

Methadone fee variations will place drug users at risk, say GPs

FEARS are growing that GPs in many areas of Scotland could opt out of prescribing methadone as a result of differences emerging in NHS payments to doctors under the new GP contracts which come into force next month.

At least three Health Boards in Scotland have agreed to pay £350 per patient but in another area GPs have been offered only £75.

The fee disparities are prompting acute concern among doctors that they may find themselves forced to withdraw from prescribing services, which would add to the already patchy provision across Scotland. Doctors warn this could mean many users returning to illegal drugs and committing crimes to pay for them.

Meanwhile, in Glasgow, a rift has developed between prescribing GPs and the Health Board over the Board's review of methadone services in light of the new GP contracts. The Board has agreed to pay the £350 fee for one year only to allow it to look at alternatives to the GP practice-based system.

See page three

Prisons look at new ways to combat blood viruses

ADVICE on safer injecting techniques and the provision of citric acid sachets and condoms are among a raft of measures being considered by the Scottish Prison Service (SPS) to combat the spread of bloodborne viruses among prisoners.

Psychostimulants training for staff, measures to improve the effectiveness of care for dual diagnosis prisoners and the replacement of "Drug Free Areas" with "Addictions Support Areas" are also key areas for action by SPS as part of a newly reviewed and wide-ranging strategy to tackle the harm caused by prisoners' problem drug use.

In its first ever social inclusion policy and guidance manual, SPS pledges to become more effective in its drugs harm reduction service delivery and promises to produce a "robust" harm reduction strategy.

Among the measures anticipated are:

- The availability of literature and staff training on safer injecting techniques

- Encouraging injecting drug users to turn to alternative, risk-reduced administration routes such as inhaling or smoking

Other initiatives to be examined in detail for possible inclusion in future strategy - and which would require full support from the SPS Board prior to implementation - are:

- Provision of citric acid sachets to prisoners who continue to inject

- Availability of condoms, femidoms and dental dams to prisoners

- Introduction of amnesty boxes for used needles and syringes within residential areas of prisons

- The development of a safe disposal and storage policy for injecting equipment which is currently confiscated from prisoners on admission and destroyed

- The introduction of Harm Reduction Approved Activities

- The potential for harnessing peer support to reduce risky behaviour.

pilot

Meanwhile, a pilot study which will test prisoners for drugs through saliva rather than urine is to be carried out to see if it is a viable option within SPS. This study is part of a move to develop an Addictions Prevalence Testing Policy which may include the removal of the adjudication process from substance misuse testing, says SPS.

Residential "Drug Free Areas" in prisons will be come known as "Addiction Support Areas" in a move to a more supportive policy.

"SPS policy on 'Drug Free Areas' to date has been weak with

limited guidance given to the field for implementation. Currently the standard of support offered for the individual prisoner as they progress through the estate lack continuity," the manual states.

"The Addiction Support Areas, whilst encouraging abstinence, will recognise the reality that lapse and relapse are part of the treatment cycle. This will ensure that these areas are part of the treatment process and (are) not seen as the end result."

Prisoners' views on drug services should also be factored into future developments, locally and nationally, says the manual.

The SPS says it recognises the importance of taking all reasonable action to reduce the demand for drugs in prison; underlines its commitment to reducing the supply of drugs in and around prisons, and makes clear that SPS must operate within prevailing legislation.

However, appropriate harm reduction measures are essential to reduce the incidence of damage to health associated with drug use, including the potential of diseases being transmitted back into the wider community, says SPS.

"The use of illegal drugs cannot
continued on page 2

SDF COMMENT

THE Scottish Prison Service is to be applauded for its new thinking on tackling problem drug use among prisoners. Its latest policy guidance has shown a commendable willingness to grasp the nettle of harm reduction by coming up with practical solutions which could make a real impact on the health and wellbeing not only of those in custody, but their families and friends.

The provision of literature and staff training on safer injecting techniques can only be a step in the right direction and we hope that future discussions within SPS will lead to the implementation of a wider range of responsive measures, such as the provision of citric acid sachets.

It is, of course, likely that these enlightened proposals will attract criticism from the just-say-no brigade who simply refuse to accept that drug use in prisons is something that is widespread and with us for the foreseeable future.

Yet Graeme Pearson, the new Director of the Scottish Drugs Enforcement Agency, has signalled a shift of effort away from high profile drug seizures to dismantling the drugs bosses' power bases – their financial empires. What the new SDEA and SPS approaches share is a common recognition that longer term success is likely to come from slow-burning solutions and not populist quick fixes.

The SPS is only too well aware of the difficult line it has to tread. Trying to reconcile the tensions between running harm reduction programmes in an environment which by its very nature must also take into account issues such as security and criminal justice is no easy feat. However, the need to look at prison needle and syringe exchanges cannot be ignored.

A recently published study in the International Journal of Drug Policy highlighted results of needle exchanges programmes in prisons based over 10 years in Switzerland, Germany, Spain and Moldova. The study concluded that syringe exchanges were not only feasible but efficient. Syringe sharing was reduced, there was no rise in drug use or injecting drug use, syringes were not misused and disposal of used syringes was uncomplicated. Nevertheless, the authors commented on the "striking" discrepancy between the success of needle exchanges in prisons and low acceptance of the practice in Europe, with the notable exception of Spain.

It is worth noting that from 1 April, disinfecting tablets for cleaning injecting equipment will become available to prisoners in England and Wales. These tablets have been available to prisoners in Scotland for the last 10 years, reflecting the progressive nature of penal harm reduction policies north of the border. It would be a crying shame to lose our advantage – moral or policy - at this late stage.

New prison measures

continued from page one

be condoned. However, when it does occur, harm minimisation should be the priority both for the misuser and/or prison staff.

"The SPS has continued to progress a variety of harm reduction measures. Nevertheless, there is clear evidence that the consequence of harm associated with substance misuse continues to grow," the document states.

shift

"Substance misuse is intrinsically difficult to tackle in prison. From consulting a range of stakeholders, it is clear that a greater commitment and shift from a mainly punitive response towards a treatment focus is required."

As well as giving new guidance on psychostimulants, the new SPS Addictions Policy now covers

integrated care pathways and reinforces the need for partnership working within the addictions integrated treatment care process – the vehicle for delivering individual care for problem drug use within SPS - as well as for "robust assessment, action planning and transitional care" to ensure ex-offenders have improved community support on release.

- Cranstoun Drug Services has had its contract to provide Addiction Services to the Scottish Prison Service extended for a year until 31 March 2005. The SPS will use the experience of the 2004 contract extension to benefit tender development for Addiction Services in 2005.

IT IS unlikely that Scottish schools will follow plans in England to strengthen headteachers' powers to drug test school pupils, according to signals from the Executive.

A spokesman for Education Minister Peter Peacock said: "Teachers in Scotland are already aware of the need to look out for signs of drug taking in schools. However we will look at any proposals put forward south of the border to see if there is anything we can learn from them."

"Peter Peacock has written to headteacher associations in Scotland to ask them for their views on the powers they currently have. We will listen to them before we take any further steps."

David Liddell, Director of Scottish Drugs Forum said: "The focus of resources and efforts should be on targeting the young people who are most vulnerable and at risk of developing problem drug use."

Progress noted in Open Prisons' drugs work

PROGRESS has been made in dealing with problem drug use in Scotland's Open Estate prisons – despite the bringing in of drugs being one of the main security issues at HMPs Castle Huntly and Noranside, according to prisons' inspectors.

A comprehensive drugs policy has been launched and methadone and detoxification programmes have been introduced in Castle Huntly and a new policy on the management of prisoners in the Open Estate who test positive for drugs has had a noticeable impact.

An addiction team has been set up with a drug strategy coordinator and eight officers identified as addictions officers, which allow a degree of continuity in dealing with prisoners who test positive which almost guarantee there will always be an addiction officer on site, say the inspection team.

Narcotics Anonymous is in place and home leaves can be changed in order to facilitate contact with community-based counselling services.

However, there are still no drug free groups and in Castle Huntly there is a clear need for a systematic approach to pre-release particularly first home leave release, the team conclude.

- The Scottish Executive has issued a consultation on reducing reoffending in Scotland. A series of meetings and focus groups is being arranged by the Executive to take place over the next three months to listen to people's views. Written responses should be submitted by Tuesday 25 May. For more details look up <http://www.scotland.gov.uk/consultations/justice/rrcc-00.asp>

Fears loom over impact of new GP contracts

LOCAL prescribing fee arrangements under the new GP contracts are leading to tensions in some areas of Scotland, it is emerging.

The new contracts which come into force next month (April) allow doctors to opt in or out of providing drug treatment for users wanting help.

The new system categorises drugs treatment such as methadone prescribing as an "enhanced" rather than "core" service for which GPs will receive per capita payment for patients being treated.

GPs in Greater Glasgow – where there are more than 5000 people on the Shared Care methadone programme – have been offered £350 per head but for the first year only.

Some GPs in the city have heavily criticised the local NHS over the nature of arrangements for prescribing services after the first year of the new contract.

They claim that the Primary Care Trust is planning to move this service away from GPs to a more centralised model in a bid to cut costs. Because this alternative service would concentrate on methadone prescribing, say GPs, users would lose comprehensive health care services offered by family doctors and end up falling away from drug treatment.

Dr Richard Watson, who practices in Cambuslang and treats more than 100 patients on methadone, described the plans as "utterly outrageous and shocking" and cast doubt on the viability of the scheme.

"Glasgow Shared Care Scheme has been acknowledged as one of the best services in the world in the Journal of the American Medical Association, with a retention rate of 90 percent.

"These proposals will lead to an increased risk of deaths through people going back to injecting drugs and also people will go back to committing crime.

"My partner and I also offer long-term contraception to patients. It is very unlikely that any centralised service would offer these. They would be there for methadone only.

"The PCT is talking about one doctor to every 600 patients. There is a shortage of GPs and doctors working for any

centralised service may well not be qualified GPs - there is a danger that they may not be qualified in anything and that this becomes a dumping ground for doctors who would otherwise not be permitted to work as independent practitioners."

Dr Alan McDevitt, chair of the GP sub-committee of the Local Medical Committee in Glasgow, said: "The Board has been promoting the GP practice based model for years.

"GPs are upset that the Board does not want to pay them for the decent job they do and a lot of them are not prepared to run poor quality services for a lower fee. I don't know anyone who is saying it is a good model, but it will be cheaper."

Greater Glasgow NHS Primary Care Trust issued the following statement in response:

"NHS Greater Glasgow and Glasgow City Council currently provide a wide range of community based services for people who require methadone treatment. These include the shared care scheme which is provided by a number of GP practices across the city and a number of community based clinics run by doctors from addiction services.

sustainable

"Like all NHS Boards we are currently exploring how methadone services are delivered in light of changes introduced though the new GP contract. This is to ensure that we can continue to provide a safe and sustainable service to patients.

"We have agreed a one year arrangement with current GP providers to allow alternative options to be explored in more detail.

"This work is being undertaken as part of the Health Board's plans for enhanced services.

"Enhanced services give Boards the ability to commission services from a range of organisations including general practices dependant on quality, effectiveness and value for money.

"Regardless of whether future

Needle agencies need more help to use drugs law changes

DRUG agencies in Scotland don't have enough money to take advantage of changes in drugs law aimed at curbing the spread of bloodborne diseases among injecting users, according to a new survey carried out by Scottish Drugs Forum.

Lack of training and clarity in administrative arrangements is also hampering efforts to offer injecting users the wider range of paraphernalia which has been made available since a relaxation in drugs law last year.

From 1 August 2003, drug treatment workers, pharmacists and doctors have been able to supply filters, sterile water and swabs to drug users to help them avoid health risks from dirty equipment.

The changes to the Misuse of Drugs Act 1971 removed the risk of prosecution to treatment workers and doctors who provide equipment to clients and patients for health reasons and covered five types of items - ampoules of water for injection; swabs; utensils for the preparation of a controlled drug (spoons, bowls, cups, dishes); citric acid and filters.

However, a Scottish Drugs Forum survey of 42 services in Scotland has found that although most supply needles, swabs and disposal boxes, fewer than one in three were supplying citric acid and only one respondent offered sterile water – despite widespread wishes to widen the range of equipment on offer.

Almost two-thirds of respondents want to supply sterile water and citric acid and half want to supply stericups and filters.

But the survey revealed that over 40 percent had no budget to meet the additional costs or were worried about getting the necessary funding for the extra range of equipment.

One respondent estimated an extra £120,000 would be required locally per annum.

And half said organisational barriers were getting in the way of extending the range of services. These barriers included:

- uncertainty about what could be distributed
- training needs
- lack of clarity surrounding Patient Group Directives for dispensing sterile water for injections.

Extra financial help is needed to meet the new pressures, while centralising the ordering and distribution system for paraphernalia and adding paraphernalia to existing "pre-packs" to cut down pharmacy workload are among other measures which would help, according to the needle exchange workers.

recommendations

Among the SDF's recommendations for remedial action are that commissioning agencies and lead stakeholders should:

- address the range of organisational and financial problems identified by agencies
- ensure all local services know about the changes to the law
- provide relevant training
- explore alternative methods of sourcing/distributing supplies

James Egan, Head of Customer Services at SDF, said: "Our survey clearly demonstrates the concerns in the field about their ability to use the changes to the law to best effect. There is a need for lead organisations to review their policies and procedures so that needle exchanges can be more effective in tackling the transmission of HIV and Hepatitis C."

methadone prescribing services are provided by GPs or doctors employed by addiction services, patients will continue to have access to the same range and quality of methadone treatment.

"There are no plans to

centralise methadone prescribing and future services would continue to be delivered in a number of community based settings across the city, supported by nine new Community Addiction Teams."

NOF cash boost for key SDF projects

TWO Scottish Drugs Forum projects have won more than £200,000 worth of New Opportunities Fund lottery cash to expand key work in user involvement and employability.

A total of £103,000 has been awarded to SDF's Drug Workers Training Project, a one-year college course pilot in Glasgow which aims to train 10 former drug users to become drugs workers.

Meanwhile, £101,500 will go towards extending SDF's User Involvement network into the Highlands with the appointment of an UI Development worker who will help give service users a voice in the shaping and developing local services.

The Glasgow college course will involve the 10 former users undertaking 50 weeks college-based and work placement training to help them win their City and Guilds Certificate in Substance Misuse Work Level 2.

Students will learn about topics such as models of addiction, record-keeping, confidentiality issues, calming and supporting people. The project, which will be managed by SDF, has been supported by Greater Glasgow Drug Action Team and has received money from the Robertson Trust.

David Liddell, SDF Director, said: "The college project is an important initiative because education, training and jobs are important routes out of drug use.

"We have worked closely with Greater Glasgow DAT to get this scheme off the ground and we hope it will help former drug users into jobs and address some of the staff recruitment problems which agencies are experiencing."

Meanwhile, it is hoped that the Highland UI worker will be in place by September and their job will be to recruit, train and support user involvement groups to undertake a range of survey work. The initial group will be based in Inverness and a second group will be set up

after discussion with local forums and agencies.

Initially the focus of the survey work will be on accessibility to treatment services. The job is to ensure effective user input and participation in the work of the Highland Drug and Alcohol Action Team, which is part-funding the post, and its related sub-groups and drug forums.

This is the sixth SDF User Involvement post to be created – the others are in Glasgow, Dundee, Fife and Lanarkshire.

Stephen McGill, SDF's Head of User Involvement, said: "The programme will aim to respond to a range of needs, including those of users actively involved in the project, the wider population of problem drug users in Highland, service providers and the Highland DAAT. We also want to link with other user involvement developments across Scotland and disseminate good practice."

There are eligibility rules to become a UI group member but anyone interested should contact their drug worker or GP first and then Stephen as he can keep their details on file until the project is up and running. Contact him on Stephen@sdf.org.uk

David Liddell said, "We are delighted to receive funding for the UI post, which is an important step towards giving drug service users in the Highlands a voice in developing and shaping local treatment and rehabilitation services.

"Our experience elsewhere in Scotland is that User Involvement work helps improve the quality and responsiveness of services for drug users and we look forward to working with Highland Drug and Alcohol Action Team to make this a reality."

RESEARCH into why some people can use heroin without developing a problem could be the key to improving help for users who fall into problem use, according to researchers at the Institute for Criminal Policy Research at Kings College London.

Knowing how people stay in control of heroin may have important lessons for treatment agencies and users who are unable to control their use. The researchers – funded by the Joseph Rowntree Foundation – want to hear from people who have used heroin during the previous six months to take part in a confidential and anonymous on-line survey about their use (the survey can also be completed off-line). More information is available from Institute for Criminal Policy Research: www.kcl.ac.uk/icpr or the Joseph Rowntree Foundation: www.jrf.org.uk

Glasgow HCV rate in UK spotlight

THE first annual report into infections among injecting drug users in the UK has described Glasgow's incidence of Hepatitis C in users as "a cause for concern".

"Shooting Up", the first joint annual publication of its kind by public health centres in England, Scotland, Northern Ireland and Wales, highlights that an estimated 30 percent of "recent initiates" in Glasgow have been infected with Hepatitis C.

The report says that by the end of 2002 there had been 50,000 reported laboratory diagnoses of hepatitis C in the UK, most associated with injecting drug use. But almost three-fifth of injectors with the infection remain unaware that they are infected.

The authors warn that sharing of needles is a key factor in the ongoing transmission of a range of infections – particularly amongst those who have started injecting in the past three years – and that Hepatitis C will continue to place a growing demand on the NHS.

The report calls for primary care bodies and Drug Action Teams to give priority to a range of measures to reduce harm, including easy access to treatment and support for those who wish to stop injecting or using drugs as well as the development of high quality needle exchange services for those unable to stop injecting – such as access to a new needle and syringe for each injection.

This first annual report – described as "an indication of the seriousness of the issue" – also states that hepatitis B continues to be transmitted because many injectors remain unvaccinated. It calls for on-site vaccination to be available at drug services. For more details see www.hpa.org.uk

A further 10 people have become ill in the national outbreak of tetanus among injecting drug users, bringing the total to 20 – three in Scotland.

On the move...

GAIL Robertson leaves her post as Substance Misuse Development Officer (Skye & Lochalsh and Inverness) with **Highland** Drug and Alcohol Action Team on 9 April to pursue a new career as a primary school teacher.

Jamie Pitcairn has already left his job as Substance Misuse Development Officer with **West Lothian** Drug and Alcohol Team. He is now working with Green Door in Falkirk. **Hilary Smith** has replaced Catherine Evans as research officer at West Lothian DAAT.

Hannah Muldoon has joined **East Lothian** Drug and Alcohol Team as part-time Drug and Alcohol Development Officer.

Aberdeenshire DAAT has had a few changes recently and the staff picture there is as follows: ADAT Co-ordinator job-share - **Grace Ball** and **Maggie Jamieson**; ADAT Development Officer - **Anni Stonebridge**; Planning officer (children and young people) - **George Allan**; Planning officer (joint futures and integrated services) - **John Forrest**.

Sharon Hackney is leaving **Ayrshire and Arran** DAAT to take up a post as a project manager in a local mental health project. Her post has been advertised in the national press.

Tish Carter, Drug and Alcohol Development Officer, has left **Moray** Drug and Alcohol Team as has **Lynne Edmonstone**, who was Information Officer.

Finally, SDF's very own **Biba Brand** has been appointed as SDF West of Scotland Regional Manager in place of **Frances Rodger**, who left in January to take up a post in Glasgow's new Community Addiction Teams. Biba moves over from SDF's Employability Team where she has been West of Scotland Development Officer.

THE UK charity Phoenix House has launched a leaflet, 'Combating Drugs and Alcohol Within Your Community', targeted at first, second and third generation Asians. Available in Urdu, Punjabi, Gujarati and Hindi, it aims to raise awareness to encourage Asians with problem substance use to access treatment. Phoenix House Glasgow Adult Residential Service will hold an Information Open Day on Thursday 1 April from 2.00 - 4.30pm to help give the black and minority ethnic community a better insight of its work. It is aimed at community representatives, development workers and faith leaders. To book a place, contact Alan Brand or Aileen Rodden on 0141 333 9357.

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Video research shows why injectors are at risk from HCV

THE Effective Interventions Unit has recently published a report of a study which examined the injecting practices of drug users. The work was funded under EIU's programme of research on Hepatitis C prevention.

There is considerable evidence in the UK and internationally, that the introduction of needle/syringe exchange schemes have helped to control and even reduce HIV transmission among IDUs. However, these schemes have been less effective in controlling the spread of HCV. Some researchers have suggested that the sharing of drug paraphernalia (cookers, filters and water) may be another way in which HCV is transmitted, but there has been very little research that shows the precise ways in which injecting practices put people at risk.

The study involved the direct observation of drug users (IDUs) while they were injecting. Observations were recorded by video. The purpose of the study was to find out precisely what injectors are doing that is putting them at risk of HCV transmission. The findings showed that harm reduction messages about borrowing used needles and syringes are understood by drug users, but:

1. drug users don't fully recognise the ways in which they are putting themselves at risk through "indirect" sharing of needles and syringes
2. social circumstances often prevent drug users from acting on the knowledge they have.

The findings have important implications for public health policy, and they are likely to have a major beneficial impact on the advice that is given out by harm reduction services.

The study was carried out by Professor Avril Taylor at the University of Paisley. EIU is also exploring with Professor Taylor the possibility of developing a training video for harm reduction staff based on the findings from the study.

A copy of the research report and summary, is available from the EIU website at: <http://www.drugmisuse.isdscotland.org/eiu/eiu.htm>. Further information about the study may also be obtained from Professor Taylor, who will be speaking at SDF's seminar on Hepatitis C on 11 May in Glasgow.

SERVICE users in Glasgow, Edinburgh, Fife and Lanarkshire have been taking part in a series of consultations to help formulate a national guide to advocacy for drug users.

Scottish Drugs Forum workers have been carrying out four focus groups as part of a wider consultation exercise by the Effective Interventions Unit (EIU) to help shape the content of its Guide to Advocacy for Drug Users.

The document will consider what advocacy is and why it is important for drug users. Service users have been asked for their views on the existing range of advocacy services, the quality of existing advocacy services, and on future advocacy provision - who is in the best place to provide advocacy to drug users, what is the best way of providing such a service and where should services be based or located.

The Guide will include information on who currently provides advocacy for drug users and consider the most appropriate types of advocacy for that client group. The document will also provide practical advice about setting up and extending advocacy services at the local level.

EIU conducted a questionnaire survey with treatment and care service providers during summer 2003, and held a one-day consultation seminar with key individuals in December 2003. The plan is to publish the guide by May 2004.

REVIEW

Needs Assessment: A practical guide to assessing local needs for services for drug users
by April Shaw, Research Officer, SDF

NEEDS Assessments are utilised to identify the needs of local/target populations in order that services are planned and delivered to meet those needs.

'Needs Assessment: A practical guide to assessing local needs for services for drug users' has been published by the Effective Interventions Unit and is a follow-up to the 'Integrated Care Plan for Drug Users: Principles and Practice' which identified the process of needs assessment as a 'key first step' in designing and delivering integrated care for drug users.

The Needs Assessment guide aims to provide a practical step-by-step guide to the process of needs assessment from 'why do needs assessment' through to 'monitoring and evaluating' changes implemented through the process.

Practical guidance is given to sources of information that can be utilised for a needs assessment; Appendix 2 provides very useful sources of information as well as details on accessing them. Advice is also given on undertaking a profile of existing services that

identifies the range of needs being met by services, the capacity and accessibility of services, and the gap between the needs of the target population and actual provision.

Important to any needs assessment are the views of service users and providers. The guide provides practical research methodologies for undertaking service user/provider consultation including advice on constructing questionnaires and interview methods.

Throughout the guide examples of needs assessments undertaken by various services are shown as well as examples of needs assessments for psychostimulant users, young people and rural populations.

The 'Needs Assessment' guide is concise, clearly laid out and offers practical advice that will be useful to any services involved in planning and providing services for drug and/or alcohol users.

It is available on the EIU pages at the Drug Misuse Scotland website: <http://www.drugmisuse.isdscotland.org>

FOLLOWING the publication of 'Integrated Care for Drug Users: Principles and Practice' (EIU, 2002) which includes guidance on information sharing and safeguarding client confidentiality, the EIU made a commitment to do further work to support the development of information sharing. A short-life working group was set up and a DAAT telephone survey undertaken to find out more about local information sharing developments and support needs. The phone survey confirmed that all DAATs would welcome further support in this area. Also, with few exceptions, DAATs thought that local workshops would be a helpful catalyst for this.

The EIU has recently commissioned an external consultant to provide facilitation support, in the form of workshops, to all DAATs who wish them. Workshops will be tailored to meet local needs, recognising that areas are at different stages of development. The first workshops are taking place in Dumfries & Galloway, Fife and Highland during March. They will be evaluated by the EIU and adjustments made to the format and content of the workshops, if necessary, prior to organising the remaining workshops.

The EIU is also working with DAATs to encourage publication of local information sharing materials on the DAAT pages of the Drug Misuse Information Scotland website, to assist the exchange of practice examples between areas. The EIU is keen for people to come forward with further materials for this.

For more details contact Linsey Duff, Senior Information Support Officer, EIU/ISD Scotland (tel. 0131 244 3024 or email Linsey.Duff@scotland.gsi.gov.uk)

Lottery millions to help drug users

DRUGS and alcohol projects across Scotland have been awarded more than £3.8 million in lottery funding by the New Opportunities Fund.

The grants to 32 projects form the second round of the Fund's Better Off programme which is delivered in partnership with Scotland's twenty-two Drug Actions Teams.

The awards are aimed at helping people with substance use problems get back on their feet and into education, training, employment.

The largest award of just under £500,000 is made to Next Steps Scotland in Fife. They receive £458,002 to work with up to 600 recovering drug and alcohol users across Fife.

Rosemary Henry, Interim Centre Manager, is delighted with the grant. She said: "Next Steps Scotland delivers a structured day service called 'Next Steps' for individuals recovering from substance misuse. This innovative initiative, operational to date from a single location, has had considerable success in progressing participants on to Education, Training and Employment.

"This grant means that we are now able to meet the needs of working partners and provide a service locally. The expansion will produce a more even and consistent service across Fife enabling us to reach individuals who wish to make use of our services and are restricted currently by transportation, time or childcare barriers."

Two Scottish Drugs Forum projects have also received funding - £101,500 to help meet the cost of a User Involvement post to be appointed in the Highlands area, working alongside co-funders Highland Drug and Alcohol Action Team, and £103,000 to help with the costs of a one-year-pilot college course in Glasgow to help ex-users train to become drugs workers.

David Liddell Director Scottish Drugs Forum added: "The Better Off Programme funding is crucial as it provides vital routes out of problem drug use through education, training and helping people into employment"

Jackie Killeen Head of Policy and External Relations New Opportunities Fund Scotland said: "Better Off aims to support

projects that link people who misuse or have misused addictive substances with education, training, employment and accommodation opportunities in their communities.

"It's key that projects funded through the programme respond flexibly to individual needs of and involve service users in project planning and delivery as well as meeting the needs of particularly deprived and 'hard to reach' groups."

Deputy Justice Minister Hugh Henry said: "Too many lives are still being blighted by drugs and too many people seeking help are waiting too long to access that help - help that cannot always be dispensed in an easy way. Drug misusers very often have multiple problems, and the odds on success are improved if these problems are tackled in a properly co-ordinated way by local services.

Communities across the north of Scotland will benefit from awards totalling £440,948. Among the recipients are the Cearn Community Development Project in the Western Isles, which will offer people with substance misuse problems the chance to gain employable skills by offering training and an SVQ in gardening and horticulture.

In Glasgow, Impact Arts receive £111,200 to support their innovative homebuilding project Fab Pad. Fab Pad works with young people with a history of homelessness through substance abuse to sustain a new tenancy as they rehabilitate. This innovative project uses interior design and home decorating skills to assist this vulnerable group begin to carve out a new life for themselves.

In Alloa, Forth Dimension, a community rehabilitation and support project receives £44,108 aims to offer recovering substance users a better chance of finding employment by working with them and with local employers.

In the Borders The Big River Project which runs a community rehabilitation service receives £138,164. It will increase the support available to people in Hawick who use drugs by offering groups, one-to-one counselling, complementary therapies, practical support and parenting support.

The full table of awards is available at NOF's website www.nof.gov.uk

Ayrshire and Arran

LOCAL businesses in Ayrshire are being offered free training and consultancy on Alcohol & Drugs issues in the workplace, in the first scheme of its kind in Scotland.

It's courtesy of a collaborative project involving North Ayrshire Council, the University of Paisley with support from Ayrshire & Arran Alcohol & Drug Action Team (ADAT).

An Employability Co-ordinator, Liam McLaughlin, based in Irvine is now in post. Commenting on the scheme, he said: "Training will be provided to key personnel. If problems are spotted sooner then they can be dealt with more effectively. Reductions in accidents, stress issues and absenteeism will hopefully have an impact on profitability."

Ruth Shepherd, ADAT Co-ordinator, said "The cost to business for sickness in the UK due to problem drinking is £1 billion. Three out of four people with an alcohol problem are in work. We are confident that this new project will go some way to help tackle the problems brought about by alcohol and drugs misuse."

Liam is also providing drug and alcohol awareness training to Job Centre Staff which will assist them to help people with alcohol and drug problems who want to get into education, training and employment.

Christine Wallace, Chairperson of ADAT's Employability Issues Group, said " We welcome this exciting new project which should assist in progressing some of the action points identified at the Employment Conference held in October last year".

Argyll & Clyde

MID Argyll Council on Alcohol and Drugs recently received funding from Lloyds TSB Foundation for Scotland: Partnership Drugs Initiative and Argyll and Bute Council to commission a short term research study.

The purpose of the study will be to gain a profile of the main drugs used by young people in the area, the extent of drug use (recreational, regular or dependent), the nature of problems experienced by young people in relation to their drug use and what kind of services they feel would meet their needs.

The researcher will meet with young people through various methods. In addition the researcher will then formulate a development plan to take the research further should a need for service development be ascertained.

The Barrhead Family Support Project also received funding from Lloyds TSB Foundation for Scotland: Partnership Drugs Initiative, East Renfrewshire Council and Children First. Existing services provided at the Project are:

- Individual support to children and parents/carers both at home and in the community
- Groups for children to nurture self-confidence and social skills
- Groups to provide parents/carers with support and information about parenting
- Help for children and parents/carers to access services and activities in the community.

As a result of the funding the Project proposes to consolidate and expand its work through the extension of existing services and the development of new services:

- Male Parenting
- Family Support
- Family Group Conferencing
- Play Therapy
- Essential Skills
- Creative Therapies
- Complementary Therapies
- Skill Building
- Volunteer Befriending
- Volunteer Advocacy
- Volunteer Mentoring
- Sitter Service

The proposal focuses on the Project's need for a full time male Project Worker, a part time Family Support Worker and a range of sessional staff and volunteers.

Lanarkshire

THE Critical Incident Review Group's preliminary findings on drug related deaths have been reported to Lanarkshire ADAT's full committee meeting.

The presentation represented the results of several months work collating and analysing information on drug-related deaths in Lanarkshire during 2001 and 2002 from a variety of sources including the SDEA database, Sudden Death reports and questionnaires returned from drug treatment and support services.

Based on this work, the group have suggested some early actions in terms of reducing drug-related deaths in Lanarkshire. These include:

- Prioritising education and awareness raising regarding the increased risk of drug-related death for recently released prisoners and improving links to community-based services
 - Conducting an audit of the local distribution of Know The Score materials to vulnerable groups and their families and friends
 - Continuing and expanding upon the work initiated by Lanarkshire's Harm Reduction Team regarding the provision of resuscitation training for agency staff, service users and their families and friends
 - Investigating opportunities for the provision of naloxone (the overdose-reversing opioid antagonist) to appropriate groups in the community.
- The group have also identified several further pieces of work for the future including:
- Engaging with families and service-user groups
 - Investigating non-fatal overdoses and the quality and sharing of information that could identify those at high risk
 - Conducting in-depth reviews of subsequent fatalities as required.

LANARKSHIRE children and their parents will be able to learn more about the dangers of drugs through two locally produced educational videos.

Strathclyde Police have teamed up with video production and training company fps media to produce the videos after North and South Lanarkshire Councils received grants from the Scottish Executive to raise awareness of the issue.

One of the videos will be available in all Lanarkshire schools and youth groups while the other can be obtained from libraries and council buildings and is aimed at parents.

David Craig, Quality Development Officer for North Lanarkshire Council, said: "Both videos will be used extensively across the council areas to help support staff deliver drug and alcohol education to both young people and their parents."

LANARKSHIRE ADAT is to get a new look as part of a major campaign to raise its profile.

As part of an ongoing plan to raise awareness of the ADAT's strategic and policy role and the services it offers, a brand new logo is to be introduced this spring to coincide with the launch of the ADAT's own website in Lanarkshire.

The new logo and stand-alone website approach aims to provide a clear, concise and individual identity for the ADAT.

The website will be launched on April 1 this year following a consultation process which began last year.

The new logo, which features an eye-catching new design in pink and grey, will be used to highlight where information on drugs and alcohol can be found and is to be launched a few weeks later.

The logo will be the focal point for a range of branded signposting that the ADAT plans to have in place at pharmacies, health centres, etc.

The logo will also feature prominently on the new ADAT website.

The website process culminated in four design companies being invited to give a presentation in November 2003 before a panel made up of staff from the ADAT and health promotion, to set up the site.

As a result Edinburgh based company CIVIC Computing, whose previous developments include SHOW, ISD, Know the Score, Scottish Drugs Forum and the new Alcohol Information Scotland site, were selected to set the website up.

The company, who are renowned for their groundbreaking work in relation to accessibility, which will be a key feature of the ADAT site, has been working closely with the ADAT to achieve an easy to navigate and informative site.

The site, which is aimed primarily at employees of the partner agencies and other public sector professionals, will provide information on local statistics, research, services and

plans, as well as links to similar national resources.

Details of ADAT subgroup meetings, including members and dates, will also be posted on the site as well as minutes of the main quarterly meetings.

Other potential users who will find the site of interest include families and carers, service-users, and students.

It is envisaged that the site will be made up of six main sections, namely *About ADAT*, *Publications*, *Services*, *Events*, *FAQs* and *Links*.

The *About ADAT* section will provide information on the structure and remit of the ADAT as well as details of recent and forthcoming meetings. Information regarding the Lanarkshire Community Safety Partnership and other local forums will also be found here, as well as news items and press releases.

The *Publications* section of the site will bring together local strategies, action plans, conference information, reports, and research documents. Combined with links to national resources, this will provide unprecedented one-stop access to a wide range of relevant materials. Minutes of the main quarterly ADAT meetings and current and back issues of the ADAT bulletin will also be available here.

The *Services* section will contain three sub-sections. The first of these will link to an updated and searchable on-line version of the 'Connected' directory of local helping agencies, and will also provide further details of drug and alcohol services in Lanarkshire. The second sub-section will provide links to national service directories, and the third will provide details of funding opportunities and training services provided by ADAT partners and external organizations.

The *Events* section will provide details of forthcoming local and national events such as seminars, conferences and training courses relating to alcohol and drug issues. Information regarding other relevant local events such as 'Choices for Life' will also be included.

The site will also feature *Frequently Asked Questions* and *Links* sections, the latter of which will tap into an extensive list of national and international resources relating to drug and alcohol issues.

The new ADAT partnership website, will be available at <http://www.Lan-ADAT.org.uk> from April 1, 2004.

A PROJECT that works to empower stable drug users to get back on track and integrate into the

community has won an award.

CASSI – the Coatbridge & Airdrie Substance Abuse Initiative – picked up the Evening Times Breaking Down Barriers Award in the annual Local Heroes Care Awards.

CASSI originally started as a methadone group with people meeting once a week to give each other support.

They then applied to become a charity and looked at how they could make it user-led with the members being included in the decision making.

The group now makes education videos for schools as well as running adult literacy and numeracy classes.

Jim Cullen – the man behind CASSI – said: "When I first mentioned the classes a lot of them said 'oh no we can't go back to school' but now they love it and say it's the best two hours of the week."

CASSI will use the prize money from the Evening Times award to fund a variety of health and education projects.

Dumfries & Galloway

PARENTS are being offered places on a course which will put them wise about drugs and help them to help their children understand and deal with the issues surrounding drug use.

Community Officer Rolf Buwert, based at Thornhill, will deliver the course which is runs this month over six weeks.

Sessions will involve the adults in a variety of topics, including: developing home based strategies to help children make informed choices about drug use;

getting better informed about current drug use in our society and its related harm; looking at their own beliefs, attitudes and behaviour about drug use and gaining invaluable community information and access to local support.

Constable Buwert says, 'The course will not prevent children from trying tobacco, alcohol or illicit drugs but it will help parents be more effective at influencing their children's choices.'

conferences, seminars and training

april

National Young People's Drug Treatment Worker Forum

6 April

Newcastle-upon-Tyne

The Forum meets three times a year to provide an opportunity for practitioners to share good practice ideas.

Contact: Lisa Jones tel 0207 928 1211 email LisaJ@druscope.org.uk

22nd Conference of the World Federation of Therapeutic Communities

13-17 April

Mallorca

Latest research and best practice in tackling drugs harm from various perspectives within the law enforcement, treatment and prevention sectors.

Contact: see website (which has English version) for details http://www.proyectoahombre.es/congreso/index_en.html

VI European Conference European Opiate Addiction Treatment Association

22- 23 April

Paris

This conference is organised by Europad, the European society for professionals interested in the development of effective opiate addiction treatment in Europe and elsewhere.

Contact: maremman@med.unipi.it or m.reisinger@worldonline.be or www.europad.org

See our website for a fuller list of events: www.sdf.org.uk

In Safe Keeping?

28 April

Edinburgh

Searching for an all-Scotland interagency solution to protect vulnerable adults and their dependents is the theme of this British Association of Social Workers Scotland conference.

Contact: Mrs Johan Grant, BASW Scotland, tel 0131 556 9525

The Inaugural UK/European Symposium on Addictive Disorders

29 April – 1 May

London

A three-day symposium which will focus on therapeutic effectiveness, brief interventions and management issues.

Contact: Miria Robinson, tel: 0207 233 5333, email: info@ukesad.org

The Impact of Parental Substance Misuse: Research, Policy, Practice

Seminar 3

30 April

Edinburgh

The final in the series of three seminars looking at the impact of problematic substance use on families examines local and national issues for developing an effective policy framework. Building on the previous two sessions it will identify key future priorities for policy makers at all levels and consider the issues in developing cross-cutting policy informed by research and consultation with young people.

Contact: Sarah Wilson, tel 0131 651 3002 or e-mail sarah.wilson@ed.ac.uk

may

Hepatitis C and Drug Use

11 May

Glasgow

Professor Avril Taylor, of the University of Paisley, and co-author of major new research into injecting practices by drug users, is among the speakers at this Scottish Drugs Forum seminar. Dr Nicola Rowan, of the UK Hepatitis C Resource Centre (Scotland) will look at The Scottish Picture – what needs doing"; Dr Roy Robertson, Muirhouse Medical Group, will explore working at local level with drug users and Dr Roger Wong of Gartnavel General Hospital in Glasgow, will examine making adjustments after diagnosis.

Contact: Lyn Stirling tel 0141 221 1175 or lyn@sdf.org.uk

Challenging Values

12-14 May

Crieff

Social work values of dignity, worth and equality will be under the spotlight at the Association of Directors of Social Work's 2004 Annual Conference and Exhibition. Supporting frontline staff and social education and training as well as service users' rights and responsibilities will also be discussed.

Contact: COSLA, tel 0141 248 7556

Roadmaps and Roundabouts – Routes to Drug and Alcohol Services

17-19 May

Glasgow

Aimed at practitioners, commissioners, service users and policymakers delivering community based drug services in the UK.

Contact: Salma Master, tel 0208 5438333 smaster@cranstoun.org.uk

ScottishDrugsForum

The *Bulletin* welcomes contributions - please send them to Susan Dean, Susan@sdf.org.uk. Please note they may be edited. To amend your mailing details, please contact enquiries@sdf.org.uk. Copy deadline is the 20th of each month for the following month.

The views expressed in the *Bulletin* do not necessarily represent the views or policies of Scottish Drugs Forum.

Membership of SDF is open to anyone interested in drug problems - fees range from £30 per year. Contact the Glasgow office for details. SDF is funded by the Scottish Executive Health Department.

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ISSN 1357-5295

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the Federation of
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Working in the Field of
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