

East Renfrewshire Alcohol and Drugs Plan 2024-2027

East Renfrewshire is a place where we live free from the harms of alcohol and drugs, are treated with dignity and respect and are fully supported within communities to find their own type of recovery

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Introduction

In East Renfrewshire, reducing drug and alcohol related harm and is a key priority that is reflected within the Health and Social Care Partnership Strategic Plan. This Alcohol and Drugs Strategy for East Renfrewshire sets out in more detail how the Partnership will continue to reduce harm and promote recovery, working with our partners and communities. The Strategy reflects closely the national priorities set out by the Scottish Government in Rights, Respect and Recovery and the National Mission as well as local priorities identified through working with our lived and living experience communities and analysis of local data and trends.

Context for Reducing Alcohol and Drug Related Harm

In delivering the 2020-23 Alcohol and Drugs Plan, significant progress has been made in enhancing and developing services to respond to the increase in drug related deaths. The East Renfrewshire Alcohol and Drugs Partnership (ADP) has responded to new national priorities that emerged during this period through the National Mission and the work is still ongoing. The new strategy for East Renfrewshire is an opportunity to reflect the updated context around alcohol and drugs priorities.

Progress made in the 2020-2023 Strategy

The previous strategy was developed and implementing during very challenging times for health and social care in a global pandemic as well as a drugs death emergency. Partner agencies have delivered many positive programmes of work that will including:

- Full implementation of the first five standards for Medication Assisted Treatment (for opiate use)
- Embedding access to peer support services within alcohol, drugs and mental health services
- Supporting the recovery community to remobilise and develop further
- Ensuring local voices of lived and living experience are heard and influence priorities and services through establishment of the Alcohol and Drugs Lived Experience Panel and peer research training programme and delivery of two peer research studies on Opiate Substitution Treatment and Alcohol and Drugs Community Needs Assessment
- Engaging with young people through community learning and development worker outreach to build relationships with young people, as well as informing the delivery of programmes in schools based on the issues identified
- Developing trauma informed practice skills within alcohol and drugs services

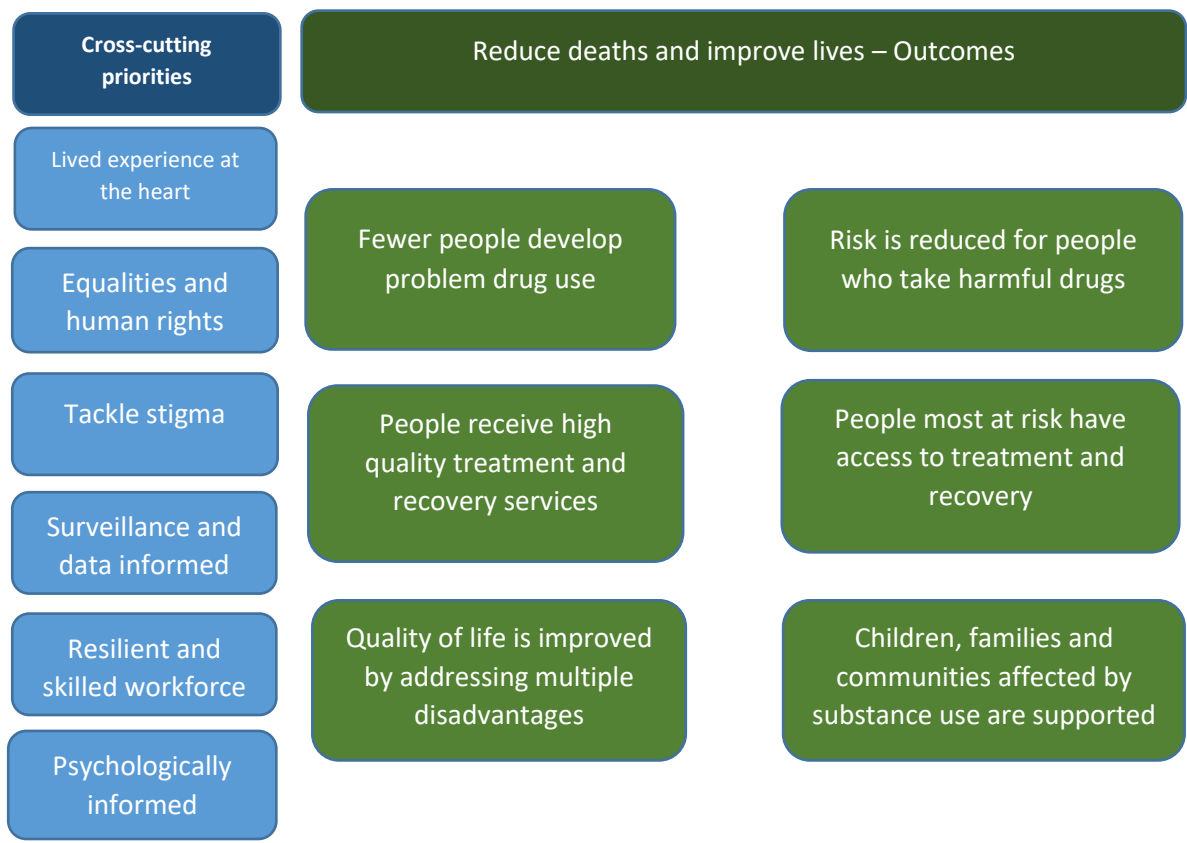
Launch of the National Mission

The Scottish Government announced the National Drugs Mission in January 2021, in response to the sharp increase in drug related deaths in Scotland. The Mission was later expanded to include alcohol and drugs. Additional funding for Alcohol and Drugs Partnerships was made available and the East Renfrewshire ADP has been working on the local investment plans alongside delivering the existing strategy. This work has included:

- Working in partnership with the third sector to implement overdose response and harm reduction outreach services locally
- Increasing the capacity of local alcohol and drugs services to ensure rapid access to services, enhanced choice in treatment options and assertive outreach to people at high risk of harm
- Enhancing the workforce through addition of prescribing and occupational therapy roles
- Increasing access to residential rehabilitation placements
- Partnership working to enhance whole family support for families affected by alcohol and drugs

This refreshed strategy is an opportunity to build on the previous one and update it to reflect the current and future work to deliver on the Scottish Government’s [National Mission Plan](#), published in 2022 with a focus on reducing both alcohol and drug related harms. National Mission funding for East Renfrewshire will support the delivery of this strategy. The cross cutting priorities and outcomes of the Mission are shown in Figure 1:

Figure 1: National Mission Priorities



Strong lived experience involvement

Over the life of the previous strategy, the East Renfrewshire ADP prioritised improvement in how we involve those with lived and living experience of alcohol and drugs services and recovery including family members, in what we do. The ways in which communities have been involved includes the following:

East Renfrewshire Lived and Living Experience (LLE) Panel

The Lived and Living Experience Panel was set up in 2021 to work with the Alcohol and Drugs Partnership to increase the voice of lived and living experience in setting strategic priorities and in the design and delivery of services. The LLE Panel is supported by the Advocacy Project and a small but dedicated Panel membership has been established. The Panel have facilitated a number of sessions with service users to find out views about service provision, and has raised emerging issues with local services. The Panel has participated in ADP meetings and attended Alcohol and Drug Recovery Service meetings.

The Alcohol and Drug Recovery Service has identified a staff member as a Lived Experience Panel Champion to ensure good links between the Panel and the service. The ADP and Lived Experience Panel will continue to work together on how ways of working can involve the Panel more effectively.

East Renfrewshire Peer Research Programme

This programme ran from 2020 to early 2023 with people from the lived and living experience community trained as peer researchers and supported to carry out research. The research team completed a study of service user experiences of Opiate Substitution Treatment and a wider community needs assessment. The findings have influenced the priorities of this strategy.

P.A.R.T.N.E.R (Partners Achieving Recovery Together Now in East Renfrewshire).

Supporting community-led recovery group PARTNER has been a key priority for the ADP to ensure community led recovery support is available within the community, through funding and capacity building support. PARTNER have also participated in engagement and involvement.

Recovery Walk 2023

A small group of people from the recovery community, supported by HSCP staff, attended the Recovery Walk in Inverclyde. The event initiated good conversations about the positive impact of recovery being visible within the community and opportunities to achieve this. Increased visibility of recovery can reduce stigma and isolation and increase feelings of hope.

This strengthening of the voice of lived and living experience will continue through the life of the new strategy. Continued support and development work will ensure the sustainability of the Lived Experience Panel and PARTNER as well as regular conversation cafes to shape service provision, encouraging more participation from all parts of the community, different age groups and family members.

Discussions with young people during the strategy development explored the issues most important to them.

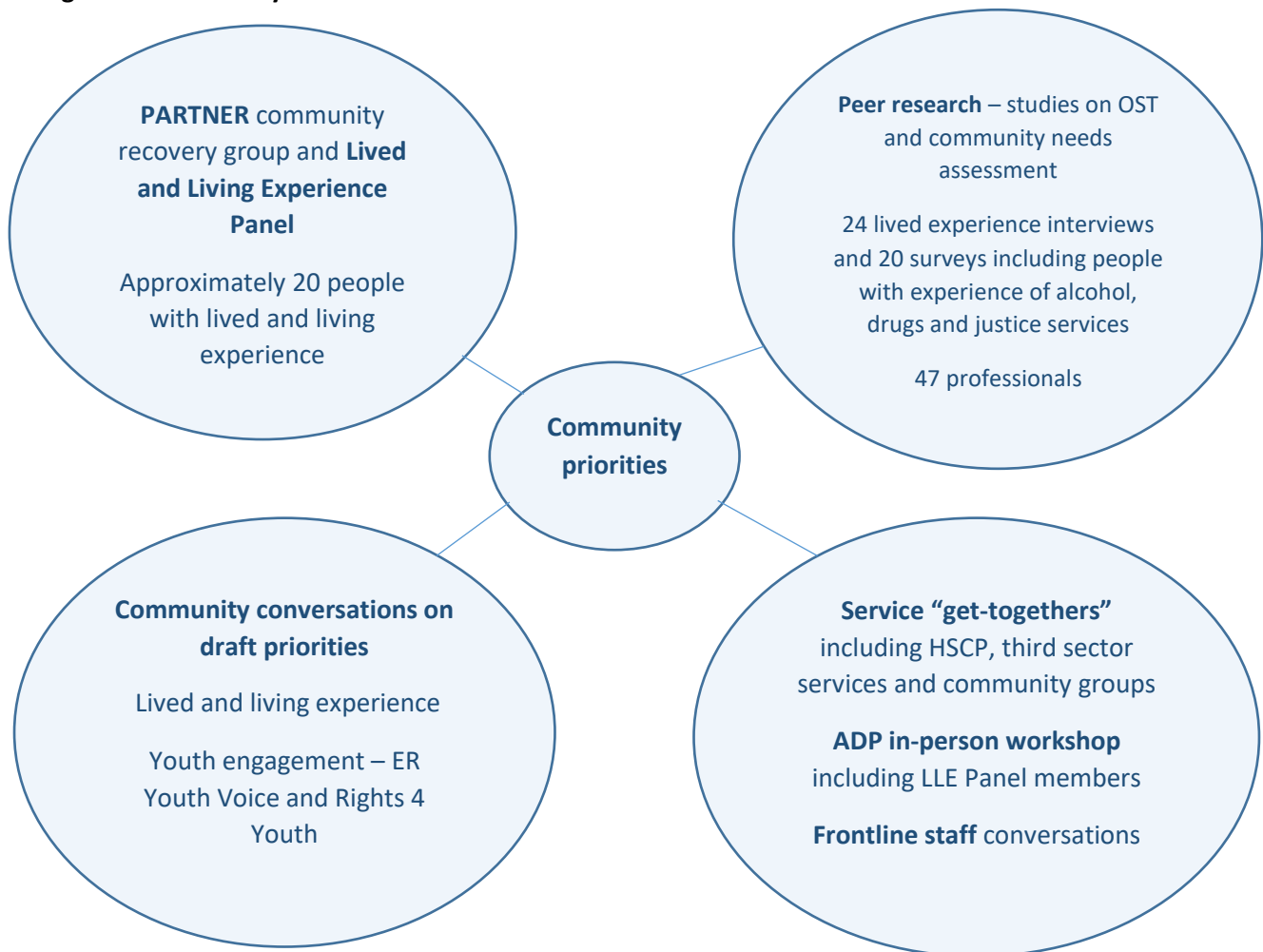
- Tackling stigma to ensure that people struggling with alcohol and drugs can ask for help
- Mental health support is a priority – to build support systems and reduce isolation and mental health difficulties
- There should be greater awareness of alcohol and drug issues and where young people can go for support, including for their friends or family members
- Support for families is important and should include fun activities

Impact of Involvement

This strong involvement at local level in East Renfrewshire will support the human rights based approach which is being led nationally through the National Collaborative to ensure that the voices and rights of those with lived and living experience are at the centre of both policy and practice and people can access their rights to health.

Feedback from community involvement has influenced the strategy priorities and will continue to influence the development and delivery of specific initiatives and actions during the life of the strategy.

Figure 2: Community Involvement



The following priorities have emerged from the involvement and collaboration with those with lived and living experience and are reflected in the priority areas for action on pages 19-22:

- Grow the recovery community and maximise the recovery opportunities people can access
- Design and implement a recovery hub
- Tackling stigma is important to reduce barriers to accessing services and wider community supports and activities
- Make recovery visible through greater participation in communities and events such as Scotland’s Recovery Walk
- Support people most at risk
- Grow peer support and advocacy for people needing help
- Increase the support available for mental health
- Support families

- Focus on partnership working
- Increase awareness of service provision and community supports to improve visibility and increase access
- Greater involvement of lived experience in services

The following section expands on some of the priority findings.

Growing the Recovery Community

One of the strongest messages from the lived and living experience community is the need to grow the recovery community and enhance and expand recovery opportunities. This includes the identified need for a dedicated space for recovery focused provision – a key priority now being progressed by the Alcohol and Drugs Partnership.

“The difference this could make is immense. A hub would allow a focal point for folk in recovery to connect with others... who understand the path they walk and who can offer real support in their everyday struggles with addiction and recovery. Running a programme of activities and training opportunities can help to turn folks lives around and give people in recovery a real chance of a meaningful life...” Lived Experience Panel member

“If we acknowledge the oft-cited quote that “the opposite of addiction is connection”, we must create safe spaces where positive relationships can be forged, help can be sought, and our people can feel seen. Addiction is such a lonely place... And everyone is deserving of support in difficult times.” Lived Experience Panel member

“One of the key resources that would benefit the programme and the recovery community of East Renfrewshire more broadly would be a distinct and specific space for recovery meetings and a supportive space for those seeking information and solidarity”. Peer Research Final Project Report

Tackling Stigma

The stigma associated with harmful alcohol and drug use is a common theme emerging from the two local peer research studies, conversations with those in recovery and in national research. Tackling stigma arguably goes far beyond the influence of partners in East Renfrewshire and regional and national campaigns to tackle stigma are critically important. At a local level, making recovery visible by increasing participation and representation in community events can contribute to reducing stigma, as well as positive promotion of the recovery community and support services, listening to the voices of lived experience and working in partnership with community members will be a key part of the East Renfrewshire Alcohol and Drugs Strategy. The recent change to the name and branding of the Alcohol and Drug Recovery Service has removed stigmatising language from service leaflets and documentation.

Making Information and Services More Accessible

Accessible services and information, and greater awareness of the supports available across the whole alcohol and drugs setting, have been identified as a priority through the peer research work and the service and community get-togethers that have been established locally. Initial work to improve the accessibility and quality of available information is underway.

Mental Health Support is a Priority

Support for mental health is a key aspect of recovery from alcohol and drugs. This was strongly evidenced in the study of Opiate Substitution Treatment which showed that the majority of participants experienced trauma and mental health difficulties at early stages of their lives. The community research indicates a demand for more mental health support but also a need for more investigation of what that looks like. There are a range of mental health supports available, from less intensive group and talking therapies to intensive psychiatric and psychological supports to meet particular needs. This is being further explored through the implementation of the Medication Assisted Treatment Standards.

“There’s basically a lot I need to get off my chest and I believe that speaking to someone and getting advice off those people about coping mechanisms and things like that” Peer research respondent

Staff Engagement

The views of frontline staff, integral to the delivery of the strategy, were gathered during the development of the strategy. There was broad support for the priority areas set out in the strategy, including the need for prevention work and supporting people at high risk. The development of the recovery community and recovery hub was consistently seen as a top priority, ensuring people have opportunities to move on from treatment and continue their recovery in the community. Many staff have experience of working in other locality areas with well-established recovery communities. The ability to work with in partnership with other services such as housing and employability to improve quality of life for service users, especially those at high risk, is of key importance.

East Renfrewshire and Alcohol and Drugs – Data Profile

Focusing on data and evidence is a key priority for the ADP. Data such as alcohol and drug deaths, hospital admissions, near fatal overdoses, and activity within alcohol and drug services, is continually monitored to identify emerging trends and needs. The most recent data is included in the following pages.

Drug related deaths are showing signs of decreasing nationally and locally but prevention remains a critical priority

Looking at the most recent published data, the number of drug related deaths in East Renfrewshire saw a slight increase from six deaths in 2021 to seven in 2022. Across Scotland as a whole, the number of deaths due to drugs decreased from 1,330 in 2021 to 1,051 in 2022. When looking at the age standardised rate of death over a five year period, this shows that in the period 2018-2022 the East Renfrewshire rate was 9.5. This is compared to an average of 3.8 deaths in the period 2003-2007. Although seven deaths in 2022 is a reduction from the peak of 11 deaths in the local area in 2018, the aim is for a continued and sustained year on year decrease in drug related deaths and ultimately a reduction in the five year average rate.¹

All drug related deaths that occur in East Renfrewshire are reviewed to identify the circumstances and any learning that can inform services. During the period 2020-22, there were 23 drug related deaths. The majority of those who died were male (65%) and just over half were aged 45-54 years. 40% of drug related deaths occurred in the 20% most deprived areas of East Renfrewshire. The majority of deaths involved multiple drugs – in three quarters of cases this involved opiates/opioids however street benzodiazepines, gabapentinoids (drugs to treat nerve pain) and cocaine were also present in a number of cases. Underlying conditions are also a key factor (typically cardiac or respiratory conditions).¹

East Renfrewshire has a low rate of drug related hospital admissions compared to Scotland and other local authority area. There was a slight reduction from 92 per 100,000 population in 2020-21 to 89 per 100,000 in 2021-22²

Referrals for drug use to the Alcohol and Drugs Recovery Service (ADRS) have increased by 15% since 2019-20 and continue to make up approximately 20-25% of total referrals received. There are approximately 140 people on Medication Assisted Treatment specifically for opiate use. As at December 2023, 14 new Opiate Substitution Therapy (OST) patients have started treatment since 1 April 2022.³

Experiencing a near fatal overdose is considered a risk factor for a future fatal overdose. Not all near fatal overdoses may become known to services such as the Alcohol and Drug Recovery Service or Scottish Ambulance Service as they may not be reported. According to emergency department presentations with overdose being categorised, the data available between Jan 2020 – December 2021 showed there were 34 overdose presentations in 2020, and 43 in 2021. Sample data analysed for the first half of 2021 shows the highest attendees were within the 40-49 age range and three quarters were male.⁴

Alcohol harm statistics have improved locally but the goal is to reduce further

Looking at the most recent published data on alcohol specific deaths, there was a decrease in East Renfrewshire from 16 in 2021 to 9 in 2022. Across Scotland as a whole, the number of alcohol specific deaths increased slightly from 1,245 in 2021 to 1,276 in 2022, an increase of 2%. When looking at the age standardised rate of death over a five year period, this shows that in the period 2018-2022 the East Renfrewshire rate was 12.5. This is compared to an average of 21 deaths per year in the period 2003-2007. This data suggests that a trend in reducing alcohol specific deaths is being achieved however the aim is for a continued and sustained year on year decrease in alcohol-specific deaths. ⁵

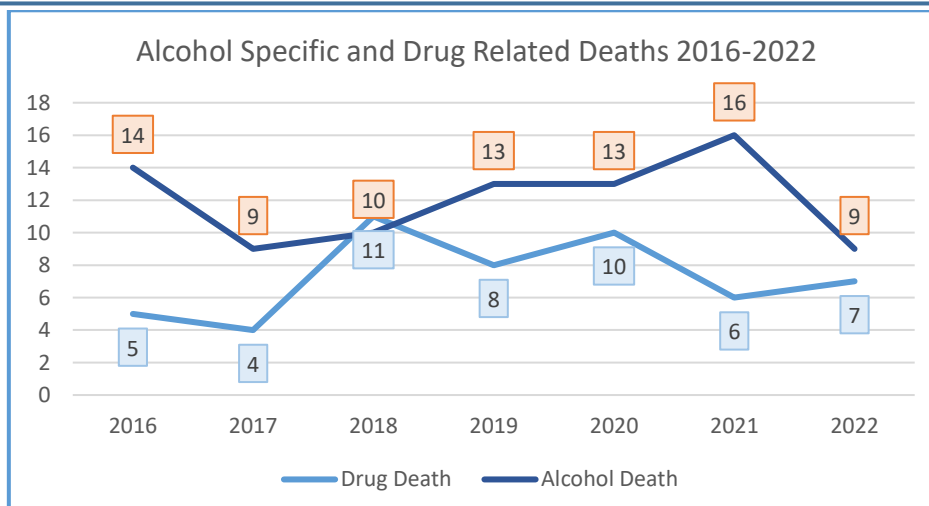
There were a total of 25 alcohol specific deaths during 2021 and 2022. Of these, 71% were male and in the age range of 55-74. Meanwhile, there was a decrease in deaths within the 35-54 age range. The most common underlying cause of an alcohol specific death was alcohol dependence followed by alcoholic liver disease and alcoholic cirrhosis of liver. ⁶

East Renfrewshire has a lower rate of alcohol related hospital admissions compared to the NHS Greater Glasgow and Clyde (NHSGGC) area and Scotland as a whole. The current rate of 394 per 100,000 population is the lowest recorded since recording began in 2002-2003.²

The NHS Greater Glasgow and Clyde Health and Wellbeing Survey 2022-23 surveyed over 1,000 adult residents in East Renfrewshire and highlighted the following related to alcohol consumption:

- One in four (26%) never drank alcohol but 29% drank alcohol at least twice per week. The proportion who drank alcohol (74%) was higher than in the health board area as a whole (69%).
- Looking at binge drinking (more than 8 units in a single sessions for men or 6 for women), drinkers under 35 were the most likely to have done so in the last year and those aged 75 over were least likely. Binge drinking behaviour was more likely amongst male drinkers those living in the most deprived areas of East Renfrewshire.⁷

Alcohol referrals continue to make up the majority of referrals to the team although there has been an 8% decrease since 2019-20³. Glasgow Council on Alcohol have completed 599 Alcohol Brief Interventions and delivered 239 alcohol counselling sessions to 31 individuals during the period October 2022 to December 2023, providing an alternative model of support for alcohol use. ⁸

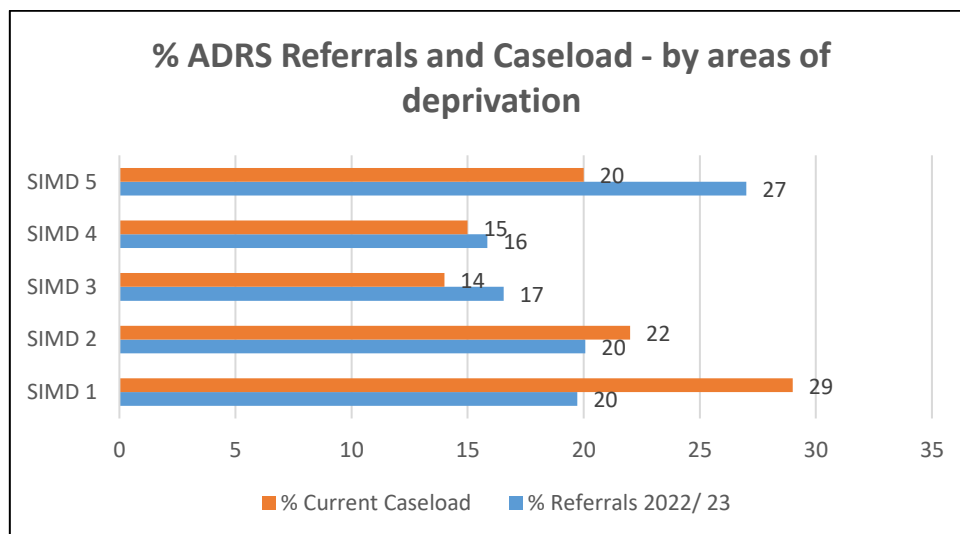


Deprivation is linked to higher levels of alcohol and drug related harm

The Scottish Index of Multiple Deprivation (SIMD) splits postcode areas into five categories according to levels of deprivation. SIMD 1 contains 20% of the population from areas that are the most deprived. SIMD 5 is the 20% of the population living in areas that are least deprived.⁹

Looking at referral data for 2022-23 against the Scottish Index of Deprivation shows that SIMD 5 (the least deprived postcodes) account for 27% of referrals to the ADRS, while 20% of referrals come from the most deprived postcodes in SIMD 1. This trend was similar in the preceding two years.³

When looking at the make-up of the caseload according to which SIMD area individuals live within, 29% of service users live within the most deprived postcode areas of the authority and 20% of service users lived in least deprived areas. This data could suggest that those from least deprived areas spend a shorter amount of time within treatment with the Alcohol and Drug Recovery Service. This could be due to the stronger protective factors supporting recovery experienced by those living within least deprived areas, such as better quality housing, a stronger overall health status or more likely to be in employment. Service users living in more deprived areas conversely may be more likely to have multiple complex needs including additional health conditions and housing challenges.



Dunterlie, East Arthurlie and Dovecothall and Auchenback have the highest alcohol related hospital admissions rates as well as being the most deprived areas according to the SIMD 2020. Together these areas make up only 10% of all East Renfrewshire residents but account for one third of all residents who are income deprived⁹. Rates of alcohol related hospital admissions have reduced in the last ten years but remain more than double the authority average and are higher than Scotland as a whole².

National research suggests that people with harmful alcohol and/or drug use in more affluent areas may be protected from significant harm to health by their more positive health status overall. Drug use disorders and alcohol dependence are in the top ten health conditions for deprived areas, while they do not feature in the top 10 for least deprived areas - for people living in deprived areas, alcohol reduces healthy years lived by 3.9 years, while drugs causes a reduction of 8.1 years.¹⁰

Supporting the physical and mental health of people with problematic alcohol and / or drug use is a priority

Over the period 2020-2022 there was a total of 24 probable suicides in East Renfrewshire. There was a reduction in the annual number of deaths from 11 in 2021 to 6 in 2022. The majority of those who died over this period were male (83%). The five year average age standardised rate has stayed fairly static over the longer term. The rate was 9 during the period 2018-2022 compared to 9.4 in 2003-07¹¹. While the numbers are very small there are incidences of individuals known to alcohol and drug services who die by suicide indicating the increased risks for this group.

Adult Support Protection (ASP) referrals with an alcohol and drug element make up a small number of the total received across the Health and Social Care Partnership (3.5%). In 2022-23, of the total alcohol and drugs referrals received, 14% proceeded to ASP investigation with males making up 60% of these and the majority being within the 36-45 age range. Self-harm shows as the most common type of harm identified followed by self-neglect.³

Many individuals with alcohol and/or drug issues are at risk from poorer mental health and wellbeing and isolation. National evidence set out in Rights, Respect and Recovery suggests that drug users of older age are at greater risk due to complex underlying health and social care issues, including mental health issues and isolation¹².

Community Justice

People with alcohol and drug problems are more likely than average to come into contact with the justice system. At a national level, 38% of those in prison used drugs when committing their offence¹³. Three quarters of prison admissions test positive for illicit substances at prison reception in Scotland and this figure is higher in some prisons¹⁴.

National data analysis highlights the risks for people with experience of the justice system. Around half of those who die a drug related death (51.6%) had ever been in prison and 18.9% had been in police custody in the six months prior to death²¹.

When analysing the Alcohol and Drug Recovery Service caseload, this shows that during 2021-22 and 2022-23, 8% were also being supported by the Criminal Justice Social Work Service. This is a reduction from 2020-21 when 14% were supported by both services³.

Substance use is a known risk factor for reoffending upon release, but both prison and community based programmes are known to help reduce reoffending rates.

There are very small numbers of young people experiencing serious harm from consuming drugs and / or alcohol however longer term prevention work is a priority.

Any young person admitted to hospital for reasons related to alcohol is a concern. In East Renfrewshire, the numbers for this (aged 11-25) are lower than adult hospital admissions at 172 per 100,000 population for the three year period covering 2019-20 to 2021-22. This is also the case at Scotland level and across the Board area ².

180 Notification of Concern referrals were made by Greater Glasgow and Clyde Emergency Departments (EDs) for children and young people who attended as result of alcohol and/or drug use during 2022-23. This is a 35% reduction compared to 290 referrals during 2021/22. East Renfrewshire attendances accounted for 3% (n. 6) of this total. Across the GGC area, girls made up 66% of attendances. The most common age of presentation was 15 year olds accounting for 36% and young people most commonly presented with the effects of alcohol use. ¹⁵

Fewer young people are coming into the Alcohol and Drug Recovery Service, with 9% of new individuals engaging with services aged 16-25. Referrals from this age group decreased by 39% (from 61 in 2018-19 to 41 in 2021-22), and are more likely to be for alcohol and drugs such as cannabis or cocaine. Approximately 5% (n. 20) of the current caseload are aged 16-25, which is lower than the number of referrals received annually, suggesting not all referrals go forward for treatment (they may not meet the level of need treated by the team and may have referred on to other services and supports). Just over two thirds of young people currently on the ADRS caseload are male³.

ERC Community Learning and Development undertake youth outreach work in communities and in 2020, deployed all staff into this approach due to Covid restrictions. Almost 5,000 contacts were made with young people during 2020-21, with themes of mood, anxiety, sleep patterns and isolation / loneliness identified. Staff used a harm reduction approach when discussing young people's safety, risk taking behaviours, drug and alcohol consumption and anti-social behaviour. In 2021-22 and 2022-23 detached youth work continued with around 3,000 contacts with young people in each year, with alcohol and drugs featuring in conversations with young people, particularly increases in young people using cannabis. Between 66% and 73% of contacts over the three years were with the 12-15 age group¹⁶.

A local Health and Wellbeing Census was completed for S2/S4 in East Renfrewshire in 2023. It should be noted that the numbers from the survey is a small sample and may not be representative of all children and young people across East Renfrewshire. The results indicated:

- Low levels of smoking (4.8% of n.188 stated they were regular smokers) with 8% using e-cigarettes
- 72% stated they had never drunk alcohol (n. 188) with 18% only a few times a year and 4% about once a month.
- 145 responded regarding illegal drug use, 16% responded that they had used drugs formerly known as legal highs, solvents or prescription drugs, and drugs not prescribed to you. ¹⁷

Local Services and Recovery Communities are supporting people who wish to recover from drugs and/or alcohol

The East Renfrewshire Community Addiction Service works with between 380 and 480 individuals per year to support their recovery from drugs and alcohol. Males make up the majority of referrals and over 90% are in age range 25+. This includes provision of weekly mutual aid, relaxation and walking groups and other seasonal group sessions. Considering a whole family approach including children, parents and other family members highlights the increased numbers of individuals who are impacted. In 2021-22, 9% of service users moved from treatment part of the service to the community recovery team³.

There is a small, supportive recovery community in East Renfrewshire with PARTNER community led recovery group supporting individuals on a weekly basis, as well as Alcoholics Anonymous groups, and the Teen Challenge charity weekly hub.

The East Renfrewshire Lived Experience Panel has been established to give a voice to those affected by alcohol and drug harms, recovery communities and families. They are supporting the Alcohol and Drugs Partnership through provision of feedback and meet with services and groups across East Renfrewshire.

Housing challenges for individuals with harmful drug or alcohol use

Housing issues can be prevalent across people who are affected by alcohol and drugs – this can relate to maintaining tenancies, securing good quality housing, and homelessness.

East Renfrewshire Council Housing Services received 445 homelessness applications in 2022-23, and these have been steadily increasing over recent years. Of the total applications, 191 (43%) cited mental health as a reason for failing to maintain their accommodation, compared to 150 in 21/22 and 144 in 20/21. 38 households cited drug and alcohol dependency as a reason for failing to maintain accommodation compared to 47 in 21/22 and 48 in 20/21, showing a slight decrease.¹⁸

Employability challenges for individuals with harmful drug or alcohol use

The rate of unemployment within East Renfrewshire, at 2.7% in the year ending September 2023, remains lower than the national average¹⁹. This is closely monitored as national trends are anticipating an increase. Economic inactivity is still high (20.5%) and just below the national average (22.4%). This group includes people with long term health conditions, caring duties, in full time education etc. This group may not usually engage with statutory services and need more intensive and longer term support to remove barriers to employment and may include people with mental health and alcohol and drugs issues.

The UK figure points to the highest rate of long term illness therefore economic 'inactivity' is rising¹⁹. Work EastRen, the employability service in East Renfrewshire deliver a range of programmes, in partnership with other agencies, to support people with mental health and alcohol and drugs issues into the workplace.²⁰

Links to other Plans and Strategies

It is important that the Alcohol and Drugs Strategy fits into and links with the wide range of strategic partnership plans that are aimed at improving the quality of life and wellbeing of the people and communities of East Renfrewshire. Collaboration and partnership working across and between thematic partnerships is critical to improve quality of life across East Renfrewshire.

The Health and Social Care Partnership Strategic Plan prioritises mental health and wellbeing and recovery and addressing health inequalities. The data analysis for this strategy shows that deprivation plays a key role in alcohol and drug harms – locality plans and place based plans that seek to reduce inequalities play a key part in preventing harms over the longer term. There are strong links with the Community Justice Outcome Improvement Plan which focuses on people in the justice system, many of whom are also affected by alcohol and drug harm.

The East Renfrewshire Children’s Plan – At Our Heart: Next Steps – has a key role to play in the wider prevention agenda through improving the outcomes for all children and young people. Alcohol and drugs partners also participate in the implementation of At Our Heart through the Improving Outcomes for Children and Young People Partnership and sub-groups. There will be joint delivery of the shared actions across partners and progress reported to both partnerships.

We know from lived experience engagement and research that experience of trauma and poor mental health and wellbeing is a key driver of alcohol and drug related harm. Within East Renfrewshire we continue to recognise the impact that adverse and distressing experiences can have on individuals and the importance of services responding in ways that help promote recovery and prevent further re-traumatisation. The local partnership, driven by the HSCP, to take forward the implementation of our “Trauma Informed Services” strategy is well established and our partners in transformational change are leading experts in the field. The alcohol and drugs workforce are active participants in the East Renfrewshire HSCP Trauma Informed Services strategy and delivering trauma informed services is a critical aspect of supporting treatment and recovery.

We will work with our health board colleagues to contribute to Greater Glasgow and Clyde plans and strategies as well as working with health board teams delivering the Alcohol and Drugs Prevention Framework, anti-stigma action plan and regional promotions and campaigns.

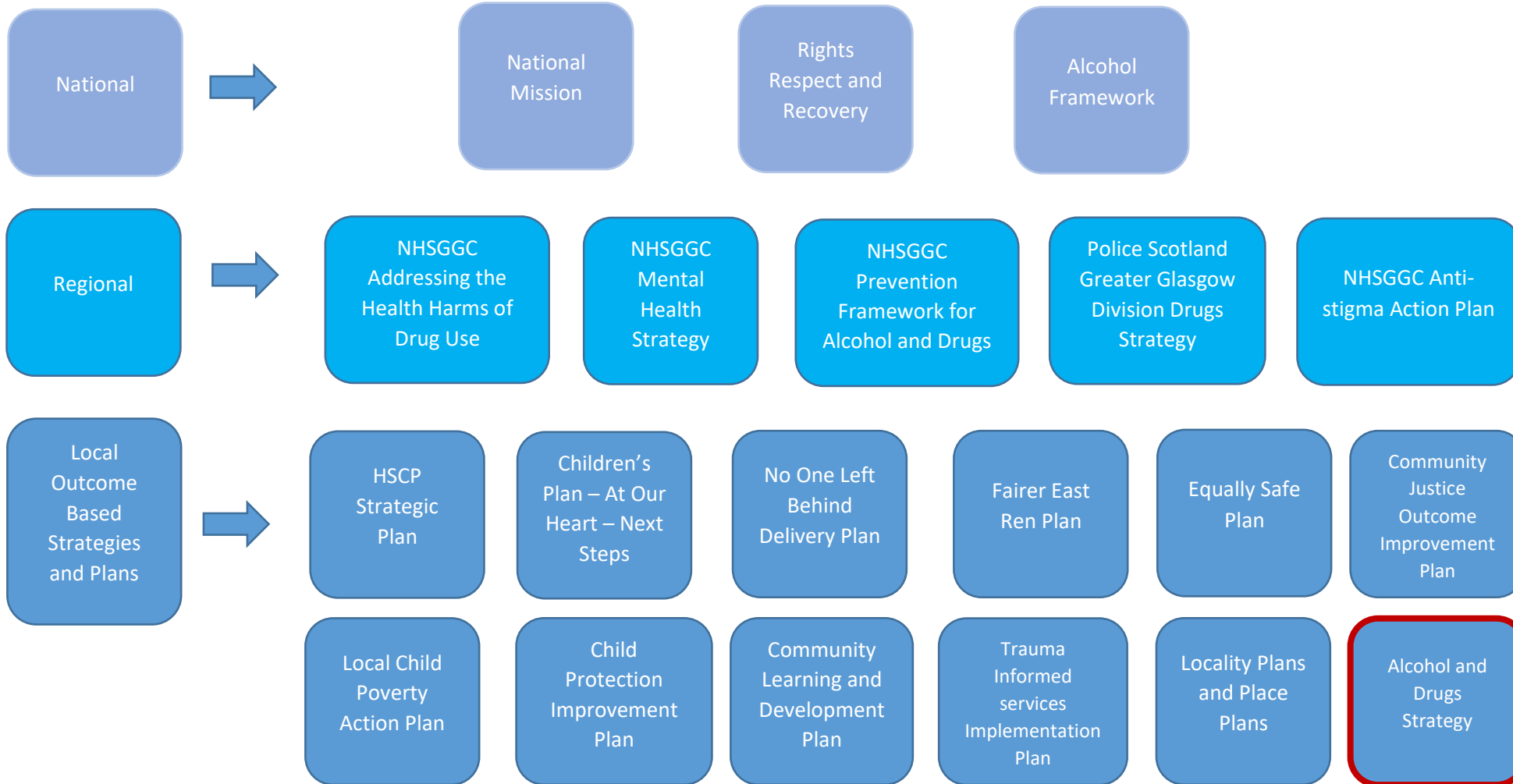
The chart on page 18 illustrates the partnership working and contributing factors to deliver the Alcohol and Drugs Strategy within a wide landscape of local, regional and national plans.

Equality, Fairness and Human Rights Impact Assessment

An Equalities, Fairness and Rights Impact Assessment was undertaken as part of the strategy development. This process found that the strategy seeks to have a positive impact across all population groups who may have, or be at risk of, harmful alcohol and / or drug use, while recognising those groups at increased risk (e.g. due to socio-economic deprivation, other long term health conditions, age or gender). Some implementation initiatives, such as the recovery hub, will require specific impact assessment work to ensure that the operational delivery takes account of the needs of equalities groups.

Wide communication of the strategy to a range of representative groups, including through the development of an accessible and easy to read summary of the strategy, will help to ensure that the strategy is visible.

East Renfrewshire Planning Landscape – Improving Quality of Life and Wellbeing



Strategy Priorities for Action – 2024-27

Based on the data analysis, Equality, Fairness and Human Rights Impact Assessment, community priorities and the National Mission, the East Renfrewshire Alcohol and Drugs Strategy identifies eight priority areas for action over the next three years.

	Priority Areas for Action 2024-2027	INFLUENCED BY
1	<p>We will work with lived and living experience communities, and partners across the public and third sector, to create a thriving and supportive recovery community.</p> <p>This will include:</p> <ul style="list-style-type: none"> • Designing and delivering a community recovery hub. This will be co-designed with people with lived and living experience and ensure the hub meets local needs. The hub will ensure people can access recovery and peer support in a community setting, as well as services such as employability programmes and 1:1 supports, money advice and advocacy services. • Supporting the growth of community-led recovery groups and activities. This will consider the needs of different population groups such as women, men, different age groups and the needs of families. 	<p>Lived and living experience priority Local partners priority</p>
2	<p>We will ensure the voices of lived and living experience are heard and included in the Alcohol and Drugs Partnership and in services, guided by the National Collaborative’s vision to integrate human rights into drug and alcohol policy, leading to better outcomes for people affected by substance use.</p> <p>This will include:</p> <ul style="list-style-type: none"> • Continuing to support the development of the Lived and Living Experience Panel as an independent group and working with them to shape services and priorities for the future • Ensuring that effective lived experience involvement is embedded within the culture and ways of working of the Alcohol and Drugs Partnership and in local services. • Engaging more with people who use alcohol and drug recovery services and families to build relationships and ensure services meets their needs 	<p>Local lived and living experience priority National priority</p>

	STRATEGIC PRIORITIES/OUTCOMES 2023-2026	INFLUENCED BY
3	<p>We will tackle stigma to reduce barriers to accessing services and wider community supports and activities.</p> <p>This will include:</p> <ul style="list-style-type: none"> • Making recovery visible through representation and participation in community life and local, regional and national events • Increasing awareness, visibility and accessibility of the wide range of services and supports for treatment and recovery (including wider supports such as housing, money advice, advocacy and employability) including sharing positive outcomes and recovery stories • Promoting and participating in national and regional stigma campaigns 	<p>Local lived and living experience priority National priority</p>
4	<p>We will develop and implement a partnership approach to prevention and early intervention to reduce alcohol and drug harms in the longer term, drawing on the NHS Greater Glasgow and Clyde Prevention Framework for Alcohol and Drugs</p> <p>This will include:</p> <ul style="list-style-type: none"> • Working with partners and using innovative approaches (e.g. podcasts) to promote prevention and early intervention supports, resources and information • Developing local capacity in partnership to deliver evidence based, early intervention approaches such as Alcohol Brief Interventions • Collaborating with young people to design and deliver diversionary programmes and opportunities that promote inclusion, responsibility, and improve wellbeing¹ 	<p>Local lived and living experience priority NHSGGC priority Data analysis</p>

¹ Links to Children and Young people's Plan Priority 2.2

	STRATEGIC PRIORITIES/OUTCOMES 2023-2026	INFLUENCED BY
5	<p>We will strive to provide high quality treatment and recovery services that are accessible, person-centred and responsive to the needs of different population groups, including people at high risk.</p> <p>This will include:</p> <ul style="list-style-type: none"> • Designing and implementing sustainable and effective approaches to overdose response, mobile harm reduction and assertive outreach • Implementation and maintenance of the Medication Assisted Treatment (MAT) Standards² • Promoting and facilitating access to residential rehabilitation placements (including pathways from the justice system), supporting people to overcome any barriers and working with them to plan and prepare for placements, and providing aftercare³ • Recognising people at risk within the justice system and ensuring clear and effective pathways from custody, prison and community justice services to treatment and recovery support • Supporting individual recovery plans through facilitating access to employability programmes, volunteering and other community opportunities 	<p>National priority Local lived and living experience priority</p>
6	<p>We will work together across services and organisations to ensure families affected by alcohol and drugs have access to holistic whole family support that meets their needs⁴</p> <p>This will include :</p> <ul style="list-style-type: none"> • Supporting children and young people affected by family members' substance use • Supporting adults affected by a loved ones' substance use • Working collaboratively across services who support families to improve skills and knowledge and provide joined-up support to families affected by alcohol and drugs • Listening to the needs of families and evaluating the effectiveness of service delivery to inform and improve provision 	<p>National priorities Local lived and living experience priority</p>

² There is a separate implementation plan for MAT Standards <insert link>

³ The East Renfrewshire residential Rehabilitation Pathway is published here [Residential Rehabilitation Pathway](#)

⁴ Links to Children and Young People's Plan Priority 1.1

	STRATEGIC PRIORITIES/OUTCOMES 2023-2026	INFLUENCED BY
7	<p>We will continue to develop integrated working across alcohol, drugs and mental health settings to provide mental health supports that meet the needs of people affected by harmful alcohol and / or drug use.</p> <p>This will include:</p> <ul style="list-style-type: none"> Improving joint care planning for people affected by both substance use and mental health conditions through integrated systems and team working Implementing the NHS Greater Glasgow and Clyde guidance for interface working between mental health and alcohol and drugs services Continuing to deliver mental health supports within the Alcohol and Drug Recovery Service through one-to-one and group based approaches, listening and responding to the needs of service users to inform and improve provision 	<p>National priorities Local lived and living experience priority</p>
8	<p>We will develop, strengthen and support a skilled, multi-disciplinary workforce across all partner agencies who support people affected by alcohol and drug harms by:</p> <ul style="list-style-type: none"> promoting sources of the most up to date knowledge and information on alcohol and drug harms across the partnership promoting training and capacity building opportunities and enabling staff to participate recognising trauma and its impact and embedding trauma informed practice across the partnership continuing to develop the multi-disciplinary team in the Alcohol and Drugs Recovery Service, including peer workers, prescribers, social work and occupational therapy 	<p>National priority Local lived and living experience priority Local partners priority</p>

Working in Partnership, Ensuring Success

The Alcohol and Drugs Partnership meets regularly throughout the year to agree priorities, review progress and respond to new and emerging issues. An East Renfrewshire ADP Delivery Sub-group and Medication Treatment Standards Implementation Group will develop a detailed delivery plan and drive forward progress on actions to deliver the strategy. The following partners are represented:

- East Renfrewshire Health and Social Care Partnership (including recovery services, children and families social work, justice services and health improvement)
- East Renfrewshire Council (including community learning and development, employability services, housing and education)
- NHS Greater Glasgow and Clyde
- Police Scotland
- Third sector providers of alcohol and drugs services including Turning Point, Scottish Drugs Forum and RCA Trust
- East Renfrewshire Alcohol and Drugs Lived Experience Panel

The Alcohol and Drugs Partnership reports to Scottish Government on their contribution to national priorities and outcomes. East Renfrewshire's Integration Joint Board oversees and approves publications including the Alcohol and Drugs Strategy and annual reports on progress.

Reports on the progress made in delivering the commitments will be published during the life of the strategy.

The work of the Alcohol and Drugs Partnership links with and complements the work of a number of other partnerships and groups working to improve outcomes for East Renfrewshire residents, including:

- Community Planning Partnership
- Chief Officer's Public Protection Group
- Improving Outcomes for Children and Young People Partnership
- Safe East Ren Partnership
- Community Justice Partnership
- Violence Against Women Partnership
- Local Employability Partnership
- Mental Health and Recovery Planning Group

Service Delivery Context

There are a number of key services and groups across the public, third and community sectors, supporting people affected by alcohol and drug harms. People affected by alcohol and drugs also need access to wider support services such as employability and housing. Working in partnership and ensuring all services are accessible, person centred and responsive to needs is central to reducing alcohol and drug harms and improving people's quality of life.

- East Renfrewshire Alcohol and Drug Recovery Service (ADRS) is part of East Renfrewshire Health and Social Care Partnership, and includes staff from social work, social care and health. The service provides a wide range of alcohol and drug treatment and recovery support to adults aged 16 and over.
- Wide range of services in the Health and Social Care Partnership who support people affected by alcohol and drugs with wider complex needs including:
 - East Renfrewshire Community Mental Health Team – supports people with alcohol and / or drug harm who have a co-occurring mental health condition
 - Social work services including Adult Support and Protection and Children and Families social work supporting families affected by alcohol and drug harms and care experienced young people
- RCA Trust provide supported accommodation flats for people affected by substance use and homelessness as well as outreach and home support for clients resident in their own tenancy.
- Turning Point Scotland – Mobile Harm Reduction Service operates in East Renfrewshire two days per months offering key supports for people who inject drugs as well as alcohol harm reduction advice
- PARTNER are a community-led recovery group offering mutual aid, peer support on a weekly basis. PARTNER is a long standing and vital part of the recovery community in Barrhead, as well as welcoming members from other parts of East Renfrewshire.
- Lived Experience Panel – open to anyone with their own or loved one's lived and / or living experience of alcohol and drugs and supported by The Advocacy Project. The Panel is a forum for sharing experiences and gathering views to shape future services.
- Teen Challenge is a Christian charity organisation supporting people on a weekly basis through a recovery hub in Barrhead.
- Eats Renfrewshire Council services including
 - Housing
 - Employability Services – WorkER
 - Education
 - Money Advice and Rights
 - Community Learning and Development

Measuring Progress

The approach to measuring the success of the strategy will be focused on a small suite of quantitative measures that are currently reported to Scottish Government, monitoring and reporting on the progress of strategic priority actions, and gathering and reporting on lived and living experience feedback. Current national measures include:

- Medication Assisted Treatment Standards – Red/Amber/Green Assessment scores, including a wide range of process, numerical and experiential data collected
- Scottish Government substance use treatment targets – alcohol and drugs
- Access to services - % people accessing alcohol and drug treatment within 3 weeks

Further information

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Data and Evidence Sources

¹ Drug Related Deaths in Scotland 2022 – Report, National Records of Scotland, published 22 August 2023

² Hospital admissions 2021-22 – Scottish Public Health Observatory (ScotPHO)

³ Alcohol and Drug Recovery Service caseload data, EMIS and Carefirst systems

⁴ Information Services, NHS Greater Glasgow and Clyde

⁵ Alcohol-specific Deaths 2022 – Report, National Records of Scotland, published 29 August 2023
2023

⁶ Report on Alcohol-Specific Deaths 2021 and 2022, NHS Greater Glasgow and Clyde, 2023

⁷ NHS Greater Glasgow and Clyde 2022/23 Adult Health and Wellbeing Survey 2022-23

⁸ Glasgow Council on Alcohol reporting data for East Renfrewshire, 2023

⁹ Scottish Index of Multiple Deprivation 2020

¹⁰ The Scottish Burden of Disease Study, Deprivation Report, Information Services Division, 2016

¹¹ Probable Suicides 2022, Report – National Records of Scotland, published 5 September

¹² Rights, Respect and Recovery

¹³ Scottish Government (2019). Understanding the Social Care Support Needs of Scotland’s Prison Population.

¹⁴ Understanding Substance Use and the Wider Support Needs of Scotland’s Prison Population, Scottish Government commissioned report, published 20 September 2022

¹⁵ Emergency Department Intoxicated Child & Adolescent Report, NHS Greater Glasgow and Clyde January 2024

¹⁶ Youth Work Statistics 2020-23, ERC Community Learning and Development

¹⁷ East Renfrewshire Schools Local Health and Wellbeing Census (S2/S4)

¹⁸ East Renfrewshire Housing Services Data, 2022-23

¹⁹ Employment, unemployment and economic inactivity in East Renfrewshire, Office for National Statistics, September 2023

²⁰ WorkER Employability Service Information, East Renfrewshire Council, 2023

²¹ National Drug-Related Deaths Database (Scotland) Report, 2022