Fife Alcohol and Drug Partnership

Prevention, Protection, Early Intervention, Treatment & Recovery

FIFE ALCOHOL & DRUG PARTNERSHIP

Annual Report

2024/2025

Table of Contents

Executive Summary

Fife Alcohol and Drug Partnership (ADP) is a strategic partnership of the Health and Social Care Partnership. Its role is reducing the prevalence, impact and harms associated with problematic and dependent alcohol and drug use throughout Fife. This report pertains to the first year of the new strategy 2024 - 2027, and development of the first year of the Fife ADP delivery plan under the new strategy.

All ADPs are required to report annually to their Integrated Joint Board and nationally to the Scottish Government on progress on embedding the strategy and improvements achieved from the annual ring-fenced government alcohol and drugs allocation and partner agency contributions.

2024/2025 Summary

This was the first delivery plan of the new and refreshed Fife ADP Strategy 2024 - 2027 and this report will be a review of progress made, the achievements of the Fife ADP support team and Committee, partners and stakeholders, including people and families with lived and living experience and statutory and commissioned services. A considerable amount of work has been undertaken, with an emphasis on work with young people (YP) and prevention and early intervention initiatives.

For example, due to the increase in YPs attending hospital for drug and/or alcohol related problems in Fife and the potential for opportunities of support to be missed a new children and young people (CYP) hospital pathway was developed in 2024. Led by Fife ADP and involving an Emergency Department and Paediatrics Consultant, Clued Up, Public Health and Children Wellbeing Liaison Nurses, a pathway was developed, which involved support being directed to Clued Up for any YP under the age of 16 to be referred to the service if they attended ED or were admitted to a ward. The project went live in Quarter 1 of 2025, with impressive engagement and early signs of good outcomes for CYP affected by their own substance use. Furthermore, Fife ADP have commissioned the transition project with Clued up and 24 CYP affected by parental substance use have transitioned successfully to their secondary school with improved outcomes in their confidence and wellbeing.

Fife ADP have also collaborated and participated in several events over the past year, including:

1. Fife Charter of Rights event - Hosted by Scottish Recovery Consortium in collaboration with Fife ADP and held in June. Service users, staff and individuals with lived experience were invited to attend so that they could be supported to understand the Charter of Rights and how that is designed to protect them.
2. Needle Exchange Surveillance Initiative (NESI) Workshop - Working alongside the Blood Borne Virus/Sexual Health (BBV/SH) team, Fife ADP support staff jointly hosted a workshop looking at four key priority areas for Fife.
3. Crack/Cocaine Training - Bespoke training provided by Scottish Drugs Forum for services and staff working in Fife. Developed using feedback from stakeholders and input from Fife ADP with more workshops to be available in 2025/2026.

Fife ADP are green on all MAT Standards for the first time, the Alcohol Brief Intervention (ABI) target has been maintained for three years, waiting times were achieved for the year, residential rehab places are increasing and over 500 people left the treatment system well, with many more achieving their recovery goals still in service. With an emphasis on continuing with a proactive and evidence-based work, Fife ADP has rolled out a vast amount of work over the past year with partners at the forefront of service delivery and engagement with those in need of support.

Fife ADP Strategic Performance and Service Delivery

Fife ADP and its services were previously required to achieve national targets for ABIs, local delivery for numbers in treatment target, 90% of people seen within three weeks and Take Home Naloxone (THN) distribution. Fife ADP also tracks national datasets on substance related deaths to assess impact of the strategy. Each project and operational service is monitored on a six month and annual basis against evidence-based activity, outputs and outcomes.

National Targets: Some targets have been sustained and some show improvement. ABI delivery has fully recovered and Fife is significantly over target due to the focused work conducted the previous year.
National Datasets: National Records of Scotland (NRS) report for 2024 for drug related deaths will be available in August 2025, but data from Police Scotland on suspected drug related deaths does not indicate a reduction for Fife in suspected drug related deaths from the previous year.
Service Delivery: Most services (Tier 2 and Tier 3), including newly commissioned and those reviewed as part of the strategy, have met or exceeded targets and continue to meet demand and manage capacity.

Next Steps for 2025/2026

- Improve our drug and alcohol education in schools across Fife.
- **Review and learn from previous processes for reviewing drug related deaths.**
- Provide additional whole family transitional support for children moving from primary into secondary school.
- **Whole Population Approach for hazardous and harmful alcohol use.**
- Collaborate with Tackling Poverty and Preventing Crisis Board.
- **Alongside Public Health Scotland (PHS) RADAR (Rapid Action Drug Alerts and Response) team, maintain and refresh a whole system substance use alert and early warning programme.**
- Increase number of people at risk having THN kits and access to Injecting Equipment Provision (IEP).
- **Review alcohol screening in all settings and ABI delivery within Fife ADP services and in priority settings.**
- Review and improve strategies/policies regarding people affected by BBV and substance use.
- **Increase access to aftercare/support from Residential Rehabilitation.**
- Develop a recovery orientated alcohol and treatment support system of care.
- **Service visibility, awareness, and access through an enhanced communication strategy.**
- Amplify the voice of lived/living experience, building a rights-based approach within Fife ADP services.
- **Development and progression of recovery-based communities in Fife.**
- Emergency Department third sector hospital navigation project.
- **Engage with the review of DAISy and comply with and support the implementation.**
- Provision of targeted support to people and communities at risk of harmful substance use.
- **Redevelop assertive outreach and retention approaches and improve follow up protocols and pathways.**
- Enhance early, successful access to health and social care following release from prison/custody.

Fife ADP Introduction & Reporting

Fife ADP is a strategic partnership of the Health and Social Care Partnership. Its role is to reduce the prevalence, impact and harms associated with problematic and dependent alcohol and drug use throughout Fife. Membership is drawn from senior officers of Fife Council, Fife Health and Social Care Partnership, NHS Fife, Fife Constabulary, HMP Perth, voluntary sector alcohol and drug services and people with lived and living experience.

Fife ADP forms strategic alliances with many other partnerships and directorates where there is a shared responsibility for outcomes and service delivery planning for people throughout Fife affected by substance use. Some of these include the Plan for Fife, Safer Communities Partnership, Fife Violence Against Women Partnership and Children's Services Strategic Plan and also includes national groups. In its role of supporting the Fife ADP Committee and its services, the Fife ADP support team provides this function to ensure that people affected by alcohol and drugs are considered in wider strategic planning, where collaborative approaches are essential for prevention, early intervention and whole population approaches.

All ADPs are required to report annually to their Integrated Joint Board and nationally to the Scottish Government on progress and improvements achieved from the annual ring-fenced government alcohol and drugs allocation and partner agency contributions. This funding is routed though NHS Boards to Integrated Authorities for onward allocation.

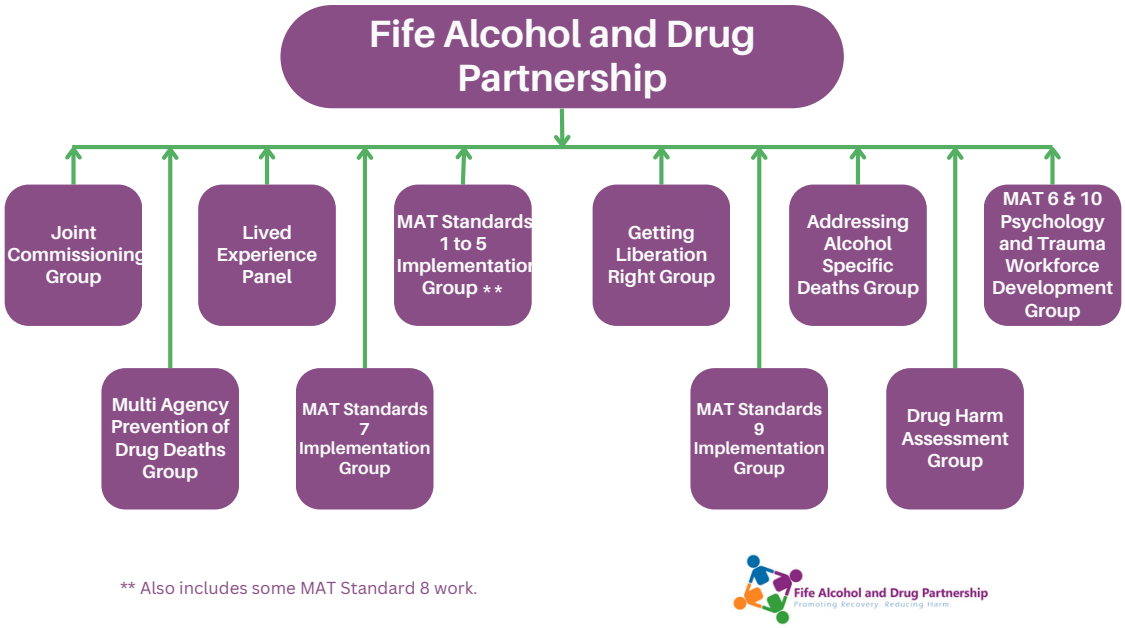
The Fife ADP Annual Report 2024/2025 is in two parts:

- A local annual report for the Health and Social Care Partnership, providing detail on structure, governance, commissioning, and improvement work and performance of commissioned and statutory services undertaken in the year to progress towards outcomes within Fife ADP Strategy 2024 - 2027.

- The second part is a mandatory template provided by the Scottish Government and reflects activity against the five themes indicated in the national strategies, latterly Drug Mission Priorities 2022 - 2026. These are prevention, improvement of the support and treatment system, protecting and supporting families, parity in delivery for those within the criminal justice system and whole population approaches for alcohol.

Fife ADP Structure & Governance

Fife ADP continually reviews its membership, subgroup membership, purpose and terms of reference to ensure increased governance and performance towards the targets and improvement work set out in the local strategy and is guided by national strategy and expectations for the MAT Standards 2021 and Drug Mission Priorities 2022- 2026. In the last year, there have been further updates to include new subgroups in response to the ongoing mission.



** Also includes some MAT Standard 8 work.

During the year, Fife ADP subgroups have continued to be established and have an increased focus on the specific issues experienced within Fife. For example, the Getting Liberation Right Group is an established Fife ADP subgroup to coordinate relevant service provision to meet the needs of those returning to Fife on a short term or remand sentence, with a purpose to co-ordinate as much support for the individual prior to them being liberated. For example, this could include registering with primary care, housing support and links back into community groups including those which are recovery based. Members of the group will be working closely with the prison during their in-reach work carried out by Phoenix Futures to make ensure the voices of those being liberated are heard and there is a person-centred approach. The group is different to other Fife ADP subgroups as it is a working group rather than an improvement based/strategic development subgroup.

The Fife ADP Committee reports to the Quality & Communities Committee, Finance & Scrutiny Committee, Integration Joint Board and onward to the NHS Fife Public Health & Wellbeing Committee. The Joint Commissioning Group continues in its role of strategic commissioning, managing performance and overseeing the financial position and reporting of Fife ADP, including the commissioning for the Drug Mission Priorities and MAT Standards. The Lived Experience Panel (LEP) (established December 2020) continued in its role of amplifying the voices of people with lived and living experience within Fife ADP Committee and its structure, ensuring the work places the needs of the care group at the heart of strategic planning and service improvement.

Fife ADP Strategy 2024 – 2027

Fife ADP **2024 - 2027** vision:

"To enable all the people of Fife affected by drug and alcohol use to have healthy, safe, satisfying lives free from stigma".

The strategic themes are aligned to the Health and Social Care Partnership themes and are detailed below:

- **WELLBEING:** Prevention and early intervention.
- **LOCAL:** Risk is reduced for people who take harmful substances.
- **INTEGRATION:** Treatment and recovery services are easily accessible and high quality.
- **OUTCOME:** Quality of life is improved to address multiple disadvantages.
- **SUSTAINABLE:** Children, Families and Communities affected by substance use are supported.

Mission Statements and values underpinning delivery are detailed more fully in the strategy.

Priority 1 – WELLBEING: Prevention and early intervention

Working in prevention and early intervention is essential for Fife ADP and the community that it supports. There have been many actions taken over the last year to achieve the aim of Priority 1. For example, Non-Fatal Overdose analysis meetings are occurring on a weekly basis, with aims of:

- **Identifying drug trends**
- **Identifying individuals at extremely high risk due to repeat incidents**
- **Emerging drug harms**
- **Areas/groups at particular risk**

Education as a tool for prevention is also a main focus for the Fife ADP support team, with Barnardo's going into schools and delivering courses on drug awareness and harm reduction to both children and parent/guardian groups. This training now also features some of the materials from the CYPs harm reduction campaign. Work is ongoing to deliver an integrated drug and alcohol education, age and stage appropriate, throughout the full school life by school-based staff and specialist support from Fife ADP commissioned services.

Organisation	Service	Annual Update in Brief
Barnardos	**Education Service**	70 primary schools and 11 secondary schools have been receiving input in the last year. Additionally, 20 priority groups were also identified and seen. 82% of P7 pupils felt they had an increased knowledge of the effect a range of substances can have on the body and mind after their sessions and 64% of secondary school pupils felt they had increased knowledge on associated risks related to substances.
Glued-Up	**P7 to S1 Additional Transitions Service**	**Education**: 24 of the CYP have transitioned successfully to their new school and four have improved attendance having had their voice heard and been able to adapt the transition process to meet their own needs **Personal**: Of the 29 children there were 75 improvements in their ability to make good decisions, to engage in their community and to feel involved. **Family**: The whole family support element of the delivery has improved parenting, family functioning and relationships, family circumstances including environment and relationships and engagement with education.

Young People - Think Again Campaign

In 2024, Fife ADP established the multi-agency CYP Affected by their own Substance Use Rapid Action Group in response to increasing drug related deaths in the 15 to 24 age range. The group has engagement from a range of relevant stakeholders, including representation from education, third sector, emergency department and communications team. The group set out an action plan of priorities, one of which was to launch a campaign aimed at delivering harm reduction messaging to YP in Fife, with the ultimate goal of preventing any further deaths within the age group.

The campaign went through consultations with various groups of YPs to get a wide range of representation and form a picture of the kind of messaging that they engage with most. The campaign launched officially in December 2024, offering materials such as social media images, a printable poster and a social media bitesize video.

Early reviews of engagement supplied by the communications team, third sector partners and statutory services have shown good engagement and highlighted the communication reaching most of the targeted group. The campaign has two overarching goals:

Change and maintain the perception that occasional/recreational drug use is safe and help support conversations between parents/carers and their young person(s).

Provide an education and awareness of the significant changes in illicit substances and the incredible risks that they pose to young people.

Improving Education with Young People of School Age and Their Parents

Barnardo's Education Service

Below is an overview of the framework for the commissioned Fife Substance Use Education Service. When developing sessions for 'priority provision' groups, the service staff liaise with staff from the groups prior to facilitation of the sessions to gain a better understanding of the needs within the identified group and to enable a programme to be devised and tailored, specific to the needs of the YPs. During the initial session, the service staff, through observation and discussion with the YPs, are able to further identify their learning needs and use this to inform the content of subsequent sessions. The team have also developed a new approach for 'priority provision' work, which will have a stronger emphasis on consultation and learning together with YPs who take part in the sessions. The team have also expanded their capacity building work with parents/carers and teaching staff, and feedback from participants in these sessions will shape and influence future sessions.

Fife Substance Use Education Service: Framework of provision to Fife schools

P7: Introductory substance use education lesson

- Core lesson facilitated directly by Barnardo's with all P7 classesacross Fife.
- All P7 teachers provided with Barnardo's Teacher Toolkit to support follow-up lessons.
- Substance use CPD will be rolled out throughout 2024-25.

S2: Teacher-led alcohol education

- Core S2 Alcohol lesson plan/resources provided by Barnardo's (via Teacher's Toolkit) to all Fife PSE teaching staff for teacher-led delivery.
- Supported further by Barnardo's offering twilight CPD sessions to increase confidence & build capacity.
- Additional follow-up alcohol lesson plans also available within Teacher's Toolkit

S3: Substance use education

- Core lesson facilitated directly by Barnardo's with all
- S3 PSE classesacross Fife.
- Teacher's Toolkit provided to PSE staff to support substance use curriculum across all year groups.
- Supported further by Barnardo's offering CPD sessions to build staff confidence and capacity relating to substance use education.

Additional/Flexible Support: Barnardo's will also continue to offer substance use education lessons to learners in PSS set education settings, tailored to their needs. The service may also be able to offer additional sessions to schools for other learners (from any year group) where there are clear, identifiable needs for further substance use education that PSE staff feel they are unable to meet within the PSE curriculum. To make an initial enquiry for such work, school staff should use this request form: https://forms.office.com/e/YkXz1xxkMB

Teacher's Toolkit: This web-based resource is regularly updated and maintained by the team. It can be accessed at www.suttfife.co.uk (also now available on GLOW). It contains a wide range of substance use education lessons and resources suitable for P7 and all high school year groups.

Teaching staff CPD: A rolling programme of online twilight CPD sessions will be offered by Barnardo's to teaching staff to build staff confidence and capacity relating to substance use education. Schools can also request bespoke in-person staff training relating to this topic from the team.

Parent/Carer workshops: Barnardo's will offer a drug awareness workshop (online and in-person options) on a regular basis to parents and carers in Fife to help them feel more confident about having open conversations about substance use with their children/young people.

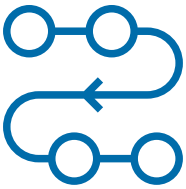
*please note that P7/S3 core lessons are organised geographically on a term-by-term basis to enable the small service team to cover all schools in Fife efficiently. If you wish to check which term your school is due to have the session, please contact the team at fifeservices@barnardos.org.uk

All pupils and teaching staff complete an evaluation at the end of each session. This asks them to rate (Likert scale) how well they believe the session increased their knowledge and understanding around the various aspects and whether they believed the intended learning outcomes were met. Comments from all pupils and staff are also usually captured.

Outputs from the service include:

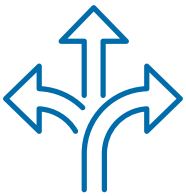
- **70 primary schools and 11 secondary schools have been receiving input in the last year.**
- **Additionally 20 priority groups were also identified and seen.**
- **82% of primary 7 pupils felt they had an increased knowledge of the effect a range of substances can have on the body and mind after their sessions**
- **64% of secondary pupils felt they have increased knowledge on associated risks related to substances.**

Hospital Liaison Pathway for Children and Young People Affected by Substance Use in Fife



In 2023, during its development, the Health and Wellbeing Strategy Group via its substance use and sexual health group, agreed an early priority was to review pathways for CYP presenting at ED or admitted to a ward where alcohol and/or drug use is indicated. This priority was supported by alcohol related hospital admissions in the 11-25 age group, indicating a higher standardised rate per 100,000 than the Scottish average, both for alcohol and drug use. Furthermore, an adult hospital liaison service, funded by Fife ADP, had been successful in preventing further harm and supported access to community-based support and Service-based information from Clued Up indicated a replication of this offer to CYP could be as equally beneficial to this age group.

A small subgroup was formed to examine data within more specific age range categories, review current approaches for sharing information and community follow up and referral pathways when CYP are presenting at hospital for alcohol and/or drug issues. This subgroup consisted of school nurses, Children Wellbeing Liaison Nurses, Fife ADP, Consultant Paediatrician and Child Protection Lead, Clued Up, Consultant in Emergency Medicine and NHS Fife Child Protection Lead.



The pathways are still in its infancy, but early data gathered by the service indicates that there are three referrals per month during its first five months in operation. This seems consistent with the numbers attending hospital factoring in service refusals and adoption of approach across the full staff complement.

Of those referred, more than 85% were not known to the service and can be considered naïve to a specialised YP service offering alcohol and drug support. 71% of these referred have engaged with the service and continued on to receive post assessment support. Although some CYP refused or did not want to engage with the service, they are now aware of support available to them and can self-refer at any time.

Demographically, half of those referred are 18 and, thus, a key group to reach at the point of crisis; and five were of school age; two thirds were male. There were referrals from all seven localities, with the most coming from Dunfermline and Kirkcaldy.

Priority 2 – LOCAL: Risk is Reduced for People Who Take Harmful Substances

Tier 2 Services

A Tier 2 service, in the context of tiered support, represents a level of expertise and problem-solving capabilities that are more specialised than Tier 1, but less so than Tier 3. It's the escalation point for issues that Tier 1 cannot resolve, involving more in-depth troubleshooting and potentially requiring specialised knowledge of systems and software.

Fife ADP commission a range of services to address the multiple, and often, complex needs of those who have issues around their consumption of alcohol and/or drugs.

Organisation	Service	Annual Update in Brief
FASS ADAPT Substance Recovery	**Triage Service**	365 people have been referred to the service in this period, with the largest number of referrals being self-referred (86%). 225 of those people received triage support and 13 clients remain open to the team due to intensive support being required. Kirkcaldy remains the highest locality for self-referrals with 18%, followed by Cowdenbeath with 17%, however, self-referrals are being received from all localities. 65% of self-referrals received triage support. No clients, during this period, self-discharged from support.
FASS ADAPT Substance Recovery	**Non-Fatal Overdose Team**	The service engaged with 317 individuals (314 of those referrals came via the Scottish Ambulance Service pathway). All clients are seen within 72 hours of the date the referral is received, meaning the service remains compliant with MAT Standard 3. Alcohol remains the highest substance reported (24.4%), followed by street Valium (14.6%). During this reporting period, the service completed 64 triage assessments and 97 THN kits were distributed.
Glued-UP	**Employability Service**	169 YPs were supported in the last reporting year. 43 YPs achieved positive outcomes, including, but not limited to, developing positive routines, making positive choices and increased knowledge in substances. 21 YPs participated in a variety of activities including job searches, job applications and attending interviews.

Organisation	Service	Annual Update in Brief
FASS ADAPT Substance Recovery; we are withyou; NHS Fife	Hospital Liaison Service	253 people were referred to the service in year 2024/2025, 39 people engaged. 64% referred to the service receive ongoing support. 90% of people had an alcohol related problem, 9% drug related problems and 1% both. Majority of referrals from the Cowdenbeath and Kirkcaldy areas, opposed to previous year where the majority were in the Levenmouth area. 232 individuals referred through MDT process, engaging with the Liaison Harm Reduction team. A total of 1,054 transactions delivered, covering 754 harm reduction, 300 social inclusion and, targeted support (i.e. BBV advice/overdose prevention/injecting site assessment). 86 miscellaneous single-instance interventions were recorded. The total no. of patients added to Addiction Liaison Service caseload for the period is 1,027 . The total no. of contacts for those patients over the 12-month period is 1,786. A contact can be in many forms, i.e. face-to-face inpatient visit.
sacro	SACRO	The service reported they had 240 referrals from the custody suites during this period (annual target: 90). Most planned closure cases (60%) are working with the service for 3-12 weeks following their appearance in the custody suite. 56% of people engaging with the service are working on reducing their substance use. 67% of service users working with the service have better knowledge of their life skills and selfcare. 60% of people reported an improvement in their mental health and wellbeing since engaging with the service. The service continues to make onward referrals to over 135 separate community and statutory services across Fife. 66 THN kits were distributed in this period (annual target: 20).
RESTORATION RECOVERY COMMUNITY	Restoration	Member numbers have increased from 210 to 238 in this reporting period. This remains lower than 2023/2024 numbers where the service had 325 active members. The service believes fluctuation in numbers might be due to the changes in drug trends and the impact this is having on communities across Fife. The service has noted seeing an increase in the amount of people using crack cocaine, in debt, with housing issues, deteriorating living conditions, self-neglect and worsening wounds from injecting drug use. The highest engagement is in Dunfermline, with 49 people in total attending in total each week. Four members in the reporting period have gone on to seek employment and nine members are engaging with further education.

Organisation	Service	Annual Update in Brief
Phoenix Futures	Peer Mentoring	The service engaged 69 people which is an increase of 30 people from the previous year (the service believes the increase is from their involvement in the Getting Liberation Right Group meetings). 59 people engaged with the service, 34 people remain open and 25 people successfully closed. 94% of service users are currently working towards a reduction in their drug use and 47% of service users fully achieved an improvement in their physical and psychological health when exiting the service during this period. 45 THN kits have been offered to clients, with 15 being distributed.
Phoenix Futures	Recovery Through Care	31 people were referred to the service during the reporting period, a decrease of 10 from the previous year. 27 individuals are currently engaging in support. 70% of individuals are currently working towards achieving abstinence. 39% of individuals saw an improvement in physical, emotional, and mental health when exiting the service. The highest engagement rate is in Levenmouth and Kirkcaldy, however, no referrals were received from SW Fife or NE Fife, the same as the previous year. 20 service users received a supply of THN with 25 kits being offered.
we are withyou	With You	A total of 2,766 transactions (target: 1,500) have been completed in this period. The transactions include distributing THN and clean IEP. 981 of these transactions were completed in the community, in client's homes or in the outreach van. 780 (target: 600) overdose related interventions were delivered specifically to reduce overdose risk, e.g. naloxone training, drug testing strip provision. The interventions delivered on a drop-in basis (including brief interventions, needle exchange, advice and motivational interviews) are 3,507 (target: 3,000).
Clued-UP Barnardos	Barnardo's and Clued Up Whole Family Support Service	Clued Up saw 223 new referrals in 2024, the majority of which came from Education. Outcomes for YPs show positive changes in key areas, including improved family relationships and increased knowledge on substances and improved lifestyle choices. For intensive whole family provision, in the reporting year, 45 families and 84 children were supported. Outcomes for families showed improvement, including positive improvement in safety and risk factors for families, leading to a safer and more stable environment.

Reviewing Drug Related Deaths

The previous Multidisciplinary Drug Death Review group generated extensive learning based on communication, service delivery and engagement, reach of services, system to system collaboration and improvements in harm reduction. Action plans have made good progress in year but the necessary impact of reducing drug related deaths (DRDs) in Fife, and in Scotland nationally, has not been sustained.

The key aim, going forward, was to have a new, combined system of analysing DRDs and implementing identified actions as quickly as possible. Fife ADP and NHS Fife Addiction Services are to combine as a single task force, attending the Multi-Agency Prevention of Drug Deaths Group together and combining action plans to move forward with a collaborative approach.

In early 2025, work was undertaken to combine the action plans and create a live working document that is purposeful and agile in its detail. Actions were identified under themes and combined to reduce duplication of work and align efforts to the same end goal of reducing drug related deaths.

The next step is to set up the Multi-Agency Prevention of Drug Deaths (MAPODD) group for taking forward a collaborative approach to reviewing and responding to DRDs in Fife. Terms of reference will be created, whilst also considering the relevant attendees to invite. This will lay out clear guidance on the aims and objectives of the group and expectations around the completion of actions for all of those that have been invited to attend.

New Drug Alert Process and Protocol

The Drug Harm Assessment Group (DHAG) is a multidisciplinary surveillance group, focused on both emergency responses to sudden fluctuations in levels of specific drug prevalence, specific drug harms and/or particular groups at risk of harm, as well as a monthly monitoring group to assess trends early. Drug trends and significant harm identified in other areas of Scotland are assessed and appropriate action plans are put in place to prevent the same harms occurring in Fife. A new process has been developed and renewed based on Public Health Scotland (PHS) national guidance with support from NHS Fife Public Health.

Attendance is wide ranging to ensure that intelligence and emerging harms are discussed and actions agreed at the earliest opportunity. The group has led on development of a library of alerts including for early onset overdose caused by synthetic opioids and clonazolam (an illicit benzodiazepine) and ketamine use. The Fife ADP support team was fully involved in contingency planning and continuity of service with NHS Fife. A multiagency event was held in August 2024, focused on potential potent illicit substances mixed into the drug supply and a recommendation was made to the Scottish Government (SG) and PHS to convene a national exercise. From this, Fife ADP were able to agree that DRDs would be included in NHS Fife Board's corporate risk register, complementing the Fife ADP approach.

In addition, Fife ADP are fully integrated into the two-year High-Risk Pain Medicines (HRPM) patient safety programme, to ensure safe and appropriate prescribing of HRPM and to reduce the risk of potential diversion. Fife ADP has led on experiential data gathering with lived/living experience and their use of HRPM to provide a clearer understanding of their risks. Data is yet to be analysed and themed, but is likely to have a substantial impact on the improvement plan for safety and reduction of risk to this patient group. An NHS Fife wide consultation is planned to share learning from recent DRDs to include broader actions for prevention. As mentioned in the previous years report, there are several groups, systems and organisations that are feeding into the process. This includes:

- **NHS Fife Public Health**
- **Police Scotland**
- **Pharmacy**
- **Scottish Ambulance Service (SAS)**
- **NHS Fife Addiction Services**
- **Fife Justice Social Work Services**
- **Social Work**
- **Third Sector**
- **NHS Fife Psychology**

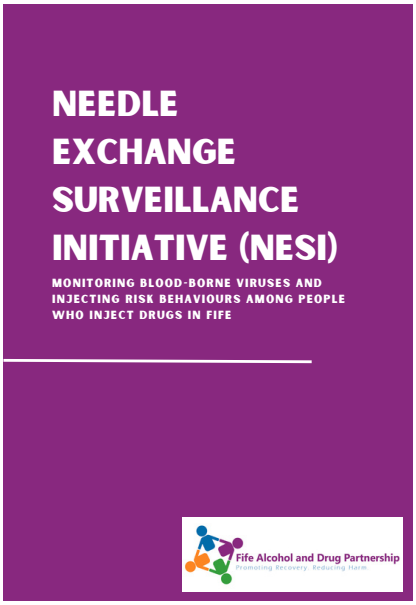
Monthly updates/intel are given to the group and an example of some of these are:

- **Near Fatal Overdose Weekly Review**
- **Harm Reduction Engagement**
- **Service user/lived/living experience input**
- **WEDINOS results for the Fife area**
- **RADAR notifications and updates**

Engagement with the group is consistently good and SAS have taken forward Chairing responsibilities via their Clinical Effectiveness Lead: Drug Harm Reduction for the region. A rolling action log is kept and reviewed monthly to ensure that responses are timely and within the agreed parameters. The group have also been able to respond to ad hoc meetings when immediate response has been required to take action where critical risks have been identified.

Needle Exchange Surveillance Initiative (NESI) – Summary

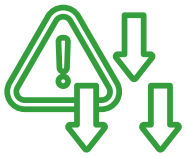
The Needle Exchange Surveillance Initiative (NESI) is a national programme designed to monitor and assess the prevalence of blood borne viruses (BBVs), among people who inject drugs. The NESI annual report has been published for 2022 - 2023, providing a national and local picture to all health and social care partnerships and NHS Boards in Scotland.



The SG has committed to the elimination of Hepatitis C, however both HIV and HCV testing rates in Fife have decreased from year 2019/2020 - 2022/2023. Severe soft tissue infections (SSTI) have fluctuated across Scotland since 2013, but have remained high overall. Fife rates of self-reported SSTI in 2022/2023 were 22%, making it the highest rate in Scotland in this reporting year. Crack cocaine has had the sharpest increase from 28% to 45% across Scotland, with 54% reported for Fife in 2022/2023. There is a national decrease in people carrying THN however, Fife must remain focused on its THN programme to ensure that rates remain high in those accessing harm reduction support and treatment services.

Fife ADP led on a workshop with multiple partners to raise awareness of the four issues in Fife and to generate system and service-based improvements over the short, medium and long term. This has generated an action plan including a Quality Improvement Charter to increase testing in those who access opiate replacement therapy (ORT) treatment. Other actions include:

- **Improve communication between relevant services around where service users can get foil.**



- **General comms plan around harm reduction and services that individuals can access.**

- **Action points aimed at increasing HIV/HCV testing rates.**

- **Increased education opportunities around soft tissue infections.**

Community Pharmacy

Community pharmacy provides a vital role in the distribution of ORT and harm reduction equipment for the prevention of drug related harm and death. Pharmacies are located in every community, can offer THN to anyone, including family members and are open at times when Fife ADP services are not.

So far, the service has:

- Completed 8,525 transactions, year to date.
- 23 pharmacies are now active.
- Staff that are fully trained and claiming renumeration.

From April 2024 - March 2025, 262 THN kits were distributed, with over 45 pharmacies involved, a significant improvement on the full year performance of 2023/2024. Community pharmacies and third sector service, With You have trained 198 people year to date, a further increase on last year's performance. Furthermore, there is now a recording mechanism available within the NEO system, which allows community pharmacy (CP) teams to note if they have offered THN, but it has been refused. So far, this year, there have been 1,473 occasions where this has been recorded. All 86 community pharmacies in Fife are now registered to provide this service.

A recent expansion also saw the development of a THN service, where pharmacies can provide overdose awareness training and THN kits to people at risk of overdose and their friends and family members. This saw representatives from NHS Fife Pharmacy Service working alongside harm reduction charity, With You, to provide face-to-face training for community pharmacy staff. The training is intended to educate pharmacy staff to know how and when to intervene with THN in response to an overdose.

Over 60 pharmacies have signed up to the THN service, with over 300 pharmacy staff from across Fife having already received training. The development of the service saw 230 THN kits distributed by community pharmacies between April to December 2024, compared to 54 across the whole of the previous financial year.

Priority 3 – INTEGRATION: Treatment and Recovery Services Are Easily Accessible & High Quality

Tier 3 Services

Tier 3 services delivering a specialist intervention as part of a recovery/care or treatment plan are Fife ADP's recovery orientated system of care. The Tier 3 services provide specialist interventions (ORT prescribing, community detoxes, counselling, psychosocial and psychological based interventions and relapse prevention) aimed at supporting people to self-manage, recover and rehabilitate from physical and psychological dependence on substances. There are seven organisations at Tier 3 in Fife: NHS Fife Addiction Services, NHS Fife Alcohol Related Brain Damage (ARBD) Service, NHS Fife Addictions and Psychological Therapies Service, FIRST Community Rehabilitation, FIRST Residential Rehabilitation Access and Support Service, DAPL Counselling Service, Fife Alcohol Support Service and Compass Social Work Service. Below is a summary of Tier 3 services' activity, output and outcomes for 2024/2025.

Organisation	Service	Annual Update in Brief
NHS Fife	**Addictions Psychological Therapies Service**	Psychology have submitted a report on targets, which indicates all targets are being met, and data was provided for outcomes. 74 individuals received psychological assessment and evidence based psychological therapy and 397 consultations with service users took place. All outcomes showed an increased score on the wellbeing scores. MAT Standards 6&10 coaching and training sessions continued, with 54 completed from April 24 - March 25.
NHS Fife	**NHS Fife Addiction Services**	NHS Fife Addiction Services referrals during the period April 24 – March 25: 969 referrals were made into NHS Fife Addiction Services. THN, IEP, wound care and testing for BBVs are being offered at all of NHS Fife main sites. Four harm reduction interventions are offered at all sites. As part of the ongoing implementation of MAT Standard 4, the service are undertaking a focused piece of work with NHS Fife BBV/SH team, to compile an audit of all the people who require testing across Fife for BBV, including people using alcohol services. All nursing staff are being trained on Tier 1 psychological interventions and the service are engaged with the MAT Standards 6 & 10 subgroups to develop further the implementation of this standard. NHS Fife Addiction Services will work with Fife ADP and partners in 2024/2025 to consider how better links can be developed with the Department for Work and Pensions (DWP) and housing agencies across Fife.

Organisation	Service	Annual Update in Brief
DAPL	Counselling Service	This service provided a comprehensive Fife ADP report return, which showed targets were met for counselling, ABIs, Distress Brief Interventions (DBIs) and provision of an out of hours service. The service engaged with 488 individuals from April 2024/March 2025 and from 355 who stated abstinence was their goal, 75% achieved this upon exit from the service. DAPL continues to provide group work, in addition to counselling and one to one work.
First	Community Rehabilitation Team	The Community Rehabilitation team has exceeded its Fife ADP targets and demonstrated outcomes for those engaged with the service. The highest referral rate has come from the Kirkcaldy and Cowdenbeath areas, and 70% of the referrals were for males. The engagement rate from referrals are 58%, which is standard across services.
First	Residential Rehabilitation Service	The Residential Rehabilitation (RR) service received 103 referrals across the year and 43 individuals engaged with the service. Within the year period, 24 individuals entered residential rehabilitation. Positive outcomes were demonstrated for those who accessed residential rehabilitation. Ongoing work continues with Healthcare Improvement Scotland on pathways into residential rehabilitation.

As highlighted above, Tier 3 services are performing well and continually assess and review performance and impact to ensure that services are accessible to those that require the specialist support, as well as still ensuring that these are high quality. Fife ADP works closely with all of its delivery partners to ensure that this priority is achieved and continues to be achieved.

Residential Rehabilitation

Fife ADP and NHS Fife Public Health are leading a multi-agency group to deliver the Health Improvement Scotland Action Plan for Residential Rehabilitation in Fife. Currently we are mapping existing pathways into residential rehabilitation, including specific routes for women who are pregnant or have children under the age of five. This work has strengthened referral processes and improved the local framework to increase access and choice for a broader range of residential rehabilitation units. The current criteria has been removed from the application process to increase service users' rights to attend residential rehabilitation as their first treatment preference. Lived and living experience is fully integrated into this process and have proved invaluable to ensure the best possible outcomes for individuals accessing residential rehabilitation.

Additionally as part of our ongoing work, we have mapped all residential rehabilitation providers included in the national Residential Rehabilitation Framework. This mapping exercise has captured key information on each provider including eligibility criteria such as gender and age range and any barriers such as detox limits. While progress on some aspects of this work has not advanced as quickly as anticipated, a recent reassessment has allowed us to develop a clearer, more structured plan to move forward. Including exploring other avenues of funding opportunities for residential rehabilitation providers funded directly by the SG.

MAT Standards

The MAT Standards are a national human rights-based framework for the safe, effective and accessible delivery of medication (ORT), psychosocial support and psychological interventions and are designed to create a whole system approach to support recovery from drug use, inclusive of Primary Care, mental health, housing, welfare and advocacy services. In addition to this assessment process, the SG require Fife ADP to submit updates quarterly on their implementation plan to support oversight and governance on the central funding awarded to ADPs to deliver the MAT Standards programme.

As can be seen below, Fife is now sitting as green for all of the MAT Standards and the progress can be charted through the graphic so that the journey can be clearly seen. This, however, does not prevent continual improvement methodology from being applied moving forward. All standards have been reviewed in 2024/2025 and an action plan developed, covering areas where small improvements can still be made.

The table below provides an overview of PHS's external validation over the four years of the MAT Standards programme and demonstrates Fife ADP's progress:

MAT Standard	RAGB Status 2021/2022	RAGB Status 2022/2023	RAGB Status 2023/2024	RAGB Status 2024/2025
1 Same Day Access and Prescribing	Amber	Provisional Green	Green	Green
2 Medication Choice Throughout	Amber	Provisional Green	Green	Green
3 Anticipatory Care & Assertive Outreach	Amber	Amber	Green	Green
4 Harm Reduction in Services	Amber	Amber	Green	Green
5 Retention	Amber	Amber	Green	Green
6 Psychological Interventions	Not scored this year	Amber	Provisional Green	Green
7 Primary Care	Not scored this year	Amber	Provisional Green	Green
8 Advocacy, Housing & Welfare	Not scored this year	Amber	Provisional Green	Green
9 Mental Health	Not scored this year	Red	Provisional Green	Green
10 Trauma Informed System of Care	Not scored this year	Provisional Amber	Provisional Green	Green

FAIR Model Assessment Tool

During 2024/2025, PHS reviewed all the assessment measures and protocol in partnership with ADPs and issued new guidance in November 2024 for the year. Part of this guidance required ADPs to complete the FAIR (Facts, Analyse, Identify and Review) Assessment tool on all MAT Standards, with a further deep dive on two of the standards decided by each ADP area on a priority basis. The FAIR Assessment has been developed by the National Collaborative for the Rights of People affected by substance use and is recommended for use by ADPs within the National Charter of Rights published in December 2024. The purpose of the Charter and the FAIR Assessment within it, is threefold:

- Support people affected by substance use to realise the human rights that belong to them.
- Support service providers (statutory, third sector and independent) to understand how to implement the human rights which belong to people affected by substance use.
- Shift the power and change the culture from criminalisation and stigma towards public health and human rights, with people coming to see themselves as rights bearers and service providers having a better sense of their role as duty bearers.

Fife ADP adopted the FAIR template and use this as a basis for self-assessment for year 4's implementation to PHS and for onward planning moving into the final year of delivery. It is expected that once the national programme completes at the end of 2025/2026, Fife ADPs delivery of the standards will be fully embedded and measurement of impact will be conducted on a self-assessment basis, improvements generated and executed in partnership with people with lived and living experience.

The FAIR model requires four stages applied to each of the 10 MAT Standards:

FACTS - What are the facts around MAT Standard priorities for the ADP area, based on an update from the national benchmarking report in the previous year.

ANALYSIS - This requires use of the Availability, Accessibility, Acceptability and Quality (AAAQ) tool applied on a basis of the seven rights detailed in the Charter of Rights for People Affected by Substance Use 2024.

IDENTIFICATION - This sets the actions needed to address the concerns indicated from the analysis. The tool used is PANEL principles (Participatory, Accountability, Non-discriminatory, Engagement and Legality).

REVIEW - This creates a focus on the vision and desired outcomes with respect to the PANEL principles - what was intended, what has been done & how this can be supported by the evidence detailed in the FACTS section

FAIR Action Plan

Standards	Identified Actions (PANEL)	Review Position
1. Same Day Access and Prescribing	• More people need to be seen in less than a week, even though a high majority are scripted on the same day when seen. There is a potential pathway referral system problem which needs further investigation amongst partners (A, E) • Barriers to engagement and access to MAT Standards 1 are going to be handled by the use of the retention team. This will be coupled by discussions with the Living Experience group, who are people struggling to access MAT Standard 1. • Home visit policy will be considered and offered more regularly, capturing the reasons as to why people do not attend and what the barriers might be. This will include discussions with family.	To improve timeliness of access to the service. Experiential interviews will evaluate delivery.
2. Medication Choice at initial assessment and at reviews	• Collaborative care planning approach with service user and family members. Service needs to create a platform for dose and medication review to allow choice to be more fully integrated for long standing patients. (P, A, N, E) • LEP involvement in promoting choice and options, in particular buvidal. (P, E)	To maintain choice across the care group at initial and review stages with patients/family members well informed of the options, supported by numerical and experiential data.
3. Anticipatory Care & Assertive Outreach (third sector provider)	• Maintenance of retention approach across full system of care and ensure phone call contact at missed appointment stage. (A, E) • Repurpose how the retention service is used to respond to appointments missed earlier in treatment, particularly for alcohol and for groups with additional needs/protected characteristics. (P, N, E)	Every person at every stage of the system of care will be contacted after a high risk event to check on their wellbeing and for engagement purposes.
4. Harm Reduction provision within the MAT Standards Services	• MAT Standard Services need to ensure harm reduction is equally available at satellite clinics. (N) • Implementation of wound care within the service and fully mainstreamed into the offer with data capture about conversation, offer and possible treatment. • BBV guidance pack to be completed, and capturing the offer. • Chronic pain guidance and working more closely with Primary Care to ensure THN is supplied broadly to all people at risk.	To ensure harm reduction interventions are offered on a routine basis by all Fife ADP services, where relevant, as part of standard practice.

5. Retention in Services	• Continue with development of positive relationships within Fife ADP services, using MAT Standards 6 &10 learning. (P, E) • Continue to offer alternative appointment types (online, telephone). (E) • Maintain all forms of follow up and discuss disengagement in multi-agency referral and allocation meetings. (A)	Every person at every stage of the system of care will be contacted after a missed appointment to check on their wellbeing and for re-engagement purposes.
6. Psychological Interventions	• Work with individuals with lived experience to design services that are trauma informed for women, polysubstance use and other marginalised groups, whilst expanding the availability of training on trauma informed practices. (P, N, L) • Allow flexible service models that are trauma informed that allow individuals to engage in non-traditional settings. Ensure staff at all levels of the organisation are trained in trauma informed practice. (P, A, E) • Ensure person centred language is used by staff, particularly in correspondence with service users via email/letters. (P, N, E) • Mandatory trauma informed training as part of Fife ADP services Service Level Agreements (SLAs) for all staff. Include regular supervision and support. (A, E)	All staff within Fife ADP services are trained, confident to use and supporting the care group with a trauma informed approach, integral to service delivery.
7. Primary Care	• Test of change of model to improve the coordination of care between Primary and Secondary Care, if chosen by the patient. This includes improving communication and facilitating the removal of “break glass” between Primary Care IT system and NHS Fife Addiction Services system. (P, N, E) • To accept all referrals from Primary Care (regardless of substance used) and act as a referral point to other services within the Tier 2 and Tier 3 system of care, cognisant of the choice of those accessing support/treatment. (P, A, N, L) • To continue to develop localised numerical measures that indicate evidence of an integrated model of care, e.g. number of SCI Gateway referrals, attrition rate between referral and assessment and use this data to identify any indirect discriminatory practice. (A,L) • To communicate more clearly and fully with service users and Primary Care about shared care models, the potential benefits and their rights with support and advice from the LEP. The terminology currently used is not well understood, not cognisant enough of involvement of Primary Care and the different aspects of this for the care group. It may be beneficial to record service user preference for GP involvement at their MAT Standard 1 appointment. (P) • Contribution to public communication messaging to dissolve stigma and the fear of stigma within the care group and shared with all of Primary Care. This should include a deeper understanding of where and how stigma is experienced by the care group. Use this to promote rights, rights to complain and improve language used in Primary Care. (P, A, N, E)	To have an integrated model of person-centred care between Primary Care and NHS Fife Addiction Services which reflects the needs and choices of people with lived experience and their families, inclusive of their rights, and a commitment to address stigma and other barriers. Improvements will be evidenced by experiential data, both of staff and people accessing treatment and by numerical measures reflective of the model.

8. Advocacy, Housing & Welfare	• Offer of independent advocacy and its benefits to be made at first appointment and to consider this in the context of protected characteristics. (P, N, E) • Include mention of advocacy availability in NHS Fife Addiction Services patient letters. (A, E) • To ensure pathways are better understood to income maximisation and housing support through the continuation of the ASIST model at ED. (P, A)	To uphold and protect rights for independent advocacy support for people affected by alcohol and drug use when accessing housing, income and alcohol and drug services.
9. Mental Health	• To understand the barriers for patients to attend appointments where their mental health can be screened and assessed and address these. (A) • To complete a training needs assessment with mental health staff on drug/alcohol knowledge, confidence and skills. (P,A) • To continue to embed ASIST Lite and to make changes to core assessment. (P, A, N) • To adjust guidance and support removal of "break glass" allowing for improved communication/shared care and better care outcomes. (N) • Develop and test an early draft of operational protocol between mental health services and NHS Fife Addiction Services. • Understand referral pathway by mapping out provision and referrals under the four quadrant model (short life working group (SLWG) to focus on this). • Networking event across the full sector to include localities, broad LEP network and grassroot organisations. (P, E). This will support a wider promotion of rights and demonstrate work completed thus far.	That an agreed operational interface document between mental health services and substance use services is in place and this is evidenced in experiential data of staff and people accessing treatment and support.
10. Trauma Informed System of Care	• Work with individuals with lived experience to design services that are trauma informed for women, polysubstance use and other marginalised groups. (P, N) • Flexible service models that are trauma informed that allow individuals to engage in non-traditional settings. Ensure staff at all levels of the organisation are trained in trauma informed practice. (A, N, E) • Ensure person centred language is used by staff, particularly in correspondence with service users via e-mail/letters. Mandatory service user feedback is required from services, to ensure services are always evolving with a trauma informed approach. (A, E)	All services within Fife ADP are considering and adapting spaces and policies to be inclusive and responsive to those who have experienced trauma

Numbers in Treatment Target

As can be seen below, Fife came in just below target for Quarter 2 versus Quarter 1, but only by 1%. It should also be stated that this is based on the previous year's target, as these were only set for years 1 and 2. It is also worth noting that the national performance for 2024/2025 was also down by 1%. This provides some reassurance that locally, the performance is not lagging behind the national average. In terms of performance against the baseline figure, Fife is up by 9% overall, which is, again, similar to the 11% increase that has been reported for Scotland as a whole.

Area	Baseline	Target End of Financial Year 2023/2024	No. in Receipt of ORT – Q1 2024/2025	No. in Receipt of ORT – Q2 2024/2025	% Increase from Q1 to Q2	Overall Increase from Baseline
Scotland			29,476	29,126	↓ -1%	↑ 11%
Fife	1,711	1,865	1,881	1,863	↓ -1%	↑ 9%

Calculation of the 'reach' of the National Naloxone Programme is based on the number of first supplies made to people at risk of opioid overdose. The data items necessary to make these exclusions are available in the agreed national dataset for National Naloxone Programme monitoring of THN supplies from community outlets and prisons.

Local Delivery Plan Drug & Alcohol Waiting Times

The local delivery plan requires that 90% of people accessing Tier 3 support for alcohol and drug issues are seen and assessed within a three week period. Having consistently achieved target in the previous reporting year, it was a far more positive year, with target being met every quarter. This was, in part, due to the exclusion of one service due to reporting issues, however, that would likely have only impacted negatively on one quarter.

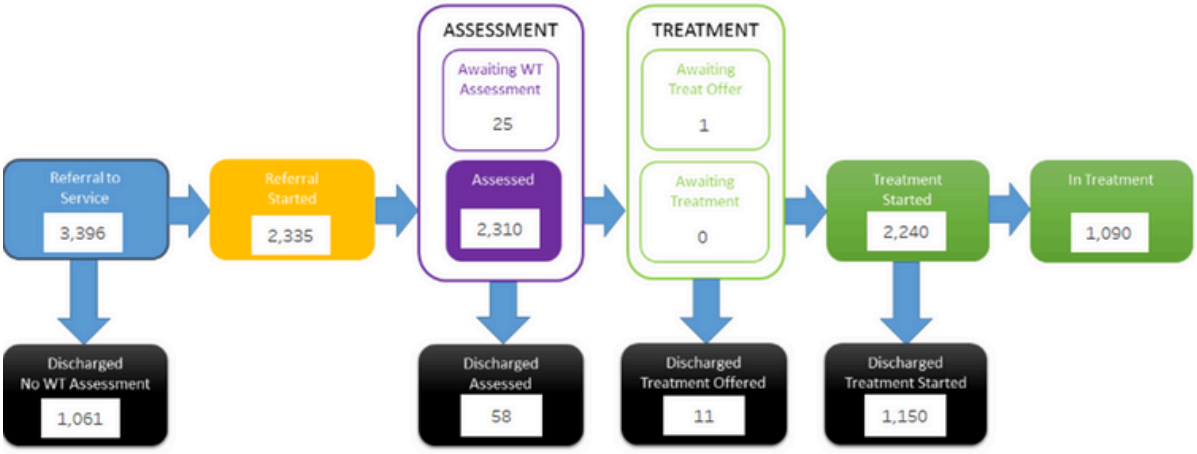
Having had a task group formed for the previous year to identify the root causes for the issues causing the failure to hit or exceed the 90% target, it can clearly be seen that this has impacted positively on last years figures. There was an issue around the figures and error reports for NHS Fife Addiction Services in Quarter 3, which required some dedicated training from the DAISy team and Fife ADP support team. This has enabled more people within the team to support the work and ensure that recording is accurate and up to date and importantly, now highlights the hard work going in to ensure that the vast majority of service users are being seen within the three week target.

Indicator	Target	2022/ 2023	2023/ 2024	2024/ 2025	Performance Indicator
Drug and Alcohol Treatment Waiting Times – Q1	90%	94.1%	85.9%	94.4%	↑
Drug and Alcohol Treatment Waiting Times – Q2	90%	95%	82.9%	92.4%	↑
Drug and Alcohol Treatment Waiting Times – Q3	90%	97%	83.7%	94.2%	↑
Drug and Alcohol Treatment Waiting Times – Q4	90%	94%	93%	92.2% (Est.)	↓

Service & System Performance

Nationally Reported Fife ADP Tier 3 Performance

From April 2024 – March 2025, Fife ADP Tier 3 adult services received 3,396 referrals. 2,240 of the referrals started treatment and 1,090 remained in treatment after March 2025.



People Leaving the System of Care

During 2024/2025, 566 people (with both alcohol and drug problems) left the system of care having completed their treatment and achieved their recovery goals. These are typically improvements in their quality of life, reduction of harms, abstinence from substances and improvements in health and social functioning. This represents 20% of the people receiving support from the system. This is an increase from 281 people in 2022/2023, which only represented 13% of the people in the treatment system. It is important to note that numbers are small as this is about people leaving the system of care on a positive outcome.

'During 2024/2025 566 people left the system of care having completed their treatment and achieved their recovery goals...'

Discharge Category	2022/2023	2023/2024	2024/2025	Total
Treatment incomplete	1,823 (83%)	2,327 (77%)	2,143 (75%)	**6,293 (78%)**
Treatment complete	281 (13%)	554 (18%)	566 (20%)	**1,401 (17%)**
Transfer	52 (3%)	103 (4%)	97 (3%)	**252 (4%)**
Discharge other	30 (1%)	31 (1%)	46 (2%)	**107 (1%)**
TOTAL	**2,186 (100%)**	**3,015 (100%)**	**2,852 (100%)**	8,053 (100%)

Priority 4 – OUTCOME: Quality of Life is Improved to Address Multiple Disadvantages

Fife ADP is committed to addressing areas where multiple disadvantages are being experienced. These are a few examples of the work, support and interventions carried out over the last year:

- A strong collaborative relationship was developed between Fife ADP and the Scottish Recovery Consortium to support those with lived and living experience to collaborate with the Charter of Rights development. Fife Charter of Rights event - Hosted by Scottish Recovery Consortium in collaboration with Fife ADP and held in June. Service users. staff and individuals with lived experience were invited to attend so that they could be supported to understand the Charter of Rights and how that is designed to protect them.
- Independent advocacy continues to be provided by Circles Network, ensuring that all service users have the option of independent advocacy to be able to speak out about issues by providing a voice to those who are experiencing drug and/or alcohol issues, so that they feel heard and involved in the treatment and support services offered to them. 318 individuals engaged with this service in 2024/2025. The main issues addressed continued to be housing and finance, alongside the issue of treatment this year. Circles Network continues to be involved with the LEP and employ two lived experience workers. 24 service users surveyed on exit from the service felt more heard and less stigmatised.

- Compass Social Work service has seen 55 new referrals accepted and 84 cases have been closed in this period. Of the 84 closed cases, 34 people received an initial Compass assessment. 10 people have reported an improvement in their housing/secure tenancy. Eight people have been supported to maintain their GP engagement and three people have been supported to stabilise their substance use. The Compass team have attended eight Adult Support and Protection case conferences and 21 Inter-Agency Referrals have been completed. Staff are now trained to distribute THN and have completed both Tier 1 and Tier 2 psychology training.

Take Home Naloxone Performance

The ongoing distribution of THN is one of the essential interventions required to prevent DRDs. In late 2024 into 2025, there has been the presence, nationally, of synthetic opioids and other unknown substances mixed into the heroin supply throughout Fife and Scotland. A substance being sold as heroin that causes sudden onset of overdose and often requires multiple doses of THN to be administered before an improvement can be seen in the person suffering from the opiate overdose. These have and continue to contribute significantly to harm including NFOs and death. As this requires multiple doses of THN to prevent fatal overdose, higher volumes of distribution and raising of awareness in the care group and community is critical.

Indicator	Target	2022/2023	2023/2024	2024/2025	Performance Indicator
Take Home Naloxone (THN)	1,400	1,098	1,674	1,538	↓

This led to a pharmacy and organisation wide protocol to issue two THN kits every time, instead of one, which ensures that double the dosage is available if anyone finds themselves required to take life maintaining measures. This rapid response to the emerging drug harm was reflected in the SAS NFO reports. Fife ADP continue to commission a harm reduction trainer within With You, a third sector harm reduction specialist service. This role ensures that initial and refresher training, including overdose awareness, are rolled out amongst services and a plan has been developed to mainstream this training, with partners working with people at risk and their families. This ensures that a dedicated worker is responsible for delivering refresher training, including overdose awareness to all Fife ADP and non drug treatment services across Fife.

The project is now in year 3 and a project plan has been developed to mainstream this training throughout ED in Fife, as well as all staff working within Fife Council, who may volunteer to carry THN. Work continues across Fife to train people at risk and their families to carry THN at all times and provide up to date messaging on the importance of this with the everchanging drug trends in Scotland.

"Naloxone is a medicine that rapidly reverses an opioid overdose. It is an opioid antagonist. This means that it attaches to opioid receptors and reverses and blocks the effects of other opioids. Naloxone can quickly restore normal breathing to a person if their breathing has slowed or stopped because of an opioid overdose but, naloxone has no effect on someone who does not have opioids in their system, and it is not a treatment for opioid use disorder. Examples of opioids include heroin, fentanyl, oxycodone (OxyContin®), hydrocodone (Vicodin®), codeine, and morphine."

ABI Performance

Fife ADP has maintained the local delivery plan target for ABIs for three consecutive years. There has been a small decrease in total ABI delivery over the last reporting year with figures 7% lower than in the previous year. The breakdown shows that the decrease is occurring in Primary Care and 'other' providers. It has been encouraging to see increases in delivery in ED and antenatal care.

Indicator	Target	2022/ 2023	2023/ 2024	2024/ 2025	Performance Indicator
Alcohol Brief Interventions (ABIs)	4,187	4,184	6,600	6,155	↓

Number of ABIs delivered in Fife:

Service	2022/2023	2023/2024	2024/2025	Performance Indicator
Primary Care	2,314	3,422	3,361	↓ 2%
A&E	245	581	627	↑ 8%
Antenatal	10	7	12	↑ 71%
Others	1,615	2,590	2,155	↓ 17%
TOTAL	4,184	6,600	6,155	↓ 7%

Lived & Living Experience

Fife ADP has commissioned Scottish Recovery Consortium to enhance and sustain the already established autonomous LEP. This is a recognised subgroup of Fife ADP, with the same rights and responsibilities as other subgroups, to develop policy, strategic direction and contribute to improvements of service delivery. The group is now in its second year under new development and has worked with Fife ADP to contribute to the MAT Standards experiential data, residential rehabilitation and a recovery communities mapping exercise.

An independent living experience group in Dunfermline, supported by the Scottish Drugs Forum, continues to meet on a monthly basis. The group is designed to allow members to feedback about their own experiences throughout Fife to then lead to improvements in the system of care. The group also has a management group, supported by Fife ADP support team, and service partners also attend. This supports immediate changes and adaptions to service models presenting indirect barriers to people accessing support. The group has helped make improvements in various services within Fife ADP, as well as feeding into the MAT Standards and the experiential data programme

Priority 5 – SUSTAINABLE: Children, Families & Communities Affected by Substance Use Are Supported

Service Updates

Fife ADP commissioned services work is integral to providing support and vital interventions to everyone affected by drugs, alcohol or both. This includes all age groups and those around the vulnerable person who, themselves, will require support to manage and cope with their loved ones use of alcohol and/or drugs. They provide information and support family members with such areas as confidence, communication, and general wellbeing. The commissioned services can link them to other services, including local specialist services. Most importantly, they also help people to recognise and understand the importance of looking after themselves too.

Organisation	Service	Annual Update in Brief
Barnardos / Clued-Up	Barnardo's and Clued Up Whole Family Support Service	Clued Up saw 223 new referrals in 2024, the majority of which came from Education. Outcomes for YPs show positive changes in key areas, including improved family relationships and increased knowledge on substances and improved lifestyle choices. For intensive whole family provision, in the reporting year, 45 families and 84 children were supported. Outcomes for families showed improvement, including positive improvement in safety and risk factors for families, leading to a safer and more stable environment.
20 years Scottish Families Affected by Alcohol & Drugs	SFAD	134 individuals engaged with this service through a variety of one to one's and group work. 103 of those involved in the service left feeling better educated about substance use. Family members had other positive outcomes from their engagement with SFAD, including better physical, emotional, and mental health and 10% of family members were trained in THN.

Locality Planning: One Stop Shop Updates

The Fife ADP support team have strong links within the Localities and Communities team, and have a representative at each group to advise around any issues regarding drugs, and/or alcohol. This not only benefits the localities with access to rapid responses, but also provides Fife ADP with vital local knowledge which, across a rural, widespread local authority, is crucial in ensuring that services and supports are targeted appropriately.

KY Clubs have continued to grow in their impact on the local communities with the vast range of supports that they offer. The groups continue to work with Community Managers, Fife ADP services, GP cluster leads, welfare support, housing services, advocacy and family support services, people with lived experience and other community and locality-based staff to help each of them become established. There are now three KY Clubs operating:

- **KY4/5** - *The total number of attendees during the period Apr 2024/Mar 2025 was 605. The weekly average number of people attending was 13.*
- **KY8** - *The total number of attendees during the period was 1,316. The weekly average number of people attending was 25.*
- **KY2** - *The total number of attendees during the period Apr 2024/Mar 2025 was 941. The weekly average number of people attending was 13.*

Of these Clubs, **62 new individuals** have accessed MAT. This is broken down across the Clubs as follows:

- **KY2 - 24**
- **KY4/5 - 10**
- **KY8 - 14**
- **KY Women - 14**

Clubs are performing well, though, a potential new premises for KY4 is being sought as the hours of access at the Maxwell Centre are morning only, and hence, this can be a barrier to service users accessing the service. Rapid Access Clinics are really drawing in new service users, who tend to engage with Clubs once they have attended Clinics. All Clubs offer external services, i.e. wound nurses, With You staff, welfare workers, NHS Fife Addiction Services, NHS Fife BBV/SH team, NHS Fife Tissue Viability team and Compass Social Work service, who also attend regularly to offer their service to people who need to be seen in their communities. At the One Stop Shops, service users can find support for those ready to access treatment and triages can be conducted in a private room with same day access to treatment. Other supports include:

- **Hot food and supplies of food and other items.**
- **Social activities and contact, reducing isolation.**
- **THN training and supply of kits and other harm reduction support.**
- **Access to NHS Fife Addiction Services on site.**
- **Fife based recovery services.**
- **Same day prescribing (MAT Standards 1, 2, and 3) also available.**
- **BBV testing.**
- **Onsite mental health support.**
- **Individual and family support.**
- **Housing support.**
- **Welfare checks.**

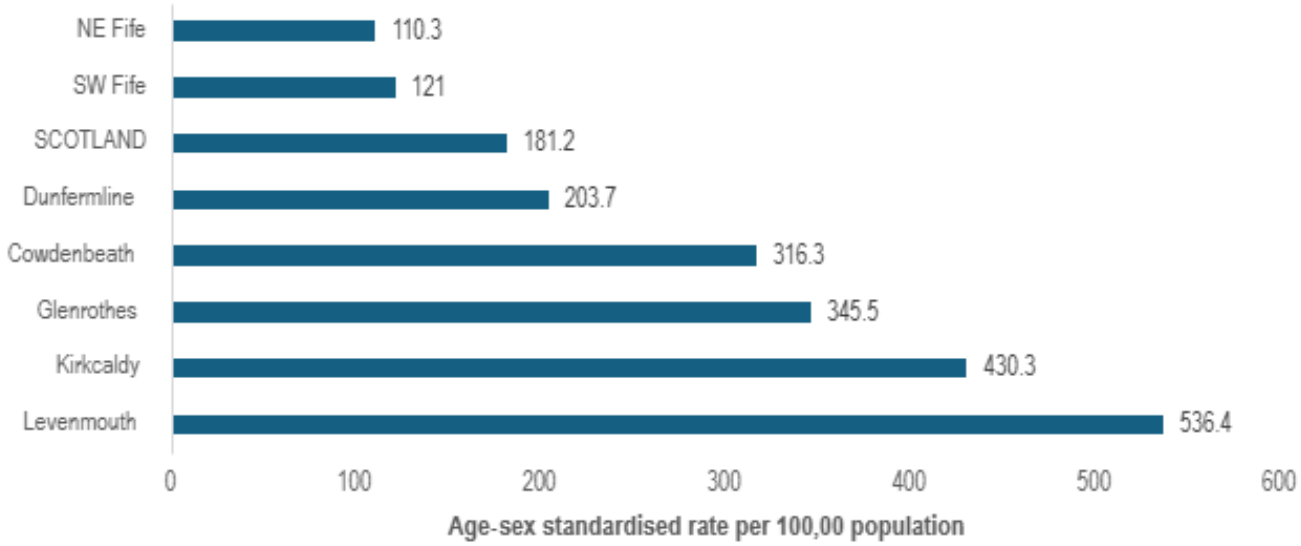
National and Local Response: Context and Performance

"Drug related hospital admissions are defined as general acute inpatient and day case stays with diagnosis of drug use in any position."*

Drug related hospital admissions in Fife: These are measured by a three year rolling average number and then age-sex standardised per 100,000 population. The official 2024/2025 figures have yet to be published, however, Fife rates over the 2021/2022 - 2023/2024 period were 291.

Drug related hospital stays have continued on the same trajectory and, as such, have increased again. It has been consistently higher than the Scottish average, with increasing harms related to opioid hospital admissions. As well as this, overdose related stays are higher in Fife than in Scotland in the last six years. The Levenmouth locality has the highest rate of drug related stays than any other locality.

Drug-related general acute/psychiatric combined stay rates1 by Fife Locality (Scotland; 2023/2024*)



1 **Uses European Standard Population 2013 and National Records of Scotland 2023 mid-year population estimates.**
***Provisional**

**Terminology updated from "misuse" to use, in the avoidance of using stigmatising language.*

Active Communities

Active Communities and Fife ADP worked together to arrange outdoor activity sessions for individuals in recovery. This was started with the intention of increasing the confidence of those in recovery so they will be able to attend other outdoor activity events in Fife. By integrating those in recovery with local groups in Fife, it will help to reduce the stigma associated with individuals in recovery from alcohol and/or drugs and prove that people can take part in activity and enjoy opportunities in their community, even if they have not yet become abstinent from substances.

Active Communities look to achieve the following outcomes for everyone in Fife through their work with Fife ADP:

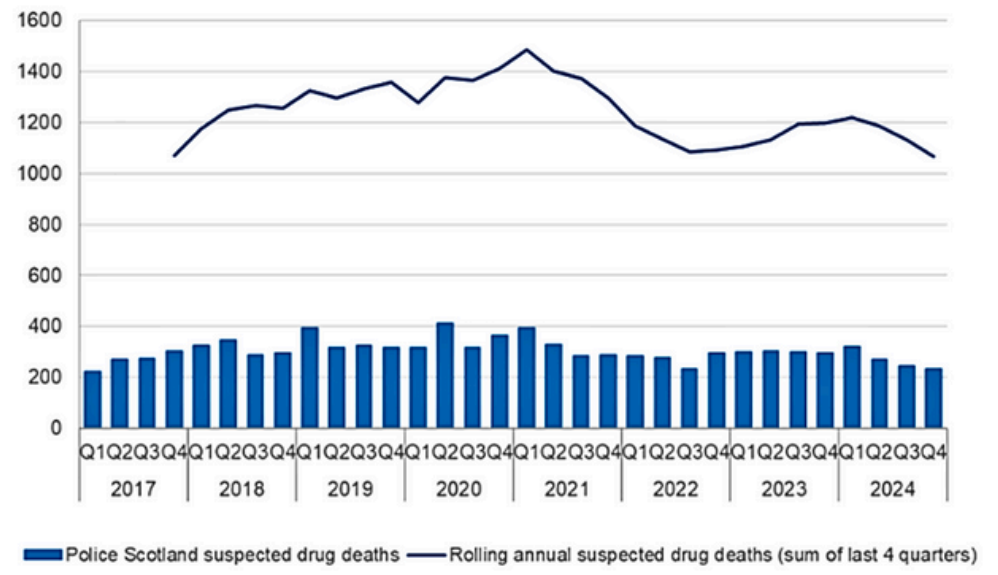
- Encouraging and enabling the inactive to be more active
- Encouraging and enabling the active to stay active throughout life
- Developing physical confidence and competence form the earliest age
- Improving our active infrastructure – people and places
- Supporting wellbeing and resilience in communities through physical activity and sport
- Improving opportunities to participate, progress and achieve in sport
- Help to reduce the stigma associated with individuals in recovery

'Fife ADP recognise the right for everyone to define their own recovery and will collaborate with other partnerships to make this possible.'

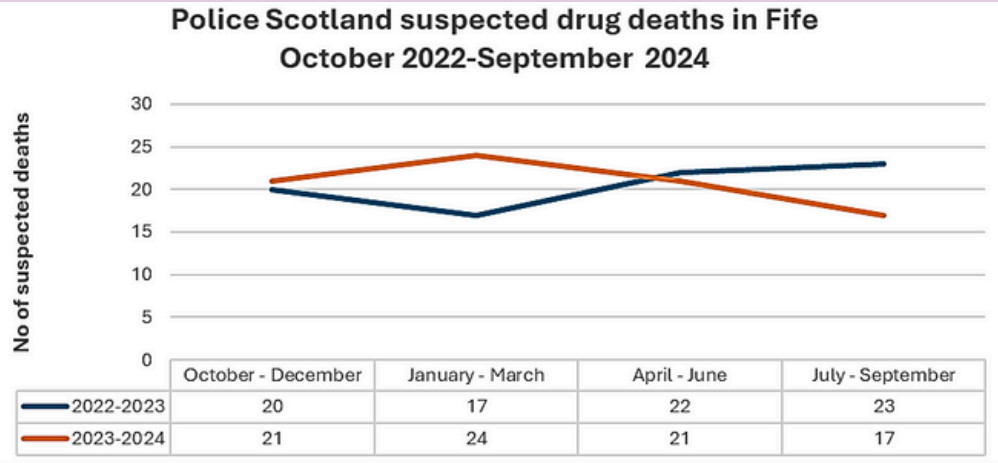
Drug Related Deaths in Fife

The official 2024 DRD figures for Scotland have yet to be published by the NRS, however, the following is being reported on the suspected DRD data gathered by Police Scotland. It provides an indication of current trends in suspected drug deaths in Scotland. This data is sourced from management information from Police Scotland, who compile figures on the basis of reports from Police officers attending scenes of death. Classification as a suspected drug death is based on an officer's observations and initial enquiries at the scene of death. Police Scotland suspected drug deaths correlate very closely with the official NRS drug death statistics:

- **Drug death rates in Scotland overall have reduced from 1,197 in 2023 to 1,065 in 2024.**
- **The Police Scotland suspected drug deaths report showed 1,092 deaths in 2022 and 1,197 suspected deaths in 2023 in Scotland overall, a 10% increase, however, 2024 saw a decrease to below the figures from the previous 2 years with 1,065 suspected DRDs, an 11% decrease on 2023.**
- **Fife figures from the Police report showed 83 suspected DRDs in 2023 and 89 DRDs in 2024.**



Number of Police Scotland suspected drug deaths by quarter and year, Scotland, January 2017 – December 2024



	October - December	January - March	April - June	July - September
2022-2023	20	17	22	23
2023-2024	21	24	21	17

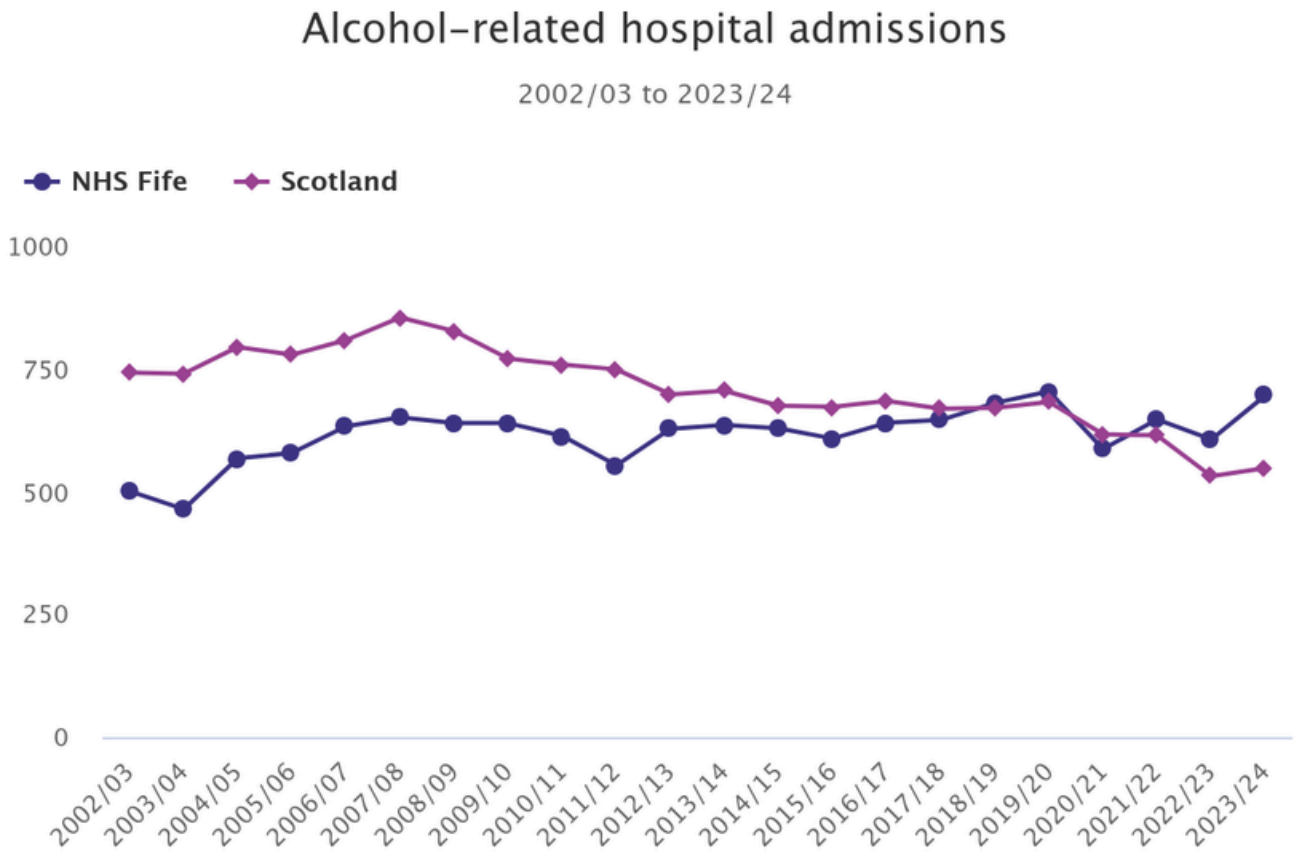
The above graph shows the suspected DRDs in Fife for October 2022 - September 2024 based on each reporting period. The Police total in Fife for October 2022/September 2023 was 82 and for October 2023/September 2024 it was 83, a 1% increase, although it should be noted that this is an estimation and not the official figures reported by NRS.

Alcohol Related Hospital Admissions

Fife has had an increase in **wholly attributable**** alcohol hospital stays from 606.8 per 100,000 population in 2022/2023 to 696.7 per 100,000 population in 2023/2024. Overall, in Scotland, there was also an increase per 100,000 of the population, but this was a far less sharp increase. For Scotland, the rate in 2022/2023 was 532.0, which increased to 548.5 in 2023/2024.

As a percentage increase, that comes in as circa 3% whereas the percentage in Fife equates to circa 15%. That's an increase at five times the rate of the national figure for Scotland. It is essential that this is a priority focus for Fife ADP throughout the subsequent years, in order to see a difference.

Recent work to address this includes, alcohol mapping across Fife to identify target areas and establish effective pathways for people to access support. There is also a Primary Care pilot, linking in NHS Fife Addiction Services support directly into a GP Practice for early intervention and dedicated support and working collaboratively with the NHS Fife Addiction Services to define an alcohol pathway, a streamline access to support for those that need it most.

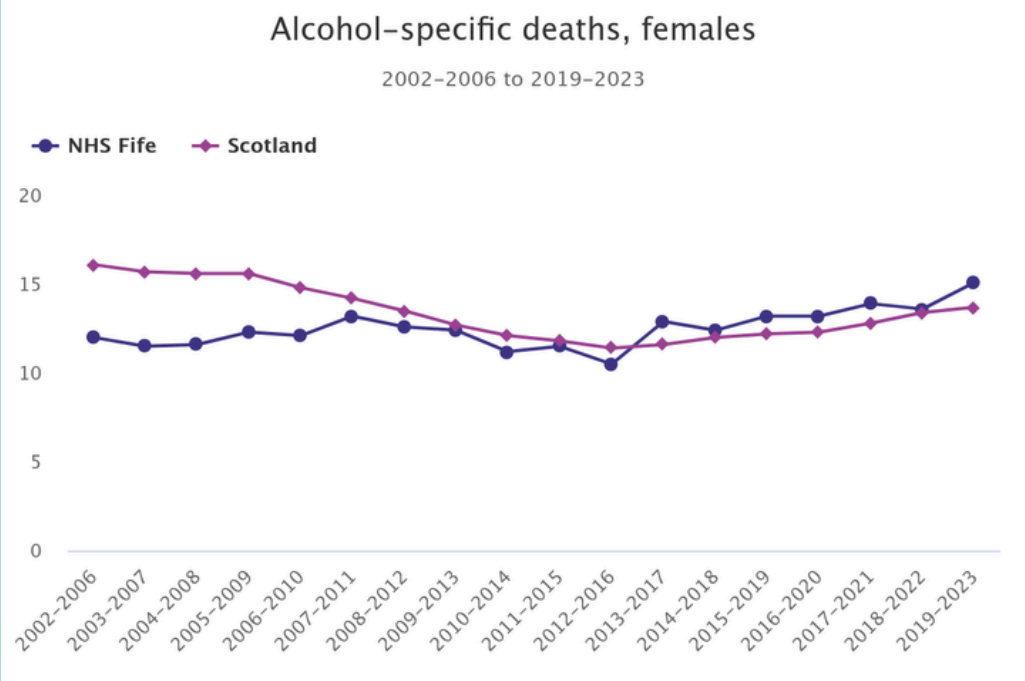


Fife wholly attributable alcohol hospital stays, compared to Scotland by European Age-Sex Standardised Rate per 100,000

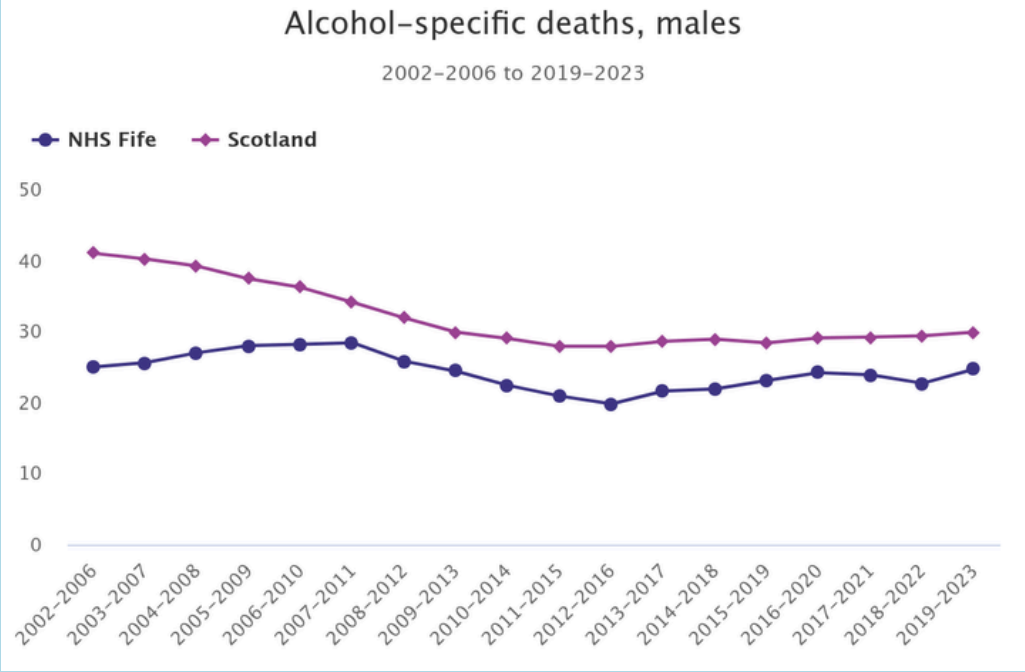
****Wholly attributable is defined as health conditions where each death is a direct consequence of alcohol use.**

Alcohol Specific Deaths

Alcohol specific deaths in Fife, on the whole, have been lower than the Scottish average. The number of women dying from alcohol specific deaths is higher however, than the Scottish average and continuing to track above it.



The number of men dying from alcohol specific deaths continues to be marginally lower than the Scottish average:



As mentioned before, Fife ADP have been definitive in taking action to prevent drug and alcohol deaths. Processes have been reviewed and put in place, including:

- Addressing Alcohol Harms & Deaths group
- **Multi-Agency Prevention of Drug Deaths group**
- YP drug harm awareness campaign
- **Drug Harm Assessment Group**
- NFO review group

Next Steps for 2025/2026

The strategy delivery plan has been updated for the second year of the ambitious three year Strategy for 2024 - 2027. There has been a reprioritisation of themes, significant changes to the original plan and a renewed focus on the areas that require it most in Fife. These are already in development, as detailed in the strategy delivery plan and some key areas are:

- **"Review and learn from previous processes for reviewing drug related deaths to achieve a robust, preventative and up-to-date action plan with real time data and impact."**
- **"Increase access to and aftercare/support from Residential Rehabilitation."**
- **"Develop integrated and coordinated models of shared care and support between Fife ADP services and mental health and Fife ADP Services Primary Care for people affected by alcohol and drug use."**

The other priorities going on in tandem with this are also very focused on areas where gaps have been identified through reviewing pathways, localities within Fife and workshopping with all related services to understand current and local needs. For example, more work is under waywith:

- **Whole system approach**

- **Early intervention with young people**

- **Support for the children and families of people using substances**

The residential rehabilitation service will continue on its continuous improvement approach in partnership with Fife ADP support team to continue providing positive outcomes but to also reach priority groups and identify pathways and partnerships to increase the reach of this type of support.

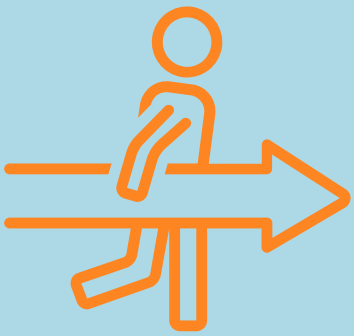
A focus will continue to be on alcohol related harm and deaths and the complexities of reporting around those as well as the contributing factors involved. As now outlined in the delivery plan, the Addressing Alcohol Specific Death Group has formed an implementation group to support wider organisations in utilising the data collated and the overarching themes from their findings. The six priorities have been broken down into smaller tasks/actions to be implemented.

The two test of Change Housing Projects, funded through the 'Ending Homelessness Together Fund', have been given further funding to extend the projects by a further full year. The hospital navigator service (now known as ASIST) is now based within the hospital environment and is operating extended hours in order to engage with as many people as possible that are presenting with potential housing issues and in all cases, substance use issues.

The Dedicated Addictions Worker posts continue to operate flexibly and provide a range of support including, directly to housing support service users, providing training within the housing sector to upskill staff teams for quicker signposting and early interventions. The flexibility of this role also allows them to support other teams, respond quickly to urgent needs and support knowledge and information sharing to guide services to all of the drug and alcohol services available to provide specialist support.

Much has already been done to engage with and ensure that there is participation from individuals with lived or living experience within the strategic planning and policy work of Fife ADP. A dedicated worker has been commissioned through the Scottish Recovery Consortium to ensure that people and their families are fully supported to co-produce, collaborate and are offered development opportunities on a volunteer basis. Due to staffing changes, it is essential that the new worker is employed and integrated into the post as quickly as possible.

The aim is to ensure all Fife ADP subgroups are collaborating directly with people with lived and living experience and the voice of lived and living experience is present across the HSCP and other universal service provision where their voice can benefit service improvements, strategic planning and policy development. It is vital that they give input and insight into the changes employed through MAT Standards subgroups with special attention paid to their assessment of services using the Trauma Informed Lens tool.



Moving forward it is essential that Fife ADP continue to implement its strategy and focus on the key areas in order to prevent, intervene early, provide quality in treatment and support to all the people of Fife. The continued implementation of the MAT Standards will be a critical focus for Fife ADP and nationally as we continue to embed the standards within Fife ADP services but also mainstream the approach in universal provision where people with alcohol and drug problems struggle to engage. A complete system approach to the MAT Standards is required in Primary Care, Mental Health, Housing and Welfare and Advocacy Services.

Fife ADP will continue to strive to enable all the people of Fife affected by drug and alcohol use to live healthy, safe, satisfying lives free from stigma.

Further Information

01 Fife ADP Strategy 2024 – 2027: ADP-Strategy-24-27-07.05.24.pdf

02 Charter of Rights for People Affected by Substance Use 2024: Charter of Rights

03 Fife ADP Drug Related Death Report 2023: Drug Related Deaths Report 2023

04 National Drug Mission Priorities Plan 2022 – 2026: National Drugs Mission Plan: 2022-2026 (www.gov.scot)

05 Medication Assisted Treatment Standards 2021: Medication Assisted Treatment (MAT) standards: access, choice, support (www.gov.scot)

06 Rights Respect and Recovery 2018 - Rights, respect and recovery: alcohol and drug treatment strategy - gov.scot (www.gov.scot)

07 Alcohol Framework Preventing Harm 2018: Alcohol Framework 2018 (www.gov.scot)

08 Fife ADP Getting Help: Getting Help | Fife ADP

Glossary of Terms

AASDG – Addressing Alcohol Specific Death Group, a subgroup of the ADP

ABI – Alcohol Brief Intervention, a short, structured screening and intervention delivered to people at risk of alcohol related harm

ADP – Alcohol and Drug Partnership

APTS – Addiction Psychology Therapy Service, an NHS Fife Psychology Service

ARBD - Alcohol Related Brain Damage

Compass - ADP funded Social Work Team

DAISY – Drug and Alcohol Information System, a national database for recording waiting times for treatment for Tier 3 services.

DAPL – Drug and Alcohol Psychotherapies Limited

DBI – Drug Brief Intervention, a short, structured intervention delivered to people at risk of drug related harm

FIRST – Fife Intensive Rehabilitation Substance use Team.

JCG – Joint Commissioning Group, a subgroup of the ADP

LEP – Lived Experience Panel, a subgroup of the ADP.

MAT – Medication Assisted Treatment, a framework for the safe, consistent and effective delivery of care for people who can benefit from opiate replacement therapy.

MDDRG – Multi-agency Drug Death Review Group, a subgroup of the ADP

OST/ORT – Opiate Substitute Therapy or Opiate Replacement Therapy

RADAR – Rapid Action Drug Alerts and Response, Public Health Scotland Team

SACRO – Scottish Association for the Care and Resettlement of Offenders

SFAD – Scottish Families Affected by Alcohol and Drugs

SLA - Service Level Agreement

THN – Take-Home Naloxone, a medication that can reverse the effects of an opioid overdose.

UNCRC – United Nations Convention on the Rights of the Child

WY – With You, an ADP harm reduction service

Prevention, Protection, Early Intervention, Treatment & Recovery for all.

Fife Alcohol & Drug Partnership
Brunton House, 318 High St.,
Cowdenbeath,
Fife, KY4 9QU
03451 55 55 55
www.fifeadp.gov.uk
@FifeADP