

**29 MAY 2014**

Argyll and Bute ADP – Update Report for Council PRS Committee

1.0 SUMMARY

- 1.1 The Argyll and Bute Alcohol and Drug Partnership (ADP) is a partnership of statutory and voluntary organisations working together to achieve a reduction in the harmful effects of alcohol and drugs on both individuals and the wider community.
- 1.2 Significant work has been undertaken recently by the Argyll and Bute ADP to ensure that it is in the best possible position to support the delivery of high quality services to those impacted by drug and alcohol addictions.
- 1.3 This update report to the Council PRS Committee provides information on the existing governance arrangements for the Argyll and Bute ADP and on progress to offer assurance that the priorities in relation to addiction services as laid out within the SOA and associated delivery plans are on track and that a process is in place to support these priorities on an ongoing basis.

2.0 RECOMMENDATIONS

- 2.1 It is recommended that the PRS Committee note content of this update report.

3.0 DETAILBackground to ADPs and Governance Arrangements

- 3.1 Alcohol and Drug Partnerships (ADPs) were formed as a result of the decision of the Delivery Reform Group set up by the Scottish Government in 2008, who identified the need for reform of the delivery of drug and alcohol services. ADPs were formed under a framework which set them as strategic partnerships which help locally deliver the outcomes of Community Planning Partnership (CPPs) which relate to alcohol and drugs. The Lead Agency for alcohol and drug services is NHS Highland who annually receive, administer and are accountable in audit terms for budget resources provided by the Scottish Government

- 3.2 The ADP reports to the Argyll and Bute Community Planning Management Committee and governance on its activities is also provided through the Argyll and Bute Strategic Health and Social Care Partnership. The internal governance from NHS Highland as lead agency for alcohol and drugs is undertaken through the Argyll and Bute CHP Committee.

Historical Issues within Argyll and Bute ADP

- 3.3 Prior to 2011, relationship issues had developed between different partners which was often characterised as an inter-sector dispute between the statutory services delivered by ABAT (a shared service managed by NHS Highland encompassing nursing and social work) and 3rd sector service providers. In reality however the relationship issues did not involve all 3rd sector organisations and in some areas good working relationships were evident. What was clear however was that the focus of the disputes was the annual grant process which determined the allocation of ADP budget and which was not founded on a clear strategy, formal contracts for services and was not the subject of detailed contract monitoring.

Addressing These Issues – The Strategic Direction

- 3.6 In 2012, the ADP Chair invited all partners to attend a development day to seek to resolve the relationship issues and set out a strategic vision and direction for the partnership. This was derived from conversations he had undertaken with parties from across the partnership and reflecting different levels and perspectives. At that session the vision and direction was unanimously agreed.
- 3.7 The Argyll and Bute ADP agreed an overarching process commencing with the commissioning of an area needs analysis for alcohol and drug services and featuring the following sequential steps:
- agreeing a service strategy related to a local outcomes framework;
 - developing a service delivery plan;
 - creating a Commissioning Plan with associated service specifications for both statutory and non-statutory services
 - establishing new commissioned contracts for the delivery of those services through a competitive procurement process through a tendering programme; and
 - establishing formal contract management arrangements; and establishing a performance management and reporting framework.
- 3.8 The Needs Analysis was completed by an external consultant originally from Glasgow University and following significant challenge was finally accepted. The Argyll and Bute ADP Strategy based on the needs analysis was finalised and agreed by the Partnership at the beginning of 2013. The development of the 2013-2016 strategy sought to develop open, transparent and best working practices through a series of key actions under the following four ADP priorities:

1. Health in Argyll and Bute is maximised and communities feel engaged and empowered to make healthier choices regarding alcohol and drugs
2. Effective integrated care pathways are established, offering a flexible range of services from assessment to recovery is in place in Argyll and Bute
3. Individuals, families and communities in Argyll and Bute are protected against substance misuse harm
4. Children affected by parental and personal substance misuse are protected and build resilience through the joint working of adult and children's services in Argyll and Bute

3.9 These key actions were expanded upon in the ADP delivery plan which was approved in January 2014. The aim of the delivery plan being to programme the actions identified to achieve the strategy and to identify the resource and timescales required to do so. The delivery plan has also helped to increase confidence across a range of stakeholders (including service users, their families, service providers, the CPP and the Scottish Government) that high quality services, are being delivered. In developing the delivery plan, the ADP consulted widely, hosting workshops across Argyll and Bute and consulting with service users.

Work is continuing to support the monitoring of the outcomes identified within the delivery plan and the associated performance measures, including HEAT targets. An ADP scorecard will now be built into the Pyramid performance management system.

Moving Towards Commissioning

3.10 In July 2013 the ADP began the process of preparing service specifications for both the non-statutory and statutory services and agreed a commissioning process. This involved partners from both statutory and 3rd sectors. Work is well underway with this and it is expected that the non-statutory services contracts will be awarded in August 2014 with a contract start date in November 2014. A new service specification for the statutory services, the Argyll and Bute Addictions Team, will be in place for July 2014.

3.11 This stage of the process was taken forward by the ADP Commissioning Group which was formed by the ADP Executive Group to lead the work on developing service specifications for the statutory and non-statutory services. The ADP Delivery Group (which has representation from the statutory sector, the 3rd sector and from local community fora) agreed the membership of the Commissioning Group. After initial meetings of the Commissioning Group, two separate working groups were formed; one to develop the service specifications and the other to proceed with the tender process. The service specification group had three Third Sector forum representatives alongside the ABAT and ADP support team representatives to develop the specifications for both services.

- 3.12 The specifications have been developed in line with national and local priorities, linking the work of both services to complement the overall service delivery. The third sector representatives on the specification group were from Kaleidoscope, Encompass and Oasis.
- 3.13 The second group, the Tender Process Group, worked separately to develop the tendering and contracting pathway and documentation, and to oversee the process of awarding Third Sector contracts via the Council's procurement process. This group was made up of representatives from Argyll and Bute Council, NHS Highland and the ADP support team. This membership was restricted due to the confidential nature of the work this group required to carry out to enable the tender process to move forward keeping the integrity of this process intact. The Council's Commissioning and Procurement team were however engaged to ensure all relevant procurement regulations are being met and there is financial probity assured in the process.

Opiate Replacement Therapy (ORT) Services in Kintyre

- 3.14 Kintyre is one of the few remaining places in mainland Scotland where ORT Services are not available locally to addicts seeking to enter a programme of recovery. Currently a small number of recovering addicts have to travel 3 times a week to Dumbarton, often by public transport, to receive prescription for the replacement drugs (the most well known by name is methadone). Successive Scottish Govt Ministers have met with NHS Highland and the ADP and urged the development of a local service however the progress has been stalled by significant public opposition to the service and the resultant reluctance of local GPs to be seen to support the service.
- 3.15 To seek to move the issue forward NHS Highland firstly appointed two salaried GPs and latterly trained a nurse prescriber to support the commencement of services. A working group had been set up involving local statutory services, community representatives and the local 3rd sector alcohol and drug service provider. The group was established to consult on arrangements for delivering these services but appears to have been misinterpreted by some as having a veto on whether or not these services should or should not be provided.

A limited service to recovering addicts coming off drug treatment orders finally commenced in February 2014 and work is continuing to consider how the service could be made available to other resident addicts seeking to enter recovery.

Liaison with Scottish Government

- 3.16 The ADP Coordinator has had a number of meetings with Roseanna Cunningham, Minister for Community Safety and Legal Affairs where she has urged the development of services in Kintyre. Dr Margaret Somerville, Director for Public Health for NHS Highland has recently written to the Minister to confirm this position.

3.17 The ADP has kept in close contact with the Scottish Govt National ADP support team to take advice through the overall strategic development process and have latterly agreed with them they would be involved in reviewing the service specification and tender evaluation processes to ensure a further level of objective scrutiny on the process.

General Communications

3.18 A communication and engagement plan has recently been agreed and by producing clear and meaningful communication material the ADP aims to:

- Through communications campaigns, increase the uptake of drug and alcohol services in Argyll and Bute
- Raise the profile of substance misuse, the ADP and ADP Partners amongst professionals in wider settings, individuals, communities and organisations to ensure they are well informed and non-judgemental
- Develop improved communications to build confidence and engagement in the work being done in Argyll and Bute to tackle substance misuse and, to educate the communities of Argyll and Bute about drugs and alcohol information to those affected by drug and alcohol issues and their friends and families.

ADP Structures

3.19 Finally the governance of the ADP has recently been revised and simplified. The Lead Officers Group has been renamed the Executive Group, currently chaired by Cleland Sneddon, Executive Director of Community Services. The Implementation Group has been renamed the Delivery Group, currently chaired by Agnes Harvey, service manager of Kaleidoscope. The Delivery Group reports to the Executive Group. A new Performance Management and Resourcing Group responsible for monitoring the implementation of the delivery plan, finance and workforce issues has been created as a subgroup of the Delivery Group. The seven local forums continue to exist as previous reporting into the delivery group these being Bute, Cowal, Helensburgh and Lomond, Islay, Kintyre, Mid Argyll and Oban. In addition standalone groups continue to exist as previous such as the Drug Related Deaths Review Group.

3.20 In conclusion, there has been a significant change in the structure and support for the ADP in recent months and there is a real commitment from all partners in both the statutory and non-statutory services to work together to achieve the strategic aims of the Alcohol and Drugs Partnership in Argyll and Bute.

Cleland Sneddon
Executive Director Community Services
Chair Argyll and Bute ADP Executive Group