



North Lanarkshire Alcohol & Drug Partnership  
Impact Report April – Sept 2022  
Draft 1 – December 2022

### **Purpose**

This report sets out the progress of statutory and commissioned services for the period April – September 2022. This follows NLADP moving towards a standardised reporting process for all commissioned services at the request of the NLADP board. The report reflects a sample of the ongoing work and the impact of ADP investment for our communities.

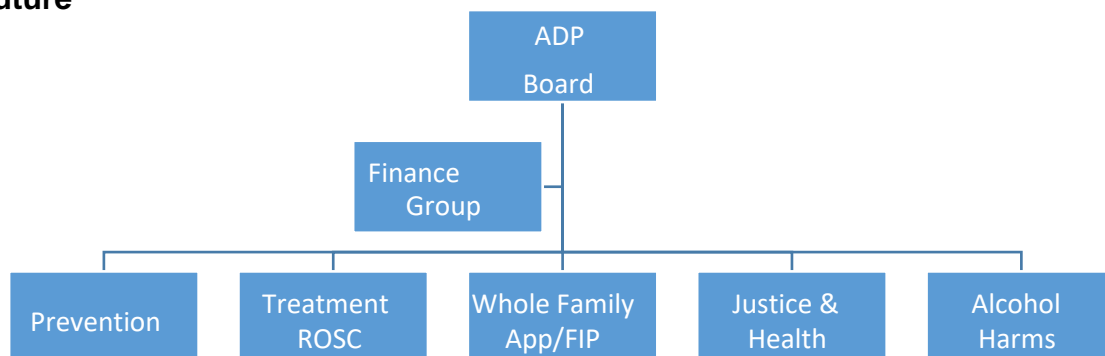
## About North Lanarkshire Alcohol and Drug Partnership (NLADP)

North Lanarkshire Alcohol and Drug Partnership (NLADP) was established in 2019 as a multi-agency strategic partnership focused on understanding and mitigating the impact of problematic alcohol and drug use in the local area.

The purpose of the ADP is to co-ordinate and lead a collective response to tackle harms and improve the lives of people who used alcohol and drugs and those around them. The ADP is made up of key agencies and stakeholders with an interest in tackling harms and improving lives. This includes the wider community and those who have lived experience (including families).

Much of our work involves bringing people together to plan and improve services whilst setting out what needs to be put in place to support change and keep people safe and well. We do this by reviewing, monitoring and evaluating the impact of investments targeted towards reducing substance-related harm and improving health and wellbeing.

## NLADP Structure



## NLADP support team continues to be active within the following networks and forums.

Child protection committee	Family Support development group
Adult protection committee	Harm Reduction - Naloxone/BBV/WAND
VAW partnership Operational Group	Residential rehab
Community Justice Partnership	Buvidal Steering Group
Family Support Task Group, Children's Services Partnership	Improving Child Services Group
MAT Standards oversight group	Drug Death Prevention Group
MAT Experiential/ MAT Numerical	Reducing Alcohol Harms Group
Licensing - RAHG	Trauma Informed Network

## ADP Overview

- **Priority area 1** - Fewer people develop problem alcohol & drug use.
- **Priority area 2** - People access and benefit from effective, integrated person-centred support to achieve their recovery.
- **Priority area 3** - Children and families affected by alcohol and drug use will be safe, healthy, included and supported.
- **Priority area 4** - Vulnerable people are diverted from the justice system wherever possible, and those in the system are fully supported.
- **Priority area 5** - An Alcohol Framework for North Lanarkshire

## ADP Support Team Key Achievements in 2022

- Funding approved & awarded – 20 projects/initiatives tackling harms from alcohol and drugs
- NLADP service directory published with all treatment and care contacts including commissioned support and statutory services
- NLADP service guides and info clip for key services launched in collaboration with Scottish Drugs Forum. These can be accessed [here](#)
- Rapid Review of services and pathways commissioned with follow up learning events. The evidence has shaped service design/commissioning priorities
- NLADP Stakeholder Day – Feb 2022 over 60 stakeholders and partners attending
- Tier 2 treatment support and Children & YP service re-tendered (Barnardos & Phoenix Futures)
- Lanarkshire Overdose Response Team (LORT) launched – DDTF funded for 1 year for NFO extended into 2023 to allow for tender processes to be initiated
- MAT standards implementation group established (pan Lanarkshire and North). Implementation plan and monthly reporting drafted and submitted by NLADP support team. Details published [here](#)
- Residential Rehab – Working groups in place establishing processes & finance arrangements. Details published [here](#)
- All ADP subgroups membership finalised with all meeting at least 4 times this year offering recommendations and actions to the ADP Board to support change/commissioning
- Alcohol Harms Prevention Group draft action plan (Lanarkshire-wide) with NL actions
- Stigma work initiated with Scottish Families with fund set aside to tackle stigma in 2023
- NLADP (monthly) bulletin launched with 6 bulletins issued this year, webspace and increase use of [social media](#) to highlight ongoing work
- VANL Substance misuse support [fund launched](#) - £115,000
- Arrest referral pathways ToC in development with Police Scotland, commissioned services and Justice colleagues
- Increased ADP capacity – new Development Officers and Clerical Support and Pan-Lanarkshire Drug Death information Officer

## Training & Key Events in 2022

Training/Event Title	Venue	Date of Course	Number Signed Up	Number of Attendees
Stakeholder Event	MS Teams	03/02/2022	81	66
Crew2000 Cocaine Training	MS Teams	24/05/2022	16	16
Crew2000 Cocaine Training	MS Teams	07/06/2022	16	16
Residential Rehab Training - Day 1	Coathill Hospital	04/08/2022	9	9
Residential Rehab Training - Day 2	Coathill Hospital	11/08/2022	9	9
Board Development Session	Atrium Business Centre	15/09/2022	45	32
This Fierce Love Event with Scottish Families	Xaverian Missionaries Conforti	25/10/2022	49	28
Gender Based Violence and Substance Use Training	MS Teams	25/11/2022	24	16
			<b>249</b>	<b>192</b>

## Budget update

YTD Spend – £1,540,854

<u>Budget Breakdown 22/23 as at 10/8/22</u>	
<b>CORE Baseline Funding within ADP North</b>	<b>1,298,159</b>
<b>21/22 Carry Forward budgets</b>	
DDTF	98,402
National Mission	317,148
Near Fatal OD	190,289
Lived and living	33,982
Out Reach	130,289
Res Rehab	317,148
Whole Fam Approach	222,004
MAT Standards	375,311
	<b>2,982,732</b>
<b>Total Budget</b>	<b>4,124,343</b>
Tracker check	4,184,343
	- 60,000
IJB Reserve	1,141,611

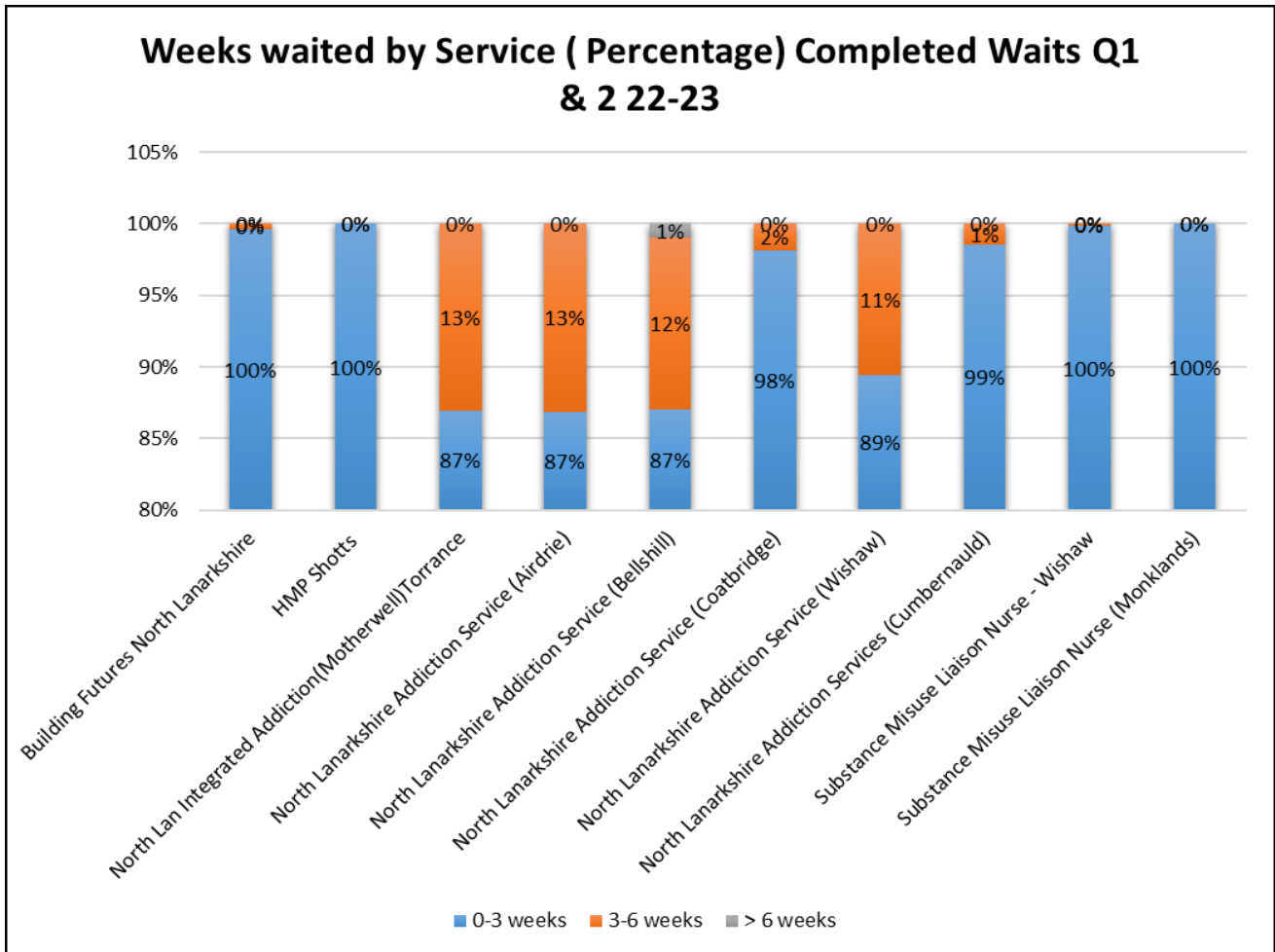
<u>21/22 Budget info</u>	
ADP Baseline for full of Lanarkshire	2,905,079
Local Authority	718,661

<u>22/23 Funding Letter</u>	
MAT Standards	570,866
Task Force	188,383
Additional National pfg uplift	1,081,200
Additional National Mission	699,600
Res Rehab	318,000
WFA	222,600
Lived and Living	31,800
	<b>3,112,449</b>

1,684,573  
1,141,611  
2,826,184

## Statutory Treatment Services

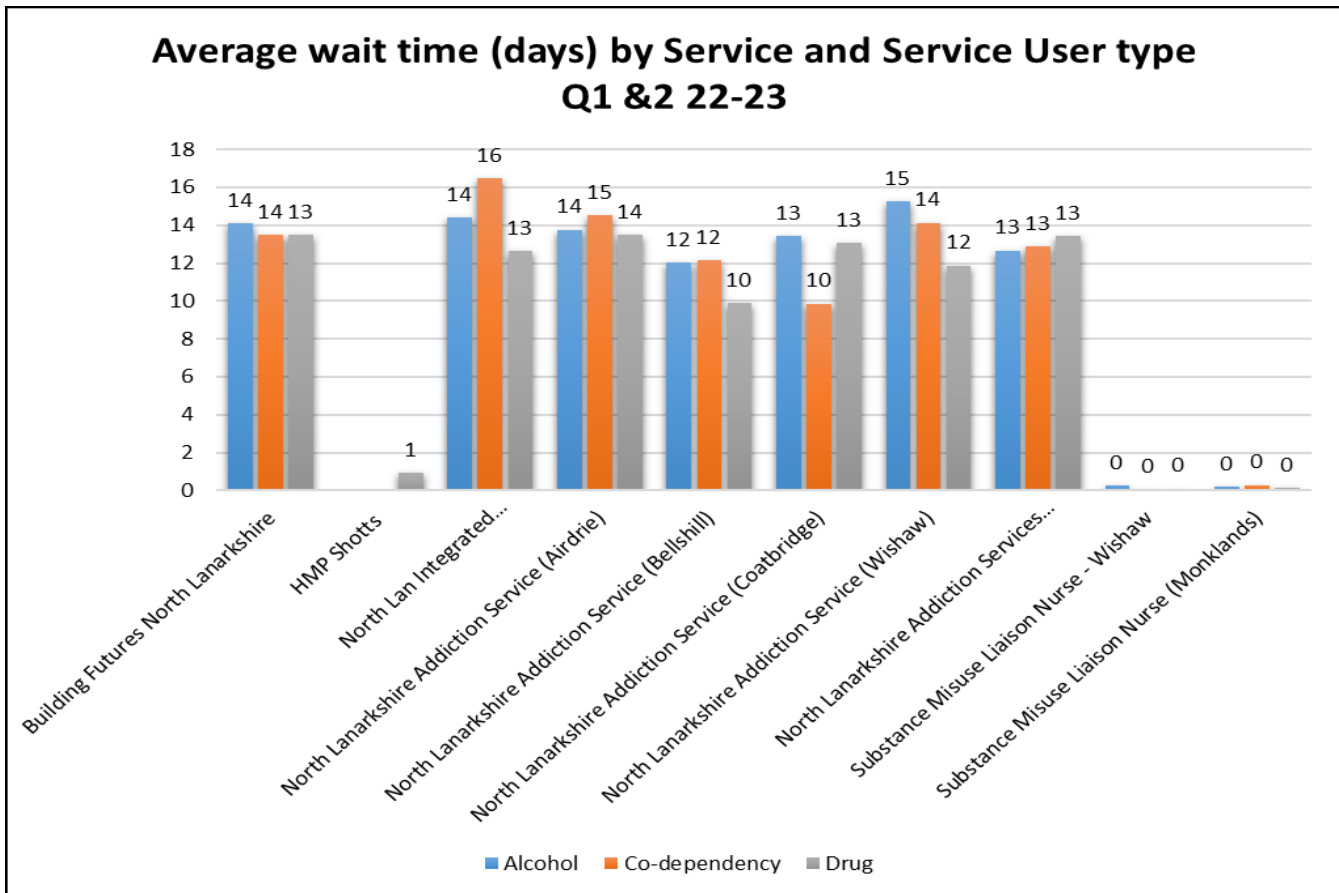
### Addiction Recovery Team - Waiting times



This chart shows the percentage of completed waits (referral to treatment) by service for referrals received in Q1 and 2 2022-23 by service split into the weeks waited categories 0-3 weeks, 3-6 weeks and >6 weeks.

**This data is significant in our understanding of the work that is required to support same day access to treatment as part of the MAT standards.**

This is due to be in place by April 2023.

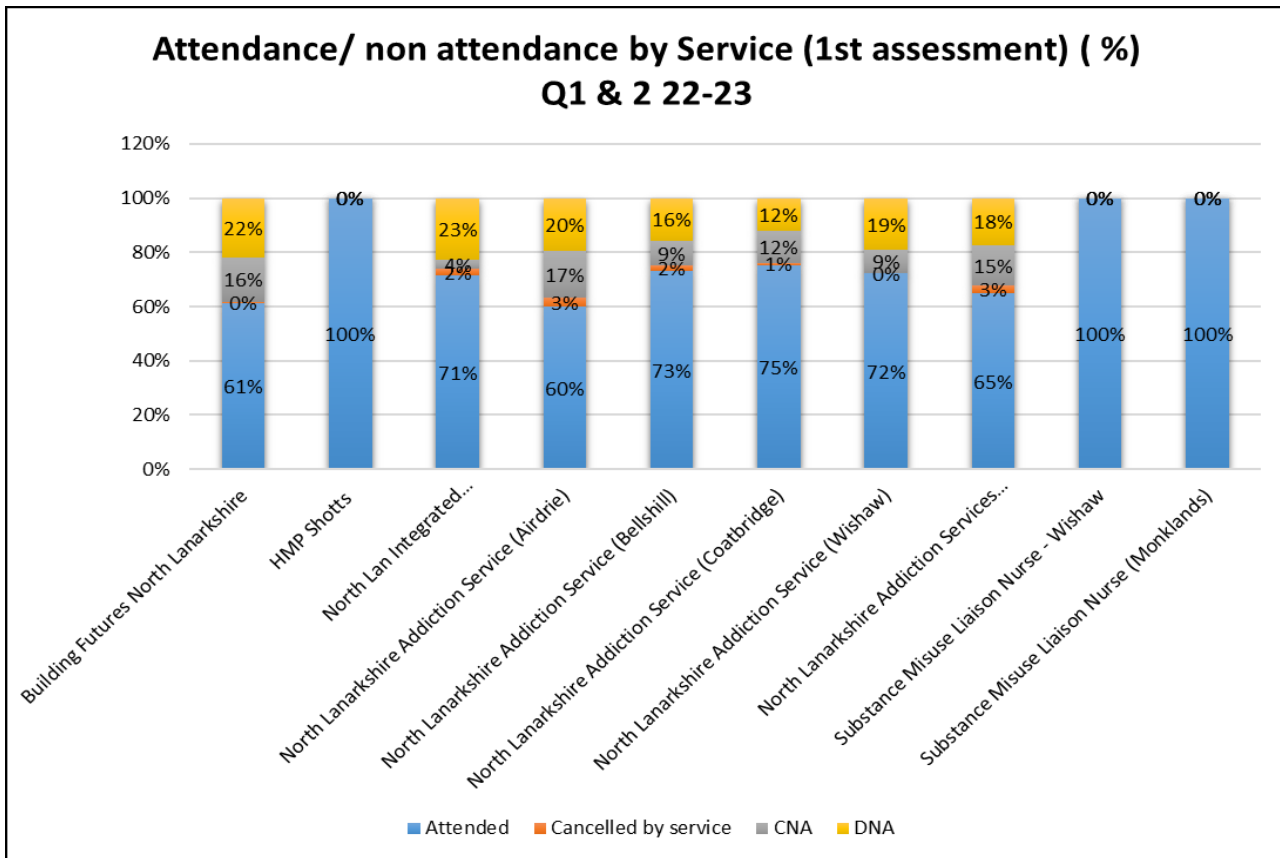


This chart shows the average wait in days by service and Service User type.

Building from the information from the previous 2 charts you can see that the SMLN have an almost 100% wait time within 3 weeks (there was one wait out with 3 weeks in the over 1000 completed waits recorded) and that these waits are normally 0 days i.e. the service sees them on the same day as referral. This, in conjunction with the percentage volume of completed waits has a significant effect on the overall average waiting time for treatment within North Lanarkshire.

**The average days waited across North Lanarkshire across all services are:**

- **Alcohol 6 days**
- **Co-dependency 9 days**
- **Drug 8 days**
- **Overall 7 days**



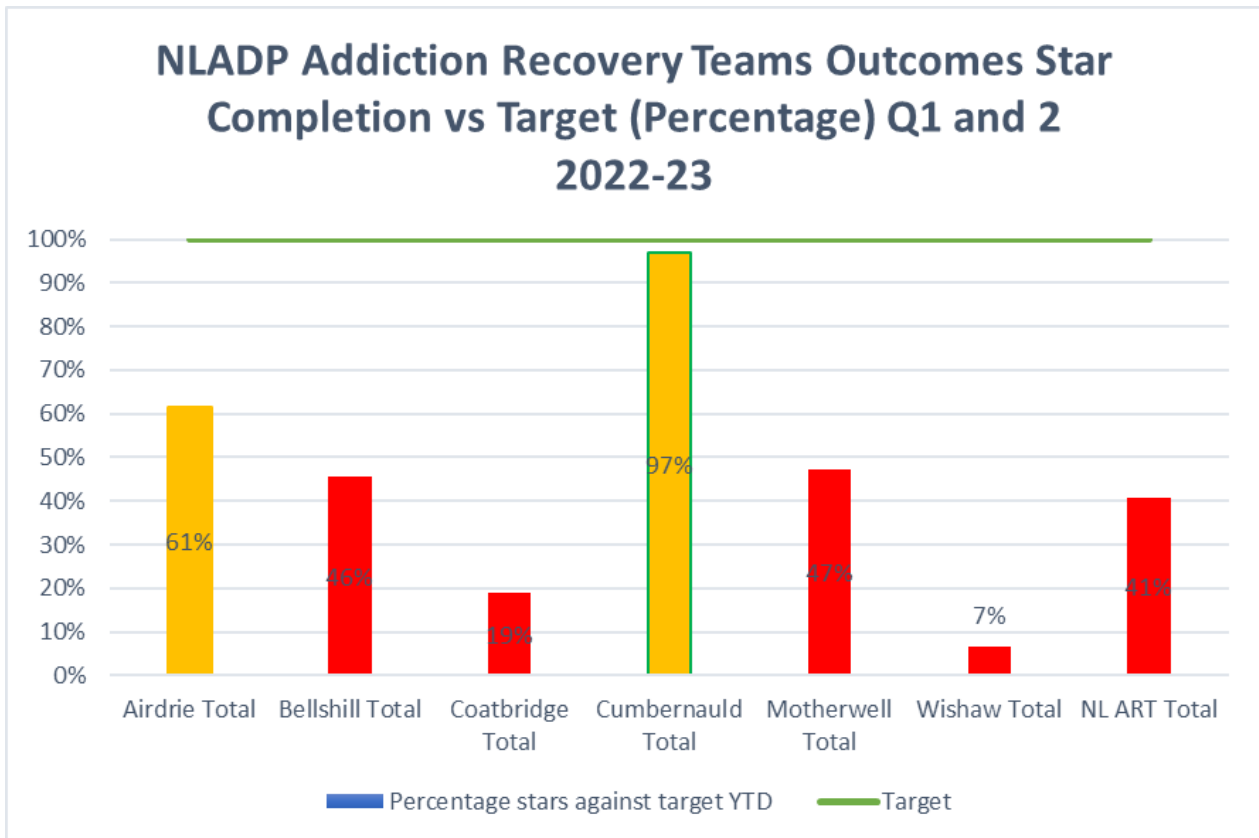
This chart shows the percentage of attendance at the 1<sup>st</sup> offer of assessment by Service for referrals received in Q1 and 2 2022-23.

The overall percentage attendance across North Lanarkshire (at the 1<sup>st</sup> offer of assessment) is 84% however as previously commented please be aware of the effect of the contribution of SMLN Services on this overall figure.

This data with the waiting times data will be used to target assertive outreach efforts. This has been an ongoing and consisted gap what was identifies by scoping work this year and feedback from those with lived and living experience.

**NLADP is working with procurement colleagues to tender a combined crisis support, assertive outreach and overdose response service that will be in place by April 2023. This is in support of the MAT standards and required to make progress towards the treatment targets set by the Scottish Government.**

**Whilst this presents an opportunity to keep more people safe and well in preventing drug related deaths, significant challenges still remain around delivery capacity across localities to meet any increase demand.**

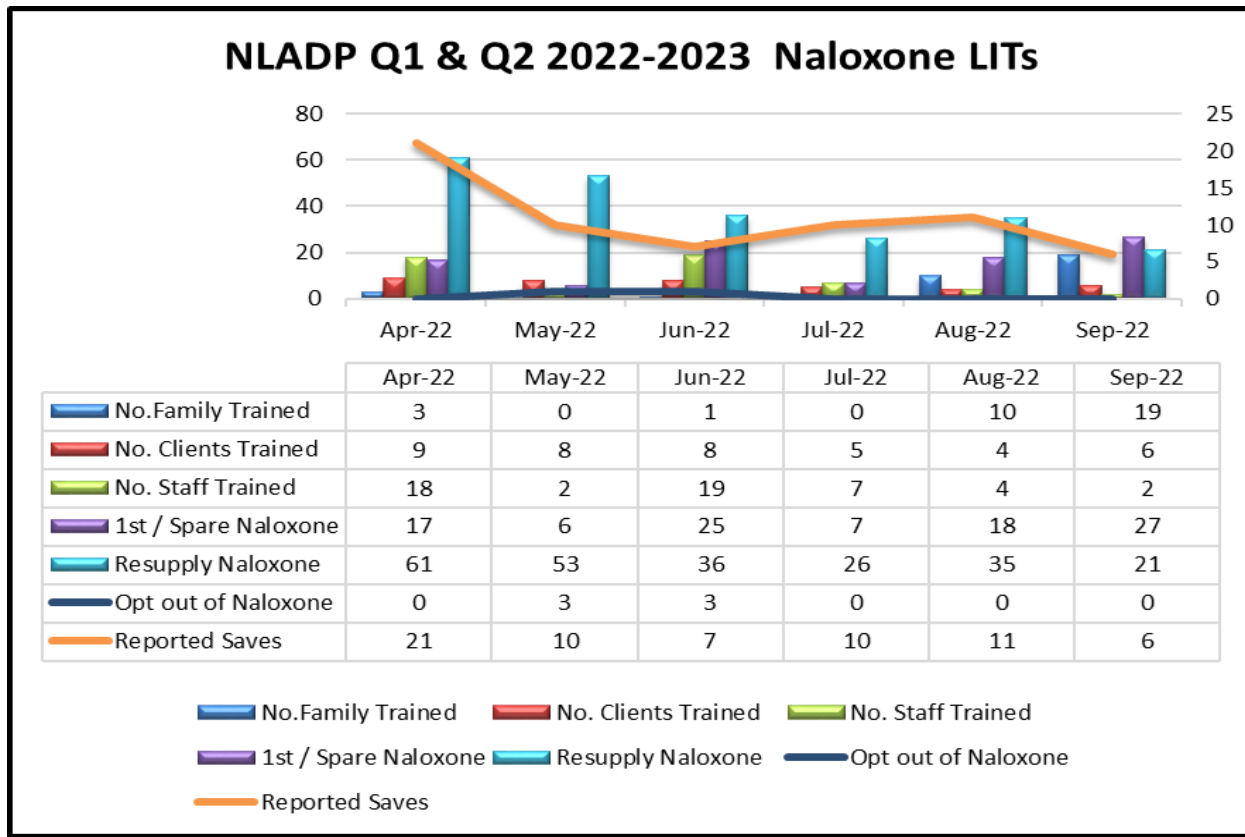


Outcomes Star is a tool utilised by the ART Service. “Outcomes Stars are **evidence-based tools designed to support positive change and greater wellbeing**, with scales presented in a star shape and measured on a clearly defined 'Journey of Change'. The Outcomes Star is completed as part of conversations between individuals and support practitioners such as key workers” (<https://whatworkswellbeing.org/blog/outcomes-stars-a-tool-for-measuring-wellbeing>).

**More work is required to understand why there is such disparity across NL localities in relation to the frequency and consistency of outcome stars carried out relative to the number of people engaged in treatment.**

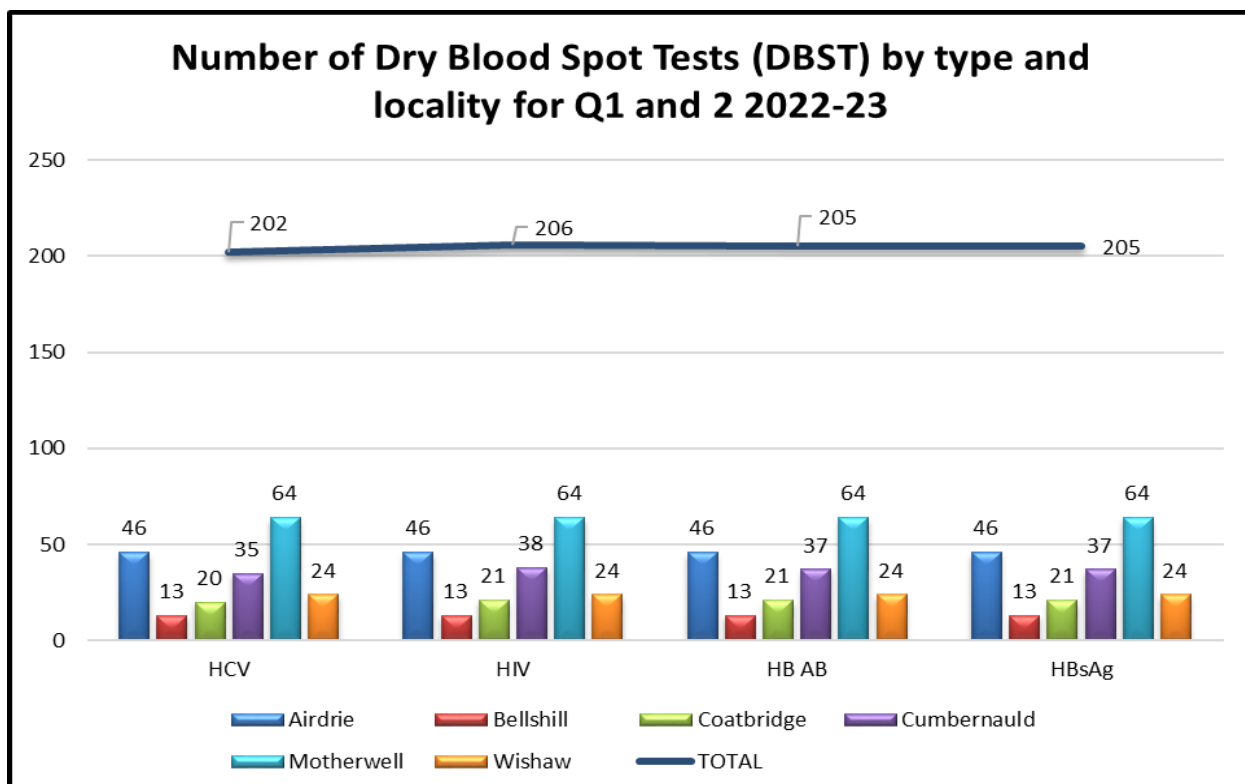


### Harm reduction Team – Naloxone Distribution

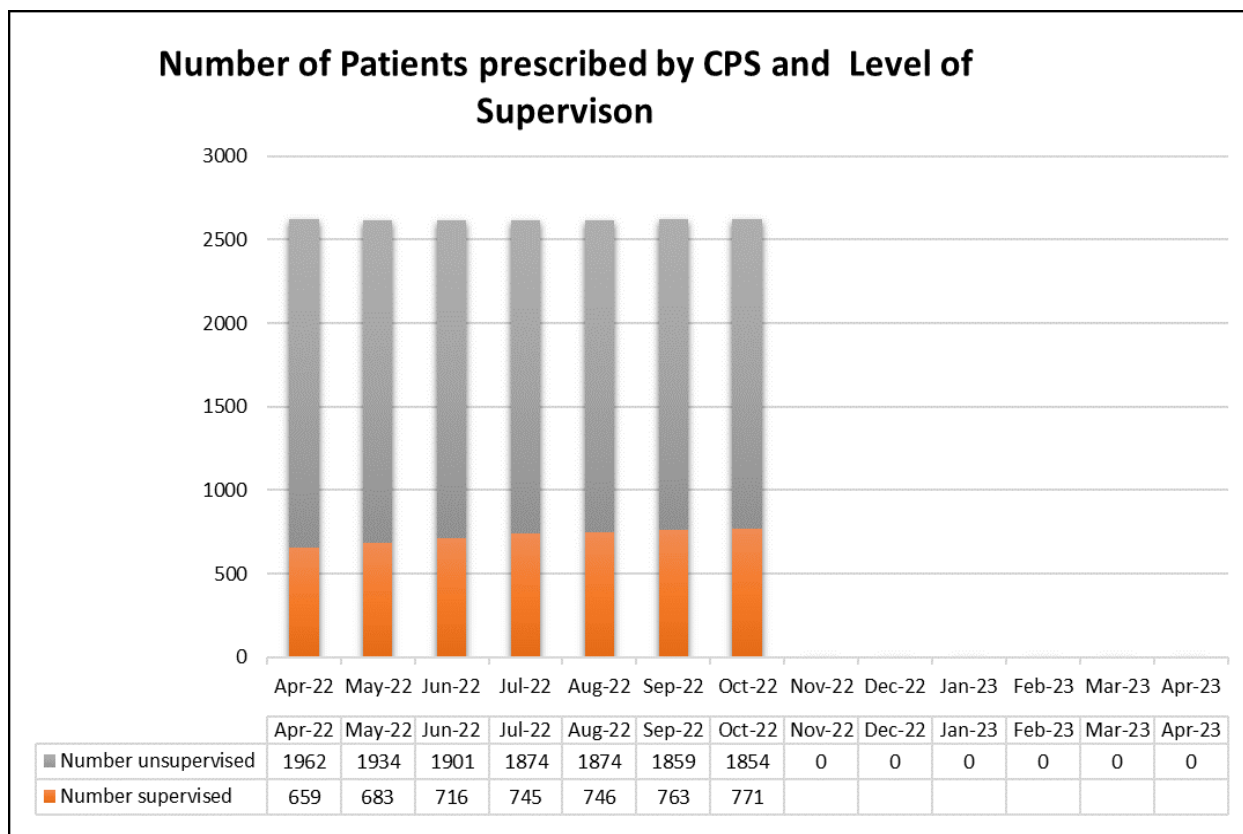
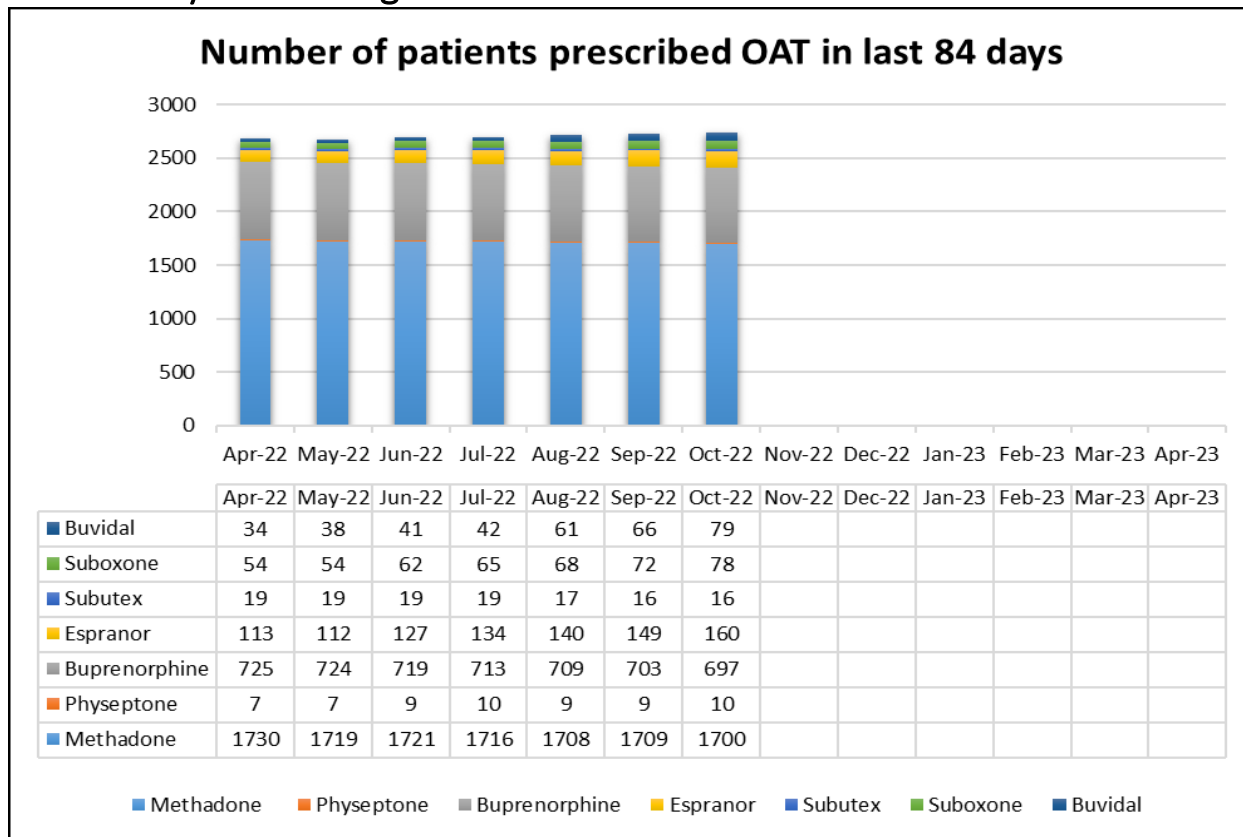


All data items with the exception of reported saves are plotted against the axis on the right. Reported saves are plotted against the axis on the left.

### Dry Blood Spot Testing (DBST)



## Community Prescribing data



## Addiction Psychology Service

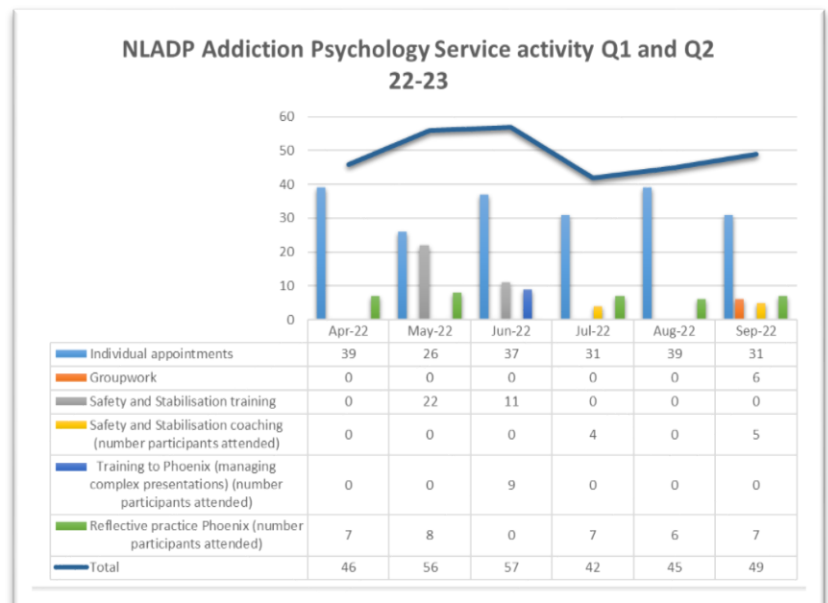


Addiction Psychology Service addresses the psychological needs of adults with addiction and mental health difficulties living in Lanarkshire. The service offers individualised psychological assessment, formulation, and intervention. Clinicians are skilled in a number of evidence-based psychological therapies (e.g., CBT, CFT, EMDR, Schema Therapy).

Addiction Psychology Service psychologists also provide consultation and guidance to other health professionals working within addictions and to professionals working in other areas who encounter addiction issues with individual patients.

### Highlights

- Addiction Psychology Services (APS) have delivered 3 Days NHS Education for Scotland Safety and Stabilisation training for 16 staff members with 3 follow up coaching sessions
- In addition, APS have also provided 1 Day training on managing complex presentations followed by 6 Reflective Practice sessions to 9 staff within Phoenix Futures
- There has also been direct clinical work undertaken. An 8-week joint emotional resource group work programme has commenced in partnership with North Lanarkshire Recovery Community for 10 community members and 2 staff, promoting access to psychological interventions



### Challenges

- APS have faced challenges with staffing as the 0.9wte 8c has left the service and 0.5wte 8b also handed in their resignation, and with the length of time required for recruitment to vacancies
- Staffing appears to be a shared challenge with statutory addiction services, which has been reflected in the follow up coaching sessions from the NES Safety and Stabilisation training. Many staff have felt they have not been able to commit the time to attend given the many other demands they have within their role thus impacting on attendance and overall roll out of the training

### **Emerging Trends/Opportunities**

- As part of the MAT standards, it will be helpful to look at how matched care is delivered across North Lanarkshire, and a clear plan of how APS both fits into a person's care journey, and also provides support for training to support the work of other services

### **Risks**

- Risk of gap in service due to recruitment. Using existing staffing to try to maintain relationships and continuity as far as possible

## Barnardos Axis

Provides support, advocacy and care coordination for young people impacted by their own or someone else's substance use. The service

offers support to young people aged 11 – 21 (26 if care experienced), and their families. Working within a wider Recovery Orientated System of Care, the service will provide needs led interventions to support recovery and help individual develop coping strategies which improve health and wellbeing.



## Highlights

- Lots of engagements (1694 – calls, texts, social media)
- 1090 sessions of 1-1 support provided, 382 active caseloads
- 47 active caseloads for family support service
- 64 3<sup>rd</sup> party referrals
- ABI training delivered
- ABIs delivered – 27 screenings, 18 ABIs (followed up by a combination of techniques including; MY RAP, in house harm reduction activities, Alcohol workshops, Focused emotional health and wellbeing, Referral to health, Referral to ART)
- Over the Easter and Summer holidays, Barnardos developed and ran their BWILD programme which enables young people to see the connection between emotional wellbeing and the outdoors. Workshops have also been delivered to parents and carers Wrap is an approach used with CYP and families to improve health and wellbeing and enable individuals to have autonomy over their own wellbeing. Over the past 6 months, Barnardos have ran 2 groups with both parents and YP
- The service has engaged more education staff, resulting in an increase in referrals from education
- Of the young people involved in offending when referred to the service 63% have reduced involvement with police, whilst 24% have had no police involvement in the last 3 months

## Challenges

- Some difficulties experienced are in relation to the complexity of need, resulting in CYP requiring support for longer periods of time, impacting on staff capacity
- The service has received more referrals for younger age groups using drugs and alcohol. At the moment the service age range is 11 – 21, and whilst there is the temptation to support those at a younger age, there is an issue around capacity in terms of meeting the age range outlined within our SLA
- Capacity – since the pandemic, the level of need of those accessing the service is more intense resulting in support being required for longer than anticipated. While it is in line with RRR, and support should be tailored and as long as the individual requires, there is a difficulty in is that targets set may not be reached. Ways to potentially mitigate this include smaller support groups and supporting young people who have previously used the service to become peer mentors

### **Emerging Trends/ Opportunities**

- To establish a steering group meeting to support the SLA
- We are also conscious that we haven't formally signed off on our SLA

### **Risks**

- No information submitted

## **Drug Treatment & Testing Orders (DTTO)** **North Lanarkshire Criminal Justice Social Work**



A partnership between justice services and addiction recovery teams. Drug Treatment and Testing Orders (DTTOs) are one of a number of options available to the court when sentencing an individual for offending. DTTOs are aimed at people who have a significant drug misuse issue, and whose offending is linked to their drug misuse. Individuals placed on a DTTO are expected to have a high level of contact with their social worker and addictions worker and regular contact with the sheriff who placed them on the Order.

### **Highlights**

- Supported 50 individuals in the reported time frame
- Offering post order support to had completed their court order
- Offering support to people in CPO in addition to the support they receive from their social worker – people who are at risk of breaching order & are not engaging with addiction services 12-week intense support
- Justice through care statutory and now voluntary offered
- Only 1 person of the 30 individuals supported was subjected to a breach report
- Going above and beyond with individuals, supporting them with housing, DWP, Finance
- CJSW have been linking with the families to offer support and advice
- Option appraisal to evaluate the service delivery, consider alternatives that would improve the service

### **Challenges**

- Challenging Behaviour Service based in Blantyre and only runs on a Thursday evening. Difficult to support people who are engaged with this service with healthcare
- Individuals linked are not receiving a robust addiction response for example one individual fell out of treatment, and was unable to communicate with the addiction link with CBS for over two weeks
- Travel is widespread and it can be difficult for them to respond quickly in a crisis.
- CJSW not being collated with addiction services and this causes challenges in maintaining communication with professionals in localities

### **Emerging Trends/ Opportunities**

- The more support/outreach available the more likely the person to successfully complete. Using the Assertive Outreach Model has been extremely beneficial to the SW establishing and maintaining relationships with their service users

### **Risks**

- Risk of losing staff due to job insecurities of short term funding and in turn being unable to recruit new staff for the same reason



## Harm Reduction Team

Support for people using substances to remain as well as possible with a focus on Blood Borne Virus prevention, concerns with injecting and overdose prevention/naloxone provision.



## Highlights

- Across the last year the team has actively followed up 155 in North Lanarkshire of the 404 people highlighted by the SAS report up to the start of November
- 59 people were repeat referral's (some referred multiple times) (1x14, 1x5,1x4)
- 104 Near fatal overdoses were referred to the Addiction Recovery Team

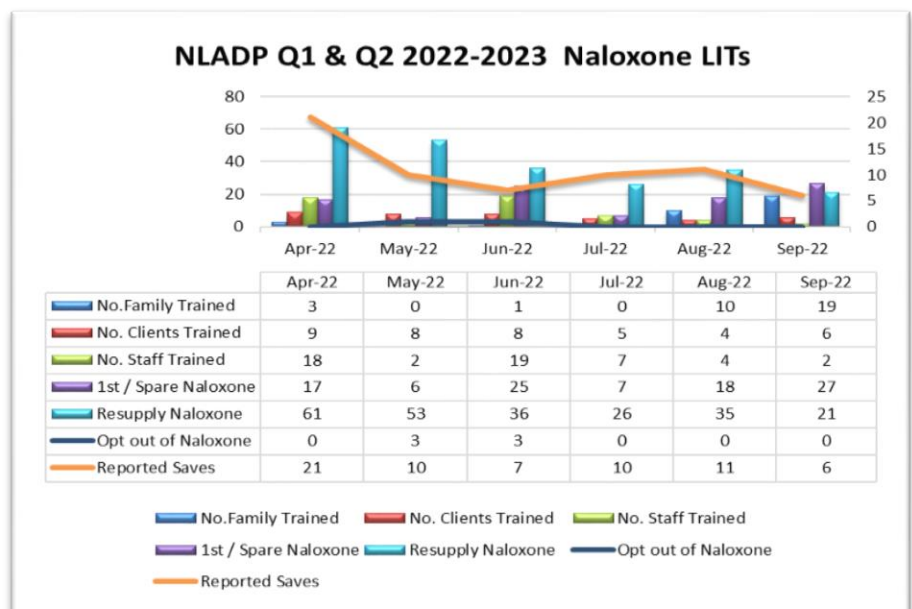
## Challenges

- Access to electronic systems to access all available intelligence to improve risk assessment is an ongoing issue

## Emerging Trends/ Opportunities

- Some clients not identified electronically as not on NHS systems. Applications made to access DAISy and SWIS systems to ensure all people are covered. This will also improve the ability to highlight NFOD with mental health colleagues.

*All data items with the exception of reported saves are plotted against the axis on the left.  
Reported saves are plotted against the axis on the right.*



## Risks

- The impact of a high number of SAS referrals on a day there is not a NFOD team member working can be large or if there are a number of HRT follow ups



## IPS SAMH

IPS is an evidence based model to support people to achieve mainstream employment in competitive jobs; part time, full time or in some cases permitted working hours. This is the most well-established method of 'place then train' in mental health/addiction services. The IPS model is a well-recognised approach of supported employment. Evidence suggests that IPS has better employment outcomes than other vocational methods.

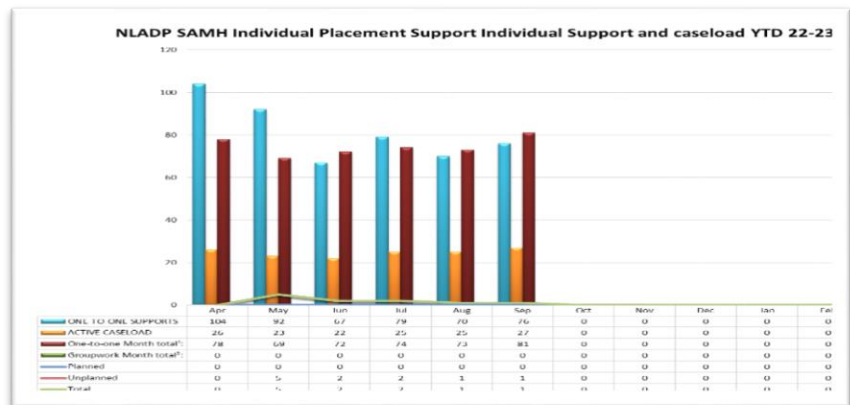


## Highlights

- During this period from April to September, the service has supported 37 individuals of which 10 (27%) have secured mainstream employment

## Challenges

- Unfortunately, the service lost a member of staff at the start of May this year, which took longer than expected to replace and therefore we relied on SAMH internal team resources to ensure that quality of service was maintained
- The key challenge has been recruiting a replacement member of staff



## Emerging Trends/ Opportunities

- The issue of short term funding has impacted on the ability to recruit and retain staff due to job insecurities

## Risks

- No information submitted

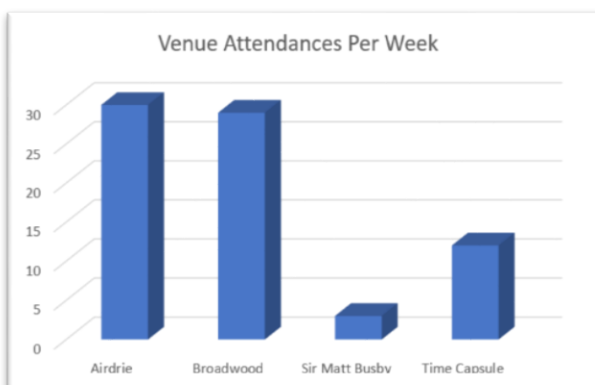
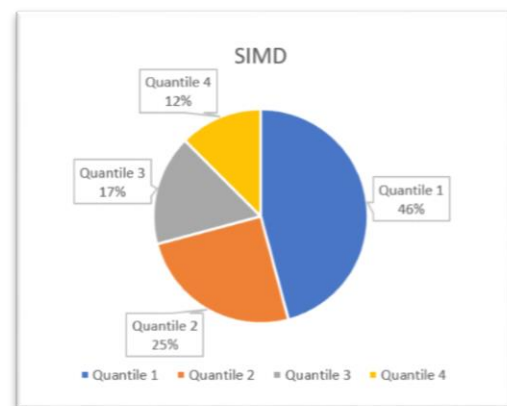
## Kickstart – North Lanarkshire Council



The Kickstart programme is designed to support individuals aged 18+ experiencing problems with substance use or who are in recovery. Free weekly structured football sessions are provided, and aim to improve confidence, self-esteem, communication and social skills.

### Highlights

- The programme currently averages around 70 participants per week across 4 sites (Airdrie, Time Capsule, Broadwood and Sir Matt Busby) with 70% of attendees from SIMD 1 or 2 areas
- The programme has reported recent successes with some attendees moving on to gain employment and also some attendees reducing their alcohol/drug use, reporting improved mental health and wellbeing through their involvement with football training and the different opportunities available to them through the programme each week
- The team have also recently linked up with SAMH Individual Placement Support to provide tailored employability support for attendees



### Challenges

- Most venues are well attended but as can be seen for the chart above, there have been challenges faced in getting people linked in to attend at Sir Matt Busby. The team have created a flyer to further promote to the programme and help encourage attendance at this venue
- Kickstart are also keen to get females linked in to the programme and are looking at how best to do this

### Emerging Trends/ Opportunities

- The Kickstart team have a new development officer in post who is working to implement participant profiles and action plans for attendees, to help aid recovery and find positive destinations for attendees. Through wellbeing questionnaires and ongoing evaluations being conducted, there is an opportunity for the ADP support team to help identify and link attendees into further support mechanisms that may be needed to help support engagement and recovery
- The team are looking to begin attending the service check in meetings again, and have been recently added to the NLADP bulletin distribution list

- Connections have also been made between Kickstart and NHS Health Improvement team and they are scoping opportunities for possible health related inputs to take place after their football training sessions

## **Risks**

- No information submitted

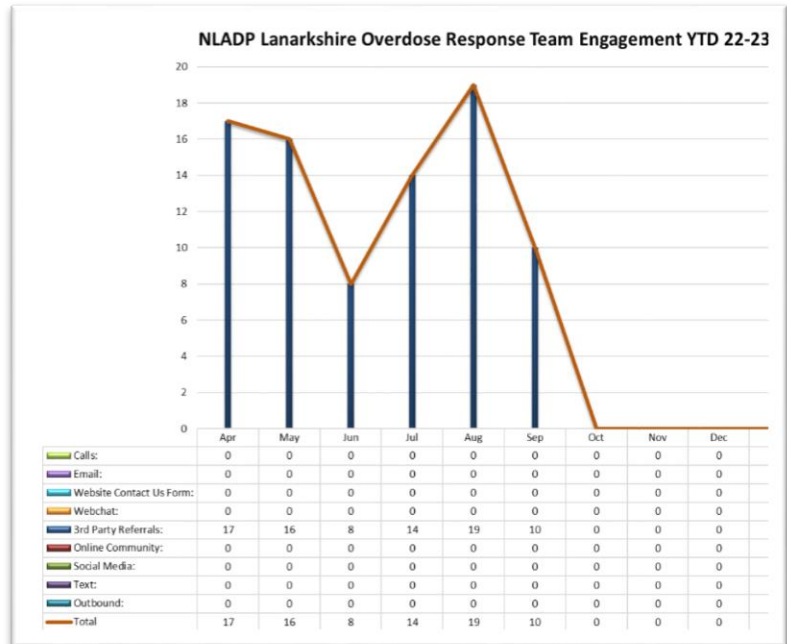
## Lanarkshire Overdose Response Team

A rapid response to near-fatal overdose providing a short, focused period of support to each person and assertively engaging them with mainstream alcohol and other drug services and services and resources within the community. The team will respond within a 24/48 period after NFO and provide short term interventions, generally no more than 3 or 4.



### Highlights

- The Pan Lanarkshire LORT service responded to 85 Near Fatal Overdoses over the last 6 months, 40 of which were within North Lanarkshire
- LORT have established referral pathways allowing a quicker and timelier process of support being provided to individuals, and have directed 32 of the 85 individuals to alternative long-term services
- The team continue to distribute Naloxone and IEP where possible. The team have trained 5 families in the use of Naloxone and supplied kits and have also signposted all families, when possible, to a number of community resources to be able to access ongoing support



### Challenges

- Staff recruitment, and the short term nature of the work. Also consent and data sharing has been another ongoing issue affecting communication, particularly between statutory and non-statutory bodies. An agreement has now been established which will hopefully help alleviate this problem in the future

### Emerging Trends/ Opportunities

- In terms of drug use, case studies reported illustrate a continued trend of cocaine injecting and high levels of use of street benzos
- Diazepam was involved in double the number of near fatal overdoses than the next most commonly reported substance. The majority of individuals referred to LORT after experiencing a near fatal overdose were poly drug users who often did not see a connection between mixing illicit drugs with prescribed medication being under the impression that “if its prescribed its safe” which is a worrying trend demonstrating the importance of harm reduction techniques

- Both cocaine injecting and street benzo use provide opportunities for test of change to take place. Working with individuals to reduce their street benzo use through the provision of safety and stabilisation beds to detox individuals and explore possible prescribing alternatives to reduce harms. Similarly, exploring MAT alternatives for cocaine injecting
- The setting up of a monthly steering group with partners and stakeholders to discuss barriers and facilitators of delivering an effective service would be helpful
- More funding and an extended contract to attract and retain qualified staff to enable high quality service provision. Management discuss funding with staff on a monthly basis and try to assure them there will be a plan put in place to relieve any pressures they may be experiencing

## **Risks**

- North Lanarkshire appears to have lower numbers than may have expected (particularly in areas such as Coatbridge and Airdrie) this may be due to a number of alternative services within these areas. When referrals come in, some work may need to be done to ensure that locality reporting is correctly to mitigate any errors in reporting
- Limited access to rehab services in North Lanarkshire was reported. An alternative is available in the South through the CORNFO service but there is not an equivalent in North Lanarkshire as of yet
- Mental health issues – the team are coming across more and more complex cases and it could be useful to source training for staff to help when responding to individuals
- Addiction workers – there have been reports that some addiction workers are struggling to engage with the individuals in their care; home working, covid protocols, and massive caseloads and what they class as non-engagement have all been discussed in terms of impacting engagement with addiction services. There also appears to be a distrust it seems between some individuals and their addictions worker leading to individuals not disclosing the full extent of drug use, mental health issues and changes in circumstances

## **NLC Advocacy – Older People**

Equals Advocacy Ltd currently has funding for a part time post (17.5 hrs) to provide advocacy to adults 65 + who reside in North Lanarkshire and have an addiction to alcohol or drugs



### **Highlights**

- During the period April to September 2022 we have provided one to one advocacy support to 29 advocacy partners
- 19 were aged 65 to 70 which had the highest cases in our age range
- A higher ratio of males (18) to females (11)

### **Challenges**

- Last year Equals Advocacy has supported 34 people in a year.
- Equals Advocacy is experiencing more complex cases as we move out of COVID and as an impact of the cost of living crisis

### **Emerging Trends/ Opportunities**

- Caseloads in Coatbridge are significantly higher than in other areas of the 6 localities
- It is worth noting in the first 6 months of this year we have supported 29 people
- A significant number of cases remain open for a long period of time on average 10 months with the highest at 37 months

### **Risks**

- The current service is delivered by one-part time worker (17.5 hrs per week) The case load is high and continues to increase. Ideally we require a Development Worker and an additional 2 advocacy workers to cope with the growing demand for our service

## NLC – Creative Faces



North Lanarkshire Council in partnership with North Lanarkshire ADP fund Barnardos to provide groups for young people that are a safe social space to allow for reduction in potential harm of social isolation and avoidance to self-medicating actions through substance misuse. Within the group members, there exists a common theme of vulnerable young adults who have experienced substance misuse within their own lives and/or that of family members resulting in homelessness and requirement for housing support.

## Highlights

- Since the formation of the group we have been to multiple outings and events (12) such as below with an average of 5 young people in attendance at each group
- Weekly walking groups (Strathclyde Park, Ruins, Chatelherault, Drumpellier, woodland walks and more)
- Stirling Castle
- Summerlee Heritage Centre
- Kelvingrove Art Galleries
- The Rage Rooms
- Bowling
- Articulate organised via The Promise team for Article 12
- The Science Centre
- In addition to this, there are arrangements for a 6week course to ReelTime music to be held within Motherwell
- We have a consistent group that report to look forward to and rely on the groups as there only source of socialising. Adding further to that, they had time with our very own director Martin Crewe with a plead to understand the impact of the pandemic and the closure of the groups within Barnardos. The social isolation was devastating for most and found a dip in mood and an increase on undesired coping strategies. Alcohol and recreation drug use appeared to be a main crutch in facilitating this void. As such, these group members since the groups have picked up again have been able to re-establish old friendships and create new ones catered for through the group events

## Challenges

- Trying to encourage young people to socialise again as their level of anxieties is very high. We have overcome this through persistence and quality communication and support
- It took a gradual introduction to the idea of group work and what it would entail and it was decided to give the ownership of the direction of events to the group members, thus forming a group work forum. The idea of this was to invite previous YP who attended the groups to advise and influence some ideas to explore. Following these meets, it was established that regular attendance and opportunities to get over the front door of their homes was imperative to maintain friendships and that were to be established



## Emerging Trends/ Opportunities

- Creative Faces has a consistent group of attendees that report to looking forward to and rely on the groups as their only source of socialising. Adding further to that, they had time with the Barnardos director Martin Crewe with a plea to understand the impact of the pandemic and the closure of the groups within Barnardos. The social isolation was devastating for most and they found a dip in mood and an increase in undesired coping strategies. Alcohol and recreational drug use appeared to be a main crutch in facilitating this void. As such, these group members since the groups have picked up again have been able to re-establish old friendships and create new ones catered for through the group events

## Risks

- Creative Faces worker started on 9 June 2022, they had no-one in post before that time in 2022 due to uncertainties with funding. Year to year funding has made it difficult to recruit and maintain staff due to job uncertainty



## NLC Equalsay Advocacy



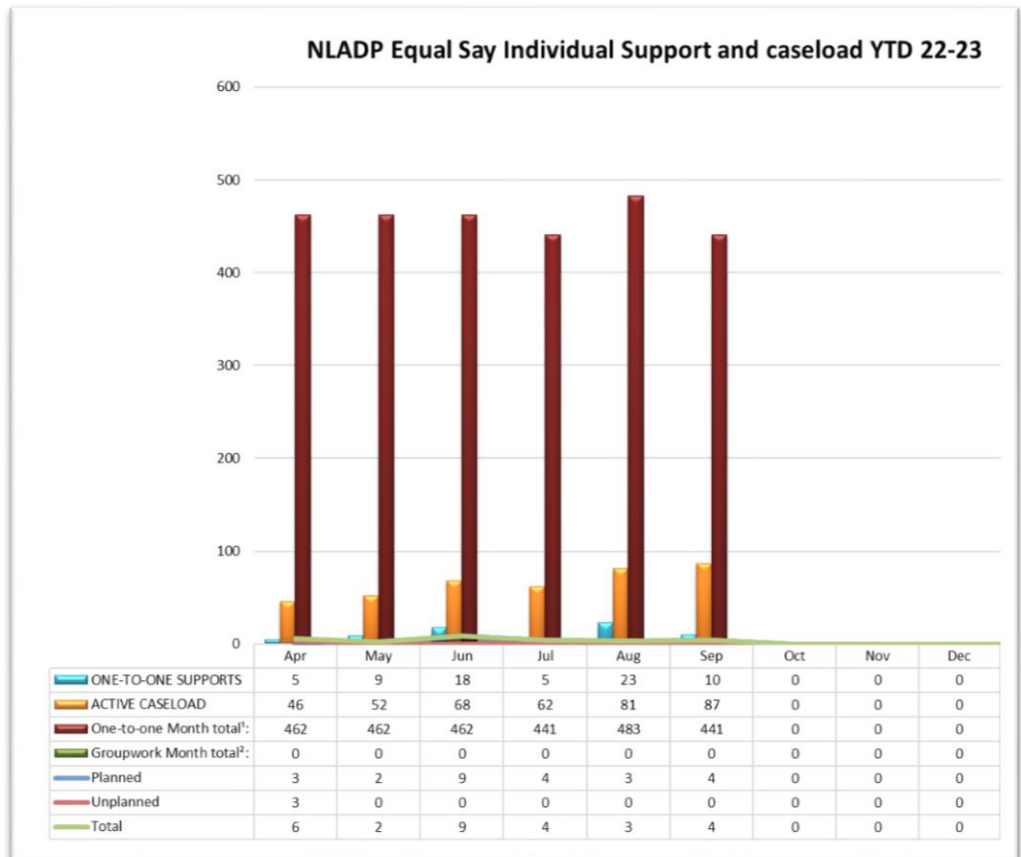
All 6 localities - independent advocacy to adults aged 18 to 64 who live in North Lanarkshire and have a disability, long term condition or addiction. Advocacy is provided by a team of caseworkers on a 1:1 basis and is issue based.

### Highlights

- Caseloads vary between 60 to 90 people at any one time
- Two of the most common themes are Housing and Child Protection

### Challenges

- We continue to receive a high number of referrals but also to be proactive in promoting the service via third sector partners, ART teams, the Lanarkshire



Overdose Response Team and the North Lanarkshire Recovery Community

### Emerging Trends/ Opportunities

- We are starting to see greater numbers of people who want our assistance to go into recovery
- For Child Protection, this often involves preparation and accompanying parents to Children's Hearings and putting across their point of view. It is not our mission to actively work with children and families rather more to be directed by the needs of the adult with addictions issues and work to their agenda

### Risks

- No adverse risk factors have been identified this reporting period

## NLC Family Plus

North Lanarkshire Council Housing work in partnership with Barnardos to refer families who present to them as homeless and are affected by domestic abuse and substance use. Barnardos offer a Family Plus worker who works with the whole family for as long as they require the support.



## Highlights

18 children in the 10 families we have supported have had full Whole Family Approach integrated support.

- Support provided to the families included:
- Providing coaching to parents
- Enabling families and children to recognise their strengths and resources
- Improving safety
- Providing family support to improve the confidence and support networks of the family
- Prevent homelessness/mitigate the impact of homelessness and trauma on children:
- Improving educational attainment:
- Improving wellbeing
- Advocating the best interests of the child
- Financial support
- Referrals made to other organisations

## Challenges

- Currently all referrals need to come via housing, this has created a barrier for some families who have attempted to self-refer and then not come back through referral from Housing as the family did not want to go there for fear reasons, we would like to change the referral process to ensure there are no barriers
- There have been many changes of housing staff and they may not have been informed about Family Plus and therefore have not referred families who would meet our criteria. We are working on a re-launch to improve this situation too

## Emerging Trends/ Opportunities

- Issues with short term funding have resulted in a staff member moving on to a longer term contracted post. There were challenges in recruiting another worker on a short term contract to continue working with the families and providing this essential support

## Risks

- No information submitted

## **NLC Lifeskills Coach – Positive Destinations**



North Lanarkshire Housing and Social work in conjunction with Barnardos provide training and reception flats, a Lifeskills Coach that works with young people who are in the process of moving on from the care of the local authority or a supported carer placement to independent living.

### **Highlights**

- From April to the end of September, 6 young people accessed the reception flats and 6 young people have been linked in with the training flat. Young people's quotes submitted, included within case studies

### **Challenges**

- Our challenges have been around pushing for our re-launch of our service within housing and social work and working in partnership for this to take place by highlighting its' crucial importance to the overall well-being of CEYP in North Lanarkshire. We are part of the working group to set up a multi-agency event early next year
- Another challenge is around starting to plan ahead for the other 2 reception flats we require and negotiating with Housing regarding this to enable us to gain the safest, appropriate accommodation
- The short-term funding is causing ongoing instability as our funding ends on 31 March 2023. We are hopeful that we can have an extension

### **Emerging Trends/Opportunities**

- No information submitted

### **Risks**

- No information submitted

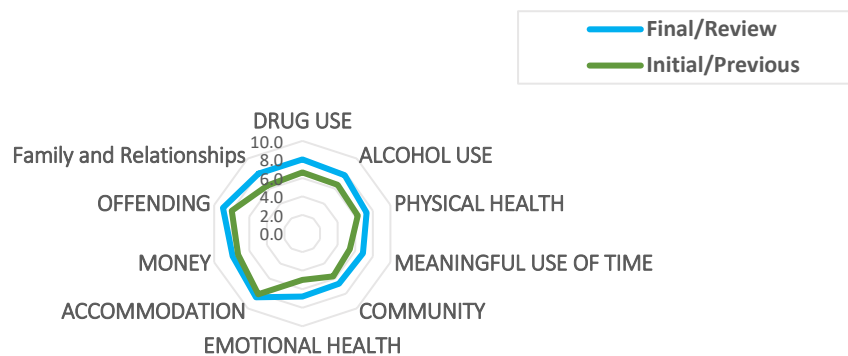
## Phoenix Futures



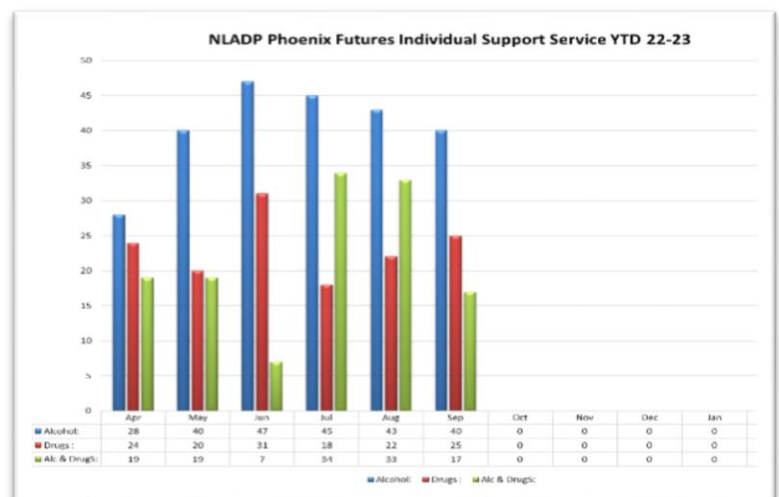
Phoenix Futures support people and families to overcome any barriers they may face and help to reduce social isolation. They promote recovery and challenge stigma. They believe in showing people that not only is recovery possible, it is happening every day across North Lanarkshire. Phoenix offer a wide range of services to help provide support. These include 1:1 and group work, Peer Mentoring, CBT Counselling, Recovery Through Nature, Family Support and general advice and signposting to other services and third sector organisations.

## Highlights

- The Outcome Star chart is based on the average scores from the current caseload from April to September 2022

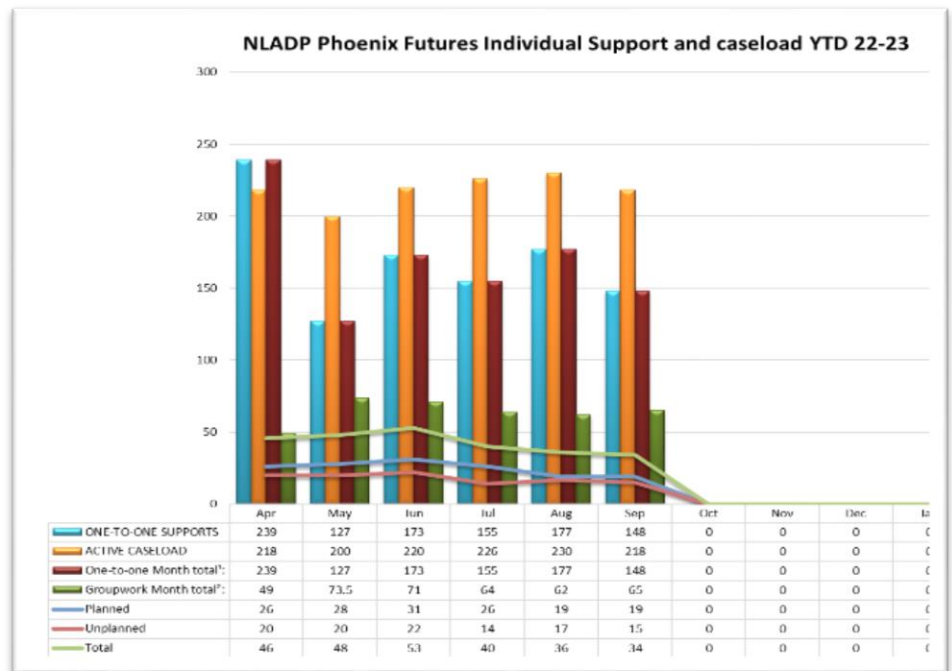


- They have held various Family Fun Days in this time to offer families support and fun during the school holidays: An Easter Egg Hunt in Summerlee Park in April, Family Sports Days during the summer holidays and a Family Day in September. They include members of the community at our events to increase visibility and reduce stigma across North Lanarkshire
- They have further established the referral pathway from SFAD to our Family Support and referrals have increased in this time period



- Following an increased demand for family support in the service they introduced a new family support group in Wishaw in August. They now run a family support group during the day in Wishaw and in the evening in Coatbridge to ensure there is a group that suits everyone. One of our Family Volunteer Peer Mentors supports with facilitation

- In April they attended our Annual Glenlude Tree Planting Day to celebrate recovery and recognise achievement through planting trees in our Phoenix Forest
- In June they ran a 6-week CBT group for those in the service that had attended 1:1 CBT sessions that needed additional support
- In June the Addiction Psychology Service (APS) facilitated Schema Training for



- all staff in the service to upskill the team and allow us build on the work they do and build capacity in this therapy for North Lanarkshire
- They ran a week of events for Overdose Awareness Day on 31<sup>st</sup> August including Naloxone training, overdose awareness groups, bereavement support groups and they also joined our partners in Recovery Scotland with their procession in Cumbernauld
- In September the Harm Reduction Team came into the service to train all staff and some volunteers in T4T Naloxone, Overdose Awareness and Basic Life Start. In September they celebrated Recovery Month and ran events across the organisation to raise awareness of stigma. They also attended the Recovery Walk in Paisley
- They have delivered Peer Mentor Training to the new Volunteer Peer Mentors in our service
- They have recruited 2 new relief staff members with lived experience to support with both the individuals and family members that access the service. Those that need further support and are identified a high risk through their Risk Assessment and Management Plan receive weekly phone support from these individuals in addition to the support they receive from their keyworker
- For the 6-month period there have been a total of 149 planned discharges. Those that leave the service in this manner have reduced their alcohol and drug use or become abstinent. Across the 6-month period referrals for our family service has increased and we have received a total of 41 referrals
- They have received 243 referrals directly for alcohol use for this time period. We continue to receive more referrals for alcohol than drugs

## Challenges

- Due to increased marketing of their family work and SFAD referring directly into the service they have seen a rise in family referrals. They have 1 Family Interventions Worker, and their caseload has increased significantly. Their caseload currently stands at 46 in addition to completing assessments and facilitating group work. They have recruited a relief member of staff to support with demand however their families are having to wait longer to be assessed
- They have a large number of unplanned discharges. They proactively try different ways to get people to engage with the service however this challenge remains

- They find it difficult to access mental health support for individuals. Our staff are often providing mental health support and working with individuals who are not suitable for the service as they have nowhere else to go. The Locality Manager has met with Health Improvement Scotland to support this gap and the work being done across North Lanarkshire
- They have ongoing issues with GPs, medication not being reviewed and not being able to speak to a Practice Manager or GP to discuss this further
- There is a lack of through care support in prisons and access to housing on release
- There is a lack of referral pathways for families to access further support with mental health and trauma

### Emerging Trends/Opportunities

- They have recruited a relief member of staff to support our Families Interventions Worker with the increased demand in the service
- As noted above we have held various family fun days across this 6-month time period

### Risks

- During this reporting period they had to exclude an individual that had accessed our service that was working with Criminal Justice Social work and is a Schedule 1 Offender
- It was agreed with Justice Services that for the safety of one of their female workers and the wider staff team that it was no longer appropriate for this individual to attend the service
- Despite this individual being made aware they were no longer to attend the service they still received calls to the service, and they would approach staff near the office building in Coatbridge while under the influence. The Locality Manager and Team Manager gave statements to the Sex Offenders Police Unit, and this individual was arrested on a Stalking Charge and held in custody. They are due on trial on 21<sup>st</sup> November 2022 and the Locality Manager and Team Manager have to give evidence



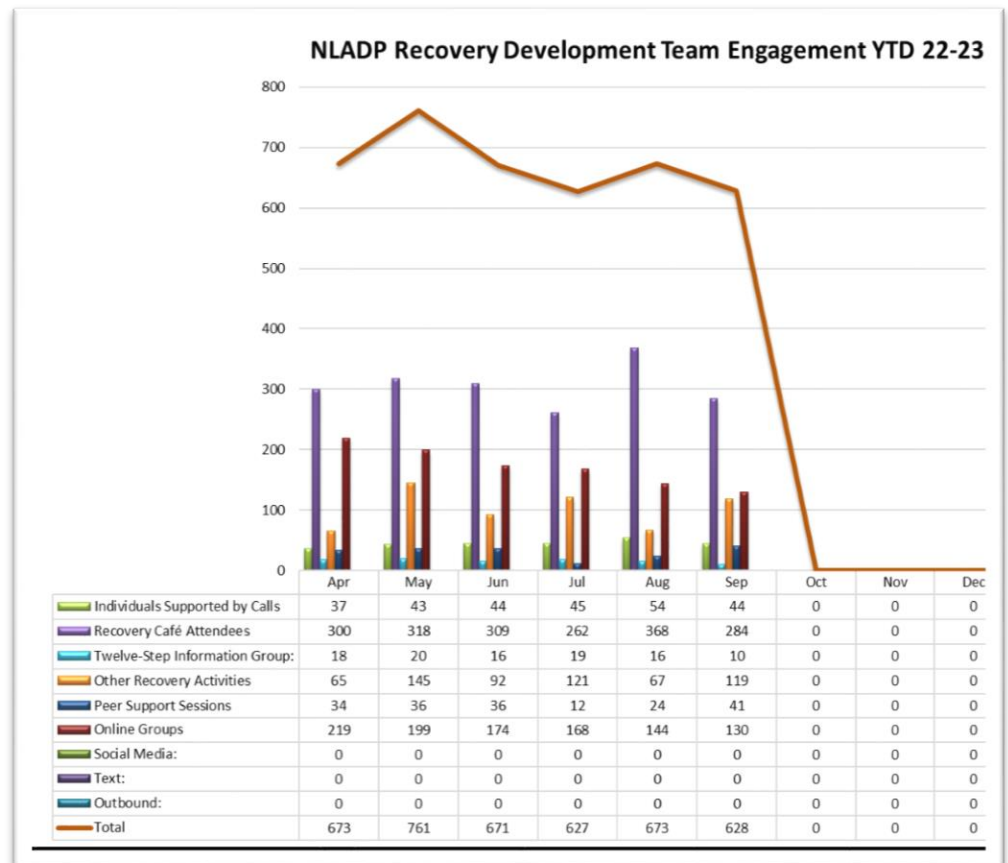
## Recovery Scotland North Lanarkshire Recovery Community (NLRC)



NLRC provides safe, drug and alcohol free events to help you build and develop your recovery. We are an inclusive and non-judgemental community committed to empowering people in recovery.

### Highlights

- Five cafés across North Lanarkshire
- 130 face to face Recovery cafes, attracted 1841 visits averaging 14 members each café
- 182 daily online Recovery group sessions, attracted 1034 visits averaging 5-6 members each day
- 183 individuals attended our Peer support sessions in various settings
- Trained 12 Volunteer members of the community



### Challenges

- Going forward, we would require resources to replace one FTE Recovery Worker's post to augment our team's capacity back to the same level pre April 2022. This would enable us sustain the delivery of all the additional activities that we have developed over the past two years

### Emerging Trends/Opportunities

- Invited to attend New College Lanarkshire fresher's week at each of the three campus
- Ongoing work with NLC Social Work justice departments to support individuals who are accessing the services of NLRC as a diversion from prosecution
- Supporting the community members who might need to appear in court for current/historical offences
- Supporting the Substance Misuse Nurse Liaison (SMNL) service in Monklands Hospital to engage at an early intervention stage with patients admitted due to addiction

## Risks

- The team are aware that there is a number of people who would benefit from accessing the recovery community, as a bridge towards accessing other services. A larger team capacity would allow them to carry out the required level of outreach work and support services with people who do not attend their appointments



## SDF Peer Research



Leading group peer research volunteer initiatives on behalf of NLADP. People who have lived/living experience of drug and alcohol use, involved in collecting data from people using drug and alcohol services in NL to identify what areas are working well and what areas require improvement.

## Highlights

- Local Services Promotion Peer Video Project - Our SDF peer researchers then made scripts for videos including information on service referral criteria, support offered and how to get in touch with them and recorded voiceovers. These were then developed into cartoon-style promotional videos for each service
- We created a service directory for all North Lanarkshire services which has been printed and is available from several locations in the area
- Next commissioned project started: Treatment and support needs of people who use alcohol or drugs and experience mental health issues

## Challenges

- We have relied on some level of engagement from services to support this by providing information for videos/guide and referring people to participate in the mental health interviews. This can be challenging as we are aware services are very busy and have their own priorities going on

## Emerging Trends/Opportunities

- The mental health and substance use project is designed to gather data which shows the impact of services/treatment, feedback from service users and should help the ADP to monitor progress of these services and their interventions

## Risks

- No information submitted

## SDF – Addiction Worker Training Programme

Trainee's with SDF, learn how to support people who are currently experiencing drug and alcohol problems. Being supported to use their own experience alongside professional training during a nine-month paid work placement in one of SDF's local partner agencies.



They support trainees to complete a qualification which is the industry standard for working in the drug, alcohol and wider health and social care field, and will open up long term employment opportunities for them.

## Highlights

- In July 2022, four people from North Lanarkshire successfully completed a 9-month supported employment programme of paid work placements, specialist training, and vocational learning through AWTP
- Placements were accessed with Simon Community Services and the North Lanarkshire Recovery Community
- Each trainee attended a programme of Quality Assured specialist training and eLearning, completing a total of 22 sessions each in topics such as Stigma, Trauma, Professional Boundaries, Harm Reduction, Naloxone, and Equalities
- Each trainee was supported by SDF's SQA Approved Learning Centre to work towards the Social Services and Healthcare SVQ Level 2 qualification, the industry standard for entering the drug, alcohol, and wider social care workforce, and suitable for SSSC Registration
- 3 trainees have achieved the SVQ qualification. One continues to work towards completion, supported by the SDF Learning Centre
- 3 trainees have been supported to secure further employment, with: Turning Point Scotland, the Simon Community, and North Lanarkshire Recovery Community
- One trainee has moved into a volunteer role with NLRC and is being supported to complete an SVQ Level 3 in Advice and Guidance
- Trainees attended a Graduation Ceremony at Glasgow City Chambers on 28<sup>th</sup> September, to mark their achievements with families, friends, and project partners. They were presented with certificates and awards of completion from Minister for Drug Policy Angela Constance, MSP
- Four new AWTP places were created through ADP and Employability Partnership support for the 2022-23 programme
- Three people from North Lanarkshire have been recruited to the new cohort of AWTP trainees (20 in total across Scotland), starting a 12-week Induction on 22<sup>nd</sup> August
- All trainees have received intensive support in the recruitment phase and in the transition into employment and have started to access a range of specialist training, alongside teaching for the underpinning knowledge required for SVQ studies
- Trainees are being supported to access a supported work placement and will attend placement four days per week, with one day per week for study and SDF input
- While work placements are face to face, all training and SVQ support / teaching is facilitated online, and all trainees have been purchased a device to support them to engage in this aspect of the programme

## Challenges

- Support from the ADP and the North Lanarkshire Employability Partnership combined, has created four AWTP trainee places in North Lanarkshire. Following 8 interviews, we were able to make four initial appointments pending references and PVGs
- A recent decision has been made related to one Candidate who is unable to progress due to a level of risk associated with convictions. This Candidate has been offered intensive support around this and advice / guidance on next steps
- We have therefore, one vacant AWTP place, but due to timing of the programme (now in week 11 of 39) it would negatively impact the appointment of a trainee at this stage (likely appointment would be in the spring of 2023)
- We are therefore requesting to carry forward this underspend of direct trainee costs, to the 2023 financial year and as part of the AWTP 2023 programme

## Emerging Trends/Opportunities

- Would like the ADP to assist in the promotion of AWTP trainee places when SDF advertise to ensure that as many people as possible in North Lanarkshire are aware of supported employment through AWTP
- SDF are also seeking permission from the ADP to carry forward the following direct trainee costs related to a place we have been unable to fill due to PVG issues outlined above
  - Travel £515
  - Laptop £464
  - Training £103
  - SVQ £1,339
  - Salary £11,478 = £13,989

## Risks

- As a multi-agency funded programme there have been challenges in securing and aligning all funding required to deliver AWTP across Scotland. To align with funder requirements, we took initial steps to bring the 2022 programme forward to August, and we intend to bring the 2023 programme forward, to May 2023. This creates space at the end of programme delivery for focussed evaluation, development, and planning work, while aligning the project better within multiple funder requirements
- To achieve this, we intend to advertise trainee places for the 2023 programme between 14<sup>th</sup> November and 27<sup>th</sup> January, with a view to programme start of early May 2023. We will advertise in North Lanarkshire, “pending funding” – applicants will be made aware of this at every stage of the recruitment process
- Regarding eligibility criteria for AWTP, it is our intention to open recruitment of new trainees to include people in receipt of OST, and to remove the current two-year abstinence criteria so that more people facing employment barriers related to drug and alcohol problems have access to the focussed support that AWTP provides
- To facilitate this, we are currently reviewing our assessments of “readiness” for such an intensive programme as AWTP and will continue to consult with delivery partners. Assessments of readiness will ascertain whether individuals are at the stage in their lives where they feel “ready” for employment and focus on the unique challenges that AWTP presents participants with

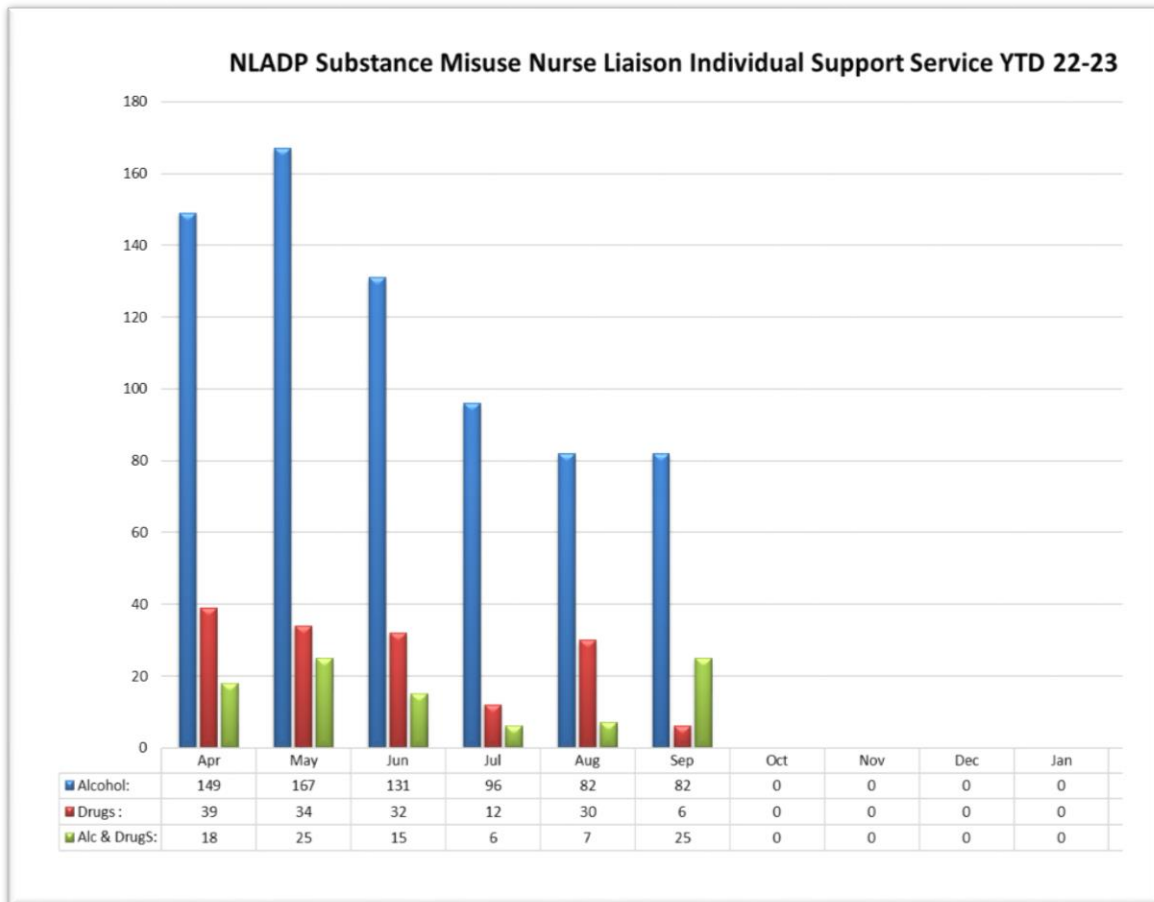
## Substance Misuse Nurse Liaison (SMNL)

The service is notified of all hospital patients in Monklands and Wishaw who are prescribed opiate replacement therapy or admitted for treatment of an acute alcohol withdrawal.



### Highlights

- The service continues to see high referral numbers with UHW and University Hospital Monklands (UHM) seeing a total of 1,040 patients from April to September



- The Near Fatal Overdose pathway has been introduced to hospital Emergency Departments to ensure that patients receive rapid follow up following presentation to hospital with a near fatal overdose

### Challenges

- The Substance Misuse Nurse Liaison (SMNL) Service continues to receive consistently high numbers of referrals
- We have had limited opportunity to formally monitor and evaluate recent progress within the service due to significant staff shortages and increased clinical demands in recent months
- There have been significant periods of time where sites have had no onsite cover

## Emerging Trends/Opportunities

- Naloxone provision is embedded in practice and we have provided education (in liaison with the Harm Reduction Team and the Lanarkshire Overdose Response Team) to Emergency Department staff about overdose awareness and naloxone provision
- In September, SMNL at UHW set up on site Alcohol Anonymous (AA) and Cocaine Anonymous (CA) meetings. These have been well attended and had positive feedback
- Outpatient detoxification would be offered to avoid the need for hospital admission, we are currently operating this clinic as telephone only with very little capacity for outpatient detoxification

## Risks

- SMNL have experienced significant staffing issues, the team is currently operating with less than 50% of its nursing resource and 37% of its admin resource

## Case Studies & Feedback



Within the summer months Barnardos ran a weeklong B Wild programme which provided intense opportunities for the young people engaging to explore nature and the outdoors as a way of promoting positive mental health. By the end of the week young people had developed in confidence and had developed coping strategies. The case study below gives a brief overview of the benefits of our BWILD (names have been changed)

Kacey is 12, and found it difficult to engage in group events. She suffered complex PTSD, anxiety, low mood and would never fully relax in a group setting, rarely smiled and appeared to be uninterested in the activities offered. When we began BWILD, Kacey began to change. BWILD allowed her to engage in nature, learning about plants, trees and insects found on her doorstep. Kacey particularly enjoyed discovering natural heritage and history of her local woodland, sparking an interest in the local area. During the therapeutic sessions, Kacey participated fully in each activity and was able to discuss her feelings and traumas in a way she had not been able to before. She showed an emotional intelligence that would not have been clear if it had not been for BWILD. Through the various games and activities, she was able to identify positive aspects of her personality, describe how feelings can affect her physically, practice mindfulness, make friends, improve physical fitness, and partake in new experiences. Kacey finished the BWILD programme a more relaxed and confident young person who was often smiling. Kacey was going to high school after the summer holidays and the increase in her confidence was apparent, and she told staff she had taken a stone from one of the BWILD activities in her blazer pocket on her first day so she could “remember my BWILD summer and do the mindfulness if I got scared”. When asked to evaluate the project, staff asked Kacey what she thought of BWILD. She stated “I loved every bit of it. I’ve climbed hills, built fires, saw deer, stuff I’ve never done before. I loved the hammocks the most but it’s hard to pick, I’ve loved it all. Everyone should do BWILD I will never forget it.” 4 months later, Kacey was still carries her BWILD stone in her blazer, showing that the experience has stayed with her long after the activity ended, and will do throughout her life.

RD



After 9 months of working with RD he has finally secured his “dream role” Although RD had been working part time night shift as a hotel porter he did not feel fulfilled in this role. As a result, he worked with his IPS worker regularly to work on developing a skill set that would help him with a meaningful career change. RD put in lots of effort with his IPS worker and after months of hard work and effort he has secured a role as an administrator a business a short commute from his home and working Monday to Friday 9-5.

This was something RD thought was unachievable at first, given that his concerns about his previous role, criminal justices concern and recovery were very much barriers to him. RD has reported an increase in mental health and also generally relationships being that he can now spend more time with his wife.





TM

TM had been working with IPS for a little under a year and although had secured some temporary roles in the past had felt that a desk role was contributing to health issues. She felt that she needed a role which would allow her to get out and about in the community preferably in a supporting role. TM worked with the IPS worker to identify a local role that would allow her to pick and choose her working hours and also would offer training opportunities. TM's IPS worker contacted some local employers and identified one employer who would allow TM the freedom of choosing her working hours. After some interview preparation and a successful interview TM was offered a role as a part time carer. A role that she is now thoroughly enjoying and is looking forward to further training.

**KICKSTART**



A full report including a video testimonial (section 4) and written feedback was shared by the team at Kickstart, in their sway report <https://sway.office.com/9ssvAU4NFnWuCTrt?ref=Link>



### **Highlighting the importance of persistent attempts to engage and partnership working when individual experiences multiple NFO's.**

Referral received from Addiction Liaison team at a local hospital. Individual had experienced a Near Fatal Overdose (NFO) however he refused to engage with our team.

A few months later the team received another referral due to the person experiencing a further NFO, at this time the individual was living in his own tenancy which had been adapted to his needs as he had a leg amputee below the knee caused by diabetes and an infection due to being an IV user of cocaine. The team once again attempted to engage through assertive outreach. Again the individual refused and stated that he did not want the teams support.

This client then had a further 3 NFO'S in the space of 7 days, the team attempted once again to outreach him, this time he engaged with us and was very open about the substances that he had been using including smoking crack cocaine and IV cocaine, taking quantities of street Valium (100-200 bought at pay day), he was also prescribed a number of drugs including MAT. The team discussed harm reduction with him including information on the risk of overdose due to poly drug use and information on the toxicity of street Valium. Sterile injecting equipment was provided and we discussed how to inject safely and hygienically reiterating to him about keeping his sites clean and try to prevent any further infection(s) and why it is important to rotate his injecting sites. He was offered naloxone however hospital had already provided this. We discussing engaging with services including information about local recovery cafes.

We then received a further phone call from the addiction Liaison team raising concerns that this individual had experienced a further NFO. Living circumstances had changed and now there was someone staying with him and they were also using substances. Team assertively outreached to them, both appeared to be under the influence of unknown substances and behaviour displayed caused the team to retreat and revisit a different time when support would be better received.

The team received a phone call from the Harm reduction team asking if we would call out and check on this individuals well-being. This time the individual displayed low mood, the team listened attentively and allowed the client to express his fears, he admitted that he did not want to die from using substance and he did not know where to turn, team spoke to the client about another organisation that could give him additional support, which he appeared to be very open too, so team made phone calls and put in the referral. Team also once again offered Naloxone and this time the client took the naloxone x2 as his friend would be staying with and both were using substances together, he was also given a refresher on overdose awareness and how to administer Naloxone.

Team contacted Addiction recovery team and raised their concerns in relation to the amount of NFO'S this client had experienced and spoke with the clients Nurse who was prescribing his Medically assisted treatment, she was very concerned that any supports that she had put in place the client refused to engage. Nurse advised that she had just seen the client in her surgery and had offered him a Valium home detox however he refused, team advised that the client was open to the team about wanting additional support and stated that he was going to engage.

In conclusion this case highlights the difficulties when an individual has multiple NFO'S and is not willing to engage and how the use of persistent assertive outreach giving support at the pace dictated by the individual can result in success. Trust was built up gradually using harm reduction interventions. It also highlights the importance of the team's partnership working between hospital liaison, harm reduction team, ART and other providers who all worked with the common goal to try and reduce drug harm and death.



Referral from social work, Advocacy partner (AP) 67-year-old gentleman with history of alcohol excess, self-neglect, reducing mobility and ARBD. AP living in community with no support. Number of recent hospital admissions and on each occasion, significant skin damage due to incontinence problems leading to extremely poor environment, maggots and flies in open necrotic wounds. For previous discharges social work offered supports but client always refused.

Social work has significant concerns around risk of similar pattern.

EA has visited AP in hospital on many occasions and attended meeting to express AP's views.

**Q:** What was the issue you were addressing or working on?

**A:** Alcohol addiction, neglect, building trust with AP, encouraging AP to accept support  
Ongoing – deep clean/cleaning service

**Q:** What did the project do?

**A:** EA had discussion around the ongoing Community Care Assessment and ongoing discharge planning and spoke to AP about different options and supports which would be available in the community. AP engaged well, in particular as our service is independent to social work; he advised he found it easier to open up. AP keen to return back home. AP advising, he feels let down by social work as he hasn't had much help in the past. Discussed support available in the past but how he has sometimes turned this down which he agreed with but felt the benefit of having EA service to speak to social work on his behalf.



Overall AP agreed to the following as options/ support/ referrals and agreed to feed this back to social worker

- Happy for homecare to visit – thinks he will only need one visit and mainly around medication and meals but happy for as many visits as social work feels he needs but would like as much consistency as possible
- Keen on support around social isolation, day-care etc. (feels isolation is leading to increased alcohol intake)
- Happy for referral to made to addiction recovery team
- Client will speak with friend around putting in place a private cleaner
- Happy for Alert to be put in place (aware of charges)

Advising he will do his shopping through the coop delivery service

**Q:** What were the outcomes/benefits or otherwise

**A:** EA fed back AP views and concerns to social work at ASP Case Conference. Due to inconsistency and limitations with homecare social work team will move forward with putting in flexible private provider in interim and will arrange for SDS budget. AP happy with this arrangement. Addiction recovery team will engage with client in supporting to reduce addiction issues. AP will remain under ASP and this will provide opportunity for AP's views to be paramount to ongoing plans with a multi-disciplinary approach to reducing risks and improving quality of life. EA working with AP for 2 months and will continue to build trust and support.

**Additional contacts** (*People, organisations, link(s) to further information, if available*)

- Social Work
- Hospital discharge team
- Home support / private provider
- Addiction recovery team



Addictions Advocacy Worker  
*Fighting against stigma*

Ally is a young man in his formative adulthood years. Having left school and got a job he was on track to do well and make a life for himself. However, Ally had started to act strangely following the pandemic which led him to lose his job. He started to communicate vaguely and distantly with those close to him. He lost friends, his familial relationships deteriorated and was left as quite a solitary character. living at home with his parents he started to abuse drugs and alcohol at the weekend with his remaining friends and family who would facilitate this behaviour. Before long, Ally was doing this on his own.

I was involved for seven months, arrested by the Police, an MHA detention, ASPA referral and case conference came and went but eventually he came out the other side and things began to improve.

He remained 'engaged' with services, abstinent from substances and willing to work with everyone to try and change his life positively. Without pleas from advocacy, family and some of those trying to care for Ally, he would have been left without a proper diagnosis for his illness for another while. This would have led to more emotional, physical and psychological destruction for this young man.

Left in the dark and stigmatised for his misuse of substances by many; he was misunderstood and misdiagnosed within a system that remains highly negative towards those who rely on substances in difficult situations. An unhealthy attitude between separating ill mental health and substance misuse continues to be prevalent in a system that silos these issues into distinctions.

An inability to provide a holistic approach led Ally in this case to be very close to going down a path of further misery. Without those around him offering a voice of reason this could have easily continued. For Ally, navigating the statutory services that were offering him help would have been impossible on his own. He needed those working with him and close to him to guide him to access, engage and get help from the right service which can be a minefield for even the most knowledgeable and equipped.

Ally simply needed people in his corner to fight the services who continued to put up barriers for him. With that help he managed to get a diagnosis and prescription that was right for him. This has allowed him to get his life back on track and become a member of society once more. However, he faced a long and drawn-out process that categorised him and saw all his problems as down to his addiction, when, as it transpired that many of his issues were linked with his mental ill health and subsequent diagnosis and treatment.



Young person feedback – NLC Creative Faces

“I had a great time meeting up together with group peers and having the opportunity to spend some time, catch up and get to know new people. It was really fun! It would be really

good to be able to go again sometime soon”.

“The regular groups we attend are amazing confidence boosters and gives the opportunity to have fun and meet new people while participating in fun activities”.

“This group gave me the opportunity to get out and about and be able to interact with others while having fun”.

“I felt happy, confident and that my self-esteem was increasing as well while participating in this group”

“Developed new skills and reduced social isolation”.

“The group was fantastic today and was such good fun”

“I had a great time, we went to Strathclyde park and it will a lovely day, meeting up as a group, having lunch and catching up with everyone. The walking group is great for our physical and mental well-being. Gives us the chance to meet new friends and have the chance to chat to different people”.



Young people feedback – NLC Life Skills Coach Positive

Destinations- ‘I just want to be normal and being in the flat is giving me a chance to be that.’

- ‘I liked the support I got from my worker. It helped me settle into the flat although he did come first thing in the morning. I’m not a morning person’

- ‘I like going to the flat because it helps me with my independent living skills and will get me ready to live on my own.’

- 'I am not good with money, and I know it is going to be hard having my own flat. Being in the flat has helped me look at on how I spend my money on things.'

Our Positive Destinations project was highlighted as an excellent model of working to support our most vulnerable young people as a result they have managed to secure £10,000 plus funding from our Banking on Barnardo's fundraising event this year in London this year. This ensures that we can furnish the flats to the highest standard for each of our young people we are supporting.

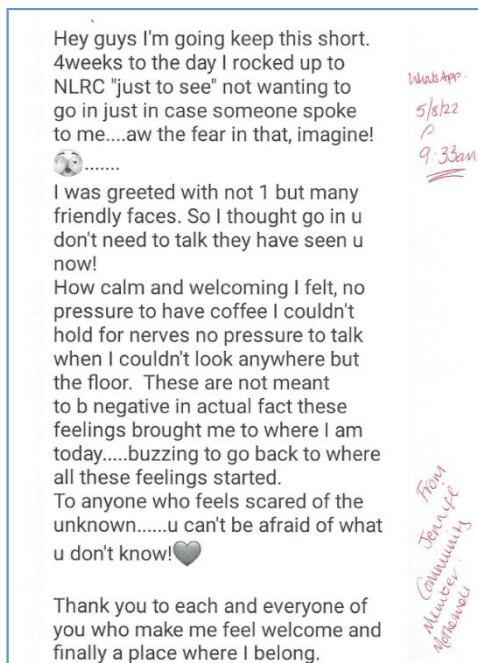


Family Member - JS was referred to the Phoenix Futures North Lanarkshire service twice, the most recent time in 2019. JS self-referred into the service for support with her adult son's ongoing drug use. Her son has been using drugs since the age of 14.

During this time JS received CRAFT 1:1 session, individual support sessions and also regularly attended the Thursday evening family support group. JS received support from the Family Worker with understanding her son's drug use, communication skills, effective boundary setting, self-care and triggers for violence and how to keep yourself safe.

JS communicated that when her son first started to use drugs there was no support for her to navigate this and the only support available was for her son. JS explained that she did not seek support until later in life due to the stigma surrounding this. Following completion of the CRAFT programme JS stated that she wished that this support had been available at an earlier stage and prior to her son becoming chaotic with his drug use.

JS was discharged from the service in 2020 as a 'Positive Move-On'. JS is now a Family Volunteer Peer Mentor and helps to facilitate the Phoenix Family Support Group. JS is also trained in Naloxone.



Whatsapp received 5/8/22 9:33am  
From Community Member  
Motherwell

## Next Steps

Commitment to 3-year funding approach with 1/4ly reporting and annual reviews (subject to ongoing SG funding):

<b>NLC initiatives continuing</b>	<b>NHS initiatives continuing</b>
Creative Faces Family Plus Project Older Person Advocacy support Drug Testing and Treatment Order – DTTO Housing Life Coaching Kickstart project	Addiction Psychology posts Occupational Therapy posts Harm Reduction posts ART – Integrated Team Substance Misuse Liaison Team VAW Partnership
<b>Services for retender on a 3 + 1 year basis</b>	<b>New Services on a 3 + 1 + 1 year basis</b>
Recovery Development Youth Information and learning Individual Placement Support	Crisis/overdose response and assertive outreach service Adult Family Support
<b>Community and voluntary sector initiatives</b>	<b>Test of Change Initiatives</b>
Medics Against Violence – Acute Navigators Phoenix Futures – T2 Treatment Service Barnardos – young person support Equal Say Independent Advocacy Phoenix - Prison Through Care support Scottish Drugs Forum – Addiction Worker Training Programme	Youth Justice Contextual Safeguarding - Arrest Referral Solution Courts Lived & Living Experience Panels Substance Misuse Support Fund – VANL Extended Youth Work Provision & Diversionary Activities – CL&D
<b>Corra Funded initiatives</b>	<b>Research, Development and Scoping</b>
Blue Triangle – Breakthrough Service Family learning centres support Barnardos/Phoenix – family support ToC SRC – Residential Rehab provision River Garden Circle – Families and Justice	HIS Substance Use and Mental Health Scotland Excel – Residential Rehab Scottish Recovery Consortium - Rehab
Training and events calendar to follow in 2023 building on learning from our first training needs analysis.	