



Fife Alcohol and Drug Partnership

Prevention, Protection, Early Intervention, Treatment & Recovery

FIFE ALCOHOL & DRUG
PARTNERSHIP

Annual Report

2023 – 2024

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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 final year of the previous ADP Strategy 2020 – 2023, and development of the new strategy features as a main part of last year's work. The previous strategy had five main themes;

Executive Summary

- **Prevention** of problematic substance use involving work with young people.
- **Early Intervention** to prevent worsening or development of harms which will make recovery less challenging.
- **Recovery and treatment** for those who have developed a physical and psychological dependence on substances.
- **Protection** of children and young people affected by another's use of substances.
- **Whole Population Approach** with an aim of achieving and maintaining health supporting levels of alcohol consumption.

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.

Commissioning and Quality Improvement

Family Support: Continued whole family support improvements to the joint commissioning with Education and Children's services for whole family and young people. Continuing to embed adult family support and carer's service and development of a new project supporting primary school to secondary school transitions for children affected by substance use.

Residential Rehabilitation: Currently working with the Lived Experience panel to implement the recommendations set out within the Health Improvement Scotland report.

Medication Treatment Standards Improvement Programme 2023/24: Fife is in the third year of implementing a rights based, safe and effective levels of care for people who can benefit from opiate replacement therapy. Fife ADP and its services are externally validated by Public Health Scotland. MAT 1 to 5, same day prescribing, and choice of medication, response to high-risk situations, harm reduction provision and retention in service have all progressed to green. MAT 6 to 10 in particular psychological interventions, primary care and mental health shared care models and independent advocacy have all been assessed as provisional green, This demonstrates significant progress in the implementation of all of the standards.

Assertive Outreach and Harm Reduction: We have continued to embed and support quality improvement for ADP services working in police custody suites, prison, hospital and in communities. The new ADP social work service Compass and the expansion of the one stop shop models into community areas where harm and risk of substance related death are high, has been very beneficial. These provisions protect people and support them to access help from a broad range of services including BBVSH, the Well and treatment for wider health care and social needs.

Lived/Living Experience Panels: Fife ADP has continued to commission Scottish Recovery Consortium to enhance and sustain the already established autonomous Lived Experience Panel. An independent living experience group in Dunfermline – with a management group implementing feedback and improvements – has progressed to a second year with several regular attenders.



Fife ADP Strategic Performance and Service Delivery

Fife ADP and its services are required to record and achieve national targets for Alcohol Brief Interventions (ABI), local delivery for numbers in treatment target and 90% of people seen within three weeks and Take-Home Naloxone distribution. The ADP also tracks national datasets on substance related deaths to assess impact of the strategy. Furthermore, each project and operational service is monitored on a six month and annual basis against evidence-based activity, outputs and outcomes as contained within the strategy.

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 Scotland report for 2023 for drug related deaths will be available in August 2024 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. Alcohol specific deaths are lower in Fife than the Scottish average but more is needed and the current approach is outlined.

Service Delivery: Most services (Tier 3 and Tier 2) 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 2024 – 2025

Fife ADP priorities over the final year of this strategy are further embedding the MAT Standards using its community based one stop shop approach in Cowdenbeath and Kirkcaldy, enhancing the voice of lived and living experience, an improvement approach for early engagement and treatment of those affected by alcohol use and further targeted prevention work with people and communities at risk of harm. Development of a new strategy will be a main focus for the partnership aligned with the health and social care partnership strategy.

ADP Introduction & Reporting

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. Membership is drawn from senior officers of Fife Council, Fife Health and Social Care Partnership, NHS Fife, Fife Constabulary, HMP Perth Prison, Voluntary Sector alcohol and drug services and people with lived and living experience.

The 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 include national groups. In its role of supporting the ADP Committee and its services, the 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

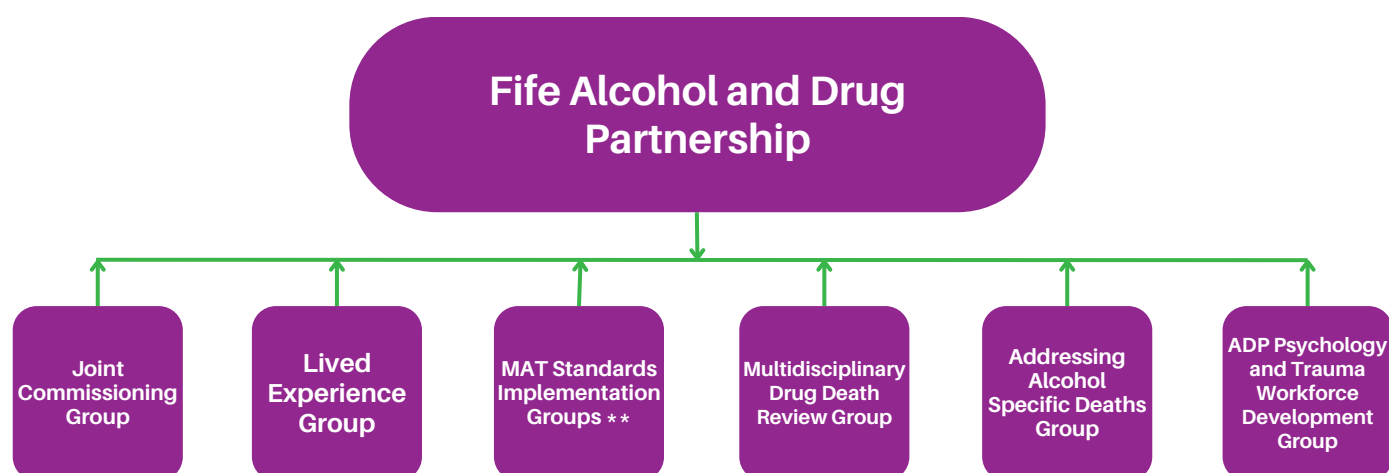
to their Integrated Joint Board and nationally to the Scottish Government on progress and improvements achieved from the annual ring-fenced government alcohol and drugs allocation and partner agency contributions. This funding is routed through NHS Boards to Integrated Authorities for onward allocation.

The Fife ADP Annual Report 2023/24 is in two parts:

- A local annual report for the Health and Social Care Partnership, detail on structure, governance, commissioning and improvement work and performance of commissioned and statutory services undertaken in the year to progress towards outcomes within the ADP Strategy 2020 to 2023.
- 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 – 26. 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.

ADP Structure & Governance

The 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 guided by national strategy and expectations for the MAT Standards 2021 and Drug Mission Priorities 2022–26



** MAT Standards Implementation Groups now include:

- MAT 7 - Primary Care Shared Model of Care
- MAT 9 - Mental Health and Substance Use Implementation Group

During the year the ADP subgroups expanded to incorporate an increased focus on the MAT Standards. This included three new groups;

- One group to progress work on shared care models for primary care (MAT 7)
- One to integrate care between substance use services and mental health (MAT 9)
- The third group focuses on improving service delivery and service places to be more trauma informed and responsive

The Addressing Alcohol Specific Death group concluded its quantitative and qualitative research, making several recommendations for improvement to the ADP Committee. This has since been replaced by an implementation group with a new chair to progress the recommendations Fife Reducing Alcohol-Related Harm Group (FRARHG). The main objective is to improve whole system services and reduce alcohol-related harm including alcohol specific deaths in Fife

The Joint Commissioning Group continues in its role of strategic commissioning, managing performance and overseeing the financial position and reporting of the ADP, including the new commissioning for the Drug Mission Priorities and MAT Standards. The Lived Experience Panel (established December 2020) continued in its role of amplifying the voices of people with lived and living experience within the ADP Committee and its structure ensuring the work places the needs of the care group at the heart of strategic planning and service improvement. Scottish Recovery Consortium continues in its support and facilitation role, sustaining the Panel, providing training and support and contributing to increase the coverage of lived experience across other directorates and partnerships.

ADP National Strategy

Rights, Respect and Recovery (2018)



The National Strategy for Alcohol and Drug use “Rights, Respect, Recovery” was published in November 2018. The strategy reaffirms that individuals’ families and communities have the right to:

- **health and life free from the harms of alcohol and drugs**
- **be treated with dignity and respect**
- **be fully supported within communities to find their own type of recovery**

It is mapped against five key themes followed by the ADP Committee in the development of the Fife ADP Strategy for 2020 to 2023.

These themes are:

- **Prevention** of problematic substance use involving work with young people.
- **Early Intervention** to prevent worsening or development of harms which will make recovery less challenging.
- **Recovery and treatment** for those who have developed a physical and psychological dependence on substances.
- **Protection** of children and young people affected by another’s use of substances.
- **Whole Population Approach** with an aim of achieving and maintaining health supporting levels of alcohol consumption.

Progress against these themes is provided in the commissioning and improvement work section of this report.



The Alcohol Framework for Preventing Harm (2018)

The National Strategy for prevention of harm associated with alcohol use focuses on four main impacts:

- Protecting Young People
- Tackling Health Inequality
- Improving National Systems
- Whole Population Approaches

Aspects of this strategy were again mapped against the themes in the ADP Strategy 2020 – 23.

The Drug Mission Priorities (2022 – 26)

The drug mission priorities were announced in January 2021 focused entirely on preventing the drug related deaths in Scotland, these are focused on:

- Whole family support and development of family inclusive practice
- Increase the capacity and access to Residential Rehabilitation for women, veterans, those with dual diagnosis and young people.
- Fast and appropriate access to treatment in line with the Medication Assisted Treatment:

1. People at high risk are proactively identified and offered support.
2. Effective pathways between justice and community services are established.
3. Effective near-fatal overdose pathways are established across Scotland.
4. People are supported to make informed decisions about treatment options.
5. People are supported to remain in treatment for as long as requested.
6. People have the option to start MAT from the same day of presentation.
7. People have access to high standard, evidence based, compassionate and quality assured treatment options.

- Assertive outreach and Non-fatal overdose pathways
- Lived Experience Panel

Progress against these priorities is provided in the commissioning and improvement work section of this report.

Medication Assisted Treatment Standards (2021)

The Medication Assisted Treatment Standards were published in June 2021 by the Scottish Government with an expectation of full implementation in all ADP areas by the end of that financial year. The standards are part of the National Drug Mission Policy response to address the prominent levels of drug related deaths in Scotland, declared a national public health crisis by the First Minister.

Commitment to the implementation of the standards was adopted very early by the ADP and as such the standards aligned with work already underway to improve assertive outreach, harm reduction, advocacy and increasing participation and engagement with people with lived and living experience. They are also strategically aligned with early intervention and whole family support service redevelopment.

The ten standards are simple statements intended to be understood by those who use the system of care and drug and alcohol services and presented with evidence and rationale for their inclusion in the framework. NHS Board, ADP and HSCP responsibilities for each standard are detailed with process, numerical and experiential measures required to be submitted to Public Health Scotland and Scottish Government on an annual basis. The MAT Standards are:

1. All people accessing services have the option to start MAT from the same day of presentation.
 2. **All people are supported to make an informed choice on what medication to use for MAT and the appropriate dose.**
 3. All people at high risk of drug-related harm are proactively identified and offered support to commence or continue MAT.
 4. **All people can access evidence-based harm reduction at the point of MAT delivery.**
 5. All people receive support to remain in treatment for as long as requested.
 6. **The system that provides MAT is psychologically informed (tier 1); routinely delivers evidence-based low intensity psychosocial interventions (tier 2); and supports individuals to grow social connections.**
 7. All people have the option of MAT shared with Primary Care.
 8. **All people have access to independent advocacy as well as support for housing, welfare, and income needs.**
 9. All people with co-occurring drug use and mental health difficulties can receive mental health care at the point of MAT delivery.
 10. **All people receive trauma informed care.**
-

National Collaborative Draft Charter of Rights for People Affected by substance use (2023)

The roll out and implementation of this Charter when finalised and published in 2024, will enshrine an approach which protects and ensures people's human rights across multiple public service delivery and locally the ADP will be required to lead on this work. Both the EQIA completed as part of the development of the strategy has highlighted the consideration of this and the Public Health Needs Assessment Synthesis has developed a deeper recognition of the differing needs of people within the care group.

This applies to understanding the increased risk of prevalence of problematic substance use for some groups and increased difficulties for access and retention in services. The Charter will require a deeper focus on the role of duty bearer when providing any service to people affected by alcohol and drug use.

Commissioning and Improvement Work – Fife ADP Strategy 2020 – 2023

In 2021/22, Fife ADP was awarded a £1.3 million per annum across six new priorities for a five year period to implement the Drug Mission Priorities 2022 – 2026. Given the high number of alcohol specific deaths in Fife, the ADP decided any additional investment would be cognisant of this priority too and would work on across both alcohol and drugs, reflective of the poly nature of use.

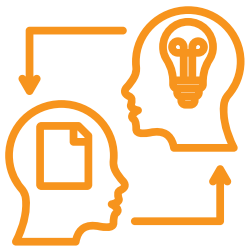
Additional funding for MAT Standards implementation has also been awarded following the development of a project specification plan. Below is a summary of improvement work funded from these additional investments and their progression over the last year.



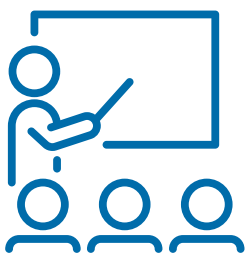
Priority 1: Children, Young People, Whole Family and Adult Family Carers Support



- Joint strategic planning and commissioning as part of Children Services Planning to create the Whole Family Support and Young Person's Service. Barnardo's and Clued Up provide whole family support at additional level for all referrers and provision for YP up to the age of 26.



- Adult family support provision across Fife co located with Tier 3 alcohol and drug services but mainly NHS Addictions to provide key working, CRAFT based support and group working to any adult family member affected by another's substance use. The service was commissioned by ADP and is provided by Scottish Families Affected by Alcohol & Drugs and will take a carers'-based approach with an aim of providing support to carers to improve their own wellbeing. A further aim is to improve access to services for the member of the family using alcohol or drugs by providing family members with knowledge, tools, and techniques to improve motivation and support recovery. Take Home Naloxone/overdose awareness training and general harm reduction advice for alcohol are also provided as part of the approach for the prevention of substance use deaths.



- Fife ADP had invested in training sessions for Family Inclusive Practice with the aim to improve service delivery recognising the value added and the rights of family members to be involved in care if their loved one wishes it. NHS Addictions has taken a lead role in completing this training.



- Additional capacity created by ADP funding allocated to Kinship Care Social Work Team for two social work positions to focus on family intervention/support and management and prevention of trauma within the family.

Priority 2: Increase Access and Improve Residential Rehabilitation



- Fife ADP are now working on the Health Improvement Scotland self-assessment report, to drive forward the recommendations included within the report. The Lived Experience panel will identify 3–4 recommendations from the 12 within the report, to be taken forward by a Short Life Working Group. The Short Life Working Group will include representation from Fife ADP support team, FIRST, Addiction Services, Lived Experience and any other relevant services that are identified in the process of looking at the recommendations.



- Fife ADP are currently reviewing the National Flexible Framework for Residential Rehabilitation developed by Scotland Excel. The benefits of the flexible framework include a top price limit for residential rehabilitation places, and all providers are registered with the appropriate bodies. The disadvantages include being limited to only the providers who are signed up to the framework.



Priority 3 & 4: Increase of Assertive Outreach, Non-Fatal Overdose Response and Harm Reduction

- **SACRO:** This project continues to provide increased assertive outreach for those in custody suites within Fife. The service works by actively linking people into a wide range of groups and support after having been in police custody. The service received 229 referrals for people who have entered custody suites in Fife. Of that, 76% of those who were involved with the service self-reported an improvement in their mental health and wellbeing. SACRO have been increasing their assertive outreach response across Fife and they actively support and signpost people to 104 different services. These include housing support, family support, employability, mental health, sports and wellbeing and alcohol and drug support. During this time, 42 naloxone kits were also distributed to service users.
- **Retention Service:** The retention service received 216 referrals which was an increase of 12% from the previous year. On average clients remain with the service for 3 months from the beginning of their journey to stabilising in the appropriate service. 67% of service users had a planned discharge within 3 months. The remaining service users have either had an internal transfer or the support was no longer required. Drugs continue to be the largest substance use problem reported by service users with 84%. However, alcohol use remains lower than previous years with 9% of the overall referrals.

- Phoenix Futures:** Phoenix Futures have been continuing their work through the peer and prison mentoring service. In one year, the service received 39 referrals with an 80% engagement rate. More females have engaged in the service this year with a 20% increase to the previous year. This is due to the service now working at the new women's custody unit. The workers continue to support people returning to Fife with conducting a individualised recovery plan prior to release. Of the service users that have engaged with the project, 77% have made progress towards reducing alcohol use and 60% of people have made progress towards abstinence. 33 naloxone kits were distributed during this time. The Recovery Through Nature project has had 27 people engage with the project in the last year. All 27 individuals have reported and improvement in their physical, emotional, and mental health. 17 of those are currently working towards achieving abstinence. All service users have received further support such as employability and attending SMART recovery meetings.
 - WAWY Harm Reduction Trainer:** A full time harm reduction worker based within WAWY was employed to increase the distribution of naloxone across Fife in 2023. The ADP, based on evidence from the needs assessment, estimated the total target for naloxone distribution in 2023 should be 1,400 kits. The final target at the end of Q4 23 was 1,674. The project has worked with supporting the commissioned ADP services to highlight the importance of naloxone being available to those at need as well as their families and as a result, services have increased their distribution. A short life working group was established with the support of Fife Council locality development officer. This further enabled the harm reduction worked to provide community training over multiple sessions where over 50 people attended in total. Finally, the worker has also been supporting naloxone distribution within community pharmacy, high street shops, foodbanks and bus stations to reduce the stigma of substance use across Fife.
 - Liberation Panel:** The ADP support team are currently in the final stages of developing a liberation meeting. The purpose of the meeting is to discuss those returning to Fife on a short-term or remand sentence. The weekly meeting is person centred and will involve key partners including social work, substance use services, addiction services, housing and other third sector services. The project will run for an initial 3 months before evaluating its progress.
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- **Harm Reduction (injecting equipment provision, take home naloxone, wound care, testing for BBV):** Provided by services at point of need. The ADP has conducted an audit of Take-Home Naloxone distribution both within its services and its wider partners and concluded that there are further training needs for overdose awareness, take home naloxone training at an individual and training level and support to access the equipment including support to report. From this the ADP has funded a specialist trainer to develop a Fife wide plan to improve distribution and to reduce stigma by promoting take home naloxone as part of a first aid approach given the prevalence of drug related deaths across Scotland. Furthermore, the ADP has supported the development of peer led distribution of Take-Home Naloxone in partnership with We are With You and Scottish Drugs Forum. This involves people with lived and living experienced trained to raise overdose awareness and distribute equipment with people at risk.
 - **Hospital Liaison Service:** The ADP will continue to redevelop this in reach and outreach partnership – provided by NHS Fife Addiction Service, We Are With You and ADAPT – to support people whose alcohol and drug use has reached crisis point and who are not getting a service, or the service provided has not yet been beneficial for their recovery. Improvements have included support and attendance at Levenmouth’s Home First project responding to individuals at risk of needing to attend ED or be admitted to hospital due to substance use. Another development in year is to increase third sector response to those attending hospital due to alcohol problems. The service has also improved referral pathways from ED to the service directly.
 - **Compass Social Work Service:** This project commenced in 2023/24. This is a partnership between Fife Social Work Adults and Fife NHS Addictions Psychology and Therapy Service has provided support to adults affected by alcohol or drug use who have complex, severe additional needs which make it difficult to access and engage in treatment and support and/or be retained in services. This will also provide additionality to people supported through the Hospital Liaison Service whose needs include social care and support and treatment for complex childhood and adult trauma. The service has embedded very quickly into the existing treatment system.
 - **Increased Assertive Outreach:** Approaches for those in custody and in prison, delivering harm reduction and providing active linkage into universal and specialised alcohol and drug support and treatment in the community. These services are provided by both SACRO and Phoenix Futures.
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Priority 5: Fife MAT Standards Progress 2023– 2024

- Fife Alcohol and Drug Partnership (FADP) and its services have completed the third year of a five-year funded programme to implement the Medication Assisted Treatment (MAT) Standards for the improvement of care and support to people receiving opiate replacement therapy.
 - The MAT standards are a national human rights-based framework for the safe, effective and accessible delivery of medication, – opiate replacement therapy (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. Across Scotland each Health and Social Care Partnership is externally validated by Public Health Scotland on its progress towards implementation of the 10 standards based on numerical, process and experiential data provided by its ADP on an annual basis. Each ADP is then awarded a RAGB (red, amber, green or blue) status for each of the standards.
 - At end of year, Fife ADP submitted its experiential, numerical and process information to evidence progress during 2023/24 to Public Health Scotland for all 10 standards. Process information includes pathways, protocols and guidance produced locally to standardise and align service and systems delivery with the standards. Numerical is the performance against pre-determined target-based measures usually applied to staff training or to patients being offered components of service delivery. Experiential is the ADP plan to gather the views of patients, family members and staff using semi structured qualitative interviews and the extent to which this feedback is used to improve MAT Standards delivery during the year.
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- In addition to this assessment process, the Scottish Government require the 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.
- Public Health Scotland has provided feedback on Fife's submission. For Fife ADP, the final assessment indicates a status of green fully implemented for MAT 1 to 5 and partial green (strong progress towards full implementation) for MAT 6 to 10. Partial green on MAT 6 to 10 is the highest score available to ADPs, due to limitations on the numerical measures set by Public Health Scotland, thus Fife has achieved the best possible position for its MAT Standard implementation progress for the last year.



The table below provide an overview of Public Health Scotland's external validation over the three years of the MAT programme and demonstrates Fife ADP's progress:

MAT Standard	RAGB Status 2021/22	RAGB Status 2022/23	RAGB Status 2023/24
1 Same Day Access and Prescribing	Amber	Provisional Green	Green
2 Medication Choice throughout	Amber	Provisional Green	Green
3 Anticipatory Care & Assertive Outreach	Amber	Amber	Green
4 Harm Reduction in Services	Amber	Amber	Green
5 Retention	Amber	Amber	Green
6 Psychological Interventions	Not scored this year	Amber	Provisional Green
7 Primary Care	Not scored this year	Amber	Provisional Green
8 Advocacy, Housing, Welfare	Not scored this year	Amber	Provisional Green
9 Mental Health	Not scored this year	Red	Provisional Green
10 Trauma Informed System of Care	Not scored this year	Provisional Amber	Provisional Green

Locality Planning: One Stop Shop KY2 and KY5 Development

In April 2023, Fife ADP Joint Commissioning Group approved the development of additional one stop shops to build on the success of the KY8 Club in Methil. Fife ADP support team gathered and analysed all available data indicating harm, substance related death and prevalence based on local service data and established with the support of the HSCP short life working groups.

These groups worked with Community Managers, 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 rapidly develop one stop shops in Kirkcaldy and Cowdenbeath areas. These one stop shops provide a warm, welcoming and safe space for people affected by alcohol and drugs to attend to meet with service in an informal setting and to enjoy a bite to eat, a warm drink and engage with support at their own time and choosing.

Available at the one stop shops are information, advice and harm reduction support and for those ready to access treatment, triages can be conducted in a private room and same day access to treatment for either alcohol or drug dependency is available. NHS Addictions, NHS BBV&SH team, tissue viability team and ADP Social Work team also attend regularly to offer their service to people who need to be seen in their communities. A summary of what is available is below but all three one stop shops are different responding separately to the needs and requests of those that attend:



- Hot food on the day, supplies of food and other items to relieve the cost of living crisis.



- Social activities and contact, reducing isolation and promoting connectivity based on a holistic approach.



- Naloxone training and supply of kits and other harm reduction advice and support.



- Access to NHS Addiction Services on site and Fife based Recovery Services with same day prescribing (MAT 1, MAT 2, and MAT 3) also available.



- Blood Borne Virus (BBV) testing.



- Onsite mental health support provided by NHS Addictions and third sector



- Individual and family support provided by a commissioned third sector service.



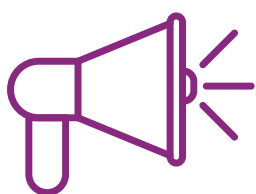
- Housing support, welfare checks and active linkage to attend other services.

Numbers in Treatment Target

Baseline	Target at the end of financial year 2023–2024	Numbers in receipt of ORT – Q1 2023/24	Numbers in receipt of ORT – Q2 2023/24	Fife % increase from Q1 to Q2	Overall Increase from Baseline
1,711	1,865	1,881	1,899	↑ 1%	↑ 11%

Fife, over a two-year period, is expected to increase and maintain its numbers in treatment target from baseline by 9% or n=154 patients. After year one, the target increased by 8.29% to 142 patients receiving opiate replacement therapy in Fife. This demonstrated a success in increasing access and retention within the service.

Priority 6: Lived/Living Experience Panels & Advocacy



- Fife ADP has commissioned Scottish Recovery Consortium to enhance and sustain the already established autonomous Lived Experience Panel. This is a recognised subgroup of the ADP with the same rights and responsibilities as other subgroups to develop policy, strategic direction and contribute to improvements of service delivery. Scottish Recovery Consortium will support the LEP in its next steps of improving the reach of the voice of lived and living experience across all subgroups of the ADP and in other relevant partnerships of the Health and Social Care Partnership. There will be training, support, and development available for the members of the LEP and a plan to embed their experience across the ADP including its subgroups and within relevant settings of the HSCP. Since the group commenced, the panel have successfully contributed to the ADP Strategy, supported the implementation of MAT Standards, input into the ADP Alcohol Specific Death Group, residential rehabilitation and are currently working on a recovery communities mapping exercise across Fife.
 - Fife ADP have a commissioned advocacy service (Circles). The two workers within this service have lived experience and work with individuals to increase confidence and individuals' ability to advocate for themselves. They help with a number of issues including access to treatment services within Fife ADP, housing issues and money advice.
 - An independent living experience group in Dunfermline with a management group implementing feedback and improvements.
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New Strategy 2024 – 2027: Development 2023

The ADP Support Team developed a project plan, working group and installed a project board to produce the new strategy. The 2020 – 2023 ADP Strategy was reviewed during six focus sessions with the working group, two sessions with the lived experience panel and the living experience group and four sessions with family members attending Scottish Families Affected by Alcohol and Drugs support groups in Fife. This review provided a reflection of the work achieved throughout the previous strategy.

Wider consultation occurred during two events, one with the Health and Social Care Extended Leadership Team and a Wider Stakeholder Consultation Event in August 2023.

In addition, NHS Fife Public Health developed a Needs Synthesis 2023 and analysed national and local data on use of substances and a focus on groups experiencing additional needs or vulnerabilities. Its research consisted of a synthesis of five service user and people with lived and living experiences evaluations commissioned by the ADP. During October to December 2023, in partnership with HSCP Participation and Engagement Team a consultation plan was developed, bringing together the views of communities, the general public and people with lived experience of substance use or working in services.

The above approach enabled the ADP to develop the vision, mission statements, six strategic themes and the principles and values underpinning how the strategy is delivered and implemented.

The new ADP vision for 2024 – 2027 is:

“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 have been matched against 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](#).



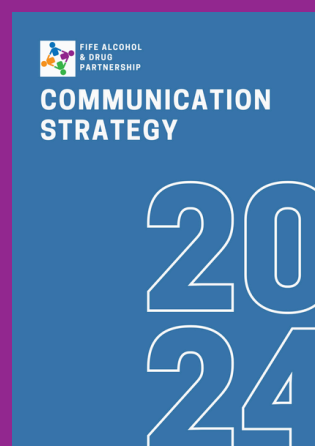
New Drug Alert Process and Protocol & Communication Strategy: Development 2024

A new Emerging Drug Harms SOP has been written up to standardise the response to substances that appear to be causing significant harm, clusters of worrying trends or intelligence from partner agencies. The aim is to take the learnings from recent incidents and create a pathway and process to ensure that the response is immediate, proportionate and targeted. Having conducted a live test of the process, further refinements have been made and the final draft submitted for approval.

It was also identified that there was a need to create, support and facilitate a weekly task group meeting to review and assess the near fatal overdose reports coming through from the Scottish Ambulance Service (SAS). Utilising the commissioned service provided by ADAPT, input and intelligence from the SAS along with the data and knowledge held Fife ADAP, the aim is to identify trends, hot spots, commonalities in substances/symptoms and those appearing on the list multiple times to put in place any reasonable measures that could prevent or minimise harm wherever possible.

Fife ADP have also created a new Communication Strategy, acknowledging feedback from services both commissioned and non-commissioned as well as service users' needs and preferences to create a strategy tailored to those needs. Five key areas have been explored and relevant actions agreed in order to improve upon these areas which are:

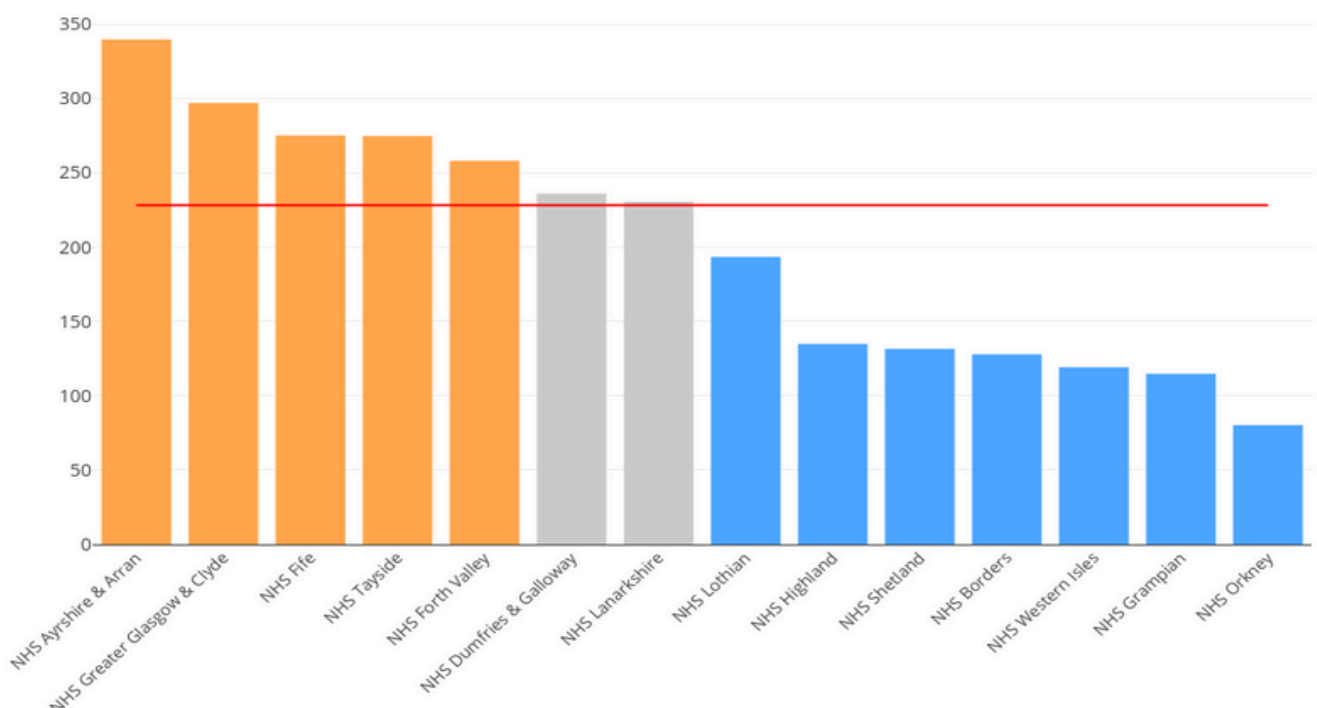
- **Fife ADP rebrand**
- **New Fife ADP website**
- **Fife ADP social media refresh**
- **Design alignment with HSCP**
- **Universal standards for comms**



National and Local Response: Context and Performance

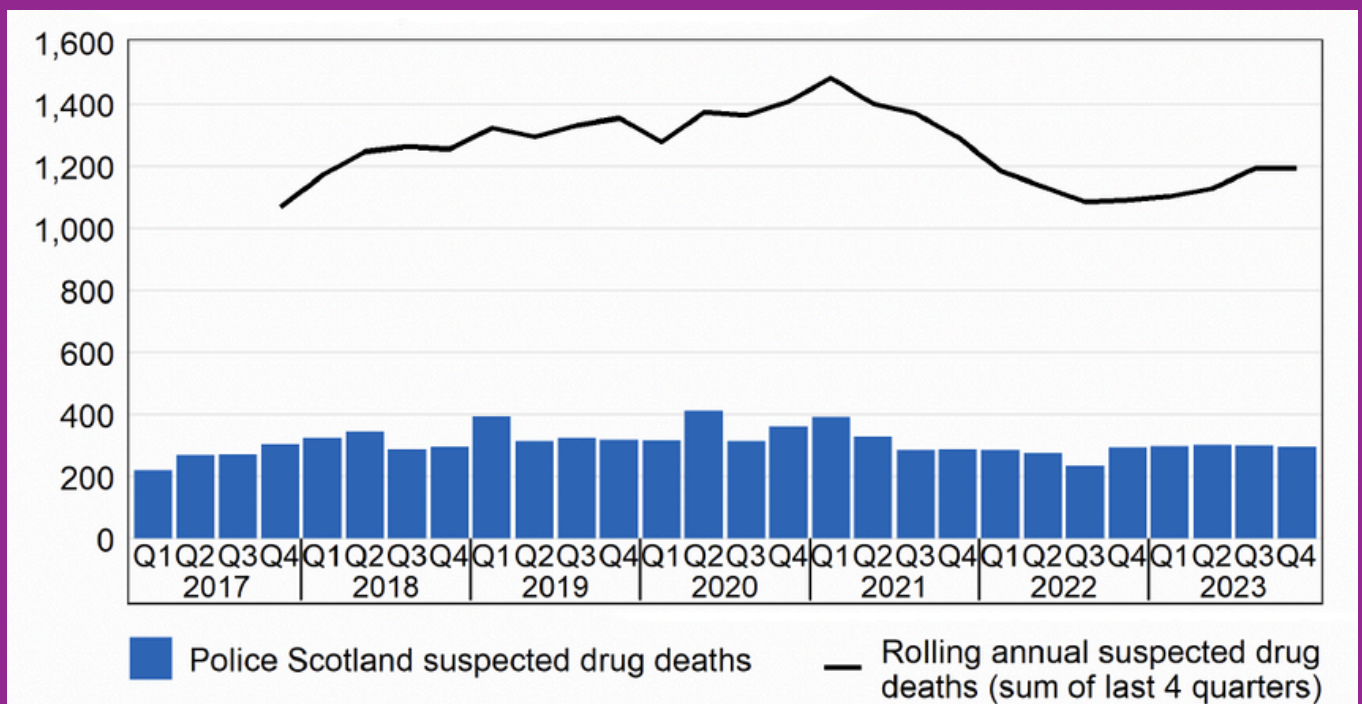
Drug related hospital admissions in Fife: Drug related hospital admissions are defined as general acute inpatient and day case stays with diagnosis of drug misuse in any position. They are measured by a 3-year rolling average number and then age-sex standardised per 100,000 population. The official 2022/2023 figures have yet to be published, however Fife rates over the 2018/2019–2020/2021 period was 288. However, Drug related hospital stays have increased significantly and have been consistently higher than the Scottish average with increasing harms related to benzodiazepine hospital admissions. As well as this, overdose related stays are higher in Fife than in Scotland in the last 5 years. The Levenmouth locality has the highest rate of drug related stays than any other locality.

Drug-related hospital admissions
Health boards compared against Scotland - 2019/20-2021/22

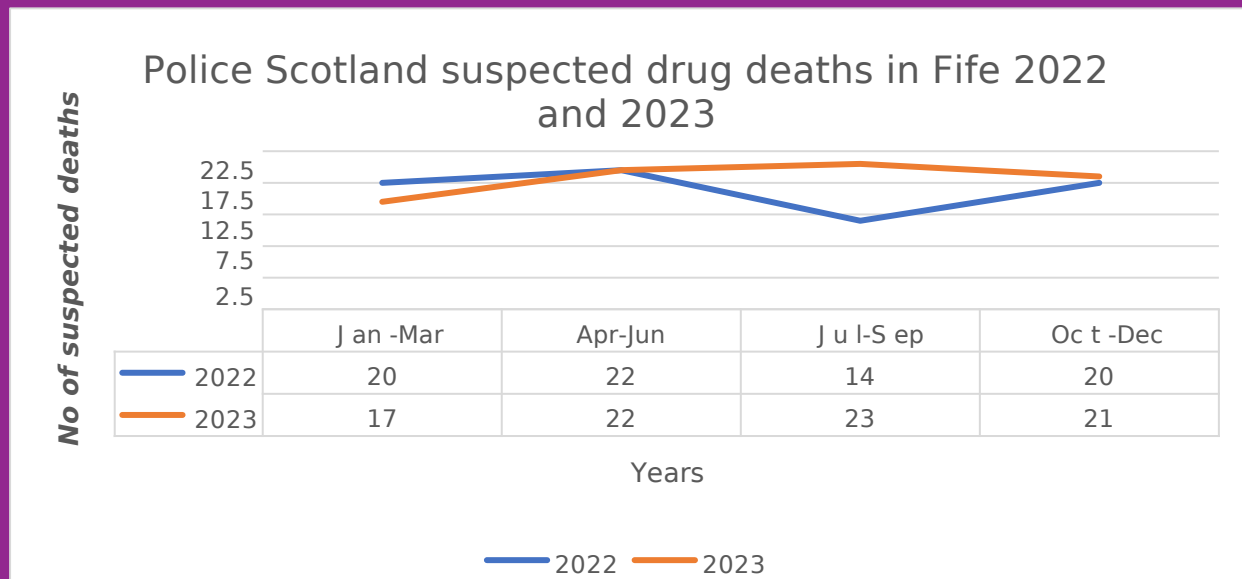


Drug related deaths in Fife: The official 2023 drug related death figures for Scotland have yet to be published by the National Records of Scotland (NRS) however the following is being reported on the suspected drug related deaths data gathered by Police Scotland. It provides an indication of current 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:

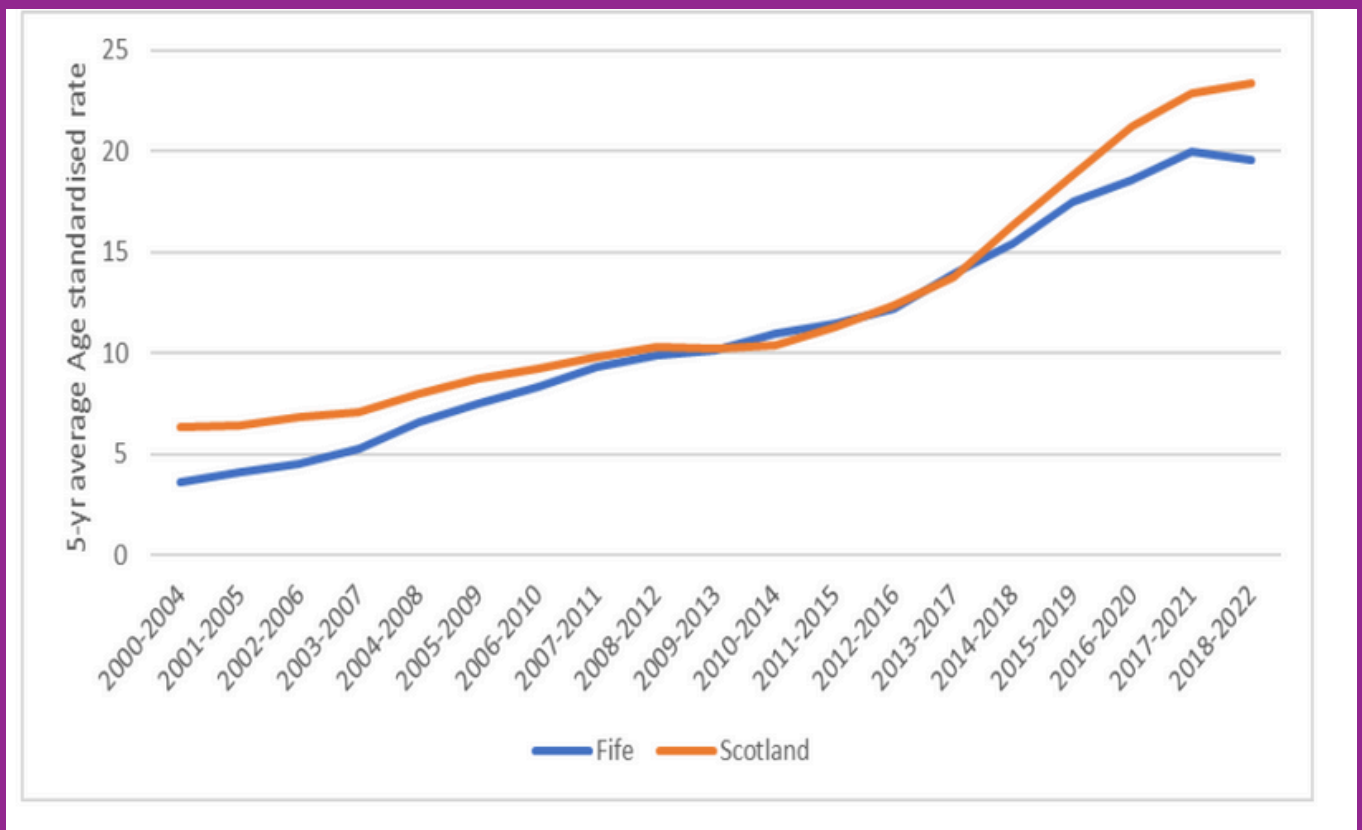
- Drug death rates in Scotland overall have reduced from 1,330 in 2021 to 1,051 in 2022.
- The Police Scotland suspected drug deaths report showed 1092 deaths in 2022 and 1,197 suspected deaths in 2023 in Scotland overall, a 10% increase.
- Fife figures from the Police report showed 76 suspected drug related deaths in 2022 and 83 deaths in 2023.



Number of Police Scotland suspected drug deaths by quarter and year Scotland, January 2017 to December 2023




The above graph shows the suspected drug-related deaths in Fife for 2022 and 2023 based on each reporting period. The Police total in Fife for 2022 was 76 and in 2023 it was 83 a 9% increase. Although it should be noted that this is an estimation and not the official figures reported by National Record Scotland.



Five-year average age-standardised rates per 100,000 population of drug-related deaths in Fife and Scotland

The above graph indicates the standardised rates per 100,000 population on a 5-year rolling average of official Drug Related Deaths and presents the challenges still faced in Fife and across Scotland. Fife has had a lower rate than Scotland since 2015-2019 and the gap between them has widened in more recent years.

Take Home Naloxone Performance

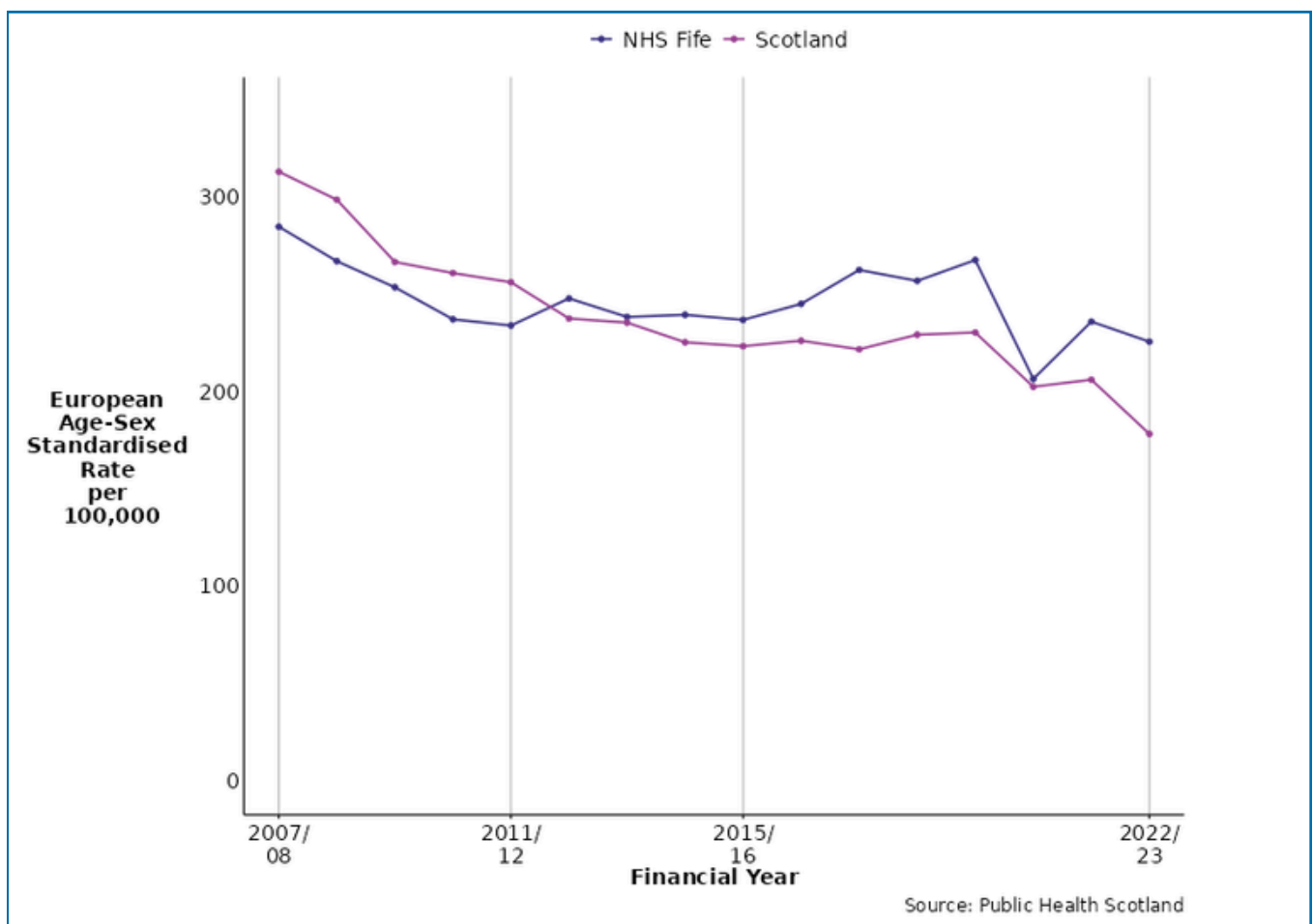
Indicator	Target	2022-2023	2023-2024	Performance Indicator
Take Home Naloxone (THN)	1,400	1,098	1,674	

Increasing coverage of Take Home Naloxone (overdose reversal medication) is one of the essential interventions required to prevent drug related deaths. During the year, Fife ADP conducted an audit of its Take Home Naloxone performance amongst its statutory and commissioned services, identifying barriers to distribution and working collegiately on a recovery plan to restore the target of 1,400 needed across Fife.

In addition, Fife ADP has commissioned a harm reduction trainer within We Are With You, a third sector harm reduction specialist service. This role will ensure that initial and refresher training, including overdose awareness, are rolled out amongst our services and a plan has been developed to mainstream this training with partners working with people at risk and their families. An extremely positive outcome for the ADP over the year is an increase in distribution of 52% from last year's performance.

Alcohol Related Hospital Admissions

Fife has had a decrease in **wholly attributable**** alcohol hospital stays from 667.7 per 100,000 population in 21/22 to 626.4 per 100,000 population in 22/23.




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

For mental and behavioural disorders caused by alcohol Fife had a decrease from 181.1 per 100,000 population in 21/22 to 162.7 per 100,000 population in 22/23. For acute intoxication, Fife was above the Scottish average. However, there was a decrease from 21/22 in Fife and Scotland.






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

ABI Performance

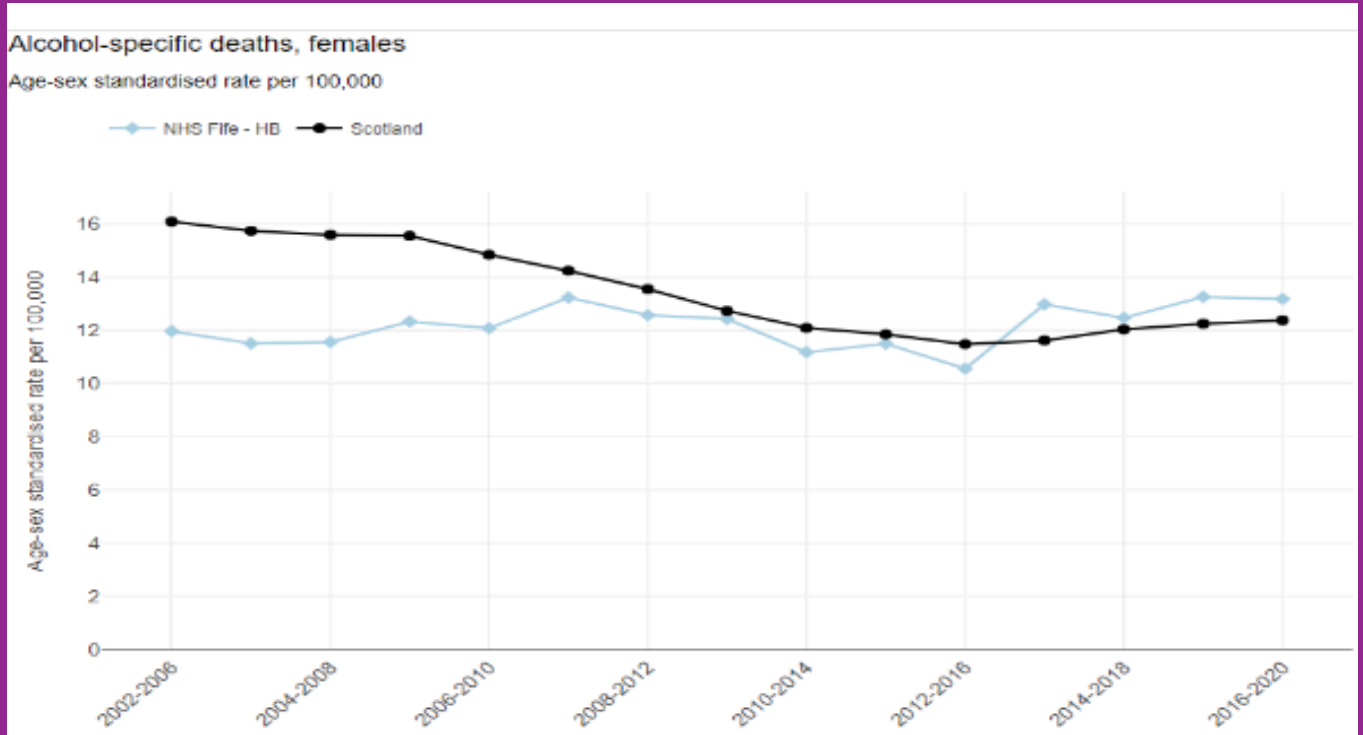
The Scottish Government are currently reviewing the local target for Alcohol Brief Interventions. Given that this is the second year this information has been collated since the pandemic, Fife's performance is higher than the pre-pandemic target.

Indicator	Target	2022-2023	2023-2024	Performance Indicator
Alcohol Brief Interventions (ABIs)	4,187	4,184	6,600	

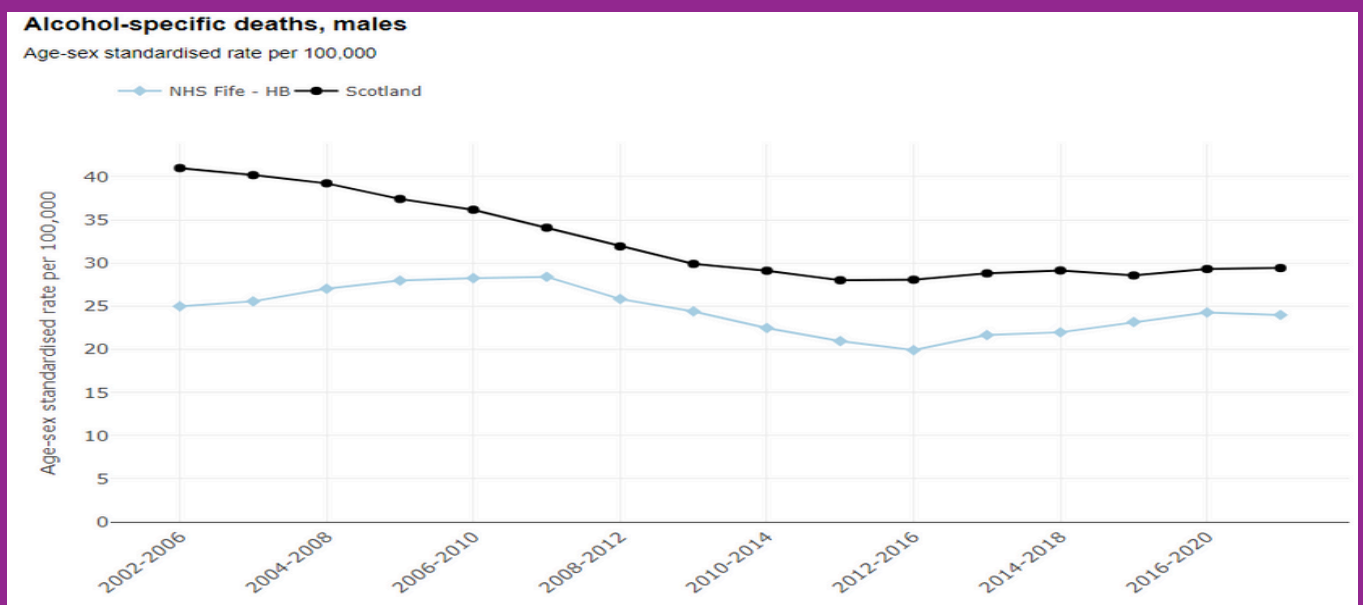
Number of ABIs delivered in Fife:

Service	2022-2023	2023-2024	Performance Indicator
Primary Care	2314	3422	 48%
A&E	245	581	 137%
Antenatal	10	7	 30%
Others	1615	2590	 60%
TOTAL	4184	6600	 58%

Alcohol specific deaths in Fife on a whole have been lower than the Scottish average. The number of women dying from alcohol specific deaths is marginally higher however than the Scottish average.



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

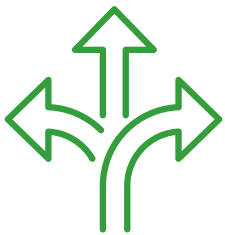


Addressing Alcohol Harm and Death Group

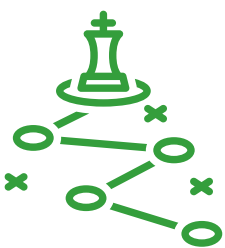
The Addressing Alcohol Harm and Death Group (AAHDG) is a subgroup of the JCG that focuses on the prevention of harm and premature mortality with the ADP strategic aim to develop a recovery orientated alcohol and treatment support system of care. The group oversees six recommendations from the previous Alcohol Specific Death Group which are:



1. As part of the evaluation of the hospital liaison service, it is essential to assess current connections between A&E, outpatient services and inpatient services across various specialities including gastroenterology, general surgery, orthopaedics and third sector services. Furthermore, the assessment should encompass the pathways and support mechanisms available for individuals post alcohol detox including prescription practises, ensuring their comprehensiveness and effectiveness by integrating third sector services alongside primary and secondary care.



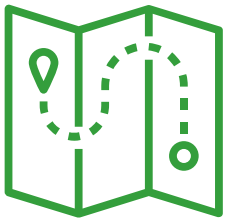
2. Create specialised pathways for priority and marginalised groups incorporating multi-agency risk assessment protocols. Including, identifying individuals at high risk of an alcohol specific death through Gastroenterology and actively engaging them in appropriate services.



3. Develop a comprehensive strategy to enhance engagement and retention in alcohol services by linking to the MAT Standard 5 work and using this as a benchmark of good practise. This work should include a review of service users within ADP funded services who use alcohol compared to the number of individuals who use drugs. Subsequently work should be carried out to address the barriers faced by referrers and service users to increase access to alcohol services whilst considering and preparing capacity impact estimates on services and the system of care.



4. Examine shared care protocols between specialist services, GPs and community pharmacies for people who drink alcohol at harmful levels. Share care may include prescribing where competent practitioners are in place. Additionally review guidance, practice and capacity for thiamine and folic acid prescribing for patients with and prior to the development of alcoholic liver disease.



5. Undertake a thorough alcohol service mapping and gap analysis exercise, of the services already available to us within the ADP. This will include bringing third sector alcohol services in particular FASS under the remit of the strategic function of the ADP. This should include considering capacity and supply in the treatment system and how resources can be aligned on a locality basis to better to respond to targeted increases in access and uptake of services for alcohol use by those at risk of alcohol specific death and harm.



6. Examine the current pathway for alcohol treatment and support from primary care and other main referral destinations, against UK clinical guidelines for alcohol treatment. Considering the use of rapid access clinic and establish wrap around support for those at high risk of alcohol harm and alcohol specific death.



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 disappointing to miss target in every quarter for this reporting year.

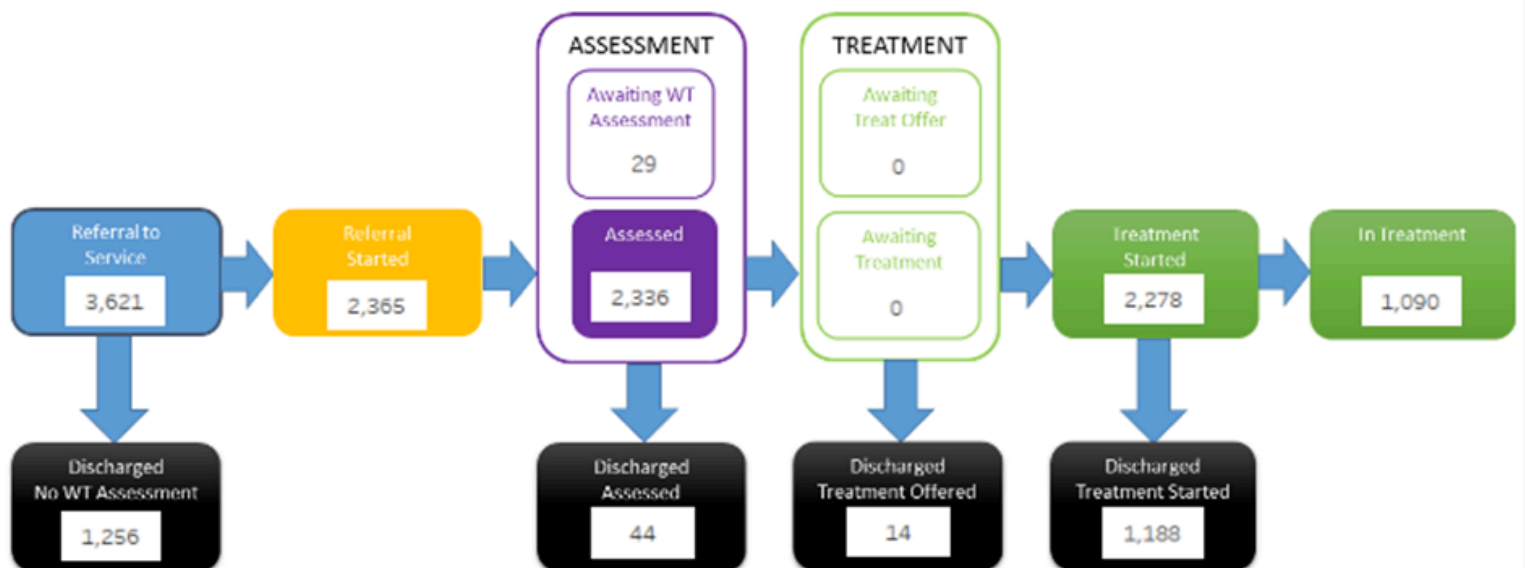
A task group was formed to identify the root causes for the issue, and it was found to be recording errors and in particular, around recording those that were given an appointment within the time frame but failed to attend. These were not being recorded on DAISy correctly and as such generated long waits for these when they were not genuine long waits. This work has generated a vast improvement in the last quarter of the year with Fife ADP exceeding the 90% target again.

Indicator	Target	2022-2023	2023-2024	Performance Indicator
Drug and Alcohol Treatment Waiting Times – Q1	90%	94.1%	86%	↓
Drug and Alcohol Treatment Waiting Times – Q2	90%	95%	82.9%	↓
Drug and Alcohol Treatment Waiting Times – Q3	90%	97%	83.4%	↓
Drug and Alcohol Treatment Waiting Times – Q4	90%	96%	92%	↔

*Q4 figure has not yet been published and has been taken from local information.

Service & System Performance

Nationally Reported Fife Tier 3 Performance



From April 2023 – March 2024, Fife Tier 3 adult services received 3,621 referrals. 2,278 of the referrals started treatment and 1,090 remained in treatment after March 2024.

ADP Contract Reporting – Tier 3 Services

Tier 3 services are defined as services delivering a specialist intervention as part of a recovery/care or treatment plan. They are linked to the improving our recovery system of care theme but do undertake harm reduction and other early intervention and prevention support in the community.

Below is a summary of our tier 3 services and their performance based on reports submitted to the ADP support team:

NHS Addiction Services:



Over 2023/24, the service responded to 767 referrals 64% of which were for problems with alcohol. A total of 207 individuals referred to access rapid access clinics.. This represents an increase of the people referred to rapid access clinics by 290% compared to the same period the previous year. The service uses treatment outcome profile to measure outcomes overtime with patients, tracking days used of substances and improvements to psychological and physical health. Over the year 682 patients sampled had a 15% reduction in days when alcohol was used and 27% reduction in days when opiates were used. There also improvement in physical health and quality of life.

In terms of workforce development, the service has made a substantial commitment to training in psychological intervention with 46 staff trained in formulation (Tier 1), 43 in endings and boundaries (Tier 1) and 19 in MI (Tier 2).

APTS:

Addictions Psychological Therapies Service (APTS) have submitted a report on targets, which indicates all targets are being met and data was provided for outcomes. 119 individuals received psychological assessment and evidence based psychological therapy and 282 supervision sessions were offered. All outcomes showed an increased score on the wellbeing scores. 38 coaching and training sessions have been completed under the MAT 6&10 funding (April 23– March 24). Training is due to commence for Tier 2.

DAPL:

This service provided a comprehensive ADP report return, which showed targets were met for counselling, ABI's, DBI's and provision of out of hours service. This service continues to deliver SMART meetings. There was a slight increase in engagement rate from referral from 44% to 47%. 410 naloxone kits were offered and 18 distributed.

FIRST:

The Community Rehabilitation team has exceeded its ADP targets and demonstrated good outcomes for those engaged with the service. The highest referral rate has come from Kirkcaldy area, and 25–40–year age group. The engagement rate from referral is 57% which is quite standard across services. Three naloxone kits were distributed.

FIRST:

The Residential Rehabilitation Service received 111 referrals across the year and 57 individuals engaged with the service. Within the year period 27 individuals entered residential rehabilitation. Positive outcomes were demonstrated for those who accessed residential rehabilitation. Ongoing work continues with Healthcare Improvement Scotland on pathways and access for minority groups.

ADP Contract Reporting – Tier 2 Services

ADAPT:



All targets for this service were met and the report was fully completed. The service had 1117 attend the drop-in clinics and provided counselling to 109 individuals however 203 were referred. ABI (Alcohol Brief Interventions) targets were also met with 227 being delivered, and 293 naloxone kits were distributed. 35% of those working towards abstinence achieved this, whilst 70% made progress towards improvement in physical and psychological health.

ADAPT NFO:



This service was compliant with MAT 3 during responding to 75% of referrals within a 3 day time period and saw 352 individuals throughout the reporting period. 80% of referrals exited after support 19% still active in service. 50 naloxone kits were also distributed. The main substance which resulted in the referral was alcohol. The NFO team have also engaged with an NFO review group alongside colleagues from Fife ADP and Scottish Ambulance Service to highlight trends relating to substances, symptoms, environments and repeat presentations and work to tackle these issues.

Barnardo's Education Service:



A full report was provided from Barnardo's for Education with most pupils/staff fully achieving or making progress of increased knowledge at exit in P7 and S3. An additional 33 priority groups were seen within the year. Barnardo's have commenced a test of change in three high schools to deliver bespoke training to school based staff and develop an substance education service based on the needs of each school and its students.

Barnardo's and Clued-Up Whole Family Support Service:



A full report was provided for this service. Referrals were on target for young people provision. Outcomes for young people show positive changes in key areas including reduction in substance use, improved family relationships and improved mental health with very few leaving support having not benefitted in some capacity. For intensive whole family provision, in the reporting year 8 families were support and some outcomes were recorded for improvement in safety for the families and relationships, parental engagement and improvements in connections to local groups.

Clued-Up Employability Service:



102 young people were supported by this service within the year. 58 young people achieved positive outcomes including but not limited to developing positive routines, making positive choices and increased knowledge in substances. Additionally, 35 ABI's were delivered, and 1 naloxone kit was distributed.

Circles Network:



257 individuals engaged with this service within the year. The main issues addressed continue to be housing and finance but there was an increase in referrals for access to treatment. Circles complied fully with the MAT standard 8 and were able to demonstrate a good level of independent advocacy offered to people affected by alcohol and drug use.

Frontline Fife:



One to one support was offered to 49 individuals with an engagement rate of 61% from referral. The highest area for engagement was Kirkcaldy which mirrors last year's reporting. All outcomes were clearly demonstrated 46 DBI's were carried out. The team also distributed 23 naloxone kits throughout the year.

Hospital Liaison Service:



ADAPT received 300 referrals most of which came from the Glenrothes and Kirkcaldy area. 84% of ADAPT referrals had an alcohol related problem. WAWY received 145 referrals of which 38 naloxone kits were distributed. They have reported the partnership is working well and has vastly improved since last reporting period. NHS Addictions received 904 referrals within the year and referring locations have increased from 10 to 52 demonstrating a good level of coverage and reach across the hospital. 20% have been generated from A&E and admissions units. Tracking across months there has been significant reductions in admissions post 3 months contact with the service and this is seen in average length of stay. For ED attendances almost every month there are significant reductions at the 3 month post contact point.

Phoenix Peer Mentoring:



This service has provided Fife ADP annual report showing targets and engagement. All outputs were met for volunteer opportunities, mentee engagement and engagement in wider community. There were 39 referrals to this service, and an 80% engagement rate. 60% of service users achieved progress towards abstinence when exiting the service. 77% made progress to reducing alcohol when exiting the service. 33 naloxone kits have been distributed by the service.

Phoenix Futures Return to Nature



A full report was provided from the service. 27 people completed the RTN programme, with a target of 30 to complete. 17 individuals are currently working towards achieving abstinence and are still open to the service. All engaged individuals saw an improvement in physical, emotional and mental health. The last reporting period saw no referrals from Dunfermline. This has now improved with 5 referrals in the last 6 months. 27 naloxone kits were distributed which is a 35% increase from the last reporting period.

Restoration



This service has reported on targets with 325 active members attending at least one activity per week. The highest area of engagement is the Levenmouth area with 77 people attending in total each week. A client survey highlighted self-improvements in isolation, mental and physical health and feeling safe. Outgoing referrals continued to be high with people supported into services that help with ongoing community support and foodbanks.

SACRO:



This service completed a full report detailing ADP targets. All targets were met with the service receiving 229 referrals to the service within the year. 179 people engaged with the service (annual target 90). There was a reduction of 84% in reported criminal activity which exceeded the target of 60%. 55% of service users reported an increase in wishing to live a crime free life. 42 naloxone kits were distributed this reporting period, an increase of 11 from previous year (annual target 20)

SFAD



118 individuals engaged with this service through a variety of one to one's and group work. 54 of the 118 left feeling better educated about substance use. Family members had positive outcomes from their engagement with SFAD including better physical, emotional, and mental health.

WAWY:



A full report was returned, and all annual outputs have been exceeded. 667 naloxone kits were distributed which is above target and a 29% increase compared to the previous year. A total of 1,135 transactions were completed (annual target 750). As well as this, drop-in 4,697 drop in interventions were completed with an annual target of 1,200.

Fife Council:



Compass: Since it commenced in August 2023, the team have received 66 referrals since going live, all of which have been allocated and are active cases. Of the 66 , 15 clients solely use alcohol. The majority of referrals are for people for whom poly-pharmacy is a risk factor. Domestic abuse, Mental Health and Homelessness/ housing issues have been the main secondary concerns.

Next Steps for 2024/2025

A strategy delivery plan has been set out to support all the new work that the ADP want to implement over the next year and beyond. With an ambitious 3-year Strategy for 2024 –27 and reprioritising themes, significant changes are already in development as detailed in the strategy delivery plan. Three key areas already in the early stages of development are:

- **Service mapping to review in line with strategic priorities**
- **Rapid Group for Young People at risk of harm from substance use**
- **With the new ADP Strategy 24 – 27 completed,**

The residential rehabilitation service will continue on its continuous improvement approach in partnership with the 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.

There will also be two test of Change Housing Projects launched that have been funded through the 'Ending Homelessness Together Fund'. These will have individual focuses which are:

Hospital Navigator Service:

- Provide opportunities to engage vulnerable/at risk patients with dedicated services
- Exploration of root causes for repeat presentations and ensure that the individuals finally access internal/external services that meet their individual needs.
- Positive signposting routes with dedicated follow up interactions to facilitate engagement with those services.
- Ensure vulnerable adults receive the support that they require.
- Support in emergency departments where it has been proven that individuals present due to loneliness, poverty and poor mental health for example.
- Providing specialised knowledge and information to staff in roles that are not related to housing and thus supporting existing workforces better.

Dedicated Addictions Worker:

- Provide additional specialist support, engaging those at risk of/presenting as homeless.
- Preventative approach for those that are struggling and who may previously have, or still are facing multiple barriers which are preventing access to housing.
- Assertive pre-emptive support provision aimed at preventing homelessness and reducing repeat homeless presentations.
- The longevity of the provision would be secured by the bespoke addictions support worker upskilling the staff team that they have been integrated into as well as providing external training to Fife Council, Housing Officers and non-housing roles.
- Increases capacity in the existing service with the specialist worker engaging people with substance use issues.
- Replicates a one stop shop type model providing trauma informed care around addictions within a housing support team.

A focus will also be maintained on alcohol related harm and deaths and the complexities of reporting around those as well as the contributing factors involved. Fife ADP will use the information gained from the Addressing Alcohol Specific Death work and the voice of people and their families with lived and living experience to drive improvements in the system of care and other partnerships where prevention and early intervention can improve outcomes. As proposed in the delivery plan, the Addressing Alcohol Specific Death Group will form an implementation group to support wider organisations in utilising the data collated and the overarching themes from their findings.

Much has already been done to engage and ensure that there is participation from individuals with lived or living experience within the strategic planning and policy work of the ADP. A dedicated worker has been commissioned through Scottish Recovery Consortium to ensure that people and their families are fully supported to co-produce and collaborate and offered development opportunities on a volunteer basis. The aim is to ensure all 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. The ADP continues to value the work of those with lived and living experience as part of the harm reduction approach including the provision of overdose reversal medication and raising awareness.

Moving forward it is essential that the ADP continue to implement its strategy and focus on the key areas in order to prevent, intervene early and 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 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.

Further Information

- 01 Fife ADP Strategy 2024 – 2027: [ADP-Strategy-24-27-07.05.24.pdf](#)
- 02 Rights Respect and Recovery 2018 – Rights, respect and recovery: [alcohol and drug treatment strategy – gov.scot](#) (www.gov.scot)
- 03 Alcohol Framework Preventing Harm 2018: [Alcohol Framework 2018](#) (www.gov.scot)
- 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 Fife ADP Drug Related Death Report 2022: [Drug Related Deaths Report 2022](#)
- 07 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

WAWY – We Are With You, an ADP harm reduction service

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

**Fife Alcohol & Drug
Partnership**

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