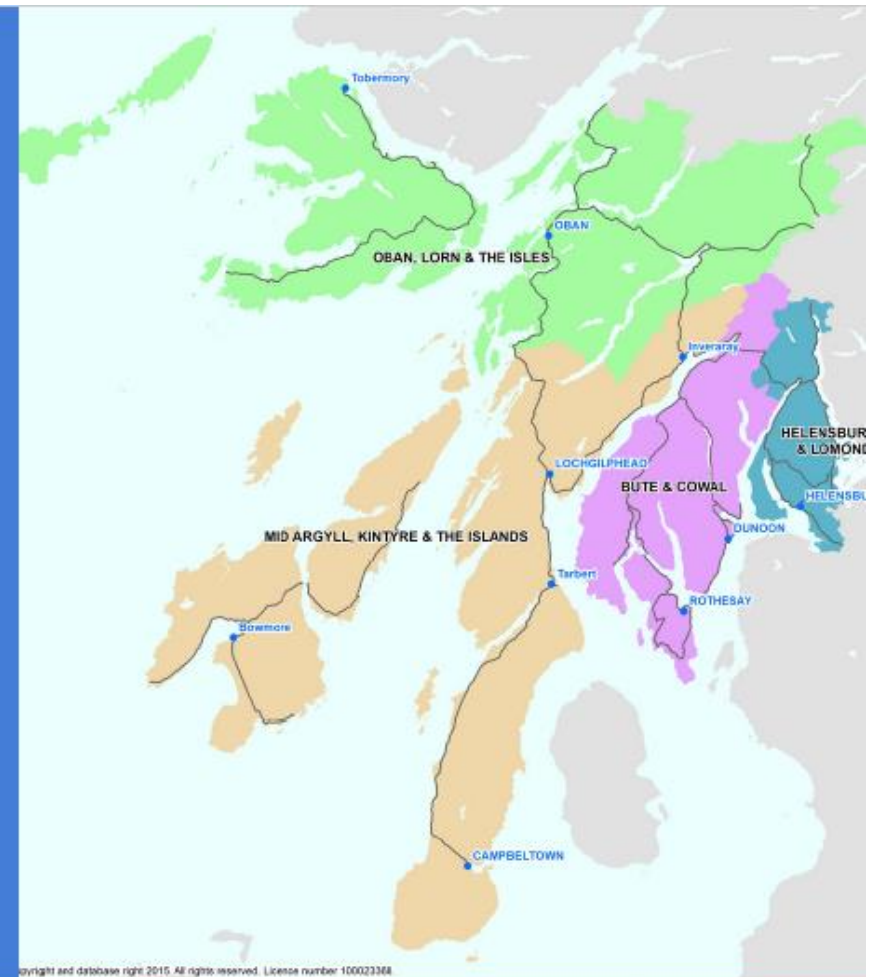




Annual Report 2019 -2020



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Argyll and Bute Alcohol & Drug Partnership

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INTRODUCTION

John Owens - Argyll & Bute ADP Independent Chair

I am pleased to again, this year, provide a foreword to the Argyll and Bute Alcohol and Drug Partnership Annual Report. It has been a privilege to carry out the duties of chair and to witness the progress made through cooperation and collaboration across the partnership to tackle and ameliorate the impact of alcohol and drugs on the lives of individuals, families and communities across Argyll and Bute.

The revised Scottish Government Strategy for Alcohol and Drugs – Rights, Respect and Recovery – is now embedded in our services and approaches across the area and is challenging and encouraging new ways of responding to old problems. RRR's success will ultimately be the delivery of a culture change and a paradigm shift in how we perceive and support individuals and families impacted by drugs and alcohol, bringing openness and respect, with access to supports being non-stigmatising. It will also see drug and alcohol services linking seamlessly with universal and targeted services avoiding a referral-on culture.

Aligned to this strategic shift has been the strengthening of our governance arrangements and improved linkages with the Integrated Joint Board (IJB) and the Health and Social Care Partnership (HSCP) and its lead officers as well as the improved coherence with the priorities of the Chief Officers' Group for Public Protection. The Partnership continues to play an active role in the Community Planning Partnership and Community Justice Partnership and contributes to the overarching Local Outcomes Improvement Plans.

The continued investment from the Scottish Government, Highland Health Board and Argyll and Bute Council has greatly assisted in consolidation and service improvement and ensures the necessary infrastructure across the recovery continuum.

I believe the current partnership is the strongest it has ever been and has achieved a well balanced mix of Statutory, Commissioned, Third Sector and Community representatives who fully understand the challenges of our agenda and have a desire to step out of their own institutionalised or personalised perspectives to create a shared definition and understanding of our localised task and to devise a realistic action plan to improve health and wellbeing across the area.

The report sets out progress to date and I am very proud of the great work done by partners and local networks to enable us to provide a positive report again this year. Much remains to be done and the continued rise of drug and alcohol related deaths remain a constant reminder that these tragic deaths are not inevitable and with concerted community effort we can reverse the numbers. We need to, at the same time, ensure that our practices and approaches are trauma informed and are person-centred whatever the age of the individual.

The report's sections link directly to Rights, Respect and Recovery and I believe provide an accurate picture of the Partnership's progress in articulating a local action plan across the key objectives:

- Education and Prevention;
- Recovery Oriented System of Care (ROSC);
- GIRFEC and Whole Family; and
- Paradigm shift in Justice.

I have great pleasure in commending the report to you and I extend my gratitude to you for your interest, your support and your contribution to the work of the ADP.

John Owens

Argyll & Bute ADP Chair

ALCOHOL & DRUG PARTNERSHIP

- Share experiences and learning on alcohol and drug matters in order to support the HSCP in effective strategic planning
- Contribute to relevant local, regional and national consultation responses or events
- Inform engagement on alcohol and drug matters within their area to assure the community voice is heard
- Participate in learning opportunities to maximise individual member contributions
- Contribute to needs assessment processes to better understand local priorities and service delivery.

MEMBERSHIP

- Independent Chair
- Public Health Specialist
- Lived Experience Representatives x 2
- Family Support Representatives x 2
- Third Sector Representatives x 2
- Housing Representative
- Scottish Fire and Rescue Representative
- Police Scotland Representative
- Statutory Provider Representative
- Non-Statutory Provider Representative
- Child Protection Representative
- Adult Protection Representative
- Education Representative
- Young People Representatives x 2
- Other HSCP staff as required

ADMINISTRATION

Recording of meeting activity will be in action note format issued within 2 weeks of the meeting. Ratification/agreement will take place at the following meeting.

CHAIR

Chair: Independent Chair by appointment.
Co- Chair: Other member by election

AGENDA & PAPERS

The agenda and the papers for meetings will be issued 2 weeks prior to each meeting.

QUORUM

Fifty percent of all members should be in attendance.

LOCATION

Wherever possible meetings will be held in venues which support video or telephone conferencing.

FREQUENCY

The ADP met 11 times in 2019-20r

ROSC in Argyll & Bute

The ADP worked in partnership with Scottish Drugs Forum to create a ROSC centred around the ten identified areas of need for positive recovery. The model, using an easily read visual score, gives an indication of the type of support on offer from each partner and holds details of organisations who could support in one or more of the identified needs areas.

A tiered partnership and referral system supports the smooth transition between services for people in recovery.

During 2019/20 20 the ADP worked with the Third Sector Interface (TSI) to promote the ROSC.

It was widely promoted by SDF to other ADPs. We continue to receive positive feedback regarding our model and are looking at ways that this can be adapted to work more effectively across a wide range of needs.

RECOVERY ORIENTED SYSTEMS OF CARE

Distinguishing features of a ROSC include:

- being person-centred
- being inclusive of family and significant others
- keeping people safe and free from harm
- the provision of individualised and comprehensive services (inc. housing & education)
- services that are connected to the community
- services that are trauma-informed



Score of 1 (centre of the web) = very little or no involvement in this area.

Score of 10 (outside of the web) = main focus of your organisations work.

OLI ● IMAKI ● H&L ● C&B ●

Organisation name: Argyll & Bute Addiction Team

Contact person: Leslie Mackay

Email: HIGH-UHB.ArgyllButeAddictionTeam@nhs.net

Tel: 01546 605602

Address: Argyll and Bute Hospital,
Blarbuie Road,
Lochgilphead,
PA31 8LD.

Brief description: Statutory addiction treatment and recovery service

[Return to Localities](#)

Some of the Treatment and Recovery Support options in place in Argyll & Bute

- Same day prescribing of Opioid Substitute Therapies (OST)
- Methadone
- Buprenorphine and naloxone combined (Suboxone)
- Buprenorphine sublingual
- Naltrexone
- Injecting Equipment Provision (IEP)
- Mutual Aid Partnership (MAP)
- Art Group
- Fitness sessions
- Social gatherings

TREATMENT AND RECOVERY

As part of the Argyll & Bute Addiction Team (ABAT) a Substance Misuse Liaison Service was initiated to improve access to treatment. Pathways have been developed within A&E departments for access to the substance misuse liaison nurse for people presenting with drug and/or alcohol problems. This has worked in tandem with the new Emergency and Urgent Mental Health Service as some of the presentations to their service have also required input due to substance misuse.

The Substance Misuse Liaison Service nurse has access to the weekly Non-Fatal Overdose (NFOD) report. He attempts to follow up with individuals who are either not known to service or not currently on caseload. Those already known are immediately followed up. Both groups are offered Naloxone training and supply. The liaison nurse provides A&E departments with immediate access and Naloxone training/supply.

We Are With You (WAWY) actively promote their service to all GPs & partner agencies. They have developed new ways to reach individuals and families who need support using telephone and video appointments.

Both ABAT and WAWY have staff trained to distribute Naloxone to individuals & their family members. Both teams also provide Injecting Equipment Provision (IEP) utilising outreach and click & collect approaches.

WAWY introduced online Mutual Aid Partnership (MAP) group sessions three times per week. They also offered safe distanced walk & talk sessions with people who are unable to engage by phone/digital. Where required they carried out doorstep welfare checks when they were unable to make remote contact with people.

The ADP's ROSC approach encourages all services to work in partnership with a wide range of local and national service providers to ensure individuals get the best service possible.

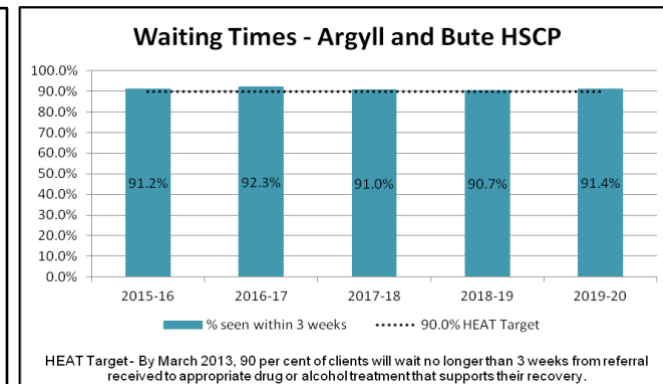
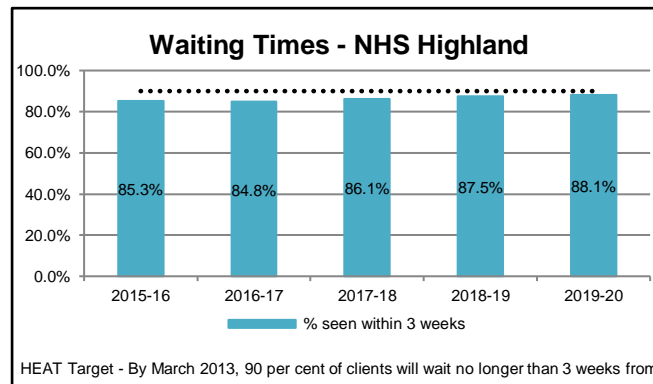
Background and Recovery Plan for ABI Delivery

Argyll & Bute ADP made the decision in 2016 to end the Local Enhanced Service with GP's. This taken against a backdrop of reduced funding to ADPs, high costs of the service (around £72 per ABI) and not meeting the target. Agreement was made to transfer responsibility for the delivery of ABIs to the HSCP. A number of attempts were made to support services to deliver ABIs, however, this never resulted in the expected embedding of ABI delivery within services. External agencies were also engaged to deliver ABIs with limited success.

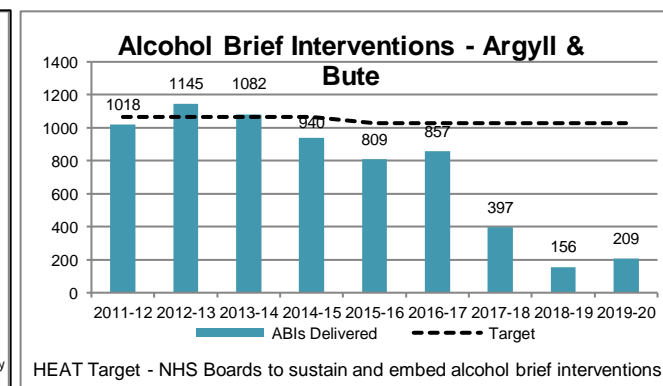
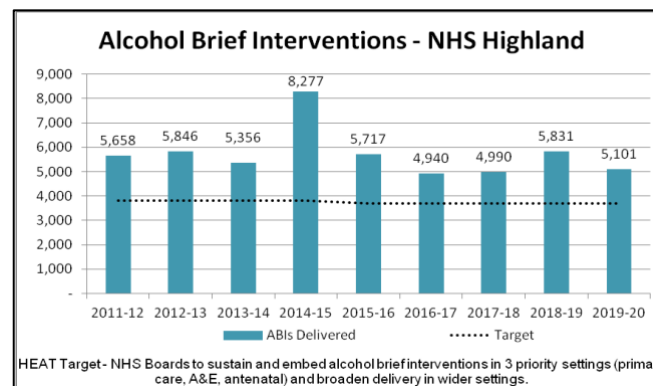
The ADP recently agreed funding of an Alcohol Liaison Nurse post to support delivery in priority settings. In addition, the ADP are currently considering approaching GP leads with a view to introducing a new LES for ABI.

ADP TARGETS

The ADP is responsible for reporting against two national targets, Alcohol & Drug Service Waiting Times and Alcohol Brief Interventions. The Argyll & Bute figures form part of the NHS highland return. Historically Argyll & Bute services have performed well against the waiting times target and have met the target of 90% seen within three weeks of referral for the past five years.



Argyll & Bute have had less success with the Alcohol Brief Interventions target and have, in recent years, failed to meet this target.



Alcohol Screening and Intervention approaches

- Alcohol related cognitive screening (e.g. for ARBD)
- Community alcohol detox
- Inpatient alcohol detox
- Alcohol hospital liaison
- Access to alcohol medication (Antabuse, Acamprase etc.)
- Alcohol Brief Intervention (ABI) in priority settings
- ABIs in non-priority settings

More work is required to improve delivery across all areas. As such the ADP is looking at additional investment including a new post to prioritise this work.

APPROACHES AND REHABILITATION

TRAUMA-INFORMED APPROACH

ABAT - Trauma has been recognised as a significant concern amongst individuals accessing drug and alcohol services and as such this has been taken into account in all our contacts. This recognition can inform the individuals requirements in accessing treatment services, for example, recognition that the gender of the worker can be a barrier.

We Are With You (WAWY) staff are all trained in Adverse Childhood Experiences (ACEs). WAWY launched a new training programme for all staff which establishes a three-phase approach to the delivery of Trauma Informed Care.

RESIDENTIAL REHABILITATION

ABAT – As available funding is limited for residential rehabilitation it is expected that any individual being considered for rehab has engaged with services, has been unable to manage their recovery in the community setting and will commit to engaging in follow up with community services following their placement. ABAT service will refer to either Phoenix Futures in Glasgow or Kings Court, Tighnabruich. ABAT supported 5 people to start residential rehab placement. 2 male and 3 female.

WAWY - 5 service users, 4 male and 1 female, accessed residential rehab for alcohol and/or drugs in Beechwood House, Turnaround and Jericho House with support from both ABAT and Criminal Justice.

SCHOOL SUPPORT

- Work with the education department to provide school based support and education services in all ten Secondary Schools across Argyll & Bute
- Fund Cool2Talk as an opportunity for early intervention and prevention
- Fund and support the S3 Drama which covers a wide range of issues including alcohol use. The pupils have a chance to ask questions of service providers and get to know which services are in their area, how to access them and what type of support they can expect from them.

Figure 1: Pupils receiving 1:1 support in school year 2019-2020

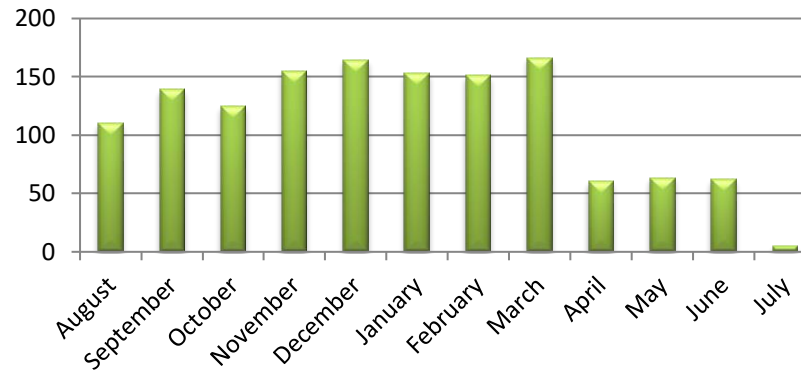


Figure 2 Interactions

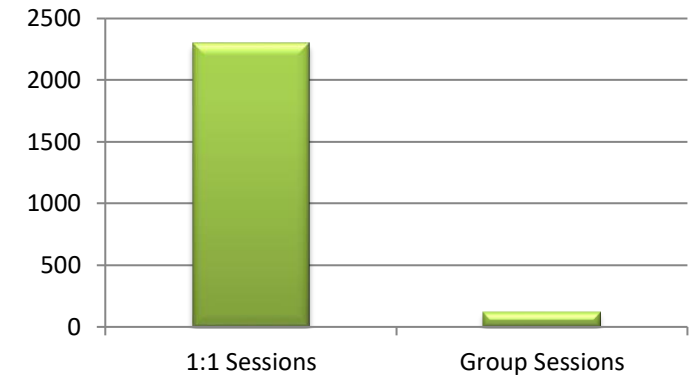


Figure 3: Ages of pupils receiving 1:1 support

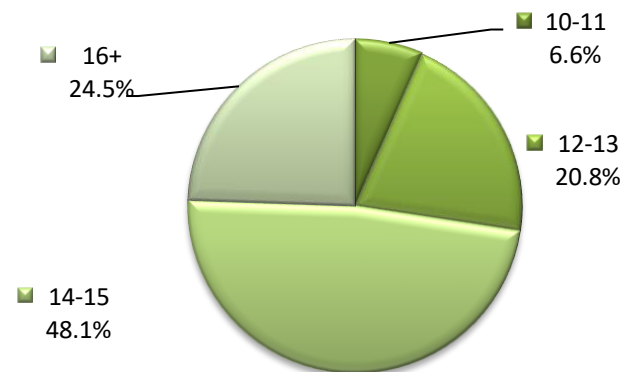
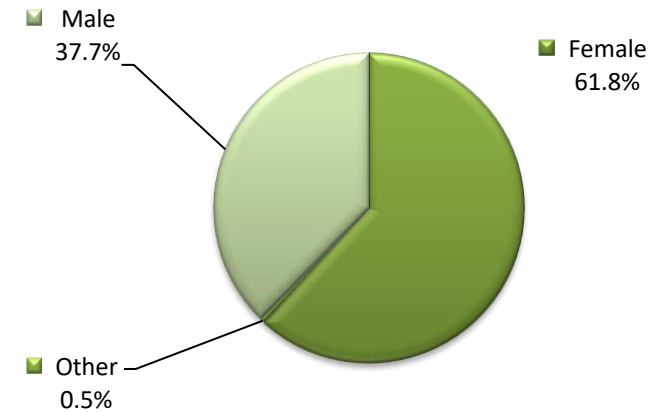


Figure 4: Gender of pupils receiving 1:1 support



Social Media Campaigns Supported by the ADP

- Recovery Walk 2019
- Alcohol Awareness Week
- 2019 HIV Test Week 2019
- World Aids Day 2019
- Human Rights Day 2019
- Dry January 2020
- Time to Talk Day 2020
- Random Acts of Kindness Day 2020
- Sober Spring;
- World Health Day 2020
- International Overdose Awareness Day 2020
- World Maternal Mental Health Day 2020
- Clear Your Head Campaign 2020
- Infant Mental Health Awareness Week 2020
- Carers Week 2020
- Find the Missing Millions Campaign for World Hepatitis Day 2020;
- NHS Inform Covid 19 Alcohol Advice campaign 2020

GETTING IT RIGHT FOR EVERYONE

Support for Children and Young People

The existing school-based support service continued to deliver throughout 2019/20. A review of this service was undertaken in 2018 and concluded, while there was a difference in approach to the delivery of support between the service providers the level of service for the most part met the Care Inspectorate Outcomes. There was evidence that the interventions resulted in improvements in young people's lives and had a positive impact on families. The feedback was shared with service providers in order that they could learn and develop their service provision.

The ADP has worked in partnership with Aberdeenshire ADP to develop criteria for a Needs Analysis in relation to the needs of children and young people around alcohol and drugs. The Needs Analysis will allow the ADP to map and match current service, identify service gaps and adapt or commission new services to meet the identified needs of young people across all communities. The commissioning of the Needs Analysis has been delayed due to the Covid-19 pandemic. In response to this, it is anticipated a desk based, remote Needs Analysis will be commissioned in 2020/21.

Support for Families

Scottish Families (SFAD) have worked closely with the ADP Support Team to train and support volunteer family members to provide Family Support groups in Argyll & Bute. The group in Helensburgh and Lomond has been a great success with very strong links to the recovery community in the area. This model was replicated in the Cowal, Bute and Oban areas but with less success. The learning from this will be used to establish more sustainable family support post Covid-19 restrictions.

INVOLVING PEOPLE WITH LIVED AND LIVING EXPERIENCE

For people with lived experience :

- Feedback/ complaints process
- Focus groups
- Lived/living experience group/ forum
- Board Representation at ADP

For Family Members:

- Questionnaires/ surveys
- Focus groups
- Lived/living experience group/ forum
- Board Representation at ADP

Argyll & Bute ADP has worked with a number of partner agencies to identify and support people with lived and living experience and their families. As a result of the extensive work, involving local services and national organisations we now have people with lived experience and families members sitting as equal members of the partnership. This has been a very good example of strong partnership working which has helped build relationships and partnership between people with lived experience and services. It has also provided an opportunity for building better pathways into and out of services. The partnership approach started with the creation of an involvement strategy which set out the guiding principles on which all involvement has been built.

In 2018 we engaged Scottish Drugs Forum (SDF) to lead on the implementation of the involvement strategy. In 2019 SDF establishment of a Recovery Steering Group which brings together people with lived experiences to highlight the needs and challenges faced by those in recovery and the recovery community in Argyll & Bute.

The ADP has also initiated Scotland's first peer led Recovery Advocacy programme. This has been developed by a partnership of Scottish Recovery Consortium, Lomond & Argyll Advocacy Service and REACH Advocacy. The project has trained up three members of the recovery community to SVQ level 3 in advocacy. Two of these individuals have now gaining employment as part of a new Recovery Advocacy Service (within LAAS). We Are With You also run a volunteer programme throughout Argyll and Bute which helps people with lived experiences gain qualifications and, in turn, aims to help them back in to employment.

ADVOCACY

A First for Argyll & Bute

With four people completing their training as Lived Experience Advocates earlier this year Argyll & Bute became the first area in Scotland to establish an advocacy service for people in recovery delivered by people with experience of recovery.

Scottish Recovery Consortium aim to establish a National Network of Peer Advocacy Services and will look to Argyll and Bute as a model of good practice. The combination of national and local based partners helped secure the funding for this project and it is hoped the establishment of a National Network will help develop and support this service as we move forward.

Argyll & Bute ADP recognised that there was a need for advocacy services specifically tailored to people affected by their own or someone else's alcohol or drug use. A partnership was established by the ADP involving Lomond & Argyll Advocacy Service, Scottish Recovery Consortium and Reach Advocacy to train people with lived experience as Peer Advocates. The partners successfully recruited and trained 4 individuals from across Argyll and Bute as Lived Experience Advocates. All four successfully completed the Reach Advocacy Rights Based Approach SQA Advocacy Award.

With the support of the ADP LAAS secured funding to establish a Recovery Advocacy Project with three Lived Experience Advocacy Workers based in Helensburgh, Dunoon and Oban. The service will offer individuals, who are struggling with complex issues and seeking recovery, one to one Rights Based Approach Independent Advocacy. It will enable them to have purposeful & meaningful conversations with a range of services, which may include their GP, Housing Services, Community Learning, Criminal Justice, Debt Advice and Welfare Rights. This service will support people, who often feel marginalised and struggle to overcome many hurdles and barriers, to feel better connected to services, their communities and have real and significant opportunities to explore recovery. It will ensure the voices of people in recovery are heard, respected, valued and included in order that we can tailor necessary and vital services to best support them.

Prior to the Covid lockdown LAAS started setting up regular Advocacy Drop Ins at all Recovery Cafes across Argyll & Bute. LAAS will continue to work in partnership with SRC, Scottish Families and Recovery Cafes, and will have the Scottish Governments Strategy. "Rights, Responsibilities and Recovery", embedded into our work.

HELENSBURGH & LOMOND FAMILY SUPPORT

What Do Family Support Group Offer?

- Focused groups which acknowledge and accept the experiences of each member
- Lived experience forums that can help build better services for people in recovery and their families.
- An equal voice on the ADP through their own dedicated ADP Representative
- Whole Family support aimed at supporting the needs of partners, parents and children as well as the individual in recovery

Argyll & Bute's first Family Support group was established, with the support and funding from the ADP, in Helensburgh in October 2018 by two family members with experience of caring for and living with someone with drug and/or alcohol dependency issues. With their support a second group was established in Dunoon.

The Helensburgh group meets weekly and provides an opportunity for every member to talk about how their week has been with their loved ones either as an open update to the group or in a 1to1 discussion. All the group members report that the group has helped them make significant progress within their lives. There has also been an opportunity for them to take part in CRAFT training (Community Reinforcement And Family Training) free of charge. CRAFT is a comprehensive behavioural programme that teaches families to optimise their impact while avoiding confrontation or detachment. The group also attended the 2019 Recovery Walk in Inverness and the Connecting Families event in Dunoon, hosted by Scottish Families, which gave them the chance to meet other family groups within Argyll & Bute. They also hosted a Christmas Dinner and night out.

In March, with additional funding from the ADP, the group hired another room within the building and create a space for children affected by a parent or siblings alcohol or drug use. They used this space to support activities including homework groups and arts and crafts. Although the Covid-19 pandemic has forced the closure of the church hall the family support group continues to provide one to one support to members and have established a regular socially distancing walking group and small meetings for lunch in local restaurants. They have received donations of bags of shopping and have been distributing these to, incredibly grateful, group members. They plan to continue meeting and supporting members in whatever safe way they can and are all looking forward to a time when they can return to hosting their regular meetings in the Church Hall.

RECOVERY COMMUNITIES

Recovery Communities in Argyll & Bute

- Oban
- Helensburgh
- Dunoon
- Mid Argyll/Kintyre

Activities include:

- Support meetings
- Indoor and outdoor activities
- Arts & Crafts
- Quizzes
- Cooking
- Hot food available
- Hairdressing
- Growing veg
- Meeting other groups
- Local campaigns
- Music groups
- Outings
- Christmas party
- Support members to attend the Scottish Recovery Walk

The Recovery communities in Oban, Helensburgh, Dunoon and Mid Argyll/Kintyre all expanding their membership. The communities are primarily led by people with lived experience and all have people with lived experience involved in the programming and organisation of the regular activities.

Oban successfully introduced a Green Shoots project which supports people to grow fruit and vegetables, build their produce knowledge and learn gardening skills. Oban and Kintyre both have weekly music groups which are open to anyone with an interest in taking part or learning new skills.

Argyll & Bute recovery communities have historically been independent of one another; however, their links have been strengthened through the creation of a Recovery Steering Group supported by SDF as part of the ADP's Involvement Strategy. The Recovery Steering Group aims to represent all of the Recovery Communities and develop a collective voice on their behalf.

The ADP Support Team provided financial support and, along with several ADP partners, worked with each of the recovery communities supporting them to offer programmes including recovery cafes, group meetings and voluntary opportunities.

The lockdown has seen a move to online meetings and support as well as the establishment of walking and talking groups in some areas. Recovery Groups and meetings offer a vital element of support to a vulnerable, and often hidden, population within our communities. The inability to gather as a result of the Covid-19 pandemic will have a profound impact on these groups and the people who rely upon them for support.

POLICE CUSTODY TO COMMUNITY PATHWAY

The ADP, in partnership with Community Justice, Criminal Justice, Police Scotland and We Are With You, established a Police Custody to Community pathway for people who wished to speak to a member of staff from We Are With You.

The offer of support is not limited to those with identified needs associated with their use of alcohol or drugs but, by using the ADP ROSC, can link into a wide range of services and opportunities. We Are With You function as a first point of contact and link people into the appropriate service

PUBLIC HEALTH APPROACH TO JUSTICE

The ADP Coordinator and Community Justice Coordinator have worked closely to ensure there is a shared approach to supporting people within the criminal justice system. This has included joint working on strategic planning and development of approaches. The Community Justice Coordinator secured funding through the Scottish Governments Drug and Alcohol National Funding Programme to undertake an analysis of the experiences of people leaving prisons and moving back into the community. How smooth, or otherwise, is their transition into services in Argyll & Bute. The findings from this will be used to redesign and develop more effective pathways which ensure people don't fall through the gaps when leaving prison.

The Custody to Community Pathways for people leaving Prison and returning to Argyll & Bute are aimed at ensuring all are provided with Naloxone on liberation. As there is no prison in Argyll & Bute, and people can be held in a range of prisons, the work to ensure an equitable approach has involved discussing between the Community Justice Coordinator and a number of Prison Governors.

Where required, prior to liberation, the prison addiction staff contact the Argyll & Bute Addiction Team in order to continue with any clinical treatments in the community. This approach has worked well for the continuation of prescribed methadone and buprenorphine.

ADP FUNDING

| Funding Source (If a breakdown is not possible please show as a total) | £ |
|--|------------------|
| Scottish Government funding via NHS Board baseline allocation to Integration Authority | 972,277 |
| 2019/20 Programme for Government Funding | |
| Additional funding from Integration Authority | 820,232 |
| Funding from Local Authority | |
| Funding from NHS Board | 355,931 |
| Total funding from other sources not detailed above | |
| Carry forwards | |
| Other | |
| Total | 2,148,440 |

| Total Expenditure from sources | £ |
|---|------------------|
| Prevention including educational inputs, licensing objectives, Alcohol Brief Interventions) | 49,835 |
| Community based treatment and recovery services for adults | 1,272,642 |
| Inpatient detox services | |
| Residential rehabilitation services | |
| Recovery community initiatives | 418,772 |
| Advocacy Services | 30,000 |
| Services for families affected by alcohol and drug use | |
| Alcohol and drug services specifically for children and young people | 69,000 |
| Community treatment and support services specifically for people in the justice system | |
| Other | 248,674 |
| Total | 2,088,923 |



A&B Transforming **HSCP** Together

Argyll & Bute Health & Social Care Partnership

If you require this document in large font or in an alternative format please contact us in any of the following ways:

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