

# ALL IN FOR CHANGE

RETREAT BRIEFING

OCTOBER 21 RETREAT

# OUR NATIONAL CONVERSATION

**What we know, the people we have told, what we are doing differently and what has helped.**



People currently using services are sceptical about change happening when there are still so many challenges in the system that people are trying to navigate. In contrast, some charity sector employees have told us that they can see progress being made.

Change leads are wanting to do more about:

- **Empowering people** who are rough sleeping, being ignored by passers-by, by helping to change public perceptions and ensure people are receiving the support they need.
- **Helping people let down by the system** by signposting them to specialised services and support, and want to find ways to make this information available to all.
- **Improving peer research**, as an essential tool to help us understand people's experiences. To make sure we improve how this is done we need to consider things like building up trust to ensure people are protected when answering difficult questions, allowing enough time to ensure peer researchers are fully trained, supported, and feel prepared. Additional funding needs to be considered to ensure there is enough time for it to be done properly.
- **Gaining trust** from people with lived experience before expecting to ask them to share their views and experiences about the progress being made on the 4 New Directions. We need to be more creative about how we link in with people and show them that we are really listening.

## **Change Leads are interested in learning more about:**


- The new arrangements for Housing First across the Pathfinder areas and how trusted relationships can be maintained as service providers change.

## **Change Leads are excited about:**

- Taking advantage of reduced restrictions and speaking to more people locally as part of the National Conversation.



# DISCUSSION POINT — SCOTLAND'S RESPONSE TO DRUG RELATED DEATHS



THERE HAVE  
BEEN **1339**  
**DRUG-RELATED**  
**DEATHS** IN 2020,  
**5% MORE THAN**  
IN 2019

THERE WERE  
**216 ESTIMATED**  
**HOMELESS DEATHS**  
IN 2019, **54% WERE**  
**DRUG RELATED**

**In January, the Scottish Government announced a £250million budget to tackle the rise in drug deaths in Scotland by supporting people to access support and treatment. They are calling for better working links between Drugs, Alcohol, Homelessness and Mental Health services.**

The areas they have identified to invest in are:

- focus on community based interventions
- quick access to treatment
- expansion of residential rehabilitation
- same day treatment
- wider range of treatment options

Using his own experience of residential rehab and recovery as a starting point, one of our Change Leads encouraged a conversation around drug deaths and how Scotland can respond to the alarming high rates.

The change team responded positively to Scottish Government prioritising some of their £250 million budget on community-based interventions such as support groups and recovery groups as well as residential rehab. Some felt that recovery starts at the grassroots and communities and peer support are how people heal.

The team appreciated the implementation of national Medically Assisted Treatment (MAT) standards but pointed out that some drugs, such as methamphetamine (crystal meth) and benzodiazepine (benzos), do not have a substitute available on prescription. To stop using drugs with no substitute is difficult and dangerous.

There is still unhelpful stigma connected to methadone treatment, with people embarrassed to queue up outside their local pharmacy.

Dehumanising experiences are keeping some people from engaging with their treatment programmes, choosing to deal with withdrawals with no support. People feel tied as prescriptions must be collected in person from pharmacies.

There are similarities being seen from the experiences of people engaging with needle exchange programmes. This highlights that attitudes around harm reduction and medically assisted treatment need to change. Pharmacists also need to be trauma informed and treatment should be provided in private, safe and flexible environments.

Changes to prescription rules during Covid-19 give people the option to pick up their prescriptions weekly instead of daily. The change team highlighted the importance of learning from the pandemic and ensuring good practice is continued.

Methadone is not always a good substitute, people don't like taking it and can be on it many years. More choice and control is needed for people receiving medically assisted treatment. More choice of substitutes are needed as an alternative to methadone.

Some change leads are seeing the same people in and out of residential rehab and temporary accommodation. Keeping people in the system by not giving them the option they need put them at higher risk of overdosing.



# PREVENTING EVICTIONS & REDUCING ABANDONMENTS



**Seven members of the Change Team attended a consultation led by Neil Morland Housing Consultant for a programme commissioned by the Scottish Federation of Housing Associations (SFHA) who are looking to create a report and toolkit that encourages good practice for social landlords.**

## These are the key takeaways:

- There should be a tenancy sustainment officer and access to a welfare rights officer within every housing association and local authority, which people can access within a certain period of time.
- There should be an early warning system put in place and money management advice given to avoid individuals or families reaching crisis point. This could encourage people to think about joining a credit union or become members of a local pantry or a cooperative (if one is available in the local area) as well as bringing more awareness around the impact of losing your home. Additional support should be given to young people who have little or no experience paying rent.
- Rent increases need to be more realistic and flexibility is needed when setting up repayment plans with families or individuals, allowing them to decide how much to put back each week.
- More fully trained, trauma informed staff are needed to help people build trusting relationships.
- Flats should be provided furnished as standard and a better system is needed to collect good quality second hand household furniture, helping people to have the confidence to invite others into their homes, and integrating into the community.
- Better relationships need to be built between Housing officers and tenants, with more opportunities to interact other than when something has gone wrong. Housing associations and local community groups could work better together. More populated areas should learn from rural areas for best practice around community engagement.
- It was felt that young people were the highest receivers of Anti-social behaviour orders which negatively impacts their tenancy. More communication is needed to help young people understand how this might affect them.

# NOTICES

## Prevention Duty

The Prevention Duty is being developed by Scottish Government with a consultation to launch before Christmas. The Change Team will be asked for their input and to advise on how to attract more people to participate in the consultation.

## National Care Service

After having a consultation about the National Care Service at our September retreat, our comments, along with those of members of Everyone Home and SFHA, were added to a collective response which was fed back to Scottish Government. [You can read this here.](#)

**Homelessness, Housing and a National Care Service**

*What are the implications and opportunities?*



## Date of the next retreat

Thursday 25 November 2021

ALL<sup>IN</sup> FOR  
CHANGE

### THE CHANGE TEAM | KEEP IN TOUCH

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