subject to the outcomes of evaluation and review of the pilot phase, with an expectation that a review will be held 12 months before the end of the pilot phase to inform future funding decisions.
- 5.4 Glasgow HSCP will continue to work closely with Scottish Government colleagues to determine the remit and expectations of any such review, which would be due to report in March 2026. It should be noted that the IJB would be required to consider the impact on wider alcohol and drug recovery services and efficacy of the service should funding not be provided from April 2027. Scottish Government are represented on the SDCF Oversight Board.

6. Service User and Community Engagement

- 6.1 A service user forum has been established, supported by the ADP Senior Officer, with lived experience, to influence service model and delivery. Feedback has been largely positive, re-enforced by feedback from partner organisations, particularly Third Sector partners. The current legal framework has not allowed the provision of tourniquets, the sharing of drugs or an inhalation/smoking area within the facility. The latter two issues have been highlighted as barriers for use by service user groups.
- 6.2 Following extensive pre-implementation community engagement, a formal Community Engagement Forum has been established. The forum has met on three occasions to date and membership includes Police Scotland, local residents, local businesses, Elected Members, Neighbourhoods Regeneration and Sustainability (NRS), and ADRS and Thistle clinicians and managers. The meetings thus far have been constructive, and partners have been able to respond tangibly to issues raised.
- 6.3 The forum has heard concerns about the ongoing impact of discarded drug related paraphernalia and away from home drug use in the Calton area, with some members claiming this to have worsened since the Thistle became operational. Whilst there is no evidence from NRS or Police Scotland of an increase in reports or activity, it is recognised that residents do not always report concerns. It is well established however that the issues relating to drug use and drug related litter have been longstanding in the local area, as noted in previous IJB reports dating back to 2017.
- 6.4 A range of actions are being taken to address these historical concerns including “deep cleans” of the most established public injecting drug use sites, increased frequency of drug related litter pick-ups, and the placing of new drug related litter bins in the Calton and Trongate areas. Outreach services to these

sites and surrounding areas will encourage movement from public sites to use of the Thistle to reduce risk of displacement to new drug use sites. A full NRS action plan is underway for the Calton area.

- 6.5 A communication and media strategy to promote the NRS action plan, and the potential for Thistle staff and recovery volunteers to contribute to reducing the community impact of away from home drug use is under development.
- 6.6 There are concerns that misinformation is being shared with community members and the wider public, and that this may be impacting on people's confidence in using the service. The Alcohol and Drug Partnership will make use of social media to challenge the misrepresentations and stigmatising language.

7. Evaluation

- 7.1 The contract between NHSGGC and the funder for the evaluation has been signed, and the collaborative agreement between NHSGGC and the research institutions is also in place. Accordingly, work on the external evaluation for the Thistle formally commenced in April 2025.
- 7.2 The National Institute of Health Research (NIHR) is funding the evaluation and has published information about the evaluation of the Thistle Service on their website - [Evaluating the impact of the UK's first sanctioned sAfer drug Consumption facility \(ENACT\): A mixed-methods natural experiment study - NIHR Funding and Awards](#)
- 7.3 The external evaluation is likely to take approximately 4.5 years to be fully completed and to deliver its outputs. The Oversight Board will therefore consider and advise on what if any form of interim internal evaluation will be required to support decisions about the continuation of the Thistle service beyond its current funding allocation, pending the outputs of the external evaluation.

8. Recommendations

- 8.1 The Integration Joint Board is asked to:
 - a) Note the contents of this report.