WEST DUNBARTONSHIRE COUNCIL

Report by Sylvia Chatfield Head of Mental Health, Learning Disabilities, and Addictions

Council Meeting 27th October 2021

Subject: Avoidable Drug Deaths in West Dunbartonshire

1. Purpose

1.1 The purpose of this report is to update Council on the work that the Alcohol and Drug Partnership are undertaking to reduce drug harms and drug related mortality within West Dunbartonshire.

2. Recommendations

2.1 To note the content of the report.

3. Background

- 3.1 Drug related deaths have increased significantly during the past ten years in Scotland. National figures also show that over half of deaths are disproportionately located within areas of multiple deprivation.
- 3.2 National Records of Scotland suggest that that within the most deprived ten per cent of communities in Scotland there were 88 drug related deaths per 100,000 population in 2020. This has risen four fold since 2001.
- 3.3 The annual average drug deaths mortality rate within West Dunbartonshire has increased from 7.6 per 100,000 between 2001-2004 to 26.0 between 2016-20. During the same period the Scottish figure has increased from 6.3 per 100,000 population to 21.6 per 100,000 population.
- 3.4 The number of drug deaths within West Dunbartonshire have increased significantly since 2017. However there was a slight decrease in drug related deaths in West Dunbartonshire from 32 in 2019 to 29 in 2020. Please see Table 1 West Dunbartonshire Drug Harms 2011 to 2020.

Table T West Durbaltonshire Drug Deaths 2011 to 2020									
2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
17	19	8	19	12	13	15	20	32	29

Table 1 West Dunbartonshire Drug Deaths 2011 to 2020

3.5 West Dunbartonshire is the only ADP within the Greater Glasgow and Clyde Health Board area that has seen a decrease in drug deaths in 2020. However, numbers are small and can vary significantly between years. 3.5 Analysis conducted by the Alcohol and Drug Partnership suggest that specific communities within West Dunbartonshire are disproportionately affected by drug harms and drug deaths. These areas mainly reflect neighbourhoods with high concentrations of multiple deprivation. Areas with higher levels of drug deaths are aligned with high levels of drug harms.

4. Main Issues

4.1 The Alcohol and Drug Partnership have recently undertaken a range of measures that will result in improved governance, improved access to treatment options and tackle preventable drug deaths within the area.

4.2 National Mission

The Scottish Government launched the national mission to tackle the number of drug deaths within Scotland. In addition to allocating resources, a dedicated government minister has been appointed, similarly, a national mission outcomes framework has been developed to measure and monitor against targets, priorities, and outcomes,

4.2 Governance

The Alcohol and Drug Partnership reports to the Health and Social Care Partnership Audit and Performance Committee. Annual reports are provided to the committee.

The Alcohol and Drug Partnership has recently implemented several improvements to governance arrangements. This will provide clear emphasis on performance management, commissioning and procurement, and partnership working that focuses on service delivery.

The Alcohol and Drug Partnership will also provide specific focus on the improvement recommendations submitted by Scottish Government to COSLA earlier in 2021 which seek to tackle the national mission to tackle drug deaths within Scotland.

In addition to this, several delivery groups have been developed that will concentrate on a multi-agency approaches. These include;

- Drug Harms and Drug Deaths
- Employability
- Whole Family Approaches
- Housing First and Homelessness
- Dual Diagnosis
- Young People and Young Adults
- Lived Experience
- 4.3 <u>Needs Assessment</u>

A two part needs assessment is currently underway to effectively assess local need. This will enable the Alcohol and Drug Partnership to effectively assess, plan, and deliver alcohol and drug services. The first part has been completed which has identified service gaps. These include;

- Services for young people who require support for their problematic substance use;
- Multi agency approach to support people with multiple and complex needs;
- Family Support.

4.4 Funding Formula

During the past year the Alcohol and Drug Partnership has consistently raised the nature of the current funding formula that the Scottish Government utilise compared to where drug harms and drug deaths occur.

The Scottish Government currently use the National Resource Allocation Committee formula which takes into account population, demographics, where services are delivered in a rural setting, and to a lesser extent deprivation.

It is anticipated that the Alcohol and Drug Partnership will work with colleagues in the Scottish Government to develop an alternative funding formula based on a combination of drug harm prevalence and population.

4.5 Funding Uplift

The Alcohol and Drug Partnership recently received a funding uplift of £244K per year for the period of the current parliament. These monies are ring fenced for supporting the delivery of the national mission, adopting a whole family approach, and access to residential rehabilitation. Similarly, the Alcohol and Drug Partnership received £110K per year for assertive outreach and near fatal overdose projects within West Dunbartonshire.

4.6 Third Sector Partnership Delivery

In addition to commissioning of community based services, the Alcohol and Drug Partnership continues to support third sector partners, such as Alternatives, DACA, and Lomond and Argyll Advocacy Service to access external monies to tackle drug deaths within the area. This is a key aspect that the Alcohol and Drug Partnership recognise and will continue to support.

4.7 Multi Agency Community Based Projects

The Alcohol and Drug Partnership are taking forward a range of community based initiatives in conjunction with local and national third sector organisations. These include:

- Assertive Outreach project, targeting people in the communities most at risk of overdose.
- Arrest Referral Scheme, ensuring equivalence of support for people in the criminal justice settings.
- Mobile Treatment Room. This will also target areas where people most at risk of overdose reside or congregate.
- Near Fatal Overdose Project. This will target people who have taken a near fatal overdose and encourage them back into treatment.
- A multi-agency response has been put forward ensuring all community planning partners contribute to developing a drug harms and drug deaths action plan that will contribute locally to the national drugs mission.

4.8 Residential Rehabilitation

The Alcohol and Drug Partnership have recently procured residential rehabilitation places since the funding became available earlier in 2021. The Alcohol and Drug Partnership will continue to work with recognised providers to ensure improved access to residential rehabilitation.

4.9 MAT Standards

Medication Assisted Treatment (MAT) Standards will be rolled out within West Dunbartonshire from April 2022. These new standards underpin existing legislation and concentrate on access to treatment, and wider system change. These standards will ensure same day prescribing, informed choice, and integrated working with mental health services, access to rights based advocacy, and trauma informed care.

4.10 System Wide Rights Based Training

West Dunbartonshire Alcohol and Drug Partnership are the first area in Scotland to take forward systems wide rights based training in relation to the MAT Standards. Over 100 staff members have attended this. This approach has received recent recognition from colleagues in Public Heath Scotland.

4.11 Naloxone Provision

West Dunbartonshire ADP continue to perform well compared to other areas across the Greater Glasgow and Clyde Health Board in the distribution of naloxone. This is an area of work that the Alcohol and Drug Partnership wish to continue, to maximise access to naloxone within all public facing public sector buildings. Naloxone is a medication that reverses the effect of a opioid overdose. This is one of the many intervention that the Scottish Government and national partners are using to reduce drug deaths. At present this vital intervention is only available within services who work directly with people who have problematic drug use.

4.12 Recovery Development

The Alcohol and Drug Partnership will shortly undertake a rights based recovery community approach within the area. People with lived experience will be central to the design, development, and delivery of the model. The model will be a holistic approach address that seeks to tackle the social determinants of health. It is anticipated that this model will support the wider community planning place based approach.

5. People Implications

5.1 The funding made available to the Alcohol and Drug Partnership from the Scottish Government is limited to the period of the current parliament. This may present challenges in recruiting staff to fixed term contracts.

6. Financial and Procurement Implications

6.1 The fixed term nature of the funding provided by Scottish Government may pose a potential risk to the council. This ongoing risk will have to be assessed and managed going forward.

7. Risk Analysis

7.1 Not applicable.

8. Equalities Impact Assessment

8.1 An equalities impact assessment is not required for this paper.

9. Consultation

9.1 The Alcohol and Drug Partnership are developing a lived experienced panel. This will ensure people and communities affected by problematic are at the heart of the design, development, and delivery of services relating to problematic substance use.

10. Strategic Assessment

10.1 The reports directly link to the Council's 2017-22 Strategic Plan and the progression of all the Strategic Priorities and Outcomes.

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Person to Contact:	Barry Sheridan, ADP Strategy Officer barry.sheridan@ggc.scot.nhs.uk
Appendices:	No appendices
Background Papers:	No background papers
Wards Affected:	The report relates to all wards within West Dunbartonshire.