



**REPORT TO:** **HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD – 20 AUGUST 2025**

**REPORT ON:** **REDUCING HARM FROM DRUG AND ALCOHOL USE – UPDATE REPORT**

**REPORT BY:** **INDEPENDENT CHAIR, DUNDEE DRUG AND ALCOHOL PARTNERSHIP**

**REPORT NO:** **DIJB50-2025**

#### **1.0 PURPOSE OF REPORT**

1.1 To provide the Integration Joint Board with a summary overview of progress made during the second year of the Dundee Alcohol and Drug Partnership's Strategic Framework 2023-2028 and inform them of priorities for the second year of delivery. To seek approval of the 2024-25 annual return from the Dundee Alcohol and Drug Partnership to the Scottish Government.

#### **2.0 RECOMMENDATIONS**

It is recommended that the Integration Joint Board (IJB):

2.1 Note the content of this report, the progress toward implementation of the Dundee Alcohol and Drug Partnership's (ADP) delivery plan and the process of integrating with the new multi-agency Protecting People Governance Structure (section 4.2)

2.2 Approve the draft ADP 2024-2025 Annual Report, noting that the draft has been submitted to the Scottish Government on the 13 June 2025 to meet their submission date guidelines (section 4.3 and appendix 1).

#### **3.0 FINANCIAL IMPLICATIONS**

3.1 Delegated resources to the Dundee Integration Joint Board (IJB) provide funding for statutory and commissioned drug and alcohol services. These resources are managed within the overall Dundee IJB Financial position. Additional funding is allocated annually from the Scottish Government to manage developments to support national drug and alcohol priorities. The specific utilisation of these funds is managed via Dundee Alcohol and Drug Partnership to meet local priorities within these national guidelines.

3.2 The value of additional Scottish Government allocation funding for drug and alcohol services in Dundee is approximately £2.4m in 2024/25, and £1.2m in 2025/26 (with further funding delegated of £0.8m delegated to the Dundee IJB and managed by Dundee ADP to support strategic priorities). The totality of this funding will be used to support the implementation of the delivery plan with direction of spend provided through the publication of the Alcohol and Drug Partnership's Strategic Framework.

#### **4.0 MAIN TEXT**

##### **4.1 BACKGROUND**

4.1.1 The Alcohol and Drug Partnership's (ADP) strategic framework and delivery plan were published in January 2023 and sets out the vision that "*People in Dundee thrive within safe, nurturing and inclusive communities, supported by accessible and effective alcohol and drug services that focus on prevention, protection, harm-reduction, resilience and recovery.*" This vision is underpinned by five key priorities:

- Reducing significant harms linked to drug and alcohol use by delivering the right care in the right place at the right time.
- Reducing the enduring impact of drug and alcohol use through an increased focus on prevention.
- Empowering people with lived experience to participate in and influence decision-making, commissioning, planning and improvement.
- Promoting cultures of kindness, compassion and hope, tackling stigma and discrimination and embedding trauma-informed approaches.
- Ensuring appropriate and effective governance arrangements and strengthening communications with stakeholders.

During 2024 – 2025 the ADP received updates on progress in relation to year two actions within the Action Plan. The ADP has also reviewed its Action Plan within the context of the new multi-agency Public Protection (PP) committee structure. It has been agreed that for 2025-26 the ADP will maintain a separate Action Plan but where relevant and appropriate begin to collaborate to support the delivery of whole system actions within the revised structure of integrated Protecting People subgroups.

4.1.2 The work of the ADP continues to be informed by the wider planning context that recognises poverty, deprivation, the range of trauma and adversities present across the population that contribute to high levels of drug and alcohol related harm. The implementation of the delivery plan reflects the high priority given by all local partner agencies to tackling harm caused by drugs and alcohol and recognise the need to continue to work at pace to improve responses to people currently affected alongside preventing future harm. Significant progress has been made during the second year of the strategic framework (2024/25) towards achieving the five key priorities, key achievements are summarised in section 4.2 of this report.

## **4.2 OVERVIEW OF KEY ACHIEVEMENTS**

4.2.1 The implementation of the national Medication Assisted Treatment (MAT) Standards continues to be a key aspect of the work of all ADPs across Scotland during 2024/25. The annual national benchmarking report on MAT implementation was published on 17 June 2025 providing an assessment on progress with local implementation of all 10 standards, demonstrating the considerable progress made in Dundee since 2022:

Table 1: MAT Standards Benchmarking by Reporting Year - Dundee

	MAT 1	MAT 2	MAT 3	MAT 4	MAT 5	MAT 6	MAT 6 & 10	MAT 7	MAT 8	MAT 9	MAT 10
2022	Red	Provisional Amber	Amber	Provisional Green	Green	N/A	N/A	N/A	N/A	N/A	N/A
2023	Provisional Amber	Amber	Provisional Green	Green	Green	N/A	N/A	Amber	Amber	Amber	Amber
2024	Green	Green	Green	Green	Green	N/A	Green	Green	Green	Green	N/A
2025	Green	Green	Green	Green	Green	N/A	Green	Green	Green	Green	N/A



Red  
 Provisional Amber  
 Amber  
 Provisional Green  
 Green

2022 MAT 6 to MAT 10 were not assessed  
 2023 MAT 6 and MAT 10 were assessed separately  
 2024 MAT 6 and MAT 10 were assessed jointly  
 2025 MAT 6 & 10 were assessed jointly but no RAGB score provided.

It is important to note, that the benchmarking report does not report directly on outcomes but recommends actions to address areas where service delivery may be able to improve from the perspective of people affected by substance use. The 2024/25 benchmarking report was published within the context of a year-on-year decline in the overall numbers of prescriptions for Opioids Replacement Therapy (OST); this is largely attributed to the fact that increasingly individuals use drugs (including non-opioid drugs such as cocaine and benzodiazepines) for which there are no OST treatments.

4.2.2 The benchmarking report highlights that during 2024-25 Dundee continued to offer fast access to treatment (essentially no waits were recorded) and a range of treatment options. Those who have experienced a non-fatal overdose are quickly identified and supported to access treatment, and increasing numbers have opted out to be supported by the shared-care arrangements with Primary Care. Dundee has continued to prioritise Independent Advocacy and harm reduction support to all those accessing MAT.

A large proportion of frontline staff (89% on a Tayside basis) have completed appropriate psychologically and trauma informed training. Individuals with co-occurring drug and mental health difficulties can access mental health support in an integrated way. A primary focus of this report is the adoption of a human rights-based approach based on the National Collaborative Charter of Rights to underpin improvements determined by local experiential programmes, and this will remain a key focus for the coming years. In Dundee the ADP has continued to prioritise and invest in the engagement with those lived and living experience.

The benchmarking report also outlines some of the remaining challenges across Scotland, including information governance and data sharing, the need to increase the focus on other support options (for those affected by the use of non-opioid drugs) including residential rehab and psychological interventions, the need for a greater focus on those affected by alcohol use, and the implementation of MAT in justice settings.

4.2.3 The ADP has recently undertaken a comprehensive review of progress achieved against their Year 2 Delivery Plan. With the development of a joint Protecting People governance structure (see section 4.1.1), the review of year two included discussions on which actions should remain within a separate ADP Delivery Plan, and which should now shift to the relevant Protecting People subgroups. It now proposed that the ADP will continue to oversee implementation and monitor progress with respect to all the MAT Standards, the alcohol pathway, the residential and community rehabilitation framework, the Year of Kindness project, specific communication around substance use, staff well-being, and managing the ringfenced substance use fund allocation from Scottish Government. Other key priority areas, including the focus on prevention and working with lived / living experience, developing trauma-informed practices and tackling stigma will now shift to the relevant Protecting People Subgroups.

4.2.4 Looking beyond the implementation of the MAT Standards, other notable developments in drug and alcohol services during 2024/25 included:

- The ADP has undertaken a review of the Alcohol Pathway for Dundee, including an overall review of the harm as well as the detox and rehabilitation processes. A revised multi-agency pathway is now being developed.
- Following an initial process to develop a response to the impact of non-opioid use, a pathway for non-opioids brief-intervention and referrals was developed and is being tested. Specific workforce development sessions were delivered to help staff respond to non-opioids use. This work will continue as a key focus in the coming months. More specifically, the Cocaine treatment pathway for those using powdered cocaine is starting to take shape. A Cocaine brief intervention training has been developed and is being rolled out in a few pilot areas to begin with. This strategy along with the Public Health Needs assessment for Cocaine and local data is helping to inform what is needed to provide the best evidence-based support for people using Cocaine.
- The Non-Fatal Overdose (NFOD) response has continued to develop and improve, with successful implementation of the A&E pathway. Work is also underway to improve harm reduction in acute hospital settings, primarily focussed on the provision of naloxone.
- Dundee Recovery Network continues to develop, with more involvement from those with lived experience contributing to Local Community Planning Partnerships, to the work within local communities and to the projects funded through the ADP 'Decentralised fund'. Dundee Recovery Network is moving towards being constituted, and Recovery Month received funding from the ADP which led to a range of more ambitious events being run to celebrate people's recovery.
- Independent Advocacy (IA) continues to be available to all individuals accessing specialist substance use services, including the Shared Care scheme with Primary Care. Individuals with living experience report that this support has been key to help them remain in services and have access to all the support they need. Longer-term funding is still to be secured for this support to be mainstreamed.
- The Multi-Agency Consultation Hub (MACH) continues to facilitate joint decision-making and supporting individuals affected by substance use and mental health (SUMH). Adults with co-occurring SUMH requiring additional support, specialist care, treatment for their mental health and wellbeing, self-harm and/or substance use have a whole system, safe, person-centred and evidence-based care plan. In addition to MACH the MAT 9 work hosted by Health Improvement Scotland has begun to explore the pathways for Mental Health Crisis Support, Home treatment and Inpatient Care for people with Drug and Alcohol problems and mental health issues. The attendance and buy in from all partners in this work should be noted. The Mental Health Models of Care work is another piece of work being taken forward from a multiagency point of view that draws together the needs of people who experience problems with Mental Health and Drug and/or Alcohol under a strategic plan.
- Following an interim report and recommendations from Scottish Families Affected by Alcohol and Drugs (SFAAD) (leading on the development of a family-Focused Approach) it is planned to set up a joint Public Protection working group to progress to implementation. The ADP is awaiting the final report from the scoping study conducted by SFAAD.
- The 'Decentralised' fund was allocated for the third year, but for 2025-26 at a reduced level. The ADP has asked Neighbourhood Services to utilise this fund to focus on the implementation of the Substance Use Prevention Framework and improve associated outcome/ impact measurement and reporting.
- The ADP allocated funding to support the continuation of the Planet Youth project. The project now includes one worker who is supported by the Protecting People Prevention

worker and links with the Protecting People Prevention Subgroup. The ADP are still waiting to hear about national plans for continuation support for Planet Youth.

- Drug Checking Service - progress has slowed. It is not possible to progress with the Home Office licence application until there is clarification about the NTL. This is being discussed with the Scottish Government who are involved in efforts to resolve the situation. All other areas in Scotland (Glasgow and Aberdeen) are in the same position.
- Feasibility study on Safer Consumption Facility for Dundee – In collaboration with Dundee University the ADP has submitted a proposal for funding to the Scottish Government to support a local feasibility study to help inform a decision around this development. The funding application has been approved, and the study will commence in September 2025.

4.2.5 Due to significant challenges relating to property portfolios across partner organisations and the availability of capital funding, Constitution House remains as a site for service delivery. This has aided the service to implement the Community Alcohol Programme (2-week Detox and Relapse prevention programme) as there was no community setting available to provide this from - evidence from patient feedback is that the programme is good. It is worth noting that significant progress has been made in ensuring that DDARS service are delivered from 10 alternative sites, including Hillbank, Wishart Centre, the Women's Hub and Lochee. This brings added benefits, for example, in Hillbank the progress made in terms of working with Hillbank patients in their own practice is one of the factors that has prompted the practice to explore being part of the Shared Care arrangements and this is being taken forward now. The patient experience has been good as they have had the availability of a holistic health check which has helped several patients discover underlying health issues and receive appropriate treatment.

4.2.6 The ADP is currently undertaking a Finance & Commissioning review with support from the HSCP. This review will consider the specific allocations made from the ring-fenced substance use funding provided by the Scottish Government to local areas. It will also cover the allocations made to local organisations via CORRA. The rationale for and aims of the review include:

- Some local allocations of the ring-fenced funding are historical and were made at a time when the extent / nature of need and key priorities in the city were different. To ensure funding is allocated where it is most needed, and providing the best impact, it is good practice to evaluate the allocations.
- Overall, public finances are under significant pressure, there is an increased need to understand the full financial landscape and be aware of all the funding available to maximise the positive impact on the recipients of help.
- This review will provide an opportunity to jointly consider the additional financial pressures (especially for third sector organisations) resulting from increases in the cost of living / National Insurance contribution. The aim would be to identify top key priorities and areas for collaboration.
- Historically, there has been more scrutiny of third sector organisations and as part of this review the ADP aims to create greater balance by also scrutinising the funding allocated to public sector organisations.

It is planned for the review to be completed by the end of October 2025. It will then progress to final approval and implementation by March 2026.

4.2.7 The delivery landscape continues to be challenging, with high levels of need and demand across the local population and public sector finance and workforce pressures. Prevalence and the nature of drug use are also shifting, requiring partners to adjust and change the type and methods of the support they provide. The ADP recognises the significant resource that will be required to sustain MAT Standard implementation. In key areas of service provision, including Independent Advocacy and support to develop residential rehabilitation pathways, short-term

funding risks will require to be addressed via the Commissioning Group. Although progress is being made, shifting focus and resources to prevention projects remains a challenge, especially in the context of current pressures on frontline treatment and care services. There is also the need to improve methods and approaches to monitoring outcomes for people that are achieved over longer period of time as they move through their recovery journey; this work will now be led by the new Protecting People Performance Management subgroup.

#### **4.3 ANNUAL REPORT TO SCOTTISH GOVERNMENT**

- 4.3.1 On an annual basis, ADPs across Scotland are required to submit an annual report on their activities and achievements to the Scottish Government. It is a requirement that the submission is approved by both the ADP and the IJB and is submitted by the end of June each year. The report includes questions from across drug and alcohol policy areas. The findings from this survey are published as official national statistics in the autumn. The data collated from all ADPs help inform and revise the National Mission and the work of national advisory groups, including those supporting programmes around the Whole family Approach, Residential Rehab and Surveillance.
- 4.3.2 Key highlights from the annual report 2024-25 include: Dundee demonstrates an effective governance structure to support the work of the ADP; there is well established engagement with those with lived and living experience; there is a robust harm reduction approach, including a well-established non-fatal overdose response and a good systems for the supply of naloxone; progress with focus on alcohol harm and access to residential rehab has been made; and, the establishment of joint assessment and support planning for those affected by mental health and substance use has progressed. Dundee was also able to demonstrate progress in implementing the Whole family Approach, trauma-informed approach (within the human rights focus) and work around gender issues.
- 4.3.3 The document was submitted to the Scottish Government in draft format on 13 June 2025 to meet reporting deadlines and the ADP considered and approved it on 4 July. The IJB is asked to consider and approve the annual report, attached as appendix 1, in order that it can be confirmed as the final submission to the Scottish Government.

#### **5.0 POLICY IMPLICATIONS**

- 5.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.
- 5.2 As described at section 4.1.2, please note that the strategic framework and delivery plan were subject to a full Integrated Impact Assessment at the point of consideration and approval by the Chief Officers Group.

#### **6.0 RISK ASSESSMENT**

- 6.1 A risk assessment has not been provided as this report is mainly being provided to the Integration Joint Board for information only, and there are no risks associated with the submission of the ADP Annual Report.

#### **7.0 CONSULTATIONS**

Members of the Alcohol and Drug Partnership, Chief Finance Officer, Heads of Service, Health and Community Care and the Clerk have been consulted in the preparation of this report.

#### **8.0 DIRECTIONS**

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act

2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	✓
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

## 9.0 BACKGROUND PAPERS

None.

Pamela Dudek  
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DATE: 20 July 2024

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**Appendix 1 – Alcohol and Drug Partnership Annual Reporting Survey 2024/25**  
**Draft Dundee Response (as submitted to Scottish Government on 13 June 2025)**

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