



**Highland**  
Community  
Planning  
Partnership

Com-pàirteachas  
Dealbhadh  
Coimhearsnachd

**na Gàidhealtachd**

Minutes of Meeting of the Community Planning Partnership Board held in the HIE Boardroom, An Lòchran, Inverness Campus, Inverness, and via Microsoft Teams, on Friday 20 September 2024 at 11.00 am.

**Present:**

**The Highland Council:**

Derek Brown, Chief Executive

**Highlands and Islands Enterprise:**

Stuart Black, Chief Executive

**NHS Highland:**

Tim Allison, Director of Public Health

**Scottish Fire and Rescue Service:**

Michael Humphreys, Area Commander (remote)

**The Scottish Government:**

Donna MacKinnon, Scottish Government Place Director (remote)

**High Life Highland:**

Steve Walsh, Chief Executive

**Highland Third Sector Interface:**

Mhairi Wylie, Chief Officer

**NatureScot:**

Graham Neville, Head of Operations - North

**Skills Development Scotland:**

Roddy Bailey, Area Manager

**University of the Highlands and Islands:**

Chris O'Neil, Principal and Chief Executive, Inverness College UHI (remote)

**In attendance:**

Kate Lackie, Assistant Chief Executive – People, The Highland Council

Malcolm MacLeod, Assistant Chief Executive – Place, The Highland Council

Fiona Duncan, Chief Officer - Health and Social Care, The Highland Council (remote)

Pam Cremin, Chief Officer, Community/Highland Health and Social Care Partnership, NHS (remote)

Jen Valentine, Chair, Community Safety and Resilience Delivery Group

Cathy Steer, Chair, Mental Health and Wellbeing Delivery Group

Alison Clark, Chair, Poverty Reduction Delivery Group

James Maybee, Chair, Community Justice Partnership (remote)  
Carron McDiarmid, Chair, Highland Alcohol and Drugs Partnership (remote)  
Gail Prince, Partnership Development Manager  
Melanie Murray, Principal Committee Officer, The Highland Council

**Also in attendance:**

Colette Macklin, Head of Gaelic and Lifelong Learning, The Highland Council  
James Turner, Head of Strengthening Communities, HIE  
Aldene Woodward, Scottish Fire and Rescue Service (remote)

**Mr S Black in the Chair**

**Business**

**1. Apologies for Absence**

Apologies for absence were intimated on behalf of Councillor Raymond Bremner, Councillor Graham MacKenzie (due to technical issues), Eann Sinclair, Sarah Compton-Bishop, Fiona Davies and Chief Superintendent Rob Shepherd.

**2. Minutes of Meetings**

The Board:

- i. **APPROVED** the Minutes of the Community Planning Partnership Board – 5 June 2024, subject to the correction of a typographical error under Apologies for Absence;
- ii. **NOTED** the Minutes of the Community Justice Partnership – 6 March 2024; and
- iii. **NOTED** the Minutes of the Highland Alcohol and Drugs Partnership Strategy Group – 21 May 2024.

**3. Action Tracker**

The Board was asked to review progress of its agreed actions as set out in the Action Tracker which had been circulated.

The following updates were provided:

- in relation to the Scottish Fire and Rescue Service Strategic Service Review Programme, the Partnership Development Manager had now met with the Scottish Government Place Director to discuss the points raised regarding the need for a place and person-based approach to public service change;
- with regard to the Highland Alcohol and Drugs Partnership Annual Reporting Template 2023/24, information on the People First – Language Matters – Partner Pledge had been circulated to partners together with information on The Highland Charter for Climate, Nature and Health; and
- in relation to the possibility of aligning the Children and Young People's Mental Health Fund to the priorities of the Children and Young People's Mental Health Steering Group, a meeting of partners/stakeholders would take place on 1 October 2024 to discuss a way forward.

The Board **NOTED** the Action Tracker and the updates provided.

#### 4. Highland Outcome Improvement Plan – Delivery Plan

There had been circulated Report No CPPB/17/24 by CPP Senior Officers.

During discussion, the following main points were raised:

- ensuring there was a focus on prevention and inequalities was welcomed. However, there was more to be done, and it was highlighted that work was underway looking at metrics and outcome indicators. In addition, inequalities was currently included mainly within the health and family elements of the plan, and it could be expanded more broadly. Others added their support for developing more indicators around prevention and reducing inequalities;
- on the point being raised, it was confirmed that employability pathways to aid recovery could be included under the Employment/Employability theme;
- in relation to the population indicators in the draft HOIP Performance Framework, it was confirmed that “reduce net migration” was a typographical error and would be amended to “increase net migration”;
- with regard to the Shared Approaches to Commissioning theme, the Chief Officer, HTSI, questioned whether she had sufficient leverage to deliver what was set out, and she undertook to liaise with CPP Senior Officers in that regard;
- reference was made in the Delivery Plan to identifying “potential priorities”, and it was suggested it was necessary to be more certain, and to tighten up the language used;
- in relation to measures of success, it was important to be assured that benchmarks were in place, and it was questioned whether that was the case in some instances. It was suggested it would be helpful to have a follow-up report on the health-check process that sat at the point at which the Board would adopt the plan and measures; and
- most of the Prosperity population indicators were around getting people into employment, and it was suggested there should be an indicator relating to average wages or income levels.

The Board:

- i. **AGREED** the updated Delivery Plan, including the responsible delivery group (delivery mechanism) and senior officer sponsor, purpose, deliverables and measures of success, subject to the points raised during discussion; and
- ii. **NOTED** the draft performance framework, subject to the points raised during discussion, and that further work would be undertaken with performance officers from across the partnership to finalise this, along with baseline measures, for consideration by the Board in December.

#### 5. Community Learning and Development (CLD) Plan 2024 - 2027

There had been circulated Report No CPPB/18/24 by the Head of Lifelong Learning and Gaelic, The Highland Council.

During discussion, the following main points were raised:

- the section of the plan on Aligning Partnership Practices was welcomed. In that regard, it was suggested it would be helpful to consider the Planet Youth Icelandic prevention model under the umbrella of CLD, and to have explicit mention of it in the CLD Plan;
- thanks were expressed for the work that had gone into improving the layout of the plan;

- in relation to section 7.3 of the plan, under Community Capacity Building, it was suggested that “HTSI develops a strong third sector in Highland” should be amended to “HTSI supports the development of a strong third sector in Highland”;
- with regard to not only the CLD Plan but all plans that came before the Board, it was questioned whether there was an understanding of current resource commitment across the partnership so changes could be measured over time, and how fragile it was, how susceptible it was to the changing political environment and whether the Board understood the associated risks. Detailed discussion ensued as to how best to achieve a full understanding of the totality of resource, during which it was suggested a systems map with resources aligned to it was needed as, at present, there was a risk in that the Board did not understand the underpinning systems that would enable it to make the changes it wanted;
- reference was made to justice clients and the need to tackle discrimination and stigma and encourage learning, thereby increasing employment opportunities. It having been commented that there was no specific reference to justice in the plan, attention was drawn to the agreed priorities set out in section 2 of the report, which were broad and flexible enough to incorporate the point raised. It was explained that the intention had been not to be too prescriptive so the plan was flexible enough to respond to local needs.

The Board:

- NOTED** the content of the report; and
- APPROVED** the Community Learning and Development Plan 2024 – 2027, subject to the points raised during discussion.

## 6. Highland Green Health Partnership Annual Report

There had been circulated Report No CPPB/19/24 by the Head of Health Improvement, Public Health, NHS Highland.

The issue of future funding having been raised, it was explained that, whilst the funding support from NatureScot had come to an end, there were opportunities for further discussions around the potential for obtaining private funding. It was added that one of NatureScot’s emerging pieces of work was around sourcing private investment into nature outcomes, and that HIE had been successful in securing funding from renewables companies to support the Science Skills Project.

The Board:

- NOTED** the progress of the Highland Green Health Partnership and achievements in Year 6 of the programme;
- NOTED** the priorities for Year 7 of the programme; and
- AGREED** continued support for the work of the Green Health Partnership and the approach to embed Green Health networks with local Community Partnerships.

## 7. Community Justice Partnership Annual Report

There had been circulated Report No CPPB/20/24 by the Community Justice Partnership Manager.

During discussion, the following main points were raised:

- thanks were expressed to Kevin Flett, who had recently been appointed as Community Justice Partnership Manager, for bringing the annual report together in a short timescale;
- attention was drawn to minor typographical errors which would be fed back to the Community Justice Partnership Manager to correct prior to the annual report being submitted to Community Justice Scotland;
- information was sought, and provided, on whether Skills Development Scotland were doing anything nationally in terms of supporting former prisoners into employment;
- discussion took place on the need for more buy-in from the Crown Office and Procurator Fiscal Service and the judiciary which, it was explained, was a long-standing issue both locally and nationally. Concern having been expressed that there was a standing apology from the Sheriff on the Community Justice Partnership, it was suggested it was an issue that needed to be raised nationally, and the Scottish Government Place Director undertook to take it up with Community Justice colleagues.

The Board **APPROVED** the Community Justice Partnership Annual Report 2023-24, subject to the correction of typographical errors referred to during discussion.

## 8. National Community Planning Partnership (CPP) Self-Assessment

There had been circulated Report No CPPB/21/24 by the Partnership Development Manager.

It having been queried whether Independent Chairs were being asked to take part in the self-assessment as they were not Board Members, the Partnership Development Manager undertook to check this with the Improvement Service. Nevertheless, it would be useful for all attendees to complete the self-assessment checklist as the information could be used internally.

The Board:

- i. **NOTED** the development of a national CPP self -assessment and associated briefing session
- ii. **AGREED** that Board Members and attendees would complete and submit individual CCP checklists when circulated; and
- iii. **AGREED** that a Board Development Session would be set up to review the Highland CPP checklist report, once available from the Improvement Service, to identify actions.

## 9. Consultation on a Population Health Framework for Scotland

There had been circulated Report No CPPB/22/24 by the Director of Public Health, NHS Highland, who gave a presentation in amplification of the report.

The Director of Public Health invited comments on the framework and the questions set out in the report, and suggested that any further comments be fed back to him by email within the next week or so.

During discussion, the following main points were raised:

- reference was made to the preventative benefits of sport and physical activity, particularly in relation to diabetes and cardiovascular disease, and it was queried how the proposed Population Health Framework fit with the Physical Activity for Health Framework that was due to be announced imminently. The Director of Public Health

responded that, whilst the links would be there implicitly, he had not seen any explicit link between the two frameworks, and it would be a useful point to feed back. In addition, the links with the natural environment were not adequate;

- it was questioned what the proposed framework was going to accomplish if it was not aligned with other Scottish Government frameworks and did not address the wider macro forces that could affect public health. The framework also did not address the rural population challenges faced in Highland, including the aging population and remoteness;
- for transparency, the Chair of the Highland Alcohol and Drugs Partnership declared a connection to this item given her role as a Non-Executive Director of Public Health Scotland. However, she did not consider it to be a conflict of interest;
- on the point being raised, the Director of Public Health confirmed that when local forecasts on the burden of disease were available he would be happy to bring them to the CPP Board and other forums to have action-oriented discussions on the regional challenges and how to prevent the forecasts from becoming a reality; and
- reference was made to the links between ill-health and lack of employment. The economic inactivity rate was considerably higher than it used to be, and was a significant issue in certain parts of Highland, and it was suggested getting people back into productive work should be a priority.

The Board:

- i. **NOTED** the presentation and the contents of the engagement document; and
- ii. **AGREED** that any further comments on the approach and the questions be fed back to the Director of Public Health by email.

## 10. Place Director Role

Donna MacKinnon, Scottish Government Place Director, spoke to the voluntary Place Director role which she had undertaken since 2017 alongside her senior civil servant role, currently Head of European Relations. There were 32 Place Directors in Scotland, aligned with local authority areas, and it was explained that the purpose of the role was to provide a facilitating link, on both a formal and informal basis, between local authority areas and the Scottish Government. An important part of the role was not only communicating Scottish Government priorities to partners but gathering intel as to how things were being received locally and feeding it back centrally. It was also to support activity informed by local priorities, and events such as ministerial visits. She encouraged partners to contact her if they had any questions or issues they wished her to feed back.

During discussion, the following main points were raised:

- the development at Ardersier Port was cited as a good example of collaboration between local partners and national players. However, that was not the norm, there often being a lack of coordination between local partners and national government, and it was suggested there should be someone within the Scottish Government responsible for ensuring it was playing its part in terms of supporting Highland with large-scale industrial developments and key issues such as housing and transport. In that regard, the voluntary nature of the Place Director role was questioned, and it was queried whether it was likely to become more formal;
- help was needed to navigate and break down the silos that existed within the Scottish Government, which had worsened since the Covid pandemic;
- Inverness was a burgeoning city, and one of the challenges was ensuring the benefits of the economic development opportunities seized there were felt across Highland. Some developments were being funded by the UK Government, and there was a need

for intergovernmental oversight of things such as the Strategic Transmission Investment Programme and housing;

- there was a sense that the scale of the opportunities in Highland were not fully appreciated and understood by the Scottish Government, and local officers had a role to play in terms of communicating to the Place Director not just the problems but the opportunities that existed;
- the Place Director commented that the Convention of the Highlands and Islands (CoHI) should act as a vehicle for cohesion, and that it would be worth considering whether better use could be made of it to achieve a collaborative whole-system approach for Highland. In that regard, the Chair suggested that the Regional Economic Partnership was more significant as it was driving change and asking difficult questions of central government;
- it was necessary to think collectively and imaginatively about how to solve some of the issues raised during discussion;
- there were a lot of smaller projects where there needed to be unlocking between the public and private sector;
- reference was made to earlier discussions regarding social justice and the work being done by Timpsons, and it was suggested that the new prison being constructed in Inverness presented opportunities to work with the private sector to address social justice issues;
- it was considered that the Rural Affairs Directorate was not taking enough of a holistic view, and the Economy Directorate needed to be more aware of the opportunities within Highland and the significant amount of funding coming into the region through network upgrades and on and offshore renewable energy developments. The transition to Net Zero was a huge economic driver, and much of the energy required was going to come from the Highlands and Islands; and
- pre-Brexit, Highland had benefited from a significant amount of European funding. That was no longer the case, and the Scottish and UK Governments needed to consider future funding for the Highlands and Islands as without economic investment there would be depopulation. It was added that the Highland Growth Deal finished in less than two years, and it was questioned what was going to replace it.

The Board **NOTED** the position.

## 11. Communications Strategy

A draft Communications Strategy had been considered at the CPP Board meeting on 5 June 2024. Feedback had been incorporated and, in consultation with Corporate Communications colleagues, the Communications Strategy had been finalised and had been circulated. The strategy applied a framework to the structure of communications across the Partnership, both internally and externally. The aim of the strategy was to create a consistent basis for how the CPP communicated and engaged with communities across Highland.

During discussion, the following points were raised:

- reference having been made to the potential to utilise partners' extensive social media reach to get messages out, it was confirmed that this was alluded to in the strategy under Channels of Communication, but it could perhaps be made clearer; and
- information was sought, and provided, on the fortnightly Highland Council and CPP Community Briefing.

The CPP Board **AGREED** the updated Communications Strategy.

## 12. Partnership Development Team – Year 1 Report, Year 2 Milestones and Quarterly Update June to August 2024

There had been circulated Report No CPPB/23/24 by CPP Senior Officers and the Partnership Development Manager.

In introducing the report, it was highlighted that the Partnership Development Officers had been recruited on temporary contracts for two years, until May 2025. It was important that an early review of the ongoing resourcing requirements was undertaken to consider next steps. Senior officers would progress this and report back to the next Board.

During discussion, the illustration at Appendix 3 of the report was commended. However, it was commented that there was a lack of female representation within it.

The Board:

- i. **NOTED** the Year 1 Report in Appendix 1 of the report;
- ii. **APPROVED** the proposed Year 2 Milestones in Appendix 2 of the report; and
- iii. **NOTED** the Conference and 2024-2027 HOIP Illustration in Appendix 3 of the report.

## 13. Review of Strategic Risk Register

The Strategic Risk Register had been circulated for consideration and review.

On behalf of CPP Senior Officers, the Chair of the Community Safety and Resilience Delivery Group spoke to a number of proposed changes to the register, including updates to the narrative and scoring in respect of several risks, and the proposed removal of 01/20 Reputational; 06/20 CPP Communication; and 08/22 Support and Resourcing for People Fleeing Crisis. Views were sought in relation to 06/21 Pandemic/Influenza Resilience and whether the Board was content that the wider risk around the possibility of another pandemic/influenza outbreak sat within resilience structures. In relation to 10/23 Public Sector Funding, consideration needed to be given to scoring, and it was queried whether it should also include third sector funding.

During discussion, the following points were raised:

- in relation to 06/21 Pandemic/Influenza Resilience, the Director of Public Health commented that a pandemic had been at the top of national Risk Registers for some time, but Covid had highlighted the impact of a pandemic on the population. The risk relating to Covid and Influenza had been downgraded on the NHS Highland Risk Register, and it would therefore make sense to do the same on the CPP Risk Register. He confirmed he would be happy to look at rescoping the risk outwith the meeting;
- there was a public sector funding impact on the third sector but there were also multiple other factors at play, and it was suggested there might need to be a separate risk around third sector funding and capacity in Highland. However, it was questioned whether there was an understanding of what the risks were;
- it was suggested that 08/22 Support and Resourcing for People Fleeing Crisis should remain on the Risk Register as, whilst some elements were business as usual, systems were under severe pressure at present in terms of the resettlement of Afghan refugee families at Cameron Barracks in Inverness;
- 02/20 Failure to deliver against strategic priorities – People, Place Prosperity, and 03/20 Commitment to Partnership Activity might be driven by circumstances that could be linked back to public sector funding; and



- the Chair suggested that any further comments on the Risk Register be fed back to officers outwith the meeting.

The Board **AGREED** that the Strategic Risk Register be revised, taking into account the points raised during discussion, and presented to the next meeting for consideration.

#### **14. Date of Next Meeting**

The Board **NOTED** that the next meeting was scheduled to take place on Wednesday 4 December 2024 at 10.00 am.

The Chair highlighted that the next meeting would be chaired by Sarah Compton-Bishop, Chair of NHS Highland Board. He thanked Board Members and attendees for their input, and officers for their support, during his tenure as Chair of the CPP Board.

The meeting ended at 12.50 pm.



### **Community Justice Partnership Meeting**

Wednesday 19 June 2024, 1400 – 1600hrs,

Police HQ Inverness, Old Perth Rd, Inverness IV2 3SY

#### **Minute of Meeting**

Present: Ross MacKillop (Chair), Jenny Valentine (Police Scotland), Donna Mackenzie (THC), Frances Matheson (HADP), Sarah Malhan CJSW, Irene Johnstone (RASASH), Karen McEwan (Families Outside), Carol Spratt (NHS), Kate Mclean (Elected Member), Scott Watson (SPS), Roddy Bailey (SDS)

In attendance: Mhairi Wylie (HTSI), Briega Nugent (Researcher), Kevin Flett (CJP Manager), Gabriele Buist (CJP Senior Development Officer), Alan Grant (Custody Link Project Manager)

1. Apologies for absence – (standing apologies from Sheriff Matheson)

Chair provided a thank you everyone in the partnership, reflecting on his time as chair, how proud he was of the achievements and advised Jenny Valentine will undertake the interim chair. He welcomed Kevin Flett, newly appointed as CJP Manager.

2. Declarations of Interest
3. Minutes of Previous Meeting – Minutes attached – *Chair*

To be recirculated. No changes noted at this time.

4. Dr Briega Nugent will present her initial findings from the research into female offending in Highland.

MW introduced the background that led to the tasked research and the need to understand female offending.

Presentation will be shared with the note of the meeting.

MW proposed to the group that a round table discussion is required on this issue, bringing Briege into that setting, to explore in more detail these findings.

5. Social work link in with prison/community – *Agnes Sangster CJSW*

Carry the item over to the next meeting.

6. CJ Plan 2024-29 – Paper attached to finalise / sign off – *Mhairi Wylie*

MW advised this is the final sign off of the CJ Plan, 2024 – 2029. This has been circulated previously and has now been through the Community Planning Partnership. Propose thematic approach to the themes of the 5 year plan. This would tie in with the development of delivery subgroups.

No issues were identified, and it was agreed as signed off, with a soft launch to be undertaken.

7. Custody Link Worker Project Update – Paper attached – *Alan Grant*

The paper was there, and AG advised issues around DBI referrals and having stocks of food parcels available out of hours for the custody facility.

CP advised all officers and NHS 24 can do the referral. AG advises the concern is the NHS staff based in the custody suite cannot refer and are there. Similarly, the police custody staff aren't DBI trained for referral. CP to explore the current training and associated costs for the further 6 staff at the custody suite.

SM advise that the foodbanks are very helpful and often provide out of hours emergency packages for issue.

MW advised, as per the report, the ADP requested additional evaluation, intention for an economic health study of the project, and the costs for diversions from prison, for example.

MW raised the issue of funding, it running on emergency funding, and there needs to be joint commissioning of the service and its funding.

BN has done a study for the costs associated with custodial, during and after prison. She will send on a copy.

8. Finance Update – Verbal update – *Mhairi Wylie*

There was a budget accrued by the CJP, we committed to the development officer and the research work, this has used the funds.

Reasonable financial position, need to look at the invoicing for the CJSW. KF will look at how this is used moving forward.

9. Recruitment process for a new CJP Chairperson – *Mhairi Wylie*

The recruitment pack circulated is an outline for comment, MW is on leave next week, and it will be advertised on 01 July. Selection panel from within the membership of the CJP, Jenny will be part of that, and looking for volunteers to join that panel.

Looking for comments between now and 01 July, around the job description.

#### 10. Good News & Partner Updates– All

HTSI – confirmation, 4<sup>th</sup> year community health and wellbeing monies, under £700k. It won't be an open process, also a small £100k grant, ADP that HTSI will support processes.

Housing – good comms with the prison, the Shore system is working well, plea for early interventions also please re additional training opportunities.

Police - County Lines, review of our CJSD is going ahead, so we shall see how that progresses moving forward.

HADP – coordinate the early warning system for potential clusters for non-fatal overdoses, following on from incidents Dublin and Belfast, Police and SAS alerting, PH leading on those alerts. Brining partners together. Careful communications considerations.

Fit Homes Project, work that was done, Drug Research Network Event for Scotland. New coordinator, Eve Macleod, stable staffing now in place. Trying to improve the ADP data dashboard and looking to approach partners for support in that.

CJSW – planning stage for a women's group to get back up and running, 2 posts advertised and interviewing next week, this staffing with allow a women's group back up and running, CPN involvement, all in early stages at this time.

RASASH – considerable change, 7 new staff, new General Manager, developed group work in Inverness and now Caithness, well received and good benefit to the woman, creative groups and sharing messages. New leaflets, available for advocacy support. Updated on recent intelligence staff. Partnership Information Portal. Appreciated being part of the CJP research. Link to BBC Alba program on rural areas and barriers for survivors of abuse to be shared.

Families Outside – Stronger Together conference, support services and meet up with other families in the same situation, 35 families from across Scotland, taken away a bit of learning, and hope to do again in future. Highland, 14 family members face to face, 7 primary school age. Referrals coming through Education, seems to be more awareness.

NHS – Looking at MAT 9 standards, ensuring MH adult and AD services are working closer together, issues in Inverness, due to geography, elsewhere collocated.

Upskilled MH nurses on substance misuse. Perinatal MH team now, in Newcraigs, work across Highland, can offer intensive support, 80% is liaising with others. 6 in the team, so consultation and deal with trauma, expansive service. That is government funded, and not yet confirmed for future years.

Elected Member – possible venue for the women's group, will speak to CJSW soon. Whole Family Welfare Team positive work with Youth Highland, about to distribute some money, mall community groups Merkinch soon.

CJP Manager– looking to set up meetings and gather perspective of where things are at.

CLINK – Looking forward to the CJP team coming to the cells to see the work they're doing and understand the working environment.

CJP SDO – reaching out to Community Payback teams, raising the profile of what they're doing, and third sector in general, using social media. Reaching out the more remote parts, to build relationships for projects and placement, targeting community councils and development trusts. New placements in the pipeline. Looking at SQAs for those on placements.

SPS – working through emergency release, 7 planned over the 4 tranches, some details have been provided, from now it will be every Thursday names will be shared and liberation planning. There is a Governor's veto, and if there is risk, that is there.

SDS - moving out of Church Street this week, after 10 years. Intention to deliver in the community, review of career services nationally, customers want seen in the community, Merkinch, Job Centre, UHI, small staff based in An Lochran. Will be in touch with Community Centres, will offer places to see clients in their area.

Annual Report – Kevin reminded colleagues of the annual report which is due to be submitted in September to CJS. All partners are asked to contribute – Margaret had previously sent the template out.

Ross highlighted how every summer it is a challenge and a plea to all to contribute to the report. The email from Margaret will be re-circulated. There are ongoing issues with engagement with the Judiciary, we will pursue an invite to the Court User Group. Plea to promote the work of the CJP through organisations.

11.AOCB

12. Date of next CJP Meetings 2024:

Wed 11 September, 1000 – 1200 – main conference room  
(Altered to Tuesday 17<sup>th</sup> September, 1000-1200 – Spectrum Centre, Inverness)

Thu 12 December, 1000 – 1200 – venue to be confirmed

**Highland Alcohol and Drugs Partnership – Strategy Group Meeting**

**Tuesday 20<sup>th</sup> August 2024; 2pm-4:30pm  
Larch House, Inverness and via Microsoft Teams**

<b>Present:</b>	Carron McDiarmid (Chair)
	Andrea Broad – Consultant, NHS Highland
	Arlene Johnstone – Health and Social Care Partnership, NHS Highland
	Bev Fraser – NHSH, Drug and Alcohol Recovery Service
	Caroline Robertson – CrossReach
	Daniel Jack – Police Scotland
	Donna Munro – Child Protection Committee, Highland Council
	Elisabeth Smart – Public Health Consultant, NHS Highland
	Eve MacLeod – Coordinator, HADP
	Frances Gordon – Head of Finance, NHS Highland
	Frances Matthewson – Research & Intelligence Specialist, HADP
	Iain Templeton – Partners in Advocacy
	Ian Kyle – Head of Integrated Children’s Services, Highland Council
	Jennifer Baughan – Whole Family Wellbeing Programme, Highland Council
	Cllr. Kate MacLean – Highland Council
	Marion MacNeil – Highland Third Sector Interface
	Sharon Holloway – Development Manager, HADP
	Tracey Porter – Finance, NHS Highland
<b>Apologies:</b>	Dr Alex Keith – Consultant Psychiatrist, NHS Highland
	Claire Turner – Scottish Prison Service
	Jen Valentine – Police Scotland
	Teresa Green – Drug and Alcohol Recovery Service, NHS Highland
	James Dunbar – Vice Chair and representing Housing First
<b>Notes:</b>	Steph Tyrer

<b>1. Welcome/Apologies</b>
<ul style="list-style-type: none"> <li>The Chair welcomed everyone to the meeting and apologies were noted.</li> </ul>
<b>2. Declarations of Interest</b>
<ul style="list-style-type: none"> <li>For transparency the Chair raised her connection with items where Public Health Scotland (PHS) is noted in relation to her position as a non-executive director with PHS – no conflict arises with these items.</li> <li>Cllr. MacLean is on the Board of ACI Recovery Services and this was noted in relation to a question raised under item 5.2.</li> </ul>
<b>3. Minutes of previous meeting and actions</b>
<b>3.1 The minutes of the meeting held on 21<sup>st</sup> May 2024</b>
<ul style="list-style-type: none"> <li>The minutes of the meeting held on 21<sup>st</sup> May 2024 were agreed.</li> </ul>
<b>3.2 Action Tracker for the Strategy Group</b>
<ul style="list-style-type: none"> <li>The action tracker was updated as appropriate.</li> <li>It was noted that the updated action tracker will be circulated in advance of the next meeting along with the draft minute with a request for updates.</li> </ul>
<b>3.3 Positive developments to highlight since 21<sup>st</sup> May 2024</b>
<u>Local Early Warning System (LEWS) Group</u>

- In response to a high number of non-fatal overdoses that were raised by Police Scotland, a Local Early Warning System (LEWS) group was established to bring people together, share information and take action.
- The group have met 8 times, weekly to begin with and has now been stepped down to fortnightly. There is a Standard Operating Procedure now in place and the group can be stepped up or down depending on need. There has been national interest in this process and BF has been supporting with the paperwork for that.

#### Sharon's Contribution

- Thanks were given to Sharon Holloway who is leaving the HADP for a new position within SPS. Sharon has made many positive contributions to the HADP over the years with highlights being the Recovery Walk, Rock Challenge, Choir, National Traineeship, Recovery Networks and including people with living and lived experience.

#### New Scottish Forum for ADP Chairs

- Health Improvement Scotland (HIS) and Public Health Scotland (PHS) have convened a new forum for ADP Chairs across Scotland with the first meeting set to take place on 9<sup>th</sup> September 2024. Feedback will be provided by the Chair at the next meeting.

### **4. Finance**

#### **4.1 Update from Finance**

##### ***Final Spend for 2023/24***

- For 2023/24 HADP had a core budget of £5,003,825 plus £2,027,433 of funding through SG allocation. FG presented a table showing the allocation of spend and confirmed that the final out-turn for the HADP was an underspend of £138,271.
- It was noted that those ADPs across Scotland that operate within an Integrated Joint Board (IJB) arrangement can carry forward their underspend. Highland ADP are hosted by the Health Board who are unable to carry forward any underspend, therefore the £138,271 is no longer available. With Finance colleagues it was agreed that it is important that we plan for committing and spending all of our allocation this year to avoid this happening again.

#### **Action Points**

- FG will send the finance slide to ST for circulating with the minutes.

#### **Lead/Responsible**

FG/ST

##### ***Funding Letter***

- The funding letter from Scottish Government was received in June which confirmed our funding for this year is the same as last year apart from some uplift around staffing/NHS costs. We should ensure we captured the uplifts regularly.

##### ***Committed and Uncommitted Funds 2024/2025***

- EM has undertaken some work to look at what the committed and uncommitted funds are. We are unable to confirm what the uncommitted expenditure is for this year but should be able to share within the next few weeks.
- Need to ensure we have the correct arrangements and agreements in place for expenditure.
- Agreement was given to extend the funding for two projects that were time critical. These are for Scottish Drugs Forum Experiential Data Collection and Highland Advocacy Partnership.

##### ***HTSI Fund***

- £100,000 was awarded to HTSI at the end of the 2023/24 financial year. They will run the Local Improvement Fund with 9 grants of up to £10,000 each to be spent by March

2026. It is a community led approach that can improve participation in local services, promote community resilience and encourage collaboration between providers.

- The successful bids should link to the national mission outcomes with some additional criteria including having previous experience of the delivery of services within Highland and experience of working with vulnerable people. It is proposed bids will open from the 1<sup>st</sup> to 14<sup>th</sup> of October with panel members invited to meet early December and payments issued by the end of December for projects running January 2025 to March 2026.

#### **4.2 Commissioning and Contracts**

- NHS Contracts Team have been supporting us to make some improvements to our processes and are reviewing 4 of our current contracts as part of that. All contracts will be updated following the review and all providers with existing contracts will be contacted to ensure everything is correct.
- Contracts must be with NHS Highland and not HADP as HADP is not a legal entity.

### **5. Performance Reporting and Scrutiny**

#### **5.1 Outcomes/Performance Dashboard by national mission outcomes**

- FM shared the dashboard. Key points to note include:
  - There is an increasing trend of people on injectable buprenorphine with almost one third of Highland clients on opioid substitution therapy (OST) now on this.
  - No major variation in the male/female split with approximately a third of people on OST being female.
  - There has been an increase in naloxone provision in the financial year 2023/24 compared to the previous year.
- FM shared the Highland Drug Related Deaths Briefing for 2023:
  - There has been an increase in drug related deaths nationally with 121 more deaths recorded in 2023 than in 2022.
  - There were 26 drug related deaths registered in Highland in 2023 which is a reduction of 16 from 2022.
  - The age standardised death rate per 1,000 population for the period 2019-2023 was 0.15 for Highland and 0.24 for Scotland.
  - Female deaths in Highland account for an increasing proportion of deaths over time increasing from 21% in 2010-2012 to 30% in 2021-2023.
  - Highland has a much younger profile than Scotland with more drug related deaths occurring in the younger age groups.
  - A higher percentage of deaths in Highland are attributed to intentional self-poisoning than in Scotland, 19% and 7% respectively.
  - Benzodiazepines are implicated in 58% of deaths in Highland.
  - Dihydrocodeines and amphetamines are implicated in more deaths in Highland than in Scotland.
- It was agreed that although National Records of Scotland use the term *drug misuse* that HADP will continue to use *drug related deaths* to tackle stigmatising language.
- Child Protection data will be added to the Dashboard where drugs or alcohol are involved and the Child Protection Committee are planning a piece of work to look at information around parental drug and alcohol use as well as young people who have been referred to the Reporter for reasons that are linked to drug or alcohol.
- The alcohol specific deaths will be updated once the latest figures are published.
- Updated prevalence rates for alcohol use will be available for the next meeting.
- Liver related deaths are higher in Highland than in other comparable Boards and the majority of new cases of Hepatitis C are related to drug use. Data for both of these aspects will be incorporated into the Dashboard for the next meeting.
  - MAT Standards - Staffing issues have affected the ability for same day prescribing which has resulted in an increase in waiting lists. Measures are in place to address



this. The steering groups are progressing well. Monthly reporting to Scottish Government is still required at this time.

- There has been some media interest in the drug related deaths. The agreed media statement has been shared with the Inverness Courier and the BBC have also been in touch.
- Data may be presented differently at these meetings going forwards to separate contextual data and performance data.

Action Points	Lead/Responsible
<ul style="list-style-type: none"> <li>• Circulate the MAT Standards benchmarking report and the Highland specific management report with the draft minutes for this meeting.</li> </ul>	BF/ST



## 5.2 Reviewing Progress with Partnership Funded Services

### *Updated Progress Reports by Outcome*

- Overall the support team and partners found the new format to be much better. It was thought that it might be useful to include more explicit geographical information as well as project risks.
- A request for progress reports will come out at the end of each quarter for clearer and easier reporting giving more time for completion. Late submissions will be circulated after the meeting.

#### **Red Status**

- **Scottish Prison Service post** – There was a workshop last week in HMP Inverness for Partners to come together to use some quality improvement tools to identify ways of making improvements to that post.

#### **Amber Status**

- **Police Scotland Harm Prevention Officer post** – The post is working well, and benefits are being seen, but marked as amber due to the concern that there is not enough capacity to deliver a service to everyone in need across Highland.
- **Health Improvement Team** – ABI: Awaiting a national report and review and there has been some reduction in the capacity to deliver training; Discussing Drugs and Alcohol with Young People: An e-learning module is now available, a face to face or interactive Train the Trainer course is being set up; Festival Work: This work is ongoing with improvements being made in conjunction with the CPC.
- **Planet Youth** – One of the schools in the pilot is not engaging. IK will raise this with the ICSPB on Thursday and DM will raise with the leadership group of ICSB as well.
- **SDF** – There is an underspend of £17,000 from the trainee worker's project. It has been agreed in principle that they can use their discretion in utilising this money a different way to achieve the same outcomes. It was agreed that this flexibility can be applied by the core team to other similar requests.
- Reporting will be done by exception across all six national outcomes and one outcome will be looked at in depth. Outcome 1 on prevention will be looked at in depth at the next meeting.

Action Points	Lead/Responsible
---------------	------------------

<ul style="list-style-type: none"> <li>Volunteers are sought to help RAG the support team progress reports – please let EM know if you are able to do this.</li> </ul>	All
<b>5.3 Community Planning Partnership Board</b>	
<b><i>Chair's Update</i></b>	
<ul style="list-style-type: none"> <li>The HADP minutes from February were noted and the Annual Survey Report was approved and subsequently submitted to Scottish Government.</li> <li>EM presented on Planet Youth at the meeting.</li> <li>The Chair of the CPP Board is the Chief Executive of Highlands and Islands Enterprise and offered their Risk Specialist to facilitate our risk workshop.</li> <li>The CPP Chair asked for more information on the People 1<sup>st</sup> Language Matters.</li> <li>Pledge material has since been circulated to see if Partners can sign up to that.</li> <li>The Board agreed the Highland Outcome Improvement Plan which the new HADP strategy will be aligned to.</li> <li>There was some discussion around how Partners can share their intelligence resources better.</li> <li>Work is underway on the performance framework for the HOIP which may utilise some of the HADP data.</li> <li>The Director of Public Health, Tim Allison, presented his annual report which included information on alcohol and drugs</li> <li>Next meeting of the Board is the 20<sup>th</sup> of September 2024. No specific HADP reports are required but the HADP minute will be noted.</li> </ul>	
<b>5.4 Public Protection Chief Officers Group</b>	
<b><i>Chair's Update</i></b>	
<ul style="list-style-type: none"> <li>With relatively new Chief Officers and some independent Chairs in post work is underway to re-set the COG.</li> <li>When reporting progress with the MAT Standards we need to make it clear which ones the Partnership are supporting.</li> <li>It was agreed that an update will be provided at the next meeting in November on the implementation of the recommendations from the report that was done on drug deaths and young people. The Children's Commissioner is requested to provide this information.</li> <li>Risks identified at the HADP risk workshop, and any actions, will be reported back to the group at the next meeting.</li> <li>The ADP Chairs is one of three ADP Chairs attending the new national public protection leadership group looking at how to improve public protection functioning across Scotland.</li> </ul>	
<b>5.5 Integrated Children's Service Planning Board/Leaders' Forum</b>	
<b><i>Chair's Update</i></b>	
<ul style="list-style-type: none"> <li>No Chair's update; date of next meeting 22<sup>nd</sup> August 2024.</li> <li>The Vision 26 event is taking place at Inverness Leisure on Friday 30<sup>th</sup> August with stall holders from statutory and third sector organisations coming together to showcase the work being done in partnership to deliver on the outcomes of the Integrated Children's Services Plan. Sign up for the event is recommended, although not essential.</li> </ul>	
<b><i>Coordinators Update</i></b>	
<ul style="list-style-type: none"> <li>There was some discussion about the street work youth event that was held in Eastgate Centre on the 2<sup>nd</sup> of August. This was a successful and busy event and was an opportunity to get feedback from young people.</li> </ul>	

- The data included in the performance management framework was discussed. This could include links with the dashboard.

## **5.6 Scottish Government Reporting/Updates**

### ***Feedback from ADP Independent Chairs meeting with SG officials***

- 6 or 7 ADP Chairs are independent, the rest are employed by statutory agencies.
- The independent Chairs have been meeting monthly and at the last meeting Scottish Government alcohol and drugs team attended.
- It is an opportunity to share good practice and at the last meeting the Chair from Dumfries and Galloway shared their performance framework which CM, EM and FM will identify any learning for the HADP.
- The Government confirmed that the self-assessment process is still required.
- The first draft of the audit findings from the National audit on alcohol and drugs partnerships is with the Government and a briefing is expected on that at the next Independent Chairs meeting.

### ***Feedback from ADP Coordinators meetings***

- Scottish Government coordinates this meeting and there was input from them about the public protection work.
- Public Health Scotland provided some input about RADAR. Thoughts are welcome on whether this is an area we can do some work on.
- The UK alcohol treatment guidelines and the ABI review are awaited.
- There was the offer of an online network of drug and alcohol service managers.
- Fife gave input on their stigma strategy; they have had good input with about 20% of the input from people with lived experience.
- There was a lot of discussion around the term stigma and if different terms would be more appropriate such as discrimination or rights and dignity.
- There are more strategic plans for stigma actions and Scottish Government will bring this to the next meeting.

### ***National Care Service***

- Planning continues to establish the National Care Service from 2026. This will mean an end to the single lead agency model in use in Highland.
- It is a reform of social care, social work and community health services.
- Local Boards will be established as part of the National Care Service and there is an expectation that arrangements for alcohol and drugs partnerships would feature within the local Board.

### ***Ministerial Visit***

- The minister for drugs and alcohol is visiting the different Boards across Scotland with Highland being scheduled for November 2025.
- There will be a ministerial visit around the BBV agenda before that so there is maybe learning we can take from there.

## **6. Partnership Improvement and Learning**

### **6.1 Drug Death Reviews**

- There have been 14 suspected drug related deaths this year to date – 6 female and 8 male.
- The Terms of Reference are being reviewed and there are continual steps being taken to try and improve the process and streamline work.
- Concerns have been raised at the Chief Officers Group about patterns of vulnerable women in Highland. Maybe need to consider a different approach to address these concerns.
- The Child Protection Committee are doing some work with Police Scotland around data relating to criminal exploitation and sex exploitation which are often linked to drugs and alcohol.

- It has been identified within the joint ADP/CPC group about the number of women who have had their children removed and then go on to experience drug or alcohol issues. Some work could be done around the link between women in these circumstances and drug related deaths.
- The Criminal Justice Service are also doing a piece of work they are planning specific to women.
- Organise a meeting of the different partners that are doing something around this to see if it is something we could take a joint approach to.

Action Points	Lead/Responsible
<ul style="list-style-type: none"> <li>• DJ will speak to JV about the concerns raised about vulnerable women in Highland to see if there is another approach that can be taken.</li> <li>• DM will feedback on the work they are undertaking with Police Scotland relating to criminal exploitation and sex exploitation.</li> <li>• Arrange a meeting of the different partners who are doing work specific to women to see if a joint approach can be taken.</li> </ul>	DJ  DM  Support Team

### 6.2 Housing First Recommendations and Next Steps

- One of the cases in the report is female and links to county lines and cuckooing.
- Next steps are to get key partners together who were involved with Housing First and identify the elements of the model of practice that are appropriate to them.
- Technology enabled properties were recognised as a means of keeping people safe as they only open the door to people they want to and movement within the property is detected.

Action Points	Lead/Responsible
<ul style="list-style-type: none"> <li>• Circulate the draft Housing First Report to the group.</li> <li>• Arrange a meeting with key partners to work through the model of practice and identify the parts that are appropriate for them.</li> </ul>	ES/ST  ES

## 7. Strategy and Partnership Development

### 7.1 Development Plan

- Progress is being made across all areas within the development plan with key actions noted below.

### 7.2 Health Needs Assessment

- A health needs assessment is being undertaken to help inform the new strategy. This needs to be done by the end of the year. It is being done jointly with A&B ADP and NHS Health Intelligence team and an update will be provided at the next meeting.

### 7.3 Risk Workshop – 23<sup>rd</sup> August

- This is a key action within the HADP development plan and the workshop facilitated by HIE is being held this Friday at UHI House. All partners are encouraged to attend or send a substitute.
- HIE will run the workshop and the template they use has been shared. An update will be provided at the next meeting.

### 7.4 Self-Assessment with support from Improvement Service

- This is a key action within the HADP development plan. The Scottish Government has a Self-Assessment tool which was last used by the Partnership in 2022.
- Once the risk assessment is done, the local authority improvement service will facilitate the self-assessment process for us, possibly early next year.

#### **7.5 HADP Strategy Group survey feedback**

- The majority of people who completed the survey voted for a two and a half hour meeting with a break.
- The majority of people reported the Strategy Group meetings to be valuable to them.
- People were asked what would improve these meetings for them and their service – EM will circulate the comments.
- The support team are developing an induction pack for Strategy Group members and can include the role of the Third Sector rep in that.

#### **Action Points**

- Circulate the comments from the survey feedback.
- IT will contact MM to draw up some information on what the role of the third sector rep should be.

#### **Lead/Responsible**

EM  
IT/MM

### **8. Current and Emerging Risks**

#### **8.1 Any Emerging Risks**

- Nothing additional raised.

### **9. National Reports and Consultation**

#### **9.1 N/A**

### **10 Date of Next Meeting**

- The next meeting will be on Tuesday the 19<sup>th</sup> of November 2024; 2pm – 4:30pm; in person at the library meeting room, UHI House, Inverness and via Microsoft Teams link if needed.