

**Agenda Item 17i.**

**Minute of the Highland Alcohol and Drugs Partnership Strategy Group**

DATE: 19.11.15  
 LOCATION: Police Scotland Divisional HQ, Old Perth Road, Inverness  
 CHAIRMAN: Chief Superintendent Julian Innes

*Present:*

Inspector Ewan Henderson	Police Scotland
Karen Underwood	Project Accountant, NHSH
Debbie Stewart	HADP Coordinator
Sharon Holloway	Development Manager, HADP
Sarah MacKenzie	Research & Intelligence Officer, HADP
Mark Holloway	Scottish Prison Service
Cathy Steer	Head of Health Improvement, NHSH
Suzy Calder	Head of Substance Misuse, NHSH
Frances Gordon	Accountant, NHS Highland
Elaine Featherstone	Addictions Counselling Inverness
James Maybee	Criminal Justice Service

*In attendance:* Aileen Trappitt (Minutes)

*Apologies:* Liz Smart, Keith Alexander and Alasdair MacDonald

Item	Discussion	Action
1	<b>WELCOMES / APOLOGIES</b> The Chair welcomed all present to the meeting and the Chair asked the group to introduce themselves for the benefit of new members.	
2	<b>MINUTES AND ACTIONS FROM PREVIOUS MEETING</b>	
2.1.	The minutes of the meeting held on 25 August 2015, having been circulated, were approved.	
2.2	<b>ACTIONS FROM 25 August 2015</b>  Ongoing actions were discussed and updated on the action log. The Chair asked that the completed actions be removed from the log and file separately  <i>Action: Aileen to create a "Completed Actions Log"</i>	AT
3	<b>STRATEGY DEVELOPMENT</b>	
3.1.	<b>Local Delivery Plan</b>  Debbie summarised the feedback from the Scottish Government for the Local Delivery Plan. There was very strong evidence for	

	<p>Partnership working. The goals that were set were improvement goals, but they were not SMART goals. The government would like to see more on service user input and more specific detail and Time bound goals for the ORT work. However they felt that there was good, Innovative work around NPS. There was evidence of much better use of long term trend data. We are now looking at how we can revise the targets taking the Government comments into consideration. Sarah has revised the baseline for each indicator, they are now based on an average of the last three years. The chair is keen that we measure outcomes that will make a difference.</p>	
<b>3.2</b>	<p><b><i>Annual Report 2014/15</i></b></p> <p>The Annual Report was produced in September. We have produced a summary document. It is difficult to compare with last year as the questions change every year, however we have more green and less red items than last year.</p> <p>We have identified 5 priorities for 2015/16 and the ministerial priorities are also listed. Please advise Debbie Stewart/Aileen Trappitt of any comments you may have.</p> <p><i>Action: Aileen to email the Summary document to the group. Everyone to provide feedback/ comment</i></p>	AT/ ALL
<b>3.3</b>	<p><b><i>Feedback from ADP Chairs Meeting (22.10.2015)</i></b></p> <p>Julian attended the ADP Chairs Meeting on the 22<sup>nd</sup> October 2015 where 4 members were invited to give presentations. Two of the Chairs had been in post for some time (8-10yrs) and were very interesting. It was a very useful day. However we need to keep asking if we have the right people round the table and are we still going in the right direction. There was a very clear message from Scottish Government that they would do their best to ensure that the funding remains the same. There is a requirement for detailed needs assessment. The question is being asked "How many people have recovered?" Recovery is a journey and we should be careful how we benchmark it as everyone's journey is different.</p>	
<b>3.4</b>	<p><b><i>Feedback from the ADP Coordinators Meeting (12.11.2015)</i></b></p> <p>Similar issues were raised as at the Chairs meeting. There was anonymised feedback on the Local Development Plans and an update was provided on DAISy (Drug and Alcohol Information System) Although there has been no sight of a business plan and no funding secured as yet, indications are that this will go ahead. It should go live in April 2017. There is a meeting in January and people will be asked to prioritise this. DAISy should provide good</p>	

	<p>outcome indicators.</p> <p>There is a huge piece of work underway, embedding the Quality Principles as part of the Scottish Government improvement work. The government worked with the care inspectorate to develop 8 quality indicators which relate to the principles. Services will use these indicators to complete a self assessment exercise and provide feedback on how well they are doing. They were given a deadline of the end of December. This timescale is unrealistic. The project involves, staff and user surveys and case auditing. These tasks all take time. The ADP was happy to deliver but not on this timescale. The government are looking to extend the deadline, but there has been no confirmation of this.</p>	
<p><b>3.5</b></p>	<p><b><i>Needs Assessment Framework</i></b></p> <p>The support team are aware that this is a priority. It will be complete for the next meeting in February 2016</p>	
<p><b>4</b></p> <p><b>4.1</b></p> <p><b>4.1.1</b></p>	<p><b>Strategy Delivery</b></p> <p><b><i>HADP Progress Report – Update for November</i></b></p> <p><b><i>Maximising Health – Substance Misuse Toolkit Data</i></b></p> <p>There was a sharp increase in hits on the toolkit on the day the schools started back after the October break. There is now a questionnaire for the toolkit on a banner at the top of the home page</p> <p><u><i>Substance misuse</i></u></p> <p>There are 8 new trainers for ABI and new courses will be run in December. Discussions are also underway with the Youth Action Nurses to develop work young people. There will be an online pilot in September. Elspeth has been promoting the Facebook site. There are now 38 followers. We also had stands at the Fresher’s Fair at the new university campus. The local Festivals have agreed to raise the age to 21 and the number of under 18s and adult can sign in to 2 per adult. Rock Challenge planning is underway</p> <p><u><i>Draft Communication Plan</i></u></p> <p>A draft communication plan was distributed for feedback at the last meeting. We need to develop a protocol for responding to the press. There needs to be engagement with the communications team. We need to challenge the stigma and discrimination and get the good news stories out there</p> <p><i>Action: Debbie to discuss media protocol with the communications</i></p>	<p>DS</p>

	<p><i>team</i></p> <p>Sharon left the meeting at 15.15</p>	
<p><b>4.1.2</b></p> <p><b>4.1.3</b></p>	<p><b>Recovery</b></p> <p>Funding allocations with third sector parties are being finalised. There have been changes to Cross reach. We no longer use Beechwood for out of area people. We have invested in 2 beds for the 2 week programme. This is going really well. There are good connections across the services with Osprey House. We have been advised that the facilitators may need to run more than one group as so many people are attending.</p> <p>The lease on Church Street is due for renewal. It was agreed that we need a city centre facility and this is now with Legal to finalise.</p> <p>Local Publicity in the area has had an impact on business. This happens in peaks and troughs. We have offered to meet with local business' to allay their fears.</p> <p>The biggest challenge is the lengthy wait times, especially for ORT. There are formal appointments and drop in sessions. There are several vacancies creating gaps in the service and adding to the waiting times, these vacancies are now going out to external advert, however recruiting in some areas is challenging.</p> <p><u>ORT group</u></p> <p>There are significant cost pressures in budget, held out with this group. Work is ongoing with Community Pharmacy to look into this.</p> <p><u>Naloxone</u></p> <p>There have been further changes nationally – no longer needs to be a trained nurse that hands out the pack following training. The Scottish Government will no longer be funding this after April. We are monitoring this at present, looking for savings. We are currently spending approximately £16k per year.</p> <p>Suzy thanked the Police for their input to PREVENT</p> <p><b>Protecting the Community</b></p> <p>The police have completed another round of test purchasing, there were two fails.</p> <p>The boxing initiative is proving to be a great success; however there may be funding issues.</p>	

	<p>The Police Youth Volunteers group is running well, there are now 24 members. 8 are about to leave due to age. The youth volunteers can be used for any events accompanied by a guardian.</p> <p>Scripture Union have been working with Altnacriesh, it's still in the early stages but looking positive.</p> <p>The festivals feedback has been both positive and negative, Ewan to arrange a meeting to discuss what input is required to festival planning</p> <p><u>Rock Challenge</u></p> <p>£5000 has been secured from Choices for Life. The Police have to provide a report for Choices for Life on how the funding was utilised.</p> <p>Last year all the performances were great, however they did not all fulfil the brief to discuss Alcohol. It has been suggested that this year there should be an award for the performance that most closely fulfils the remit.</p> <p><u>Community Justice Service</u></p> <p>There are currently 8 authorities in Scotland. The Community Justice bill is going through parliament just now, the result of which will be the scrapping of the Community Justice service authorities in March 2016. There will be a move to integrate the service into Community Partnerships. Discussions are in the early stages as to how this might look</p> <p><u>Prison Service</u></p> <p>There has been a focus on the development of support staff. Mental health training has been completed. There has been a delay with the development of new posts. Client engagement has increased and there have been various family development events, including learn through play workshops aimed at helping kids affected by addictions.</p>	EH
5	<p><b>DRUG RELATED DEATHS</b></p>	
5.1	<p><b>Note of the Drug Related Deaths Prevention and Review Group</b></p> <p>Carried forward to the next meeting</p>	
5.2	<p><b>DRD Review and Prevention Group – Recommendation for Learning and review</b></p> <p>Carried forward to the next meeting</p>	

<b>5.3</b>	<b>Non- fatal OD Flash Report</b>  Carried forward to the next meeting	
<b>6.</b>	<b>BUDGET</b>	
<b>6.1</b>	<b>Financial Statement</b>  Karen Underwood gave a brief overview of the financial statement. There is a predicted under spend, most of which is from the vacancies in North and West operational units. There has been little change in 3 months. Julian to contact the council to ask for their budget report.  Debbie to check back statements for payments to the Criminal Justice Service as we have not had an invoice for some time. James thought this was a non recurrent payment and was no longer being paid.  Julian thanked Karen for her report	<b>JI</b>  <b>DS</b>
<b>7</b>	<b>HADP SUPPORT TEAM</b>	
<b>7.1</b>	Debbie welcomed Aileen to the support team advising that we now have a full compliment. Debbie advised the group that this would be Sarah's last meeting as she would be on Maternity Leave by the next meeting. The group congratulated Sarah and wished her all the best.	
<b>8</b>	<b>FOR INFORMATION AND NOTING</b>  No issues raised.	
<b>9</b>	<b>AOCB</b>  <u>Press release</u>  Suzy advised that there had been a press release yesterday regarding NPS, there had already been 3000 hits and 70 shares on social media. The Press and Journal and the Courier are to do follow up articles.  <u>Progress reports</u>  We would like to continue with the progress reports; perhaps we could look at the progress reports prior to the meeting and bring	

	<p>bullet points to the meeting for discussion.</p> <p><u>New Manager</u> James advised that they would have a new Manager, he would like to invite to the next meeting.</p> <p><u>Third Sector</u> Elaine asked if alternative models were being looked at in the areas with capacity issues, Suzy confirmed that there are discussions underway around changing the working models. We are looking at Pharmacy input, Social Work input and skill mix and support work to free up the capacity of staff that can do the detailed work.</p> <p><u>Recovery Walk</u> Sharon co ordinated a highland wide participation in the Recovery Walk in Glasgow. This was the first year Highland had participated. A short video was played to give some insight into the day and what it meant to the participants.</p>	
10	<p><b>DATE OF NEXT MEETING</b></p> <p>Tuesday 16<sup>th</sup> February 2016 1400 hours in the Board Room at John Dewar Building</p>	