



## Argyle & Bute Addiction Service (Oban)

|                                               |                                                                                            |
|-----------------------------------------------|--------------------------------------------------------------------------------------------|
| Service name:                                 | Argyle & Bute Addiction Service (Oban)                                                     |
| Address:                                      | Market Street Centre<br>Market Street<br>Oban                                              |
| Town:                                         | Oban                                                                                       |
| Postcode:                                     | PA34 4HR                                                                                   |
| Telephone number:                             | 01631 571294                                                                               |
| Fax number:                                   | 01631 571294                                                                               |
| Health board area:                            | Highland                                                                                   |
| Local authority area:                         | Argyll And Bute                                                                            |
| Alcohol and Drug Partnership (ADP) area:      | Argyll And Bute                                                                            |
| Type of service:                              | Statutory                                                                                  |
| Nature of service:                            | Community Based                                                                            |
| Referrals:                                    | GP, Health Professional, Social Work, Court,<br>Other (please specify below)               |
| If other has been selected, please specify:   | Self referral and referral from any agency<br>applicable to harm reduction part of service |
| Client access (please select all that apply): | 16-18, 18+, Non-gender specific, Other (please<br>specify below)                           |

### Service Access

|                         |                                                                                                                                                                                 |
|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Opening days and times: | Monday: 9.00am - 5.00pm<br>Tuesday: 9.00am - 5.00pm<br>Wednesday: 9.00am - 5.00pm<br>Thursday: 9.00am - 6.00pm<br>Friday: 9.00am - 5.00pm<br>Saturday: Closed<br>Sunday: Closed |
| Service access:         | By Appointment, No Appointment Required,<br>Home Visits, Contact Address Required                                                                                               |

### Substances treated/targeted:

|                                       |                                                                                                                                                                                                                                                                                                                                                                                                         |
|---------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Substances treated/targeted:          | Yes                                                                                                                                                                                                                                                                                                                                                                                                     |
| Selected substances treated/targeted: | Heroin, Dihydrocodeine or other<br>Opiates/Opioids, Cocaine, Amphetamine or<br>other Stimulants, Cannabis or Synthetic<br>Cannabinoids, Diazepam (Valium) or other<br>Benzodiazepines, MDMA/Ecstasy or other<br>Empathogens, Ketamine, Methoxetamine or<br>other Dissociatives, LSD and other<br>Psychedelics, Solvents/volatile substances,<br>Prescription medication, Over the counter<br>medication |

|                                        |                                             |
|----------------------------------------|---------------------------------------------|
| Advice and information:                | Yes                                         |
| Detoxification as part of the service: | Yes                                         |
| Detoxification options:                | Home Based Detox, In-Patient/In-House Detox |

### **Mental health service**

|                                                                            |                                                                                                                                                                                |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Mental health: does your service provide mental health support and advice? | Yes                                                                                                                                                                            |
| Mental health support options:                                             | As part of the service<br>Depression, Anxiety/Phobic disorder, Physical Abuse, Sexual Abuse, Self Harming, Eating Disorders, Bipolar Disorder, Psychosis, Personality disorder |
| Mental health support option types:                                        |                                                                                                                                                                                |

### **Outreach service**

|                   |            |
|-------------------|------------|
| Outreach:         | Yes        |
| Outreach options: | Streetwork |

### **Rehabilitation and other services**

|                                             |                                                                      |
|---------------------------------------------|----------------------------------------------------------------------|
| Rehabilitation and other services provided: | Education and Training, Sexual Health, Talks/training                |
| Needle exchange:                            | No<br>Harm Reduction Service will see clients without an appointment |

### **Further information**