

INTEGRATION JOINT BOARD

Date of Meeting: 25 November 2020

Title of Report: Alcohol & Drug Partnership Annual Report

Presented by: John Owen, Chair, Argyll and Bute Alcohol and Drug Partnership

The Integration Joint Board is asked to:

- Discuss the detail of the Annual Report and highlight any specific actions they would like to see the ADP take in relation to its content.
- Approve the report for publication

1. EXECUTIVE SUMMARY

1.2. The Argyll & Bute ADP Annual Report introduction, by Independent Chair of the ADP, John Owens, highlights the achievements and plans for the coming year. The Terms of reference are presented to give readers an understanding of the membership and protocols of the ADP. The annual report provides detail of several key pieces of work including the Recovery Oriented System of Care, which is required by the Scottish Government, and examples of service practice around treatment and recovery.

1.3. The ADP reports against two national targets

- 1) Waiting Times – 90% of people seen within three weeks of referral. This target has been met.
- 2) Alcohol Brief Interventions – the target of 1028 ABI per year hasn't been met. A plan to increase delivery within Hospitals and Primary Care is included.

1.4. Work with young people and families reported and provides details on school-based support work and work done by the family support groups.

1.5. Details of positive work around the inclusion of representatives with lived and living experience as well as the first Peer Led Recovery Advocacy Service in Scotland are given.

1.6. Work undertaken in conjunction with the Community Justice Partnership to increase support for people coming out of prison or Police Custody is highlighted.

1.7. Details of the ADP finances are presented at the end of the report.

2. INTRODUCTION

The Alcohol & Drug Partnership is a Strategic partnership with direct reporting responsibility to the IJB. The ADP are required to submit an Annual Report to the Scottish Government, using their specified proforma, annually in October detailing action undertaken in the preceding financial year.

In line with the reporting requirements, the Scottish Government report was approved by the HSCP Chief Officer and the Chair of the ADP in late October 2020. The report presented today is adapted from the Scottish Government Report and provides more detail and specific examples of good practice in Argyll & Bute.

3. DETAIL OF REPORT

- 3.1 Argyll & Bute ADP presents its Annual Report. The introduction, by Independent Chair of the ADP, John Owens, highlights the achievements over the last 12 months and sets out the plans for the coming year in the context of Scottish Governments Rights, Respect and Recovery Strategy. The Terms of Reference are presented to give readers an understanding of the membership and protocols of the ADP. The document then goes on to highlight several key pieces of work.
- 3.2 The report notes the requirement for each ADP to have a Recovery Oriented System of Care (ROSC in place). Argyll & Bute ADP have developed a ROSC with support of Scottish Drugs Forum which aims to put people at the centre of service delivery and link services together with the aim of the best placed service meeting the needs of the people in recovery. The next page gives some examples of Treatment and Recovery practice from Argyll & Bute Addiction Team (ABAT) and We Are With You (WAWY). It also presents a list of (some of) the treatments and interventions available in Argyll & Bute.
- 3.3 Details of national targets the ADP has to report on are presented on the next page. As noted previously these are:
 - 1) Waiting Times – 90% of people seen within three weeks of referral to the service. The partnership have consistently met this target for several years.
 - 2) Alcohol Brief Interventions – the HSCP target for delivery of 1028 ABI per year hasn't been met in recent years. The ADP intends to work with ABAT and HSCP staff to increase ABI delivery in hospital settings and is currently looking at options for re-introducing a Local Enhanced Service for GP's.
- 3.4 The report presents details of the Trauma Informed Approaches used by both ABAT and WAWY to ensure services are sensitive to the needs and experiences of people. It then presents information regarding the use of Residential Rehabilitation by services in Argyll & Bute. It notes different approaches used to identify and support people with problematic alcohol use.
- 3.5 The report moves on to look at the support offered to young people in Schools in partnership with the Education Department. A series of graphs provide details on the type of support/education and the breakdown of

those using the service. A list of other school-based work supported by the ADP is also included.

- 3.6 The school-based work links into the ADP approach to Getting It Right for Everyone, and the following provides more detail on the – school-based work. It also highlights plans for a Needs Analysis which will support the future delivery of services for young people affected by their own or someone else’s alcohol and/or drug use. There is then a brief introduction to Family Support group work the ADP has supported and a list of media campaigns we have highlighted to partners.
- 3.7 The ADP has worked hard to get to a point where people with lived and living experience of drug and alcohol use and harm are represented in the ADP. The annual report looks at the range of activities and developments to involve people with lived and living experience in the planning and delivery of services in Argyll & Bute. As a direct result of the engagement work the ADP has undertaken Argyll & Bute has become the first area in Scotland to establish a peer led Recovery Advocacy Service in partnership with Lomond and Argyll Advocacy Service and others.
- 3.8 Another example of good practice is the Helensburgh & Lomond Family Support group. Their brilliant work has been driven by volunteers in the Helensburgh & Lomond area and has had a major impact on families and individuals in recovery. Their story is presented for the reader. Alongside the Family Support group, work with the Recovery Communities across Argyll & Bute helps support the recovery of many people. The wide range of work they deliver is highlighted within the annual report.
- 3.9 The ADP Coordinator has worked in partnership with the Community Justice Partnership Lead Officer over the last year to look at developing more integrated pathways for people leaving custody and returning to the community.

4. RELEVANT DATA AND INDICATORS

Waiting Times – In 2019/20 services (ABAT and WAWY) met the waiting times target of 90% of people seen within 3 months.

Alcohol Brief Interventions - In 2019/20 the ADP/HSCP delivered 209 ABI against a delivery target of 1028.

5. CONTRIBUTION TO STRATEGIC PRIORITIES

The annual report includes information on the ADPs two national targets, Waiting Times and Alcohol Brief Interventions (ABI). The ADP has consistently met the Waiting Times target but, in recent years, there has been a significant drop in ABI delivery. The decision to remove the payment for GP delivery of ABI was taken in light of a reduction in funding from the Scottish Government to ADPs. The anticipated increase in ABI deliver across other sectors did not happen. The ADP has agreed funding of a nursing post to lead on the embedding of ABI within the HSCP and is currently considering introducing a new GP Local Enhanced Service for ABI.

6. GOVERNANCE IMPLICATIONS

None

6.1 Financial Impact – ADP 2019/20 funding by source and expenditure are detailed at the end of the report. The Scottish Government has committed to funding alcohol and drugs interventions through the ADP structure, however, there is a Scottish Parliamentary election due to take place in May 2021 and there can be no certainty of funding priorities beyond this date.

6.1 Staff Governance – No implications

6.2 Clinical Governance – No implications

7. EQUALITY & DIVERSITY IMPLICATIONS.

Not required for this document

8. GENERAL DATA PROTECTION PRINCIPLES COMPLIANCE

Data protection has been considered in the writing of the annual report.

9. RISK ASSESSMENT

Not required for annual report

10. PUBLIC & USER INVOLVEMENT & ENGAGEMENT

Not required for annual report (however there are details of ADP involvement and engagement work within the report).

11. CONCLUSIONS

The ADP Annual Report details actions across a range of priority areas in line with the Scottish Governments reporting requirements. It highlights good practice in advocacy, involvement of lived and living experience and family support. The report also indicates where the ADP need to improve, specifically on delivery of Alcohol Brief Interventions and the design of future services for Children and Young People. The annual report shows that the ADP has been able to deliver across a wide range of priorities within the budget allocated by the Scottish Government, NHS Highland and Argyll & Bute Council.

12. DIRECTIONS

Directions required to Council, NHS Board or both.	Directions to:	tick
	No Directions required	x
	Argyll & Bute Council	
	NHS Highland Health Board	
	Argyll & Bute Council and NHS Highland Health Board	

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