

**IMPROVING  
SCOTLAND'S  
HEALTH**

# **Drugs and Alcohol Workforce Action Plan 2023-2026**



**Scottish Government  
Riaghaltas na h-Alba**

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# Ministerial Foreword

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The Scottish Government remains firmly committed to our National Mission to reduce drug deaths and improve lives. Whilst the emerging signs indicate that we have started to turn the corner, and fewer people are now dying, the numbers remain unacceptably high and every life lost to drugs and alcohol use is a preventable tragedy.

Deaths devastate the lives of those left behind, family members, loved ones and friends. If we are to continue to reduce deaths, then we need to sustain momentum behind the National Mission over the remainder of this parliament and beyond.

However, the National Mission is not just about reducing deaths but also about improving the quality of life for people affected by drugs and alcohol. The evidence shows that many people using drugs or alcohol have experienced particularly high levels of trauma and adversity. This can often lead to multiple complex needs or comorbidities, requiring support from a wide range of services. We need a collaborative approach to support those affected. This requires staff and organisations, across all sectors of the workforce, to have the confidence, knowledge and skills to provide consistent, trauma-informed care and support.

Delivery of our entire National Mission requires us to have in place a skilled, resilient workforce. On a daily basis, the efforts of the workforce are saving and improving lives, in often challenging circumstances. It is essential that the workforce is provided with support to ensure they have the skills, opportunities, and resources to continue to do this.

I am aware that in recent years, staff working across multiple Health and Social Care settings have faced significant challenges. Furthermore, we know that these challenges are often more pronounced within the drugs and alcohol sector, whilst the vital work they deliver is too often not afforded equal status to their colleagues in other settings. This must change. Implementation of the actions identified in this Action Plan will help to drive that change.

It is important to remember that many in the workforce will have their own experience of trauma. We must ensure they are provided with care and support for their own mental health and wellbeing, in order to allow them to continue to provide care for others. This is key to creating a sustainable workforce with attractive career choices.

The Scottish Government's '*Drugs and Alcohol Workforce Action Plan*' sets out the key actions that we will support to deliver a sustainable, trauma-informed, skilled workforce with the capacity to deliver a person-centred, rights based approach. A workforce which is confident, valued for the work it does and is fully empowered to prevent deaths and improve lives.

The Scottish Government has listened to those best placed to understand workforce challenges, including those with lived and living experience of drug and alcohol use. What we have learned is that workforce challenges are complex and multifaceted. They have often transpired over time and regrettably, there are no 'quick fixes' which can instantly resolve them.

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If we are to embed real and lasting improvement, then it is critical that we address both the symptoms and causes of the current challenges. Developing a sustainable workforce will be achieved through effective joint working and the Framework, of Plan, Attract, Train, Employ and Nurture, set out in the '*National Workforce Strategy for Health and Social Care in Scotland*'.<sup>1</sup>

This strategy sets out our commitment to significant investment, including over £11 million during this parliament to fund the establishment of the Centre for Workforce Supply and directly underwrite international recruitment activity for NHS Health Boards to grow our Health and Social Care workforce. We are also increasing the number of medical school places by 500 and recruiting 800 additional General Practitioners (GPs) over this parliament. Such investment will include those delivering drugs and alcohol services.

Drugs and alcohol services make up an incredibly important component of the wider Health and Social Care workforce, and much of the investment highlighted will positively impact service delivery. However, I am committed to ensuring the drugs and alcohol workforce also has specific investment. In addition to the £480,000 per year allocated to increase the number of number of trainees on Scottish Drugs Forum's (SDF) Addiction/Recovery Worker Training Programme (A/RWTP), this Action Plan will also be supported by £500,000 per year to support the workforce development activity identified.

I am committed to increasing the representation of people with lived and living experience in the workplace; whilst also recognising, and celebrating, the professional experience of those who have spent their careers developing expertise in this field. I recognise that this is one of the most challenging areas to work in; whilst it can also be amongst the most rewarding. The workforce can and does make a real difference to the lives of some of Scotland's most marginalised citizens and we are hugely grateful for their efforts. If it were not for them, then we would not have achieved the progress made so far and we would not be able to continue this work.

This '*Drugs and Alcohol Workforce Action Plan*' explains how we intend to drive improvement across the sector. This Action Plan reaffirms the value we place on the drugs and alcohol workforce and our determination to support them to do the best job they possibly can.

# Executive Summary

Delivery of Scotland's National Mission to reduce drugs deaths and improve lives is dependent on having in place a skilled, resilient workforce. It is therefore vital that our drugs and alcohol services are able to attract, retain, and support staff. However, the drugs and alcohol workforce currently face significant challenges, particularly in relation to recruitment, retention, and service design. This '*Drugs and Alcohol Workforce Action Plan*' sets out the key actions that the Scottish Government will deliver to address these challenges.

In order to achieve a sustainable workforce, we require effective joint working, and a multipronged approach, where we simultaneously make progress against the five pillar framework of 'Plan', 'Attract', 'Train', 'Employ', and 'Nurture' as outlined in the '*National Workforce Strategy for Health and Social Care in Scotland*'<sup>2</sup>. This '*Drugs and Alcohol Workforce Action Plan*' sets out the Scottish Government's priorities over the next three years, laying out how, and when, we aim to initiate delivery of these.

## Plan

We need to improve data capture and facilitate improved understanding of the entire drugs and alcohol workforce. In support of this we have already undertaken and published '*Scotland's Alcohol and Drugs Workforce: Mixed-Methods Research Compendium*'<sup>3</sup>.

We will now seek to:

- Complete a comprehensive workforce mapping exercise which accurately articulates the scope of the drugs and alcohol workforce across Scotland;
- Improve understanding of workforce demographics and support a workforce which is more diverse and reflective of the communities that it cares for;
- Build upon the workforce mapping exercise to support improvement in workforce planning and service design; and
- Improve drugs and alcohol workforce data capture.

## Attract

We must take steps to make the sector an attractive place to work. In support of this we have already made multi-year funding available to drugs and alcohol services. We will now seek to:

- Capitalise on all opportunities to raise awareness of the lifesaving work undertaken by those employed in the drugs and alcohol sector, ensuring that they are afforded equal status with colleague in other settings;
- Improve pathways into the drugs and alcohol sector; whilst also seeking to improve understanding and knowledge amongst the potential future workforce.

## Train

Workforce retention is essential for the delivery of consistent, high quality and safe services. Those working in drugs and alcohol services require opportunities for career progression. In support of this we have already begun facilitating training provision across a range of key areas. We will now seek to:

- Support the development of a learning pathway to communicate and signpost available training opportunities to the entire drugs and alcohol workforce, regardless of sector;
- Continue to progress training opportunities which will ensure that services are informed and fully empowered to support the mental health needs of people who use drugs and alcohol;
- Develop and implement new operational protocols which will detail how mental health and substance use services should work together to provide high quality care;
- Expand the existing Transforming Psychological Trauma Implementation Coordination Network (TPTIC) network, and recruit a National Lead specialist with experience in substance use and trauma-informed practice;
- Facilitate the development of competencies for workers who support people who use drugs and alcohol;
- Identify the training opportunities that drugs and alcohol workers should undertake;
- Provide support for the development of continuous career development opportunities; and

- Facilitate the development of standards and guidance for all services that use peer support workers, ensuring they are appropriately valued and have career progression opportunities, in line with Fair Work principles.

## Employ

Recruitment to the drugs and alcohol sector is critical to reducing vacancies, caseloads, and pressures. In recognition of this we have already leveraged Medication Assisted Treatment (MAT) funding to support additional Alcohol and Drugs Partnership (ADP) recruitment. We have also supported the recruitment of up to 20 additional SDF A/RWTP trainees per year through annual investment of £480,000 for the remainder of this parliament in 2026. We will now:

- Support participants with a history of using drugs and alcohol to enter and sustain employment; and
- Support organisations and professions to develop pathways to support people with lived and living experience to enter and pursue careers within the drugs and alcohol workforce.

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## Nurture

Support for employee wellbeing is at the heart of our workforce development efforts. We want to reduce caseloads for different parts of the system and ensure psychological support and wellbeing services are provided as standard. We have already sought to support improved workplace mental health and wellbeing through continued support for a range of national initiatives. This work has been supported through ongoing monitoring and highlighting of best practice. We will now seek to:

- Capture the views of the workforce through an online survey;
- Encourage employers to give consideration to existing resources which can promote positive staff wellbeing;
- Publish a guiding principles document which will allow organisations to provide effective support to employees with lived and living experience of drug and alcohol use;
- Explore how the principles of the Health and Care (Staffing) (Scotland) Act 2019 may inform service design going forward; and
- Take advantage of every opportunity available to recognise and promote the vital lifesaving work undertaken by those working in the drugs and alcohol sector.

Further information on all actions planned, or in progress, that the Scottish Government will seek to deliver, including when these will be initiated, is provided at in our Actions Framework at **Annex A**.



# Section A - The Drugs and Alcohol Workforce Context

## Scotland's Health and Social Care Workforce

The '*National Workforce Strategy for Health and Social Care in Scotland*'<sup>4</sup>, published in partnership with COSLA, details that over 400,000 skilled and compassionate people deliver Health and Social Care services throughout Scotland across many different roles and settings. As the largest workforce in Scotland, they reach into every aspect of life and community.

The '*National Workforce Strategy for Health and Social Care in Scotland*' sets out a national framework to achieve a vision of a sustainable, skilled workforce, across the entire Health and Social Care sector, with attractive career choices where all are respected and valued for the work they do.

The strategy acknowledges the significant pressures faced by the Health and Social Care workforce and sets out that sustained action is required to support workforce development.

The strategy sets out the evidence base and actions that will be taken forward to achieve the vision of a sustainable workforce, these include:

- Increasing front line health spending;
- Establishing a centre for workforce supply;
- Delivering a workforce which is inclusive, diverse and reflective of the communities that it cares for and supports;
- Increasing the number of medical school places;
- Recruiting additional Primary Care staff, including GPs and pharmacists;

- Supporting nursing and midwifery training costs; and
- Increasing Local Authority Social Work capacity.

The drugs and alcohol workforce forms a key part of Scotland's wider Health and Social Care workforce. Almost all of the challenges impacting upon the wider Health and Social Care workforce also, consequently, impact upon those delivering drugs and alcohol services. Delivery of those actions identified in the '*National Workforce Strategy for Health and Social Care in Scotland*' will therefore positively impact on the drugs and alcohol workforce.

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**Key Point: This Action Plan will not reiterate those wider actions detailed in the 'National Workforce Strategy for Health and Social Care in Scotland'. Instead, the focus of this Plan will be on setting out the specific actions which will be progressed to address the particular challenges faced by the drugs and alcohol workforce.**

This 'Drugs and Alcohol Workforce Action Plan' (hereafter referred to as the 'Action Plan') does, however, use the framework of the 'National Workforce Strategy for Health and Social Care in Scotland' by presenting all current or future actions under the key five pillars of:

- 1. Plan**  **4. Employ** 
- 2. Attract**  **5. Nurture** 
- 3. Train** 

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## **The National Mission to Reduce Drug Deaths and Improve Lives**

In January 2021, the previous First Minister set out our National Mission to reduce deaths and improve lives impacted by drugs. In August 2022, the '*National Mission on Drug Deaths: Plan 2022-2026*'<sup>5</sup> was published. The plan set out that we will reduce drug deaths and improve lives through preventing people from developing problem drug use; reducing harms from the consumption of drugs; getting more people into high quality treatment and recovery services; addressing the needs of people with multiple and complex needs; and supporting families and communities affected by problem drug use.

Our Outcomes Framework, developed with stakeholders, reflects the objectives of the National Mission. Delivery of this National Mission is dependent upon having a skilled, resilient workforce. It is vital that services are able to attract, retain, and support staff to have the right skills and knowledge to support people who use drugs and alcohol.

## National Drugs Mission outcomes framework

Cross-Cutting Priorities	Reduce Deaths and Improve Lives					
Lived Experience at the Heart	<b>01</b> Fewer people develop problem drug use	<b>02</b> Risk is reduced for people who take harmful drugs	<b>03</b> People at most risk have access to treatment and recovery	<b>04</b> People receive high quality treatment and recovery services	<b>05</b> Quality of life is improved by addressing multiple disadvantages	<b>06</b> Children, families and communities affected by substance use are supported
Equalities and Human Rights						
Tackle Stigma	a) Young people receive evidence-based, effective holistic interventions to prevent problem drug use	a) Overdoses are prevented from becoming fatal b) All people are offered evidence-based harm reduction and advice	a) People at high risk are proactively identified and offered support b) Effective pathways between justice and community services are established	a) People are supported to make informed decisions about treatment options b) Residential rehabilitation is available for all those who will benefit	a) All needs are addressed through joined up, person centred services b) Wider health and social care needs are addressed through informed, compassionate services	a) Family members are empowered to support their loved one's recovery b) Family members are supported to achieve their own recovery
Surveillance and Data Informed	b) People have early access to support for emerging problem drug use		c) Effective Near-Fatal Overdose Pathways are established across Scotland	c) People are supported to remain in treatment for as long as requested	c) Advocacy is available to empower individuals	
Resilient and Skilled Workforce						
Psychologically Informed	c) Supply of harmful drugs is reduced			d) People have the option to start medication-assisted treatment from the same day of presentation		
				e) People have access to high standard, evidence-based, compassionate and quality assured treatment options		

## Who are the Drugs and Alcohol Workforce?

Defining the drugs and alcohol workforce is not straight forward. The workforce is complex, spanning a range of employers (including NHS, third sector, Health and Social Care Partnerships, and Local Authorities) across Scotland. Many different organisations and individuals (e.g. public, private, third sector, families, communities) work with people who use

drugs and alcohol. The wider workforce can include those in social work, hospitals, community pharmacy, general practices, education, health, police, and the community.

The picture is often complex and multi-level with several tiers of services working to support people who use drugs and alcohol as detailed in the following diagram:<sup>6</sup>

### Tier 1

- Interventions include provision of drugs and alcohol related information and advice, screening, and referral to specialised drug treatment.
- Interventions are provided in the context of general health, or social, care settings, education or criminal justice settings where the main focus is not drugs and alcohol treatment.

### Tier 2

- Interventions include provision of drugs and alcohol related information and advice, triage assessment, referral to structured drugs and alcohol treatment, brief psychosocial interventions, harm reduction interventions and aftercare.
- Other typical settings to increase access are through outreach (street work, peripatetic work in generic services or domiciliary (home) visits) and in primary care settings.

### Tier 3

- Interventions include provision of community-based specialised drugs and alcohol assessment and co-ordinated care planned treatment and drugs and alcohol specialist liaison.
- Interventions are normally delivered in specialised drugs and alcohol treatment services with their own premises in the community or on hospital sites.
- Other delivery may be by outreach (peripatetic work in generic services or other agencies or domiciliary or home visits). Tier 3 interventions may be delivered alongside Tier 2 interventions.

### Tier 4

- Interventions include provision of residential specialised drug and/or alcohol treatment, which is care planned and care coordinated to ensure continuity of care and aftercare.

Those working across all four tiers provide vital support and treatment. We fully recognise and appreciate the critical role that many professionals working in services, such as social work, pharmacy, prison, homelessness and primary care play in supporting people who use drugs and alcohol. They are an integral part of the system. We cannot prevent deaths and improve lives without them.

In order to ensure a targeted approach, delivering greatest impact, the primary focus of this Action Plan will be on those who deliver Tier 3 and 4 services, alongside those in Tier 2, who provide advice and information to people who use drugs and alcohol.

**Key Point: For the purposes of this Action Plan, when we refer to “the workforce” we mean all those, regardless of sector, who identify drugs and alcohol treatment as being the primary part of their role.**

Where delivery of identified actions can support those in Tier 1 services, who are not a specialist or practitioners in drugs and/or alcohol services but have the opportunity to positively address drugs and alcohol use through their paid or unpaid work, then this is clearly welcomed.

Our approach is in no way intended to diminish or undermine the contributions of those in Tier 1 or 2 services, instead this approach has been adopted in order to ensure our actions achieve the greatest impact for the people who use drugs and alcohol.

## **Our Vision for the Drugs and Alcohol Workforce**

Effective planning is key to delivery of a well-supported, trained, and resourced workforce capable of meeting the needs of people who use drugs and alcohol.

Our vision for the drugs and alcohol workforce is:

*“To develop a sustainable, trauma-informed, skilled workforce with the capacity to deliver a person centred, rights based approach. To develop a workforce which is confident, valued for the work it does and is fully empowered to prevent drug and alcohol related deaths and improve lives.”*

Our workforce vision is aligned with the principles of Fair Work, and the Scottish Government’s broader strategic aim to become a leading Fair Work Nation by 2025, where fair work drives success, wellbeing and prosperity for individuals, businesses, organisations, and society.

## **What are the Challenges facing the Drugs and Alcohol Sector?**

Whilst, as detailed earlier, the challenges impacting upon the workforce are often similar to those faced in the wider Health and Social Care sector, they are in many instances more pronounced, with a number of unique and specific challenges<sup>7</sup> presenting. These challenges can be categorised into the three key themes of **recruitment, retention, and service design**.

## Recruitment

The Scottish Government's *'Alcohol and drugs workforce: mixed-methods research compendium'*<sup>8</sup> (hereafter referred to as the *'workforce research compendium'*), published last year, indicated a sector-wide vacancy rate of 8.8% as of November 2021. This was higher than vacancy rates amongst allied health and medical professions overall. The challenges were found across a variety of roles and organisation types.<sup>9</sup>

Public Health Scotland (PHS) also reported that ADPs have experienced delays in being able to fully implement the MAT standards due to recruitment challenges.<sup>10</sup> The Corra Foundation, who support the Scottish Government with their funding processes as part of the National Mission, report that delays in the commencement of 15% of funded projects between April 2022 and March 2023 were attributable to recruitment issues.

We know that negative perceptions of employment in the sector can prove detrimental to recruitment.<sup>11</sup> Whilst we know that those who use drugs and alcohol too often face stigma, the *workforce research compendium* highlighted that those working in services can often also feel stigmatised.

The Drugs Death's Taskforce *'Changing Lives'* Report (hereafter referred to as the *'Changing Lives'* report) highlighted a need to 'tackle the stigma experienced by the workforce and ensure they are given the recognition they deserve as front-line health workers.'<sup>12</sup>

We know that awarding short term funding to services can dissuade potential applicants. This is an issue which can negatively impact on both recruitment and retention.<sup>13</sup> Another key challenge impeding recruitment is the lack of career pathways into the sector – this is exacerbated by the lack of further or higher education courses which specifically focus on drugs and alcohol use.<sup>14</sup>

We know that in many instances, the skills and knowledge of people with lived and living experience are not being fully utilised.<sup>15</sup> We know that often requirements for specific qualifications or work experiences can act as a barrier for this cohort being able to satisfy their suitability for many advertised roles.

## Retention

Workforce retention remains a significant challenge. Whilst it is critical that we ensure that the sector is a more attractive destination for potential employees; recruiting more staff without steps to improve retention would not lead to a sustainable workforce. Such an approach would make existing issues worse, with continual recruitment draining time from those already working in services.

It is an uncomfortable reality that one of the major drivers behind workforce attrition is that too many staff feel under increasing pressure. Both recruitment and retention challenges are impacting upon the number of staff available to deliver lifesaving treatment. As a consequence, caseloads are growing larger and ever more challenging. Whilst simultaneously those who engage with services present with increasingly complex needs. As a result, staff,



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particularly those in Social Work, often have to manage significant levels of risk from an adult support and protection perspective, in addition to managing existing risks of harm from drugs or alcohol use.

Services operating with higher caseloads results in staff having less time to undertake important tasks and some may therefore only focus on documenting information about issues posing the highest level of risk, at the expense of factors such as housing or employment. This can lead to some in the workforce not being able to develop a holistic perspective of service users' lives. Consequently, opportunities for meaningful intervention are lost. This can lead to significant levels of mental and physical stress on staff, burnout and ultimately attrition.

We know that high rates of sick absence often leads to those remaining colleagues being required to absorb the caseloads of those who are absent. The *workforce research compendium* reported a statistically significant association between increases in average caseload and the number of sick absence days taken.<sup>16</sup>

We know there are often too few opportunities for staff to progress in their careers. Whilst the vacancy rate is highest within front line service delivery roles, the *workforce research compendium* showed that the third lowest vacancy rates in the sector were for service managers at 2.1%.<sup>17</sup>

The research also outlines a lack of opportunity for learning and development. Although data does suggest enrolments on Continued Professional Development courses have increased across drugs and alcohol topic areas, there are too few formal qualification routes and specialised courses for non-clinical staff.<sup>18</sup>

We know that geography can be a barrier to the uptake in professional development opportunities.<sup>19</sup> Although much training has migrated to online platforms, some training cannot be delivered online and this can be a challenge for those working in services in more remote areas of Scotland. Training and development was outlined in the '*Changing Lives*' report as being key to enhancing staff wellbeing and the quality of the workforce.<sup>20</sup>

### Service Design

ADPs liaise directly with local services, providing advice to integration authorities on how drugs and alcohol services should be delivered by the NHS and local authority. Although this enables services to respond to local need, it can lead to wide geographical variation in the way services are designed and delivered.

We know that across Scotland there is significant variance in terms of the services and specialisms that are available. Often services are stretched, particularly in rural areas.<sup>21</sup> The *workforce research compendium* and the associated *survey of services* reported that 13.6% of responses highlighted the necessity of service review and redesign of some drugs and alcohol services.<sup>22</sup>



## Section B – Our Approach

### Workforce Action Plan

Recommendation 13 of the ‘*Changing Lives*’ report set out that the Scottish Government should:

*“Develop and rapidly implement a workforce action plan for the drug and alcohol sector to ensure the workforce is supported, well-trained and well-resourced.”<sup>23</sup>*

This Action Plan serves as our response to that recommendation. This Action Plan reflects what we have heard from our partners and stakeholders across the sector, including those responsible for service delivery and people with lived and living experience of drugs and alcohol use.

We recognise that this Action Plan will not provide the solutions to all current and future challenges and that more will need to be done. However, we believe that a phased and dynamic approach will allow us to regularly review ongoing activity, adapting and responding to new and emerging challenges, innovation and evidence. We acknowledge that achieving and sustaining our ambitious vision will require time and incremental change.

Every action within this Action Plan is aimed at ensuring we are able to grow and retain the workforce and ensure that staff are supported to deliver lifesaving care. If the right workforce is in place, appropriate training and development is available and staff have more manageable caseloads then we can positively impact employee wellbeing, make careers more attractive and support retention.

Support for employee wellbeing is therefore at the heart of our workforce development efforts. However, as acknowledged, the challenges are often deep rooted and complex and will not be reversed upon publication of this Action Plan. These challenges will require sustained action across all five pillars in forthcoming years.

**Key Point: the Scottish Government has published a number of key drugs policy documents in recent years. We recognise that at times it can be difficult for those working in services to keep abreast of all such developments. It is not our intention to use this Action Plan to place additional expectations on the workforce. Instead, the aim of this document is to outline the Scottish Government’s workforce priorities over the next three years and set out how, and when, we intend to initiate delivery.**

### Evidence Base

A number of sources have been used to inform the Scottish Government’s understanding of the challenges facing the drugs and alcohol workforce. Primarily these are:

- ‘Scotland’s Alcohol and Drugs Workforce: A Compendium of Mixed-Methods Research’<sup>24</sup>;
- ‘Scottish Drug Deaths Taskforce – ‘Changing Lives’<sup>25</sup>;
- ‘National benchmarking report on implementation of the Medication Assisted Treatment (MAT) standards. 2021/22’<sup>26</sup>;
- ‘Supplementary information for the national benchmarking report on implementation of the Medication Assisted Treatment (MAT) standards. 2021/22’<sup>27</sup>; and

- 'National benchmarking report on implementation of the medication assisted treatment (MAT) standards 2022/2023'.<sup>28</sup>

### **Workforce Expert Delivery Group**

In recognition of the challenges impacting upon the drugs and alcohol workforce, the Scottish Government, last year, established the Workforce Expert Delivery Group (WEDG). The WEDG brought together experts from across the sector, with distinct understandings of prevailing challenges.

The WEDG was tasked with considering workforce challenges and helping us to understand how these should be overcome. The WEDG was instrumental in the development of the actions communicated in this Plan.

The WEDG remains extant, and is Chaired by Mark Kelly, Interim Nursing Director for Dumfries and Galloway, reporting to the Minister for Drugs and Alcohol Policy. The WEDG will provide critical oversight and advice at key stages in delivery of those actions detailed in this Plan.

The '*Changing Lives*' report<sup>29</sup> details a number of specific workforce actions, delivery of each one would result in clear benefits. However, it was decided that in order to realise optimal delivery, then these actions would be best delivered through a phased approach with outcomes addressed in three distinct tranches.

Whilst this will mean that delivery of some identified actions will not be progressed immediately, the actions are generally interdependent and progression towards delivery of those in Tranche 1 (2023/24) will simultaneously deliver a number of key steps towards delivery of those actions identified as priorities for Tranche 2 (2024/25) and Tranche 3 (2025/26).

In order to decide which actions should be the focus for each tranche, WEDG members considered the anticipated impact, feasibility and scope and then agreed those of most immediate priority. The Actions Framework, at Annex A, details the specific tranche in which each action will be initiated.

# Section C – The Drugs and Alcohol Workforce Action Plan

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## Plan



### **What is the wider challenge across the Health and Social Care sector?**

The Plan pillar of the workforce journey illustrates a need for improved data gathering. We need to be able to identify the demographics and geographical spread of our drugs and alcohol workforce.

We need improved data so that we can understand how staff enter the workforce, the career paths that they take, the skills they develop and the reasons they leave. The whole system approach requires improved workforce planning at a local level to help us better meet the needs of our communities.

### **What needs to change within the drugs and alcohol sector?**

Planning is critical to achieving the right workforce with the right skills in the right place at the right time. This needs to be underpinned by an understanding of where and how the workforce delivers drugs and alcohol services and support.

Drugs and alcohol workforce data is too often inconsistent, sparse and lacking in accuracy. It is often challenging to define what work is delivered, and by what posts. We need comprehensive drugs and alcohol workforce data at national, regional, and local levels.

Work to improve data capture and allow improved understanding and articulation of the entire drugs and alcohol workforce has begun. It is anticipated that this work will lay the foundations to facilitate the collection of trend information. This will help support how, and where, interventions should be tailored to achieve our workforce vision.

## What have we done so far?

### Challenge

#### **The need to understand the challenges impacting upon the drugs and alcohol workforce.**

The Scottish Government undertook research to better understand the composition of the drugs and alcohol workforce. This research included both collection and analysis of existing datasets and generating new workforce data.

### Outcome

The resulting suite of publications (the workforce research compendium<sup>30</sup>), published in March 2022, provided crucial insights about Scotland's drugs and alcohol workforce. This research provided a rich evidence base across a variety of topics including service types, staff numbers, wellbeing, vacancy rates and caseloads.

This research has been critical in informing how we can support and empower individuals and organisations delivering frontline services.

### Action 1

The Scottish Government has undertaken and published the 'Alcohol and Drugs Workforce: Mixed-Methods Research Compendium'.

### Timeline

Completed.

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## What will we do next?

### Challenge

#### **The need to improve drugs and alcohol workforce planning.**

Action 125, of the 'Changing Lives' report set out that the Scottish Government should undertake a review to determine the required workforce to deliver the service developments and key commitments of the National Mission. The complexity of the sector, which spans a range of service types and organisations, presents a significant barrier to workforce planning.

Improved data capture is required to improve our understanding of demographics and support a workforce which is more diverse and reflective of the communities that it cares for. Having a comprehensive understanding of the drugs and alcohol workforce is critical to delivery of multiple actions identified in this Action Plan.

### Outcome

The Scottish Government has been working in collaboration with a number of ADPs to undertake a workforce mapping exercise. This will allow us to develop an enhanced understanding of the drugs and alcohol workforce.

Mapping will allow us to more easily articulate the locations in which services are delivered, funding streams, access points, and professions within each setting and service. Mapping will allow us to illustrate the current number of workers within each setting, serving as a foundation to determine the required workforce to deliver service developments. This will allow planning to be grounded on a firm grasp of the diverse landscape of services, providers, locations, and professionals working in this sector.

It is anticipated that this mapping exercise will allow us to begin to understand how the workforce may need to change to meet the priorities of the National Mission and the resources required to deliver this shift. It is also anticipated that we will use the information generated to identify shortfalls which limit the ability to deliver quality services where they are needed.

**Next Steps:** It is anticipated that this work will continue to evolve until it allows measurement of the efficacy of workforce planning efforts and monitoring of improvements in addressing gaps.

**Census:** Upon completion of the drugs and alcohol workforce mapping exercise the Scottish Government will consider the development of a census collection tool to undertake comprehensive analysis of this workforce. This would be informed by work undertaken by our counterparts in England. This would allow understanding of participation rates by region and sector type as well as a summary of services provision.

A workforce census would highlight where staff are employed by sector and area. It may include an overview of workforce numbers by job role group, salary profile, time in post, contract detail as well as metrics for vacancies, sickness, turnover and demographics.

It is anticipated that this work could inform the development of a National Specification outlining the key parts of the treatment and recovery system that should be available in every local area.

**Traffic Flow:** It is anticipated that the workforce map will be further developed to demonstrate traffic flow within services and may potentially be informed by prevalence data to identify service requirements and an ideal model of service provision.

**Action 2**

We will undertake a comprehensive workforce mapping exercise which will accurately articulate the scope of Scotland’s drugs and alcohol workforce.

**Timeline**

Initiated Tranche 1 (2023/24).

**Action 3**

We will build upon the workforce mapping exercise to support improved workforce planning and service design.

**Timeline**

To be initiated in Tranche 2 (2024/25).

**Challenge**

**The need to improve workforce data capture.**

Whilst the information generated in the workforce research compendium was incredibly valuable, it provided only a snapshot at the point of time the data was collected in late 2021. Therefore, further work to capture workforce data as standard requires to be inbuilt to our services.

There exists limitations in the capability to provide any validated analysis from the range of sources of workforce data and information. This is further compounded by the variance in the way data and workforce information is collated and recorded. There are inconsistencies in definitions of workforce groups and specific job roles are difficult to analyse due to limitations in the way systems are set up to record the information.

**Outcome**

The Scottish Government will work with appropriate clinical specialists to articulate the different expectations of specialist roles and develop an accurate description of those. The Scottish Government will explore how we can work with partners, such as NHS Education for Scotland (NES), who maintain workforce statistics for every professional group in the NHS, and Scottish Social Services Council (SSSC), who publish social service workforce data information and intelligence to routinely identify those who identify drugs and alcohol treatment as being the primary service area in which they work.

The Scottish Government recognises anecdotal reports of a form of consultation fatigue, where some staff, responsible for data management, experience the collection process as burdensome. Any future requirement for further data collection will ensure that this is taken into consideration and any additional demands upon staff are limited to that which realise demonstrable benefit.

**Action 4**

We will improve drugs and alcohol workforce data capture.

**Timeline**

To be initiated in Tranche 2 (2024/25).



## Attract



### What is the wider challenge across the Health and Social Care sector?

Our education system is key to the creation of effective employment pathways into Health and Social Care. We need to better utilise this system to create interest and attract people to develop careers within the sector.

Over the last two years, multiple factors have resulted in significant shifts and labour market changes. As a result, we need to be recruiting people through alternative routes and maximising the pool of talent we already have available in Scotland.

Our ageing population ensures that we need to focus on the attraction, recruitment, and retention of young people as well retraining and upskilling new people into the workforce. Through all of this we must aim to improve equality, diversity, and inclusion to ensure we benefit from different lived experiences, perspectives, ideas, and skills and promote fair working practices which will attract and retain highly skilled workers.

### What needs to change within the drugs and alcohol sector?

Recruitment remains a significant challenge for the drugs and alcohol sector and addressing this challenge is of critical focus to all workforce development plans. We know that attitudes towards careers in drugs and alcohol services can be negatively impacted by the stigma that too often exists towards people who use these services. Working in the drugs and alcohol sector is too often perceived as less attractive than other roles in Health and Social Care.

We must take steps to make the sector an attractive place to work. Attracting people to the sector through effective recruitment is a core aspiration of all drugs and alcohol workforce development. However, recruiting more staff without steps to improve retention, will lead to further problems, with recruitment becoming a continuous cycle draining more time from those already working in services. By improving retention and service design the sector will become more attractive to prospective employees.

We also need to focus on improving workforce diversity and addressing the challenges of recruiting staff in rural and remote areas. We will continue to engage with those delivering local services in these areas to ensure their needs are considered in the implementation of the actions set out in this Plan.



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## What have we done so far?

### Challenge

**Short term funding of services can result in low salaries and/or fixed term roles which can dissuade potential applicants.**

We are aware of the challenges that can result from the annual funding cycle and that this is an issue which has impacted services of all types.

### Outcome

In order to mitigate the impact, over half of the Scottish Government's funding allocation provided to NHS Boards to support ADPs is baselined to the value of over £57 million. In 2023/24 the Scottish Government issued the £17 million Programme for Government allocation to ADPs on a recurring basis. This will also be moved into Board baselines for 2024/25.

The Scottish Government has also committed £65 million to third sector and grass roots organisations for distribution via Corra Foundation. These funds are accessible on a multi-year basis, and currently support over 300 projects across Scotland.

### Action 5

The Scottish Government has made, and will continue to make, multi-year funding available to drugs and alcohol services.

### Timeline

Ongoing.

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## What will we do next?

### Challenge

**To ensure the drugs and alcohol workforce is recognised and valued for the work that it does.**

It is important that we recognise the drugs and alcohol workforce's role in saving and improving lives. Improved public awareness of the vital work undertaken will not only empower staff but will also raise their profile and ensure that the sector is viewed as a more attractive place to work.

Whilst for many people who use drugs and alcohol, complete abstinence is their chosen aspiration, and they should be supported to achieve this; for others a reduction, or a more stable pattern of use is a success. It is important that the role of the workforce in supporting all improvements is recognised and celebrated. Where abstinence is regarded as the only barometer of success, then this can be demoralising for the workforce when this is not achieved.

### Action 6

We will capitalise on all opportunities to raise awareness of the lifesaving work undertaken by those employed in the drugs and alcohol sector, ensuring that they are afforded equal status with colleagues in other settings.

### Timeline

Initiated Tranche 1 (2023/24).

**Challenge****The need to improve pathways for people to enter and develop careers within the drugs and alcohol sector.**

The sector has significant vacancies and higher rates often exist within clinical roles, which often require more extensive training. We need to attract people at an early stage, with options for further study.

**Outcome**

The Scottish Government will explore how we can improve the availability of specialist modules and ensure they are embedded into courses which can prepare people for careers within the drugs and alcohol workforce.

The Scottish Government will explore whether targeted and accelerated pathways into the sector could be developed. This could include alternatives to full-length courses, such as apprenticeships, which shorten timescales but also provide vital work experience. Shortened or fast-track courses which exist in other areas of the Health and Social Care workforce may be replicated in the drugs and alcohol sector.

Wider reflection is also required as to how drugs and alcohol issues should be included in wider Health and Social Care courses to ensure that prospective employees are provided with some understanding of issues in preparation for their future careers. One such example of this, funded by the Scottish Government in 2022/23, was collaborative work between the University of Glasgow's Humanising Healthcare Forum; North-West (Glasgow) Recovery Communities; and the Scottish Recovery Consortium. This initiative brought together, outside of a clinical setting, student doctors and people with lived and living experience for educational discussions about substance use and recovery.

**Action 7**

We will improve pathways in to the drugs and alcohol sector and seek to improve understanding and knowledge of drugs and alcohol amongst the potential future workforce.

**Timeline**

To be initiated in Tranche 3 (2025/26).

# Train



## What is the wider challenge across the Health and Social Care sector?

The workforce needs supported to ensure they have the skills and education required to deliver services. Across Scotland our schools, colleges, universities and training providers deliver high-quality education to learners at all levels to support this.

Staff retention is essential for the delivery of consistent, high quality and safe services. To this end, the workforce requires opportunities for career progression. Career development both enhances the quality of skills in the workforce and improves retention through increased satisfaction and wellbeing. Work also needs to be done to raise the profile and value placed on careers in Health and Social Care. Training and continuous career development are central to this.

Work is required with partners, stakeholders, professional bodies and educational institutes to identify where new and innovative roles and training can enhance workforce capacity and capabilities.

## What needs to change within the drugs and alcohol sector?

A set of key skills and experiences are needed for anyone working in drugs and alcohol services. These should, as a minimum, be focused on embedding care, compassion, and empathy in service delivery. The workforce should feel empowered to implement and fully embrace changes that mainstream these principles.

Approaches that encourage training to be delivered to groups, which include both professionals and people with lived and living experience, can be successful in reducing stigma and improving joint working. The workforce should be well informed on key aspects of the treatment and recovery system in their area. This should include the Near Fatal Overdose pathway and local referral processes.

Steps should be taken to support people who choose to work in drugs and alcohol services through targeted continuous career development. This should include shadowing opportunities, peer review, supervision and support. It should also provide defined career progression opportunities.

## What have we done so far?

The Corra Foundation report that 95 projects awarded funding between April 2021 and March 2023 had invested in strengthening their workforce or supported skills development.

The *'Changing Lives'* report detailed that, as a minimum, the workforce should be expected to have had sufficient training in the following five areas.<sup>31</sup>

1. Taking a human rights-based approach;
2. Practising trauma-informed care;
3. Tackling stigma;
4. Delivering family-inclusive practice; and
5. Providing harm-reduction advice.

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Whilst further additional competencies, values and training may be identified and embedded, work is already underway to facilitate workforce training uptake across those five areas. An overview of some of this follows.

### **1. Taking a human rights-based approach**

Equality and Human Rights are cross-cutting priorities underpinning the National Mission. Through the new Human Rights Bill, work is also underway to incorporate into Scots Law the right of every person to attain the highest attainable standard of physical and mental health insofar as possible within the limits of devolved competence. As duty bearers, service providers will be required to ensure that the principles of a person-centred, human-rights based approach are at the heart of delivery.

The National Collaborative is a project that aims to empower people affected by substance use and set out how the right to be included in the forthcoming Human Rights Bill can be effectively supported. It will do this by developing a **Charter of Rights** with people affected by substance use, service providers and government. The Charter will summarise key rights (existing rights and those proposed for inclusion in the Human Rights Bill) and how they might apply to people with problematic substance use. This will support people affected by substance use to know and understand their rights and to support duty bearers to continuously improve the availability, accessibility, acceptability and quality of their services.

The Charter will be used to strengthen individual and collective advocacy by, and on behalf of, people affected by drugs and alcohol in a range of contexts (i.e. in accessing treatment services but also in interactions with wider public services such as housing and employment). It will also be used to improve service delivery by those providing services and those responsible for commissioning services at a local level. At a national level the Charter will be a tool to inform prioritisation, policy development and decision making.

The roll out of the Charter will be complimented by training and capacity building with communities of people with lived and living experience and those working in services.

In order to support delivery of the MAT Standards and ensure a human rights based approach is embedded across local areas, REACH Advocacy have been funded by the Scottish Government to deliver their well-established REACH Advocacy Practice Award and MAT Standards as part of a Human Rights Based Approach Awareness Workshops in 2023/24. Corra have awarded REACH further funding to deliver this throughout 2024/25, 2026/26, and 2026/27. This cuts across a number of National Mission outcomes as well as various MAT Standards – particularly 3, 6, and 8.<sup>32</sup>

This education and training allows frontline staff and managers across statutory and third sector services to develop knowledge and more effectively deliver the MAT Standards and adhere to Human Rights legislation. Additionally, it allows people with lived and living experience to understand their rights when accessing services.

## 2. Practising trauma-informed care

The Scottish Government understands that many people who use services have experienced trauma or adversity in their lives and may use drugs and alcohol as a way of coping with the impact. The Scottish Government is committed to ensuring that all services are trauma-informed and responsive in a way that supports people to access and remain engaged with services for as long as they need to; whilst ensuring staff can offer relationships which promote recovery.

We know from the *'Changing Lives'* report that some staff felt that they needed more training in this area, specifically around appropriately responding to disclosures of past trauma. Evidence highlights that where the impact of trauma is understood by staff, and where systems are better designed to support, then barriers to engagement can be reduced and better outcomes achieved.<sup>33</sup>

Trauma-informed approaches are a process of organisational change aiming to create environments and relationships that promote recovery and prevent re-traumatisation.<sup>34</sup> The Scottish Government will support ADPs to ensure that all drugs and alcohol services are delivered in psychologically and trauma-informed environments as per Action 35 of the *'Changing Lives'* report.<sup>35</sup> Our ambition for a trauma-informed workforce and services across Scotland is shared with COSLA and many other partners.<sup>36</sup>

Since 2018, we have invested over £9.6 million in our National Trauma Training Programme (NTTP).<sup>37</sup> This has included £4.8 million of funding distributed to all local authorities, in 2021/22, 2022/23 and 2023/24, to work with community planning partners to further progress the development of trauma-informed services, systems, and workforces.

The Programme provides freely-available evidence-based trauma training resources (developed by NES). These can help raise awareness, knowledge, and confidence among the workforce to embed trauma-informed practice based on the key principles of safety, trust, choice, empowerment, and collaboration. This includes the *'Alcohol and Drug Use and Trauma-Informed Practice Companion Document'*<sup>38</sup> which has been designed to support all professionals working with people affected by drugs and alcohol use and/or their families and aims to strengthen awareness and understanding of trauma-informed practice. The NTTP has also designed a freely available e-module<sup>39</sup> specifically focused on understanding the use of drugs and alcohol to cope with the impact of trauma.

In 2022/23 the NTTP also supported four pathfinder projects focused on trauma-informed substance use services (Dumfries and Galloway and Orkney) and trauma-informed maternity services (Forth Valley and Grampian). The aim of these pathfinders was to explore the support that is needed by frontline services to design and embed sustainable models of trauma informed care. Learning reports from the pathfinders will be published in 2023.



### 3. Tackling Stigma

There is a need to ensure that, across the whole system, all those who engage with people who use drugs and alcohol understand these issues. This will help break down the stigma which too often inhibits equitable treatment.

Stigma also reinforces trauma and prevents people from seeking support and treatment. It is therefore imperative that people who use drugs and alcohol do not face additional stigma once they take the often difficult decision to engage with services.

We know from the *'Changing Lives'* report that the delivery of training to groups of professionals and people with lived and living experience has proved successful in reducing stigma and improving joint working.<sup>40</sup> We would encourage services and training providers to maximise opportunities for such shared learning to be replicated and engage with available training opportunities, such as SDF's *'Understanding Stigma - Promoting Inclusive Attitudes and Practice'*.

### 4. Delivering family-inclusive practice

Workforce Training in family inclusive practice is offered by Scottish Families Affected by Alcohol and Drugs (SFAD). This training offers staff a wide range of practical tools and techniques to involve families safely and effectively, as well as a deeper understanding of the benefits of family-inclusive practice. We will continue to encourage improved uptake of family-inclusive practice across the workforce.

### 5. Providing harm-reduction advice

It is imperative that the workforce is fully informed of harm-reduction approaches and confident to offer sound, evidence based advice and support. There is a challenge in ensuring that all professions who come into contact with people who use drugs and alcohol are trained to manage problem use and are equipped to be able to provide suitable help and care.

The Royal College of General Practitioners (RCGP) Scotland Certificate in the Management of Problem Drug Use is designed to support GPs, Pharmacists, prison healthcare staff, nurses, and third-sector workers.

The certificate gives staff the opportunity to develop their understanding of the importance of harm reduction in the management of drug use. By keeping staff informed and equipping them with the knowledge to give people affected by problem drug use the best help and care they deserve.

This course strives to provide enhanced knowledge amongst participants and also provides encouragement to develop new harm reduction initiatives in the primary care setting. Completion of the course equips clinicians with the skills to assess, support, and safely prescribe opiate substitution and other treatments for drug dependence with the aim of increasing access to treatment as quickly as possible.

The Scottish Government has ensured that RCGP's Management of Problem Drug Use certificate has been funded to continue to deliver training until March 2026. Funding of approximately £420,000 will be provided over the next three years to ensure enhanced delivery of this programme.

**Action 8**

The Scottish Government will continue to support the delivery of workforce training across the five key areas identified in the ‘Changing Lives’ Report.

**Timeline**

Ongoing.

**What will we do next?**

**Challenge**

**To ensure that the drugs and alcohol workforce is able to engage with high quality and accessible training provision.**

Access to appropriate training is vital to ensuring that staff have the correct skills to support people achieve the best possible outcomes. It is also vital that staff are able to continue to develop within their roles and pursue their chosen career path.

Whilst there are already multiple training opportunities available, from various providers; these can often be difficult to access as they are hosted across multiple formats with differing access paths.

We also know that certain training opportunities are often regarded as being exclusive to certain sectors of the workforce as a result of the space in which they are provided or hosted. This can inhibit engagement by some working in alternative sectors.

**Outcome**

We recognise and welcome innovation underway, such as the Drugs Death Digital Hub<sup>41</sup>, hosted by the Royal College of Physicians of Edinburgh, which provides a range of useful educational resources for clinicians and allied health professionals. Other organisations also deliver a range of workforce learning and development courses, such as SDF through their range of in person training sessions and e-learning courses and SFAD through their Learning Hub.<sup>42</sup> We would encourage those working in the sector to also engage with such resources.

The Scottish Government has been working with experts across the drugs and alcohol sector to develop an Online Pathway to communicate and signpost available training opportunities to the entire drugs and alcohol workforce. This Online Pathway will ensure greater accessibility to a range of training opportunities on a host of key subject matters, contributing to the delivery of a sustainable, skilled workforce.



<b>Action 9</b>	We will support the development of a single Online Pathway to communicate and signpost training opportunities to the entire drugs and alcohol workforce, regardless of sector.
<b>Timeline</b>	Initiated Tranche 1 (2023/24).

<b>Challenge</b>	<p><b>We need to ensure that services are fully informed and empowered to support the mental health needs of people who use drugs and alcohol.</b></p> <p>Prioritising the mental health of people who use services by integration of alcohol, drugs, mental health and social services is a running theme within the MAT Standards. MAT Standard 9 specifically highlights that</p> <p>“All people with co-occurring drug use and mental health difficulties can receive mental health care at the point of MAT delivery”<sup>43</sup>.</p> <p>We know that too often people are denied access to mental health and substance use services due to their co-occurring conditions. There is a need to ensure all services are fully informed on the potential mental health needs of people who use drugs and alcohol.</p>
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<b>Outcome</b>	<p>Our vision is for a joined-up healthcare system where people with co-occurring conditions get timely access to the help they need.</p> <p>In June 2023, the Scottish Government published the ‘<i>Mental Health and Wellbeing Strategy</i>’, with a vision of a Scotland which is free from stigma and inequality and where everyone fulfils their right to achieve the best mental health and wellbeing possible.</p> <p>The scope for the Strategy is wider, with an increasing focus on wellbeing and prevention and takes account of social factors and inequalities that might impact a person’s mental health and wellbeing. It recognises the many different factors that can influence mental health and wellbeing, and therefore the need for cross-policy, cross-system work.</p> <p>The Strategy was followed by the publication of the ‘<i>Mental Health and Wellbeing: Workforce Action Plan 2023-2025</i>’<sup>44</sup> and the ‘<i>Mental Health and Wellbeing Strategy: Delivery Plan 2023-2025</i>’<sup>45</sup> in November 2023. These outline how the Scottish Government and COSLA will progress a range of activities to address key workforce issues, and describes the work that the Scottish Government will undertake to improve mental health for everyone.</p>
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<b>Action 10</b>	We will continue to progress training opportunities, ensuring that services are well informed and fully empowered to support the mental health needs of people who use drugs and alcohol.
<b>Timeline</b>	Ongoing.
<b>Action 11</b>	As part of a wider programme of work to better integrate services, we will develop and implement new operational protocols which will detail how mental health and substance use services should work together to provide high quality care.
<b>Timeline</b>	Ongoing.
<b>Challenge</b>	<p><b>To ensure that our workforce and services are trauma-informed and responsive.</b></p> <p>The Scottish Government, in partnership with COSLA, NHS Education for Scotland (NES), the Improvement Service and the Resilience Learning Partnership are currently rolling out a National Trauma Training Programme (NTTP). This programme is based on the 2017 Knowledge and Skills Framework for Psychological Trauma developed by NES<sup>46</sup> which sets out the level of knowledge and skills needed for staff, relevant to their role. The NTTP includes funding for a network of Transforming Psychological Trauma Implementation Co-ordinators who are based in health board areas and provide trauma expertise to organisations and Trauma Champions in their local area to support training, coaching, implementation and collaborations with people with lived experience of trauma.</p>
<b>Outcome</b>	The Scottish Government will expand the existing TPTIC who will continue to support universal services as part of the NTTP. We will also recruit a National Lead specialist post to focus on developing support for trauma-informed substance use services, building on the learning from the trauma-informed substance use pathfinder work taken forward in Dumfries and Galloway and Orkney in 2022/23. This will ensure that both specialist and generic services that people who use drugs may encounter, are trained and equipped in trauma-informed practice to ensure appropriate responses and support is given

<b>Action 12</b>	We will expand the existing TPTIC network and recruit a National Lead specialist post with experience in substance use and trauma informed practice.
<b>Timeline</b>	To be initiated in Tranche 1 (2023/24).

<b>Challenge</b>	<p><b>To ensure that the drugs and alcohol workforce possesses a key set of competencies to appropriately support people who use drugs and alcohol.</b></p> <p>A set of key skills and experiences are needed for anyone working to support people who use drugs and alcohol. These should be focused on embedding care, compassion, and empathy in service delivery. Training and improvement practice should be used to fully embed these competencies into practice.</p>
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<b>Outcome</b>	<p>In order to ensure that the workforce possesses a key set of competencies, the Scottish Government will engage with an extensive range of relevant stakeholders to:</p> <ul style="list-style-type: none"> <li>• Clarify the tiers and areas of the workforce to which these key competencies should apply;</li> <li>• Identify and learn from existing practice and competencies across various sectors;</li> <li>• Agree the competencies which each layer of the workforce should possess;</li> <li>• Support organisations to embed these key competencies in job descriptions/ role profiles; and</li> <li>• Raise awareness and promote these competencies.</li> </ul>
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<b>Action 13</b>	We will work with partners to support the development of competencies for workers who care for people who use drugs and alcohol.
<b>Timeline</b>	Initiated Tranche 1 (2023/24).

<b>Challenge</b>	<p><b>To ensure that the workforce undertakes appropriate training to allow them to provide effective support to people who use drugs and alcohol.</b></p> <p>The development of key competencies must be supported by appropriate training opportunities. There is a need to ensure that across the whole system, all those who engage with people who use drugs and alcohol understand this issue.</p>
<b>Outcome</b>	<p>The Scottish Government will build upon the development of key competencies to identify supporting workforce training. The Scottish Government will seek to ensure that access to training, identified as necessary, is made available. In order to deliver this outcome, the Scottish Government will work in collaboration with relevant stakeholders to:</p> <ul style="list-style-type: none"> <li>• Clarify the tiers and areas of the workforce to which this training should apply;</li> <li>• Identify and learn from best practice and available training within this area;</li> <li>• Agree on what training opportunities should be undertaken by the workforce;</li> <li>• Ensure that access to these training opportunities is available for all; and</li> <li>• Increase engagement through improved awareness, promotion, and accessibility.</li> </ul>
<b>Action 14</b>	<p>We will work with partners to identify key training opportunities for the drugs and alcohol workforce.</p>
<b>Timeline</b>	<p>To be initiated in Tranche 1 (2023/24).</p>

<b>Challenge</b>	<p>The Scottish Government should provide support for the development of continuous career development for the workforce.</p> <p>The workforce research compendium highlighted a lack of opportunities for career progression as a barrier to recruitment, consequently leading to workforce attrition.<sup>47</sup> The <i>'Changing Lives'</i> report outlined that steps should be taken to support the workforce with targeted continuous career development opportunities.<sup>48</sup></p>
<b>Outcome</b>	<p>The Scottish Government will work with key partners to establish defined career development opportunities. These will be based on, and follow the implementation of identified key competencies and supporting training.</p>
<b>Action 15</b>	<p>We will work with partners to support effective continuous career development for the drugs and alcohol workforce.</p>
<b>Timeline</b>	<p>To be initiated in Tranche 3 (2025/26).</p>

**Challenge****To commission the development of standards and guidance for all services who use peer support ensuring they are valued and appropriately paid.**

People who use drugs and alcohol often perceive peer support as providing enhanced safety, thereby facilitating effective connection through shared life experiences. In addition, evidence tells us that training and education approaches involving people with lived and living experience help people in early recovery to become confident in their new identity. This can make recovery more visible. Supporting others can also form an important part of a worker's personal recovery journey.

We know that the shared understanding and lived experience that peer workers and volunteers can bring to the workforce has immense value in terms of practical and motivational support. Relationships built on this trust are vital to ensuring people remain engaged with services. This is evident in the Navigator Service<sup>49</sup>, run by Medics against Violence with support from NHS partners, which helps to navigate individuals attending Emergency Departments away from chaotic lifestyles.

However, we know that often the role of peer worker is not appropriately valued. The '*Changing Lives*' report also set out that peer support should be clearly defined.<sup>50</sup>

**Outcome**

Peer workers have an important role to play in support services such as assertive outreach programmes. Standards and guidance should be developed to ensure they are valued for this, in line with the Scottish Government Fair Work principles.

The Scottish Government has been promoting Fair Work practices since 2019, through our Fair Work First policy.<sup>51</sup> Employers in Scotland who are in receipt of public sector grants, contracts and other funding have been asked to adopt Fair Work First principles. In July 2023, further strengthening of this approach was introduced which requires employers in receipt of public sector grant funding to pay their workers at least the real Living Wage and provide appropriate channels for an effective voice. The Scottish Government believe that public sector funding should leverage wider societal benefits, such as high Fair Work standards.

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We will seek to ensure that peer support workers are supported to develop and progress in their careers. We will seek to develop formalised pathways, as well as appropriate training, development, pay and career progression opportunities.

**Action 16**

As per Action 60 of the 'Changing Lives' report, we will support the development of standards and guidance for all services that use peer support, ensuring workers are appropriately valued and have career progression opportunities, in line with Fair Work principles.

**Timeline**

To be initiated in Tranche 3 (2025/26).

## Employ



### What is the wider challenge across the Health and Social Care sector?

The Employ pillar focuses on how staff must feel appreciated for the work that they do, and that terms and conditions must continue to modernise. This will mean we can develop a more skilled, resilient workforce. We have to ensure the consistent progression of Fair Work practice and have a system around staff that is responsive to their personal circumstances and provides opportunities for career progression.

The Scottish Government's *'Fair Work Action Plan'*<sup>52</sup> sets out our wider ambition for Scotland to be a leading Fair Work Nation by 2025, and the actions we are taking to realise this. Evidence tell us that adopting fair work practices can help employers attract and retain workers, and likewise workers benefit from being fairly rewarded and respected in a safe and secure working environment.

We should ensure that a career in Health and Social Care is one of choice and we retain people who want to stay and progress. The system needs to allow flexibility, and focus on human rights and person-led experiences.

### What needs to change within the drugs and alcohol sector?

Recruiting new people to the drugs and alcohol sector is critical to reducing vacancies, caseloads, and pressures. It is imperative that the workforce continues to expand to better support people. We need to use a multipronged approach where we simultaneously make progress against all five pillars. As previously explained, recruiting more staff, without steps to improve retention, would lead to a continuous cycle, draining more time from those already working in services.

The section that follows outlines the specific work being undertaken to employ more people within the drugs and alcohol workforce. However, it should be acknowledged that almost every action outlined in this Plan, across all five pillars, should to some extent improve recruitment, as a by-product of making the sector a more desirable place to enter and develop a career.



## What have we done so far?

<b>Challenge</b>	<p><b>To recruit additional drugs and alcohol workers across Scotland.</b></p> <p>In June 2022, the previous Minister for Drugs Policy outlined to the Scottish Parliament, that most of an additional £10 million per year MAT funding would be used to recruit more than 100 staff nationally.</p>
<b>Outcome</b>	<p>Many ADPs have reported that they have made significant progress towards the recruitment targets set for themselves. In June 2023, a snapshot of the picture in each area was captured; those figures were encouraging across a number of areas with some reporting significant progress against their intended targets. However, many still face significant challenges.</p>
<b>Action 17</b>	<p>MAT funding has allowed the Scottish Government to support additional ADP recruitment.</p>
<b>Timeline</b>	<p>Ongoing.</p>

**Challenge****To support those with lived and living experience of drug and alcohol use to establish careers within the sector.**

The value that people with lived and living experience can bring to the sector has been reiterated throughout this Action Plan. We are fully committed to ensuring increased involvement in both the delivery and design of services. However, we know that people with lived and living experience often face multiple barriers when entering employment. This group often require ongoing support to gain qualifications and enter the workforce.

**Outcome**

SDF's A/RWTP provides a supported employment programme for people with experience of drugs and alcohol use. Trainees are supported through SDF's Scottish Qualifications Authority approved Learning Centre, to achieve the Scottish Vocational Qualification (SVQ) Level 2 in Social Services and Healthcare. SDF's Learning Centre tailors delivery of SVQs to meet the needs of the workforce.

The SVQ is the industry standard qualification required for working in the drugs, alcohol and wider social care field. This SVQ satisfies registration requirements for the SSSC, who serve as regulators for the social work, social care and early years workforce in Scotland. Achievement of this SVQ therefore opens up employment opportunities for graduates.

The traineeship offers a unique opportunity to utilise life experience in conjunction with a salaried work placement, professional training, vocational learning and intensive support to produce high calibre social and health care professionals.

The programme has demonstrated clear successful outcomes, with a reported 90% completion rate. Furthermore, over 85% of people who complete the programme move into further employment; the vast majority into full time jobs in Health and Social Care.

In January 2023, the Scottish Government announced that it would support up to a further 20 placements annually through investment of £480,000 per year.<sup>53</sup> For each ADP funded place, SDF offered up to two match funded places from Scottish Government funding.

This additional funding has encouraged ADPs to consider the value of increased resources for the programme. Fife ADP responded favorably by doubling their allocated resource to the programme, while all other ADPs maintained their 2022-23 commitment.

Scottish Government funding has also:

- Significantly increased the number of trainee places available;
- Facilitated additional support from one new ADP area (Inverclyde); and
- Expanded the geographical reach of the programme to a further four local authority areas.

The programme is now being delivered throughout Argyll & Bute, Borders, East Ayrshire, Edinburgh, Falkirk, Fife, Glasgow, Highland, Inverclyde, North Lanarkshire, Renfrewshire and South Lanarkshire.

**Action 18**

The Scottish Government will continue to support the additional annual recruitment of up to 20 additional Addiction/Recovery Worker Training Programme trainees through investment of £480,000 per year for the remainder of this parliament.

**Timeline**

Ongoing.

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## What will we do next?

<b>Challenge</b>	<b>To support people who have lived and living experience of using drugs and alcohol to enter and sustain meaningful employment.</b>
<b>Outcome</b>	<p>No One Left Behind<sup>54</sup> is the Scottish Government’s approach to transforming employment support in Scotland. It has a crucial role to play in delivery of our vision for economic transformation and tackling child poverty. The approach aims to deliver a system that is more tailored and responsive to the needs of people of all ages who want help and support on their journey towards, and into, work – particularly people with health conditions, people with disabilities and others who are disadvantaged in the labour market.</p> <p>An exercise has been undertaken to improve understanding of those commissioned services working across Scotland to provide drugs and alcohol services. This exercise has improved understanding of current vacancies, their geography, and the nature of the skills and qualifications sought by those with a track record of employing people with lived and living experience.</p> <p>Cross Government work is now underway to maximise the role of employability services in supporting people with lived and living experience working towards and into work, including roles within the drugs and alcohol sector.</p>
<b>Action 19</b>	We will support participants with lived and living experience of using drugs and alcohol to enter and sustain employment.
<b>Timeline</b>	Ongoing.

<p><b>Challenge</b></p>	<p><b>The need to support professions to develop pathways for people with lived and living experience to pursue careers within the drugs and alcohol workforce.</b></p>
<p><b>Outcome</b></p>	<p>The Scottish Government is committed to ensuring that people with lived and living experience are at the heart of everything we do. We want to ensure they are supported to pursue careers within the sector and play a more active role in the design and delivery of services. The Corra foundation reported that of 226 funded projects, between April 2022 and March 2023, a total of 147 employ or involve people with lived and living experience in their work.</p> <p>We understand there exists a need to develop pathways for people to enter, and progress, careers within the sector. The Scottish Government is working with key partners to support this. We will achieve this by:</p> <ul style="list-style-type: none"> <li>• Identifying best practice in existing career pathways;</li> <li>• Drawing on the workforce mapping output (see Plan section) to identify the most appropriate roles to which pathways should be developed;</li> <li>• Identifying existing barriers and enablers for career entry and development;</li> <li>• Identifying best practice in risk management and safeguarding processes; and</li> <li>• Developing a framework of key principles which will support organisations to deliver clear pathways for people with lived and living experience.</li> </ul> <p>This outcome has been identified by the Scottish Government’s WEDG as a key priority to be initiated in 2023/24.</p>
<p><b>Action 20</b></p>	<p>We will support organisations and professions to develop pathways to support people with lived and living experience to enter and pursue careers within a workforce which is inclusive, diverse and reflective of the communities that it cares for.</p>
<p><b>Timeline</b></p>	<p>Initiated Tranche 1 (2023/24).</p>

## Nurture



### What is the wider challenge across the Health and Social Care sector?

The Nurture pillar requires us to look at how we support the workforce. Staff wellbeing is of utmost priority and consideration should be given to safe working, appropriate staffing levels and manageable workloads across the Health and Social Care sector.

Work needs to continue to ensure that appropriate support is offered across the system. We need to actively listen to staff, understanding pressures and any actions that can be taken to mitigate their impact.

Promoting positive, trauma-informed cultures leads to better wellbeing outcomes for both service users and the workforce. At the heart of any organisational culture there should be equality, diversity, and inclusion.

### What needs to change within the drugs and alcohol sector?

Drugs and alcohol services are dealing with an ageing population of people whose needs are increasingly complex. Consequently, caseloads are not only growing larger but also more challenging. Increasing caseloads and high levels of sick absence often increase workforce pressures and make employment within the sector a less attractive proposition. All of these factors contribute to recruitment and retention challenges.

Steps should be taken to reduce caseloads for different parts of the system. Psychological support and wellbeing services should be provided to the workforce as standard.

**Key Point: Current workforce challenges are a result of complex factors unfolding over a prolonged period of time. It is, therefore, not realistic, despite our best efforts and intentions, to expect that these can be immediately reversed through publication of this Action Plan. However, there are things that can be done to support staff now.**

There is a clear need to address the stigma associated with working in drugs and alcohol services. Addressing this will help develop, enhance and sustain career pride. We will continue to work with employers to ensure that the workforce feel heard and included within their organisations.

The workforce engages with diverse communities and we aspire to facilitate one which is more diverse and reflective of the communities that it cares for.

## What have we done so far?

### Challenge

#### To support improved workplace mental health and wellbeing.

We know that those working in services are often under significant pressure. It is testament to their efforts that we are making progress on reducing deaths and improving lives. However, we have heard that working in this challenging context can, in some instances, lead to a form of 'compassion fatigue', which at times may manifest in stigmatising practice.

Whilst we acknowledge that manageable caseloads and appropriate staffing levels are key to workforce wellbeing; we also recognise that there are a range of existing resources which can support workforce wellbeing and we would encourage that these are fully utilised.

### Outcome

We value every member of the workforce and their wellbeing remains a key priority. The Scottish Government has previously made £12m available to support this and introduced a National Wellbeing Hub<sup>55</sup> and 24/7 helpline available to everyone working in health, social care and social work in Scotland.

We will continue to support staff mental health and wellbeing through national initiatives such as the National Wellbeing Hub, the National Wellbeing Helpline, Coaching for Wellbeing, confidential mental health treatment through the Workforce Specialist Service and funding to support the delivery of local psychological therapies and interventions.

The Scottish Government also support bespoke provision on offer for specific areas of the workforce, such as the Social Work Professional Support Service<sup>56</sup> and would encourage staff to engage with resources such as this.

### Action 21

The Scottish Government will continue to support positive workforce mental health and wellbeing through a range of national initiatives.

### Timeline

Ongoing.

<b>Challenge</b>	<p><b>To identify and share wellbeing good practice.</b></p> <p>A subgroup of the Scottish Government’s WEDG focused on staff wellbeing. This group illustrated how the physical, mental and emotional wellbeing of those providing direct support to people who use drugs and alcohol were often negatively impacted. The factors impacting upon wellbeing generally replicated those challenges identified throughout this Action Plan, in addition to some specific operational challenges caused by systems not operating optimally. Whilst there are no ‘quick fixes’ to alleviate existing pressures, this subgroup was able to establish a baseline of existing good practice, through undertaking a scoping exercise in collaboration with ADPs. Some of the good practice identified as being delivered included:</p> <ul style="list-style-type: none"><li>• Management of caseload demands;</li><li>• Psychological support and wellbeing services;</li><li>• Coaching, supervision or reflective practice groups with a focus on staff wellbeing;</li><li>• Flexible working arrangements;</li><li>• Co-location of services to enhance joint working;</li><li>• Enhanced in-person working;</li><li>• NHS Scotland’s Supporting Staff in Distress &amp; Crisis Information Sheet<sup>57</sup>;</li><li>• Provision of support and wellbeing resources to staff; and</li><li>• Staff recognitions schemes.</li></ul> <p>In recognition of such practice the annual ADP survey, designed to collect information on a range of aspects relating to the delivery of the National Mission, will now seek to understand which methods are being deployed to improve and support wellbeing within each area. This will allow us to better understand ongoing work and highlight best practice which local areas may adopt or develop.</p>
<b>Action 22</b>	We will continue to monitor and highlight any ongoing practice which can promote workforce wellbeing.
<b>Timeline</b>	Ongoing.



## What will we do next?

<b>Challenge</b>	<b>To actively listen to staff, understanding pressures and any actions that can be taken to mitigate their impact.</b>
<b>Outcome</b>	PHS are conducting an evaluation of the National Mission which will help the Scottish Government learn lessons around what is, or is not, working well. In order to help inform this evaluation PHS intends to also capture the views of frontline staff and understand their experiences of working in drugs and alcohol services. This will be done through an online staff survey. The results from the survey will be presented in the baseline evaluation report, anticipated to be published in Spring 2024.
<b>Action 23</b>	PHS will capture the views of the workforce through an online survey.
<b>Timeline</b>	Ongoing.
<b>Outcome</b>	The Self Care and Wellbeing: A Practical Guide for Health and Social Care <sup>58</sup> course, developed jointly between the Royal College of Physicians of Edinburgh and the University of Edinburgh, is open and active. It is reported that many health professionals have found this resource helpful.
<b>Action 24</b>	We will encourage all to utilise existing resources which can support positive staff wellbeing.
<b>Timeline</b>	Ongoing.



<b>Challenge</b>	<p><b>The need to address stigma experienced by those working in drugs and alcohol services.</b></p> <p>Substantial evidence suggests that those working in drugs and alcohol services feel their work is often not afforded equal status to the work of their colleagues in other health or social care settings.<sup>59</sup></p>
<b>Outcome</b>	<p>Wider work to address the stigma experienced by those who use drugs and alcohol will deliver on the commitment to ensure dependency is regarded a health condition. The Scottish Government’s <i>National Stigma Action Plan</i><sup>60</sup> will support individuals and organisations to accept responsibility for their own behaviour and learning, and to take practical steps towards a stigma-free Scotland. As stigmatising attitudes towards people who use drugs and alcohol reduce, then it is anticipated that this will positively impact upon appreciation for the workforce.</p> <p>Every member of the workforce should feel valued, respected, and included. Their value as a critical component of the wider Health and Social Care sector should be recognised. We will seek to ensure that those working in this sector are recognised as the front line health workers they are.</p>
<b>Action 25</b>	<p>We will utilise all opportunities to promote the vital lifesaving work undertaken by those working in the drugs and alcohol sector.</p>
<b>Timeline</b>	<p>Ongoing.</p>


<p><b>Challenge</b></p>	<p><b>To support organisations to provide effective care for employees with lived and living experience.</b></p> <p>We know that some employers may be unsure about how best to support employees with lived and living experience of drugs and alcohol use. We also know that this is not always recognised as a health condition, often leading to stigmatising practice. The <i>‘Changing Lives’</i> report recommended that the Scottish Government should commission guidance on how employees in recovery can be supported.</p>
<p><b>Outcome</b></p>	<p>The Scottish Government is facilitating the development of guiding principles which will educate and inform employers on how they can provide optimal support for employees with lived and living experience of drugs and alcohol use. This is being developed in collaboration with a number of key third sector organisations and people who currently use, or have used drugs and alcohol.</p> <p>The document will emphasise that recovery is not always a linear process and that setbacks are not uncommon. Support from an employer, rather than judgement and negative consequence, is required to enable the person to continue on their journey.</p> <p>The guiding principles document will allow organisations to develop local guidance to address stigmatising practice and ensure that staff with lived, or living experience can flourish.</p>
<p><b>Action 26</b></p>	<p>We will publish a guiding principles document to inform organisations on how they can provide effective support to employees with lived and living experience.</p>
<p><b>Timeline</b></p>	<p>Initiated Tranche 1 (2023/24).</p>

<b>Challenge</b>	<p><b>To reduce caseloads for the drugs and alcohol workforce.</b></p> <p>The <i>workforce research compendium</i><sup>61</sup> and 'Changing Lives' report<sup>62</sup> both make reference to the need to tackle burnout and staff wellbeing challenges; suggesting that there is a need to outline safe caseload limits as well as providing psychological support and workforce wellbeing services as standard, in order to manage trauma and work-related stress.</p>
<b>Outcome</b>	<p>Support for employee wellbeing is at the heart of all our workforce development efforts. The 'Changing Lives' report recommended that the Scottish Government should encourage the principles of the Health and Care (Staffing) (Scotland) Act 2019 to be applied to those areas of the workforce to whom it applies, in order to ensure safe and appropriate workloads.<sup>63</sup></p>
<b>Action 27</b>	<p>We will explore how the principles of the Health and Care (Staffing) (Scotland) Act 2019 should inform service design going forward.</p>
<b>Timeline</b>	<p>Initiated Tranche 2 (2024/25).</p>

## Annex A: Actions Framework

The following table provides a breakdown of all actions planned, or in progress, that the Scottish Government will seek to support delivery of. These are organised under each of the five pillars of Plan, Attract, Train, Employ and Nurture.


Plan 		
OVERARCHING AIM	ACTIONS	TIMELINE
Whole system, evidence-based planning to better understand the workforce we have and plan better for the workforce needed to deliver drugs and alcohol services that our communities need.	<b>Completed:</b> 1. The Scottish Government has undertaken and published the Alcohol and Drugs Workforce: Mixed-Methods Research Compendium.	Completed
	<b>Next Steps:</b> 2. We will undertake a comprehensive workforce mapping exercise which will accurately articulate the scope of Scotland’s drugs and alcohol workforce.	Tranche 1 (2023/24)
	3. We will build upon the workforce mapping exercise to support improved workforce planning and service design.	Tranche 2 (2024/25)
	4. We will improve drugs and alcohol workforce data capture.	Tranche 2 (2024/25)
Attract 		
OVERARCHING AIM	ACTIONS	TIMELINE
Ensure careers in the drugs and alcohol sector are attractive, with inclusive and diverse routes to recruitment, benefitting from different lived experiences and where all are respected, empowered and valued for their work.	<b>In Progress:</b> 5. The Scottish Government has made, and will continue to make, multi-year funding available to drugs and alcohol services.	Ongoing
	<b>Next Steps:</b> 6. We will capitalise on all opportunities to raise awareness of the lifesaving work undertaken by those employed in the drugs and alcohol sector, ensuring that they are afforded equal status with colleagues in other settings.	Tranche 1 (2023/24)
	7. We will improve pathways in to the drugs and alcohol sector and seek to improve understanding and knowledge of substance use amongst the potential future workforce.	Tranche 3 (2025/26)

Train 		
OVERARCHING AIM	ACTIONS	TIMELINE
<p>The drugs and alcohol workforce is supported to develop the required skills to deliver effective services with opportunities for career progression, whilst embracing new technologies and evidence-based approaches.</p>	<p><b>In Progress:</b></p> <p>8. The Scottish Government will continue to support the delivery of workforce training across the five key areas identified in the ‘Changing Lives’ Report.</p> <p>9. We will support the development of a single Online Pathway to communicate and signpost training opportunities to the entire drugs and alcohol workforce, regardless of sector.</p>	<p>Ongoing</p> <p>Tranche 1 (2023/24)</p>
	<p><b>Next Steps:</b></p> <p>10. We will continue to progress training opportunities, ensuring that services are well informed and fully empowered to support the mental health needs of people who use drugs and alcohol.</p>	<p>Ongoing</p>
	<p>11. As part of a wider programme of work to better integrate services, we will develop and implement new operational protocols which will detail how mental health and substance use services should work together to provide high quality care.</p>	<p>Ongoing</p>
	<p>12. We will expand the existing TPTIC network and recruit a National Lead specialist post with experience in substance use and trauma-informed practice.</p>	<p>Tranche 1 (2023/24)</p>
	<p>13. We will work with partners to support the development of competencies for workers who care for people who use drugs and alcohol.</p>	<p>Tranche 1 (2023/24)</p>

	14. We will work with partners to identify key training opportunities for the drugs and alcohol workforce.	Tranche 1 (2023/24)
	15. We will work with partners to support effective continuous career development for the drugs and alcohol workforce.	Tranche 3 (2025/26)
	16. As per Action 60 of the ‘Changing Lives’ report, we will support the development of standards and guidance for all services that use peer support, ensuring workers are appropriately valued and have career progression opportunities, in line with Fair Work principles.	Tranche 3 (2025/26)

**Employ** 

OVERARCHING AIM	ACTIONS	TIMELINE
Develop a more resilient and stable workforce where staff are appreciated and rewarded for the work that they do, so that we retain people who want to progress and stay within the workforce.	<b>In Progress:</b>	
	17. MAT funding has allowed the Scottish Government to support additional ADP recruitment.	Ongoing
	18. The Scottish Government will continue to support the additional annual recruitment of up to 20 additional Addiction/Recovery Worker Training Programme trainees through investment of £480,000 per year for the remainder of this parliament.	Ongoing
	<b>Next Steps:</b>	
	19. We will support participants with lived and living experience of using drugs and alcohol to enter and sustain employment.	Ongoing
	20. We will support organisations and professions to develop pathways to support people with lived and living experience to enter and pursue careers within a workforce which is inclusive, diverse and reflective of the communities that it cares for and supports.	Tranche 1 (2023/24)

Nurture 		
OVERARCHING AIM	ACTIONS	TIMELINE
<p>The drugs and alcohol workforce is valued, empowered, supported, and listened to.</p>	<p><b>In Progress:</b></p> <p>21. The Scottish Government will continue to support positive workforce mental health and wellbeing through a range of national initiatives.</p>	Ongoing
	<p>22. We will continue to monitor and highlight any ongoing practice which can promote workforce wellbeing.</p>	Ongoing
	<p><b>Next Steps:</b></p> <p>23. PHS will capture the views of the workforce through an online survey.</p>	Ongoing
	<p>24. We will encourage all to utilise existing resources which can support positive staff wellbeing.</p>	Ongoing
	<p>25. We will utilise all opportunities to promote the vital lifesaving work undertaken by those working in the drugs and alcohol sector.</p>	Ongoing
	<p>26. We will publish a guiding principles document to inform organisations on how they can provide effective support to employees with lived and living experience.</p>	Tranche 1 (2023/24)
	<p>27. We will explore how the principles of the Health and Care (Staffing) (Scotland) Act 2019 should inform service design going forward.</p>	Tranche 2 (2024/25)



## Annex B: Glossary

A/RWTP	Addiction/Recovery Workers Trainee Programme
ADP	Alcohol and Drug Partnership
COSLA	Convention of Scottish Local Authorities
DAISy	Drug and Alcohol Information System
GPs	General Practitioners
MAT	Medication Assisted Treatment
NES	NHS Education for Scotland
NHS	National Health Service
NMCAG	National Mission Clinical Advisory Group
NTTP	National Trauma Training Programme
PHS	Public Health Scotland
RCGP	Royal College of General Practitioners
SDF	Scottish Drugs Forum
SFAD	Scottish Families Affected by Alcohol and Drugs
SSSC	Scottish Social Services Council
SVQ	Scottish Vocational Qualification
TPTIC	Transforming Psychological Trauma Implementation Coordination Network
WEDG	Workforce Expert Delivery Group

## Annex C: Workforce Expert Delivery Group Membership (WEDG)

Members of the WEDG were appointed individually, as representatives of their respective organisations and were expected to engage across their organisations regarding activity.

The table below provides a breakdown of those organisations that are currently, or have previously been represented on the WEDG.

<b>Organisations Represented</b>
<b>Chair:</b> NHS Dumfries and Galloway
Alcohol & Drug Recovery Services, Greater Glasgow & Clyde
Angus Integrated Drug & Alcohol Recovery Service
Cyrenians
Faces & Voices of Recovery UK
Glasgow Alcohol and Drug Recovery Services
Glasgow Alcohol and Drugs Partnership
Healthcare Improvement Scotland
NHS Education for Scotland
NHS Lanarkshire
NHS Lanarkshire Drugs Research Network for Scotland
Public Health Scotland
Renfrewshire Alcohol and Drugs Recovery Services
Royal College of Nursing
Royal College of Psychiatrists
Scottish Families Affected by Alcohol and Drugs
Scottish Government
Scottish Health Action on Alcohol Problems
Scottish Recovery Consortium
Scottish Social Services Council
Social Work Scotland
South Lanarkshire Alcohol and Drugs Partnership
Turning Point Scotland
Western Isles Alcohol and Drugs Partnership

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