

Organisation:

West Dunbartonshire Intensive Assertive Outreach Team (WDOT), Turning Point Scotland

Key Rights Applied:

Right to life

Right to the highest attainable standard of physical and mental health

Right to an adequate standard of living

Background & Context

Through ongoing reflective discussions, the team recognised that although emergency responses were in place, the period immediately following a non-fatal overdose could be confusing or disempowering for the person involved. Some people disengaged at this stage, often due to fear of judgement, previous negative experiences, or uncertainty about what support was available or what was expected of them.

Use of the Charter of Rights and Toolkit:

The Toolkit was used within team reflective practice sessions to explore how people's rights can be unintentionally compromised following crisis, particularly when staff are managing high levels of risk or uncertainty. It supported reflection on how power, decision making, and communication can shift in these situations.

Using the Toolkit encouraged staff to think more critically about:

- How quickly follow-up contact is made and who takes responsibility for this.
- How conversations are framed, ensuring people feel informed rather than directed.
- How options are offered clearly and honestly without pressure or expectation.

This reflection led to practical changes in how follow-up is prioritised and how conversations are approached, with greater emphasis on listening first and supporting people to make informed choices.

Support following a non-fatal overdose is approached holistically, recognising that substance use may not be the only factor affecting risk or engagement. The team consider immediate practical needs such as access to food, appropriate clothing, physical health care, and digital connectivity, alongside wider personal, social, and emotional factors. Taking a whole person approach helps ensure that unmet needs are not overlooked, barriers to engagement are identified and individuals are supported to make informed choices about their wellbeing in a way that respects dignity, autonomy, and rights.

Results to Date:

- Improved continuity of contact following non-fatal overdose, with individuals more willing to engage in follow-up conversations. People appear more open when support is offered quickly and in a non-judgemental way.
- Increased uptake of harm reduction, wellbeing, and practical support.
- Improved coordination with partner services, helping to reduce gaps or delays in ongoing support.
- Staff feedback has been positive, with increased confidence in having open, honest conversations that balance safety with respect for autonomy and rights.

Lessons Learned:

- Importance of the period immediately following crisis. How services respond during this time can significantly influence whether someone feels able to remain engaged.
- Small, practical changes such as timely contact, clear communication, and checking in about what matters most to the individual can make a meaningful difference.
- Supporting people to make informed decisions about their care has helped to build trust and, in many cases, supported safer outcomes.
- The reflective use of the Charter of Rights Toolkit has also highlighted the value of giving staff protected space to think, learn, and develop practice together.

Recommendations for Others:

- Use the Charter of Rights Toolkit as a reflective and developmental resource rather than a compliance exercise.
- Create space for honest discussion about risk, power, and professional judgement.
- Start with one area of practice and test small changes.
- Involve lived experience, where possible, to ensure that changes remain grounded in what people actually find helpful.