



# Recovery is Reality

South Ayrshire Alcohol  
& Drug Strategy

2023 – 2026





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## Introduction

This is South Ayrshire's alcohol and drugs strategy. It is set in the context of the wider strategic outcomes of the Health and Social Care Partnership and Community Planning Partnership.

Our refreshed third strategy has been developed in partnership with individuals, families and communities across South Ayrshire. Our Strategy builds on previous partnership work and also reflects new national policy direction and national outcomes, along with the recommendations from our ADP Learning Review.

Our Learning Review assessed the ADP's ambition, presence, structure and function, and assessed, in particular, the degree to which ADP-funded services are meeting shifting priorities and outcomes. Our Learning Review also built upon the initial evaluation, extensive consultation, review of needs assessment, evaluation and self-assessment information; all of which has now identified local strategic priorities.

Our ADP is a strong and ambitious partnership, full of energy, commitment and hope who are committed to developing relationships, building connections and

embedding our collaborative approaches. We are working together to ensure everyone in South Ayrshire receives the support which meets their needs, when they need it.



## Who are we?



**South Ayrshire Alcohol and Drug Partnership (ADP)** was established in August 2009 following the publication of [A New Framework for Local Partnerships on Alcohol and Drugs](#). The framework proposed that ADPs should be established in each locality area, firmly embedded in local planning arrangements. For South Ayrshire, the ADP was established as a thematic group of the Community Planning Partnership (CPP). In 2015 we became a thematic group within the Health & Social Care Partnership (HSCP).

Our partnership involves over **100 individuals** from a wide range of settings including:

- ✂ Community Justice Ayrshire Partnership
- ✂ Department of Work & Pensions
- ✂ Family members and carers
- ✂ Health & Social Care Partnership
- ✂ Individuals with lived experience
- ✂ NHS Ayrshire & Arran
- ✂ Police Scotland
- ✂ Scottish Fire and Rescue
- ✂ South Ayrshire Council
- ✂ Third sector services

As a partnership, we are tasked with working together to implement evidence-based alcohol and drug strategies based on local need and ministerial priorities. Our strategic priorities are designed to contribute to the Scottish Government's strategies [Rights, Respect and Recovery: Alcohol and Drug Treatment Strategy, 2018](#), [Alcohol Framework 2018: Preventing Harm](#), the [Public Health Priorities for Scotland, 2018](#), [Scottish Drug Deaths Taskforce Evidence Based Strategies](#) and the [National Drug Mission Plan, 2022 - 2026](#)

Our activities also contribute to the outcomes and activities detailed within the [South Ayrshire HSCP Strategic Plan, 2021 - 2031](#) and [CPP Local Outcome Improvement Plan \(LOIP\) 2017](#). Our activities will also contribute to outcomes in a range of local plans including the [Children Services Plan 2020 - 2023](#), the [Local Housing Strategy 2017 - 2022](#), and the [Community Justice Ayrshire Outcomes Improvement Plan 2018 - 2021](#).

We are responsible for the allocation of Scottish Government funding for alcohol and drug services in line with our local priorities and ensuring our services are high quality, person-centred and support individuals to achieve their full potential.



## Our Current Strategy

This is our third partnership strategy which has been refreshed in light of the national priorities and local ADP Learning Review. Our revised strategy sits within the context of The Scottish Government's recently published self-assessment template for ADPs, a useful resource to assess and guide our next steps.

**Quality Standard 1 states:**

**“ The ADP [must have] a Strategic Plan for delivery of identified outcomes which ensures adequate alignment with other aligned strategic plans (Transparency and Effectiveness, Inclusion, Planning Cycle, Needs Assessment, Whole System Approach, Resources and Delivery, Outcomes)”**

Within that context, our refreshed third strategy takes into account the [National Drug Mission Plan, 2022 - 2026](#), [Medical Assisted Treatment \(MAT\) Standards](#), the [Drug Death Task Force Final Report, Pathways into, through and out of Residential Rehabilitation](#) and [Drug Deaths Taskforce response: cross government approach](#) as well as local priorities.

The key learning from our Learning Review and a range of local self-assessment activity and evaluation reports and performance

management information from our local services have also been considered.

Our strategy remains rooted in the current national strategy [Rights, Respect & Recovery, 2018](#), taking account of the ADP Ministerial Priorities, national policies and strategic drivers, legislation, and good practice guidelines.

### **The ADP Learning Review**

The 2020-21 ADP Learning Review involved a number of activities in support of the ADP and the development of this updated Strategy: -:

- ✂ a process evaluation of the partnership.
- ✂ an outcomes evaluation of funded services.
- ✂ a summative evaluation.
- ✂ an evaluation of Connect4Change.
- ✂ a residential rehabilitation scoping study.
- ✂ a study into a one-stop-shop model for South Ayrshire.
- ✂ a study into the experiences of vulnerable people with complex needs.
- ✂ a test of change for support for young people.
- ✂ mapping, research and test of change activities to inform whole family and family inclusive approaches.

Our strategy has been written for the people of South Ayrshire and continuous consultation and feedback will be an essential part of the delivery of the strategy.

## Our Strategic Vision

INDIVIDUALS, FAMILIES  
AND COMMUNITIES ARE  
ABLE TO BUILD ON THEIR  
STRENGTH AND ASSETS  
TO HELP REDUCE THE  
IMPACT OF ALCOHOL AND  
DRUGS ON THE POPULATION  
OF SOUTH AYRSHIRE







# Our Change Story

How our ADP will meet this vision is a bold, hopeful and achievable story of change. It reflects the way of working in our ADP which is [collaborative, open and based on relationships](#). These are the values that will guide our collective journey.

We are seeing results, but we want to do more. [Here is our story of change for South Ayrshire](#) -

What is crucial in reducing alcohol and drug related harm is ensuring that **those who need help are able to receive it quickly** and in an way which meets their needs. To help make this happen, we will provide immediate response pathways for those who experience a non-fatal overdose; give vulnerable people the option to begin medication-assisted treatment as soon as they wish to; and train individuals, families, staff and the local community to provide Naloxone kits to people at risk, which can save lives in cases of opioid overdose.

We're also further developing ways to reach out to those not in services - [through our intensive, flexible and person-centred support service](#), and through new assertive outreach methods including an outreach vehicle.

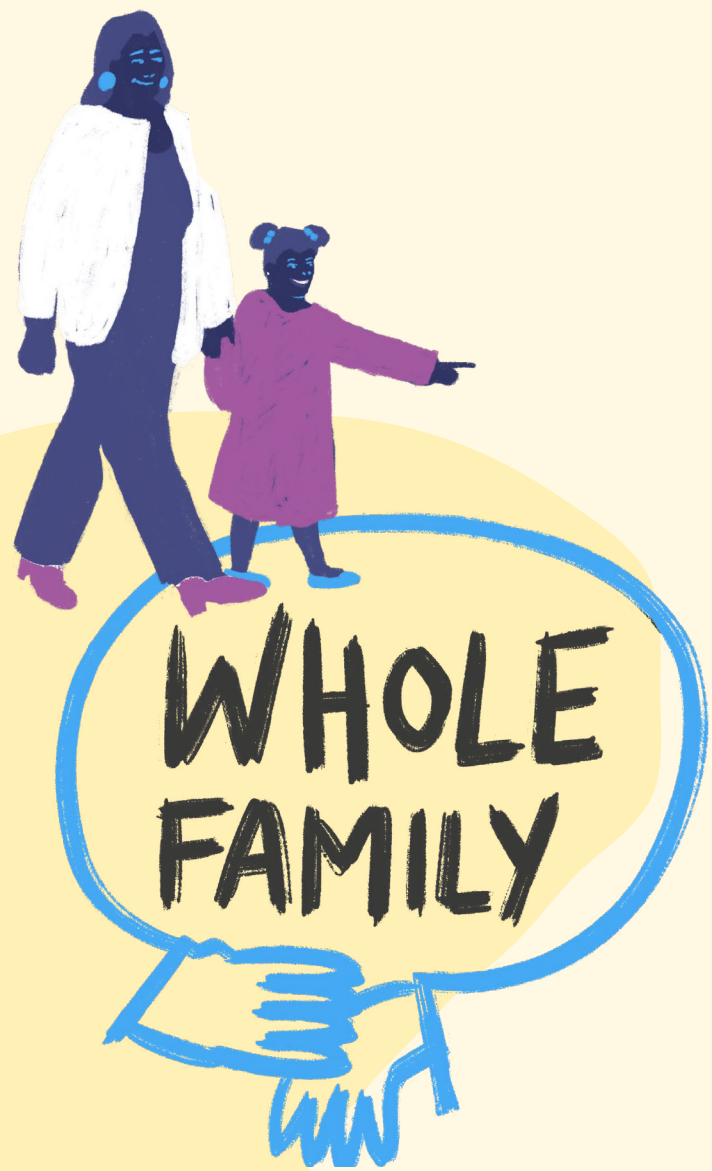
In the coming time, we will set up more community-led spaces across South Ayrshire so looking to access support for any aspect of their alcohol or drug use can make immediate contact with other relevant services located under the same roof. [We call this our one-stop-shop hub and spoke model](#).

We are also developing support to individuals affected by alcohol or drug use who are involved with [justice services](#), providing peer-led recovery focused activities to those in prison and increasing understanding of the

RECEIVE  
Help  
QUICKLY







WORKING  
TOGETHER  
TO → END ←  
STIGMA



We recognise the need to **improve support available for young people** in a way which meets their needs, and we are working together with partners to further develop support for young people affected by their own or someone else's alcohol or drug use.

# WORKING IN CLOSE COLLABORATION



All of this work naturally involves us **working in close collaboration** with people and organisations across all of South Ayrshire. We work across health, education, social services, emergency services and with the strong peer recovery communities in South Ayrshire. All our work is grounded in the shared **motivation to work together** to ensure those who access our services get the support they need and see the changes they want in their lives.

We are seeing more people affected by alcohol or drug use **know where and how to get support**. We are breaking down some of the barriers which currently prevent people accessing support.

We know that stigma can have a significant impact on individuals and families and can be a barrier for people coming forward for support. We are working together to **reduce stigma** including developing our *ADP Stigma Charter* and supporting organisations to embed our Charter within their cultures.

We believe that everyone has a right to access the care and support they need, and we are working together to embed a **human rights-based approach** across our partnership, as well as further developing advocacy-based support. Our lived experience led group are developing human rights and stigma awareness training.

More people will benefit from **intensive and flexible support** when they need it, including rapid access to medication assisted treatment and related support, and more people will benefit from being able to access residential rehabilitation as part of their recovery journey.

In the longer-term, everyone who needs it will receive **tailored support** as and when they require it, and for as long as they need it, the people most at risk of harm will be supported assertively.

We are changing how we commission our services

# TAILORED SUPPORT



# LONG-TERM TREATMENT & RECOVERY SUPPORT





to ensure we take a **collaborative approach** and services are in line with our priorities and are as effective and responsive to local needs as possible.

Ultimately we believe these changes will result in a **reduction in the harm caused by alcohol and drugs**, and a reduction in the number of people who are dying as a direct result of alcohol or drug use.

Our partnership is strong and driven by **innovation, relationships and listening to each other**.

We are committed to ensuring the views of people with living and lived experience, including families and carers, are embedded in our work. We will continue to build on and develop our mechanisms to ensure **everyone's voices are heard**.

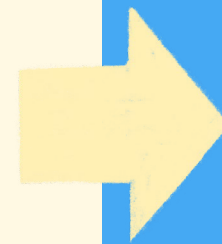
Our partnership is a key place for people to come together, in a **spirit of collaboration**, to improve local services and bring about positive change in the lives of people in South Ayrshire.

Frontline staff, peer workers, service leaders, the recovery community and those in most need of intensive support: everyone has a part to play in making **recovery a reality** in every community in South Ayrshire.

That is our Change Story



WHERE?  
TO GET  
SUPPORT



## Our Strategic Approach

From our Change Story, and in the delivery of our strategy, we believe that we must continue to consider the role of individuals, families, communities, services and the culture collectively, rather than in isolation (Figure 1).

We understand that problematic alcohol and alcohol use can be a reflection of other factors that include individual and community vulnerability: poverty, family conflict and violence, wider inequality and experience of adversity in childhood and adolescence along with involvement of the police and justice services. We also understand that shame and stigma can make it difficult for individuals and families to ask for help and support and engage with treatment and recovery supports.

Our strategic approach recognises the importance of social and community connections in enabling people to feel valued and connected and we believe that the care they receive from our services can play a significant part in their journey. Our strategy is underpinned and guided by our shared commitment to work more collaboratively, be open to new ways of working and to continually strive to create positive relationships. Evidence of the ADP working through these core principles can be found [here](#).

We recognise that socioeconomic circumstances and other existing lifestyle risk factors and health conditions have a role to play in determining the harm resulting from alcohol and drug use. We acknowledge that there are a number of policies, services and interventions which can help reduce the negative impacts of drug and alcohol use on individuals',

families and communities. These include high quality relationship-orientated universal services; early years support and interventions; place-based initiatives that are addressing poverty, insecurity of income, housing and food, green spaces and activity; public protection and access to employment. Our approach is considered in the context of national and local strategies which are focused on addressing these issues. We also recognise that the degree to which we are successful in delivering our local strategic priorities will be dependent on the implementation of the national alcohol and drug strategies.

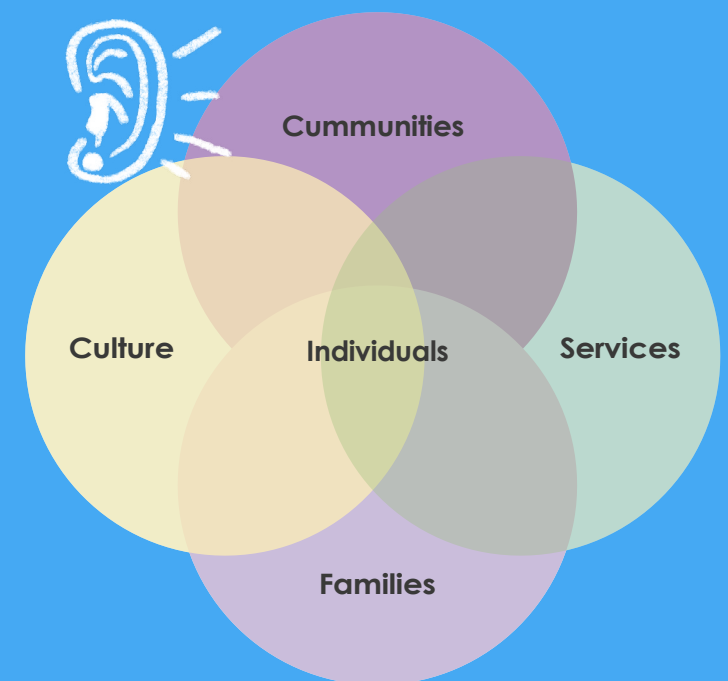
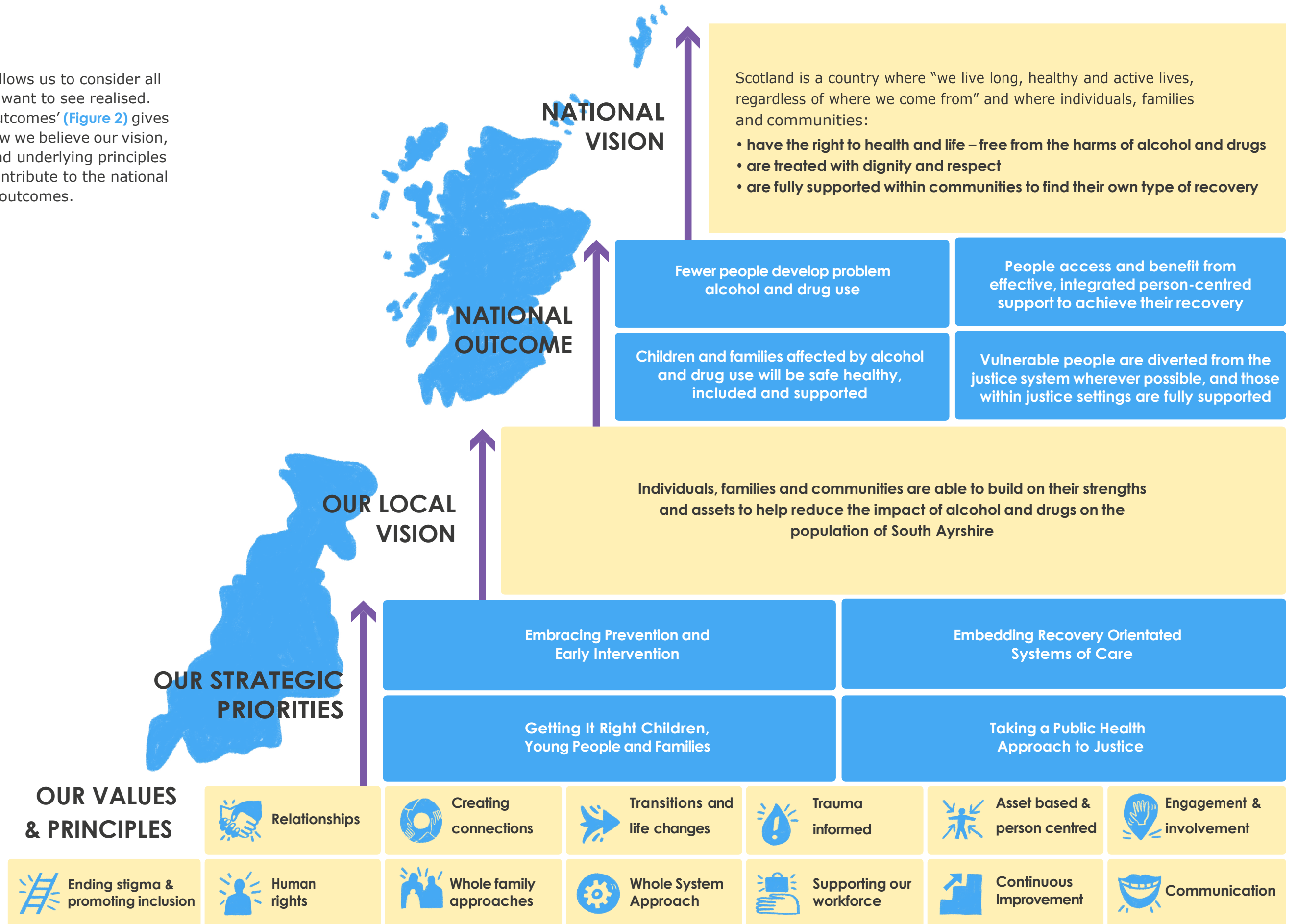


Figure 1: Our strategic approach

# Delivering Our Outcomes

This framework allows us to consider all the outcomes we want to see realised. 'Delivering Our Outcomes' (Figure 2) gives an overview of how we believe our vision, local priorities, and underlying principles and values will contribute to the national alcohol and drug outcomes.



## Our Outcomes

**Figure 3** Our local outcomes have been developed giving consideration to national alcohol and drug strategy outcomes.

### 1. Fewer people develop problem alcohol and drug use



- a) Reduce inequalities experienced by people who are at risk of developing problems with alcohol and drugs
- b) Young people receive evidence based, effective holistic interventions to make informed choices and prevent problem alcohol and drug use
- c) Increase in the number of people at risk of alcohol or drug problems linked to positive environments and opportunities
- d) Increase in individual and community wellbeing, resilience, and social connectedness
- e) Supply of harmful drugs, and availability of alcohol is reduced



### 2. People receive and benefit from high quality, person centred services and supports which address multiple disadvantages and reduce risk



- a) Overdoses are prevented from becoming fatal
- b) Improve access to harm reduction and low-threshold services and community based supports
- c) All people are offered evidence based harm reduction and advice
- d) People at high risk are proactively identified and offered support
- e) People are supported to make informed decisions about treatment options
- f) People have the option to start medication-assisted treatment from the same day of presentation
- g) People are supported to remain in treatment and recovery support for as long as requested
- h) Residential rehabilitation is available for all those who will benefit
- i) Advocacy is available to empower individuals
- j) Wider and often coexisting health and social care needs are addressed through informed, compassionate services e.g. housing, mental health
- k) Grow and expand Scotland's recovery communities into wider community settings
- l) Individuals leave services with their outcomes achieved and are connected to aftercare and community (of choice)

### 3. Vulnerable people are diverted from the justice system wherever possible and those within justice settings are fully supported



- a) Effective pathways between justice and community services are established
- b) Improve treatment in justice settings in line with the appropriate standards and guidelines
- c) Increase use of diversion from prosecution and alternatives to custody wherever appropriate
- d) Increase the effective and consistent use of justice Throughcare services

### 4. Children, families and communities affected by substance use are included and supported



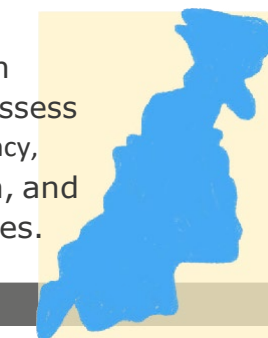
- a) Family members are empowered to support their loved one's recovery
- b) Family members are supported to achieve their own recovery
- c) Young people have early access to support for emerging problem alcohol and drug use
- d) More children, families and young people are involved by services in decisions made about their care and about service design and delivery
- e) More children, families and young people's services are high quality and evidence based
- f) Communities are resilient & supportive



### 5. Good governance centres on public trust, and the effective delivery of services by the ADP. By prioritising transparency, accountability, public participation, the ADP models good governance.



- a) Quality Improvement methodologies are used continuously enhance the effectiveness, efficiency, and quality of its services.
- b) A robust evaluation framework is used to assess the effectiveness, efficiency, and impact of our own, and commissioned, services.
- c) Effective monitoring mechanisms are used to ensure ongoing oversight and compliance with policies, regulations, and the ADP Change Story.
- d) We strive for improved accountability, actively engaging with the public, seeking their input and involvement in ADP decision-making processes





## Our Underpinning Values and Principles - what will guide our strategic journey?

As a partnership we are united by a set of underpinning values and principles which we believe are essential in achieving our strategic vision.



### **The importance of relationships**

We believe that effective relationships, trust and connections underpin everything we do, and without this, the effectiveness of our support and interventions are reduced. At an individual level this relates to the relationship between a staff member and the individual or family they are supporting. At a service level this includes relationships between staff within their own organisation, and between other organisations. At a community level, relationships are essential to ensure individuals feel connected and supported in their community, and our services are truly embedded in the community.



### **Creating connections and opportunities**

As individuals and communities we thrive on feeling connected and valued. We believe that isolation and loneliness can contribute to problematic alcohol or drug use, and also have a negative impact on individual and family recovery. We are committed to further developing opportunities for individuals, families and communities to feel valued and included. We will build on, and expand the range of volunteering, training and social activities available in South Ayrshire and promote inclusion for all.



### **Transitions and life changes**

We recognise that times of transition e.g. moving from hospital or prison to community settings, moving from care or temporary accommodation into your own accommodation, ceasing use of prescribed medication or leaving treatment services, can be challenging and may result in negative life choices or be a trigger for relapse. We will review and further develop pathways across these services and settings to ensure that people are fully supported at times of transition, with additional and flexible support tailored to their needs, and ongoing after care which continues to help maintain stability.



### **Collaborative Working**

The importance of collaboration has been shown in the findings of our broader ADP Learning Review. We have taken steps to develop our collaborative working at a services level through our new commissioning approaches and at a strategic level through the new joint statutory and third sector chairing arrangements for ADP Subgroups and our joint commitments with the Children's Service Planning Group. We are committed to further developing our collaborative approaches across the full breadth of the partnership.



### **Innovation & Openness to Change**

An openness to new ways of working has been shown as important through the evaluation of our pilot and test of change activities and through the broader ADP Learning Review. This includes exploring how we adopt flexible approaches to where and how we deliver our services to meet the needs of people accessing support, as well as how our services adapt and respond to local need and external influences. We are committed to further developing our innovative approaches and being open to new ways of working to improve outcomes for individuals and families looking for support.



### **Whole system approaches**

We believe that problematic substance use rarely occurs in isolation. To reduce the harm caused by alcohol and drug use and to support people into long term sustained recovery, we need to consider a wider range of fundamental issues such as positive mental health, good quality housing, reducing poverty and tackling inequalities. We are committed to working more effectively together, as part of a whole system approach, to improve outcomes for individuals, families and communities.



### **Whole family approaches**

We believe that a whole family approach can provide practical and therapeutic support for a child, their parent/carer and the extended family. A whole family approach also considers the implications of recovery on the child and recognises the importance of creating space for children to be listened to, which will enable us to understand the changing dynamics associated with parental recovery. We will ensure our services are working within a whole family support approach where the needs of children and young people are considered as part of the parents' recovery journey. Moreover, our services support children and young people to understand the change in relationships during their parents' recovery.



### **Involving individuals, families and communities**

We remain committed to ensuring the voices of individuals, families and communities are heard within the development and delivery of our services and support. We will build on our existing engagement mechanisms and to ensure our services and support are coproduced.



### **Asset based and person-centred approaches**

We will ensure our services and activities adopt asset based and person-centred approaches to ensure people are treated with dignity, compassion and respect. By taking this approach, we will support people to increase their knowledge, skills and confidence to effectively manage and make informed choices to move forward with their life.



### **Trauma informed approaches**

We recognise the significant impact that living through traumatic events, at any stage of your life, can have and the relationship to increased risk of poorer health (including problematic alcohol and drug use), social, education and justice outcomes. While experiencing trauma can increase the risk of poor life outcomes this is not inevitable and we recognise the importance of resilience and adaptation, and the strength of protective factors at an individual, family and community level such as positive relationships, social networks and problem-solving skills.

We support the approach that trauma is 'everyone's business' and that our workforce has a role to play in understanding and responding to people affected by trauma. We also recognise the increasing evidence base of the impact of experiencing multiple Adverse Childhood Experiences (ACEs), including increased health-harming behaviours such as problematic alcohol or drug use, offending behaviour, depression and premature death.

We will support a multiagency coordinated approach to ensure the needs of children and adults affected by trauma are recognised, understood and responded to, and we will work together to ensure we are trauma-informed and trauma-sensitive organisations.



### **Ending stigma and promoting inclusion**

We recognise that individuals and families affected by alcohol or drug use may experience stigma which may have a significant impact on their recovery and integration within their local community. We will work to ensure services, activities and resources promote recovery in a non-stigmatising way, and we will continue to work to increase the knowledge, understanding and context around alcohol and drug use.



### **Human Rights Based Approach and Advocacy Support**

We are committed to ensuring that the humans rights of individuals are at the heart of policies and practice. We will work to ensure that a human rights-based approach is embedded in our service planning and delivery. We are also committed to ensuring independent advocacy-based support is available for individuals and families across South Ayrshire.



### **Supporting and developing our workforce**

Our workforce, volunteers, peers and staff are the backbone of our organisations and we are committed to ensuring individuals are confident, appropriately trained and supported to undertake their role. The wellbeing and resilience of our workforce are of paramount importance and we will work together to ensure appropriate support is available. We believe that leadership takes place at all levels and we will support our workforce to take on leadership roles and develop innovative approaches to delivering effective services.



### **Communication**

We recognise that communication and information sharing are essential for everything we do and we will work to ensure appropriate information sharing arrangements are in place across our partnership. We are also committed to providing resources which provide accurate and clear information, and deliver key messages which support our strategic vision. We will further develop our use of web and social media platforms to provide information in easily accessible formats.



### **Continuous improvement**

As a partnership we are committed to ensuring our services are high quality, accessible and flexible to individuals' needs. We are committed to self-evaluation and ongoing service improvements and will further develop our processes to support these activities. We will ensure our services are delivered in line with the [Quality Principles: Standard Expectations of Care and Support in Alcohol and Drug Services](#) and the emerging national [Medication Assisted Treatment Standards](#) and access to alcohol treatment and support guidelines.





Our Strategic Priorities

① Embracing Prevention and Early Intervention

② Embedding Recovery Orientated Systems of Care

③ Getting It Right for Children, Young People and Families

④ Taking A Public Health Approach to Justice



# 1

## Embracing Prevention and Early Intervention

As a partnership we recognise the importance of prevention and early intervention approaches in improving opportunities and life chances for everyone in South Ayrshire. We believe that our prevention and early intervention approaches should be embedded across the life course, from pre-birth and parenting support to ensure our youngest children achieve their developmental milestones, to supporting our older population who may be socially isolated and turn to substances as coping mechanisms.

We also recognise that in order to reduce the risks and adverse impacts of alcohol and drug use that we need to work collectively across our Community Planning Partnership to improve the socioeconomic life circumstances and experiences of individuals, families and communities and the places in which they live. This also includes the impact that wider drivers such as affordability, availability and marketing can have on alcohol and drugs use (both legal and illegal) at an individual, community and population level.

Alcohol and drug use can have a negative effect on anyone, however, the relationship between significant adverse impacts of alcohol and drug use including premature death, and socioeconomic inequalities are well recognised with the most disadvantaged communities experiencing the poorest outcomes. Structural inequality (insecurity of income, housing and food) shapes and informs the way we grow and develop from infancy and across our lives while relational inequality (the absence of nurture/experience of safety in relationships as evidenced in adult distress, conflict, violence and control is no less impactful). The two together are more potent and impactful.

We continue to see the significant strength of inclusion and participation, and how feeling valued and connected to your community can have a positive impact on individuals, families, and communities. We are committed to working together to reduce the gap in outcomes for individuals living in the most and least deprived areas, and ensure our communities are safe, inclusive and promote positive health and wellbeing.



### By working together, we will:



continue to promote the **'No Alcohol, No Risk'** message to women of childbearing age, partners and families, and embed the FASD awareness raising, training and activities.



**raise awareness** of the link between Adverse Childhood Experiences (ACEs) and young people's development and behaviours, and how ACEs may impact those we support.



support the implementation of the **new national programme of alcohol and drug education in schools** and the provision of education based resources in **non-traditional settings**.



develop innovative approaches of engaging and supporting individuals drinking at harmful and hazardous levels who are attending **GP surgeries and acute services**.



continue to deliver **Alcohol Brief Interventions** in priority settings and further expand into non-priority settings.



implement our **ADP Stigma Charter**.



support the delivery of **blood borne virus, sexual health, Tuberculosis and tobacco agendas** through prevention, testing and cessation programmes.



engage with Licensing Forums, **local partners and Licensing Boards** to consider alcohol related harm data, marketing and the availability of alcohol.



increase **access** to information on services, support and recovery activities through web based and social media platforms.



promote **inclusion** for everyone, including supporting the development of safe, alcohol free community spaces.



**regularly review** our surveillance and needs analysis information, including referral and eligibility criteria, to ensure we take an intelligence-led approach to our service delivery.



**provide training** and development opportunities to support our workforce to feel confident to 'ask the question', and have the knowledge and skills to meet the needs of individuals and families affected by trauma.



**work together** to deliver briefing sessions to increase understanding of trauma, its impact and protective factors across the wider workforce and local community.

# 2

## Embedding Recovery Orientated Systems of Care

We believe, and have seen, that everyone can recover from problematic alcohol or drug use with the right support and opportunities at the right time. We recognise the power of positive relationships, connections and inclusion on an individuals recovery and are committed to continuing to removing barriers and expanding the range of support available. We value the role of individuals with lived experience supporting others on their recovery journey and being part of our workforce, and we are committed to continuing to expand the range of peer led recovery activities, training and volunteering opportunities available across South Ayrshire.

We will continue to work together to develop and embed our Recovery Orientated System of Care (ROSC) model across all services and local communities where:

- ✂ We believe that recovery is possible and at the centre of all services and supports we provide
- ✂ Individuals with lived or living experience have a key role in the planning and development of services and supports
- ✂ We will empower people to own their recovery and staff will support their recovery journey
- ✂ All recovery support focuses on individuals strengths and assets
- ✂ Volunteering, training and development opportunities are available to support individual recovery journeys
- ✂ People in recovery support others along their path to recovery
- ✂ Family members will support each other in their recovery journey
- ✂ Individuals and families in recovery are included and integrated in their local community
- ✂ People in recovery support their communities
- ✂ Our communities will support their members through recovery



### By working together, we will:



Improve **communication and referral routes** between services, ensuring equity in access to services regardless of where you live.



ensure individuals with **lived or living experience** are involved in the review and development of our services and support.



embed the **human rights** based approach across our services and increase advocacy based training and support.



continue to develop and embed approaches to ensure people receive intensive support at time of **transition** e.g. leaving hospital, ensuring ongoing support is tailored to need.



continue to embed the Medication Assisted Treatment (**MAT Standards**) across South Ayrshire ensuring experiential views inform service improvement activities.



implement, monitor and evaluate our **residential rehabilitation** community infrastructure and funded placement model.



Implement our Hub and Spoke **One Stop Shop model**, including our outreach vehicle.



Consider and **learn from the experiences** of our residential rehabilitation pathway and model, and develop our long term strategic ambition.



Implement the key learning and recommendations from our **Multiple & Complex Needs Study**.



undertake a research and scoping study to increase our understanding of the **support needs of women**, including women who are parents and implement improvement actions.



further develop joint working and **joint working between mental health and alcohol and drug services** to support access and outcomes for people who experience mental health, alcohol and / or drug problems.



enhance **partnership** working between statutory and third sector services to ensure transitions between services are streamlined and individuals feel supported e.g. joint reviews and relationship building prior to transfer.



strengthen our joint working with **housing and homelessness services**.



explore opportunities for our services and peer approaches to become **integrated** with the emerging primary care multidisciplinary teams.



further develop and expand **group work activities**, including peer led, self-management and topic specific groups, tailored to local need.



support the ongoing development of recovery communities, including online options, and evening and weekend activities to ensure there are **no barriers to accessing** recovery activities across South Ayrshire including those not easily able to access major towns.



expand the range of education, volunteering, training and work experience **opportunities** available to support people in their recovery journey.



support services to embed **peer-based approaches** in their workforce.



develop a comprehensive **workforce development plan** for volunteers, peers and our workforce, which considers individual well-being and resilience, offers peer support, training and development opportunities.



further **develop** our evaluation and self-assessment processes to ensure our services offer high quality care.



continue to implement the Drug and Alcohol Information System (**DAISy**) and the Recovery Outcomes (RO) tool across our alcohol and drug services.



embed [The Delivery of Psychological Interventions in Substance Misuse Services in Scotland](#) report across our local services.

As a partnership we recognise the significant harm which can result from dependent substance use, including the increased risk of an alcohol or drug related death. We have seen an increase in drug related deaths, often older people who have experienced complex physical and mental health, and social harms, related to their substance use.

We will work together to develop innovative, flexible and assertive outreach approaches to engage with individuals most at risk and provide support tailored to their needs.

## By working together, we will:



review all suspected **drug related deaths** and implement key learning across our services to support those most at risk.



further develop the **provision** of injecting equipment provision, naloxone and related advice and support.



review the Alcohol Deaths **Review Guidance** from Alcohol Focus Scotland and consider local improvement actions to reduce alcohol related deaths.



consider the potential role of **C4C** as it relates to other key developments and strategic priorities of the ADP, for example with regards to residential rehabilitation and the proposed one stop shop.



develop innovative approaches to **engage** those at risk of an alcohol or drug related death in services and support, including individuals experiencing a non-fatal overdose.



# 3

## Getting It Right for Children, Young People and Families

As a partnership we recognise the impact alcohol or drug use can have on children, young people, families and carers, and the significant number of child protection cases related to substance use. We will work with the Child Protection Committee to ensure our services identify and respond to children, including unborn babies, who are at risk of harm due to parental or carers' substance use.

We also recognise the positive benefit children, families and carers can have on an individual's recovery journey. We believe that adopting a whole family approach can provide practical and therapeutic support for a child, their parent/carer and the extended family. This approach also considers the implications of recovery on the child and recognises the importance of creating space for the child to be listened to, to enable us to understand the changing dynamics associated with parental recovery.

We recognise the impact of substance use on young people, including young people with emerging substance use problems and that periods of transition or life changes can be particularly challenging. We will work to ensure young people affected by substance use are fully supported during these times.

We are committed to further developing early intervention approaches to identify young people affected by substance use and ensuring appropriate support is provided. We believe that positive roles models, structure, inclusion and opportunities can empower our young people to identify their interests and passions, and achieve their full potential.



## By working together, we will:



create opportunities to listen to children, young people, families and carers to increase our understanding of the types of support and opportunities they would find helpful, informing the development of our services and activities.



ensure our services adopt **early intervention approaches**, identifying individuals at risk of someone else's substance use and providing tailored support to meet their needs.



Roll out the support for young people test of change across all secondary schools in South Ayrshire removing barriers to accessing support.



ensure our services provide tailored support for **parents**, particularly at times of transition, and support them to develop life skills to become confident parents.



Implement the key learning and improvement activities from our **Whole Family Approach Phase 1 & 2 activities** including streamlining of referral pathways and creative commissioning.



Continue to work alongside South Ayrshire's Children Services Planning Partnership to implement the emerging **South Ayrshire wide Whole Family Approach**.



develop **education materials** aimed at raising awareness of the impact of substance use on families, and dispel myths and tackle stigma which may hinder individuals and families approaching services for support.



ensure our services and activities are **designed to support** the needs of young people with emerging alcohol or drug issues, including volunteering and training opportunities, positive role models and peer-based approaches.



further develop **alcohol free family focused activities** across our recovery communities, promoting family inclusion.



ensure our services create supportive and **nurturing environments** and our staff are aware of the importance of language to ensure we foster compassionate conversations.



ensure actions relating to support for **young people, families and carers are seen as a priority**, including streamlining of pathways and the creative commissioning of services.



Ensure **learning from the Whole Family work** will be a key component of the new ADP Performance Framework and, in particular, we will measure the degree to which there is ongoing evidence of improving family wellbeing, reduced inequalities in family wellbeing, a reduction in the number of families requiring crisis intervention, a reduction in the number of children and young people living away from their families and an increase in families taking up wider support.



# 4

## Taking A Public Health Approach to Justice

As a partnership we recognise the relationship between alcohol and drug use, and involvement with the justice system. We also recognise that living through traumatic events, at any stage of your life, can lead to the increased risk of poorer health, social, education and justice outcomes.

While alcohol or drug use, and experiencing trauma can increase the risk of poor life outcomes we believe this is not inevitable, people can and do recover. We recognise the importance of resilience and adaptation responses, and the strength of protective factors at an individual, family and community level such as positive relationships, social networks and problem-solving skills.

We will work with our partners, including Community Justice Ayrshire Partnership, to create opportunities to divert people, affected by alcohol or drug use, away from the justice system and into community-based supports. Where people become involved in justice settings we will work to ensure they are fully supported, at all stages of the community justice pathway, including police custody and prison settings, and when returning to the local community.



### By working together, we will:



further develop and embed our **peer-led police custody referral** aimed at increasing engagement with vulnerable individuals affected by alcohol or drugs.



develop **innovative** ways of providing support for individuals in prison settings, including individuals on remand, and strengthen through care support for individuals returning to the community.



further develop **peer led recovery** focused activities in HMP Kilmarnock.



support the review of through-care support for individuals leaving custody and **returning to the community**, and the implementation of improvement activities.



support the development of **diversionary activities** to reduce the number of young people, affected by alcohol or drugs, entering the justice system.



support the ongoing development of the justice service user involvement group, offering peer led support groups and informal health promoting social / personal **development** opportunities.



raise awareness, and take-up of benefit entitlements, promote **financial inclusion** and the appropriate disclosure of convictions to employers.



support local organisations to develop **inclusive recruitment policies** and provide employment opportunities for individuals who may have criminal convictions and/or are in recovery, promoting inclusion for all.



**While alcohol or drug use, and experiencing trauma can increase the risk of poor life outcomes we believe this is not inevitable, people can and do recover.**



## Implementing Our Strategy

We will review our ADP structure, including the role, remit and membership of all groups, to ensure the right partners are involved in driving forward our strategic priorities.

### By working together, we will:



Continue to develop our new **website** and options to store relevant information which partners can access at any time.



Work to ensure the ADP has **strong links** to every part of the system locally with relevance to its work, for example by exploring ways of strengthening its links with Community Planning.



Ensuring the **voice of individuals, families and the communities** continue to influence our activities and will work to ensure the appropriate mechanisms are in place to enable this, including representation across our ADP structure.



Review our membership to ensure our ADP has the breadth and scope to meet the **local and national ambitions**.



Review the **ADP subgroup structure**, including remits and membership to support the delivery of our strategic ambitions.



**Develop Plans** for each of our strategic priorities outlining key actions, leads and timescales. Each ADP Subgroup will report to the ADP on progress on a 6-monthly basis.



**Review** our Implementation Plans on an annual basis to ensure that the actions continue to meet the needs of the local community and priorities set out within this strategy.



Continue to **support the workforce** to develop and work collaboratively and run a series of learning and development sessions with staff across the ADP.

**LISTENING**  
**INNOVATION**  
**COLLABORATION**  
**RELATIONSHIPS**

## Commissioning Our Services

We know that the way we commission services to support our strategic ambition should reflect evidence of what is known to work in addressing the root causes and wider determinants of drug dependence. Underpinned by this strategy, in 2023, we will develop a new comprehensive Commissioning Plan which sets out the arrangements for the provision of services and support to meet our strategic priorities and outcomes.

Our Commissioning Plan will be underpinned by key values and principles including ethical and collaborative commissioning, relationships, transparency, openness to change and the need for increased collaborative practice. We will adopt a rights-based and participative approach to the design and redesign of services; and to commissioning decisions which seek to encourage cooperation and collaboration between providers of services, rather than competition.

Our new Commissioning Plan will take account of individual service commitment to the wider system and communities of South



Ayrshire. Our services will demonstrate collaborative practice through their service delivery to deliver the outcomes set out in the overall Change Story, and show that they codesigning services with those who access services.

## Measuring Our Progress

We will continue to monitor and evaluate our services, and review needs analysis information through our new performance management framework, to ensure we take an intelligence-led approach and our services continue to meet local need.

We will develop a Performance Framework, will be linked to national monitoring and evaluation frameworks, and our implementation plans, to ensure progress towards our outcomes and priorities can be demonstrated to people accessing our services, our partners and the wider community.

Our performance framework will include a combination of service and strategic performance indicators to ensure we can evidence our services are high quality and supporting individuals in their recovery, and our activities are contributing to the delivery of our outcomes.

We will also further develop and embed our consultation and evaluation processes to gather feedback from individuals, families and communities on the impact of our strategy.

We recognise that the achievement of our outcomes will result from the contribution of all areas within the strategy in addition to external factors which may lay out with our control. The ADP will continue to be proactive in

taking its approaches to wider strategic audiences including the Integration Joint Board, Community Planning Partnership and Chief Officers group.

## Governance and Accountability Arrangements

The ADP will report to the Health & Social Care Partnership Integration Joint Board, and provides updates on progress to the Chief Officers Group and Community Planning Partnership.

We will produce annual reports detailing our progress in delivering our strategic priorities. Our annual reports will be reported to the Integration Joint Board and Scottish Government, and published on our [website](#).

## Equalities Impact Assessment

An Equalities Impact Assessment of our strategy has been undertaken and is available on our [website](#).

Recovery is  
reality



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