

**Standard Operating Procedure**

**Glasgow Alcohol and Drug Recovery Services (ADRS)**

**Crisis Outreach Service (Glasgow City)**

<b><u>Title of SOP</u></b>	Reducing Risk and Maintaining Treatment for Individuals Released from Custody
<b><u>How and Why</u></b>	The GADRS Crisis Outreach Service will provide assertive outreach, harm reduction interventions and support to maintain in treatment / access substitute prescription for individuals released from prison / custody who have not attended community services in the lead up to weekends / public holidays.
<b><u>Version</u></b>	v1.1
<b><u>Related Documents</u></b>	Greater Glasgow & Clyde Opiate Replacement Therapy Guidelines  Guidance on the Principles of Benzodiazepine Prescribing with Concomitant Opiate Dependence  Medication Assisted Treatment (MAT) Standards: Access, Choice, Support (Drug Deaths Task Force – Scottish Government)
<b><u>Reviewers</u></b>	Operational Managers, NHSGGC Alcohol and Drug Recovery Services  Service Managers, NHSGGC Alcohol and Drug Recovery Services
<b><u>Review Date</u></b>	1 <sup>st</sup> September 2022
<b><u>Validated by</u></b>	Crisis Outreach Service Steering Group  NHSGGC Alcohol and Drug Recovery Services – Operational & Service Managers

## Background

To mitigate risk for individuals directly after release the transition of care requires a targeted response from custodial and Community Alcohol & Drug Recovery Services (ADRS). Continuation of Substitute Prescribing, confirmation of appointments and an assertive outreach approach are crucial in supporting individuals at higher risk of drug related death or non-fatal overdose post-release.

Prior to continuation of substitute prescribing health staff within custodial settings are responsible for confirming substitute prescribing with the locality Community ADRS Team. Confirmation of prescribing must also include an agreement for prescribing to be continued, without break in treatment, in the community upon the individual's liberation or release.

## Release from Custody

It is the responsibility of healthcare staff from custodial settings to notify Community ADRS of the expected liberation or release of any individual who is in receipt of a substitute prescription or is assessed as being at increased risk of overdose from street drugs. Early notification to Community ADRS will be dependent on reason and timing of release: end of sentence, release from remand, release on parole, etc.

Locality ADRS Teams are notified via secure email of the expected liberation or immediate release of an individual from a custodial setting with confirmation that substitute prescribing will be administered on the day of liberation or release.

## Community ADRS Follow Up

### Appointments

Community ADRS Teams are required to confirm with healthcare staff from the custodial setting by return of an agreed appointment time for day of release for continuation of substitute prescribing. As part of the confirmation process the Community ADRS Team

Exceptions to the guaranteed provision of same day appointments are individuals subject to late liberation or immediate release from custody without prior notification. It is imperative in these circumstances that direct communication between Community ADRS Teams and custodial settings is in place to confirm a suitable appointment time or relay confirmation of a prescription lodged with local pharmacy for continuity of treatment.

### Missed Appointments

In the event an individual does not attend the scheduled appointment it is the responsibility of Community ADRS to make contact with the individual via telephone and arrange a same day outreach visit. If the missed appointment is on a Friday or the day prior to a public holiday a referral to the Crisis Outreach Service (COS) should be made to request follow up outreach visits to engage the individual.

### Prescription

The Community ADRS Team should arrange a new prescription in preparation for the scheduled appointment. In the event the individual does not attend the Community ADRS Team should lodge a short prescription with the individuals previously arranged community pharmacy.

## Shared Care

Crisis Outreach will accept referrals from GP Shared Care where the allocated ADRS worker or GP has been unable to make contact with a service user on release from custody for continuation of treatment.

## Crisis Outreach Service Follow Up

The Crisis Outreach Service (Glasgow City) will accept referrals from Community ADRS Teams with requests to outreach individuals who, did not attend appointment prior to weekends / public holidays, are at risk of lapsing from treatment or are at increased risk of overdose post-release from custody. The Crisis Outreach Service will undertake the following interventions:

### Information Gathering

The Crisis Outreach Service will discuss the referral with the originating team to confirm prescription, pharmacy details and details of next available appointment. Additional information will be sought to confirm address and places the individual frequents. A review of all electronic recording systems will be completed prior to visit, noting any known risk factors. Dependent on identified risk there may be a requirement for the prescription to be lodged at a 7 day late opening pharmacy to reduce the risk of potential lapse from treatment, this will be agreed between Crisis Outreach and Community ADRS.

### Assertive Outreach

The Crisis Outreach Service will undertake a home visit the same day, where possible, but within 24 hours from receipt of the referral. There may be a requirement for more than one visit per day dependent on locating the individual and level of risk.

### Community Pharmacy

The Crisis Outreach Service will make contact with the community pharmacy to ensure an active prescription is available for dispensing once contact has been made with the individual.

### Harm Reduction

A core part of the Crisis Outreach Service intervention will be based on a harm reduction approach. On locating the individual a brief assessment will be conducted and appropriate interventions recorded which will include training and provision of Naloxone, harm minimisation – Foil / IEP, health advice and any other intervention required as indicated through assessment.

### Communication

The Crisis Outreach Service will update the individual's EMIS record after each contact or attempted contact. Contact will be maintained with the community pharmacy to update on progress of engaging the individual to attend for continuation of treatment. Crisis Outreach will provide an update to the allocated Community ADRS worker on contact and interventions carried out.

## Contact Information

The Crisis Outreach Service operate **7 days per week**, including public holidays between the hours of **0800 – 2030** and can be contacted directly on **0141 201 3102** (answer phone service available) to discuss referrals for follow up. Alternatively referrals can be forwarded to [Ggc.Prog@ggc.scot.nhs.uk](mailto:Ggc.Prog@ggc.scot.nhs.uk)