

SUMMARY Highland Alcohol and Drugs Partnership (HADP) – Delivery Progress Report 2021/22 and Investment Plans (2022/23)

1. Purpose

HADP requests that the NHS Highland sign off the Delivery Progress Report 2021/22 and Investment Plans 2022/23. The Delivery Progress Report was agreed by the HADP Strategy Group and signed off by the HADP Chair on 23/08/22. It was agreed and signed off by the Community Planning Partnership 9 December 2022. All relevant partners contributed to completion of the report including; NHS Drug and Alcohol Recovery Service, Health Improvement, Public Health, Finance Department, Highland Council Criminal Justice Social Work, Housing Department, Integrated Children’s Services Partnership, Youth Action Service, Education Department, HMP Inverness. The Report was submitted to Scottish Government on 05/08/22 pending sign off from the CPP. The Investment Plans have been agreed by the HADP Strategy Group but will require further work to ensure the available resource is fully utilised in 2022/23.

2. Context

HADP is required to submit a reporting template to Scottish Government on an annual basis. Scottish Government usually reviews the report and provides scrutiny and feedback on good practice and areas for improvement. However, as yet no feedback has been received for the previous annual report (2020/21) resulting from Covid-19 and other pressures. In the absence of an Integrated Joint Board for Highland, Scottish Government requests sign off via the CPP.

3. Summary of Delivery Progress Report (2021/22)

The annual Delivery Progress Report has four sections; 1) Education and Prevention 2) Treatment and Recovery 3) Children, Young People and Families 4) Public Health Approach to Justice. There is a further Section II Financial Framework. Sections 1 to 4 reflect activity related to the national and local drug and alcohol strategy, Ministerial priorities and the National Mission to reduce drug related deaths. Please note that HADP was not required to RAG progress for submission to Scottish Government, but has included this information in the summary.

Section No	Priority Area	RAG	Activities & Progress	Areas for Improvement
1	Education & Prevention		Diverse range of communications events/campaigns e.g. Bi-weekly Bulletin, Count14, Highland Substance Awareness Toolkit, Fetal Alcohol Spectrum Disorder, Substance Aware School Award, Stay Safe (Festive/festivals), Overdose Awareness, Parents Under Pressure Workshop, Third Sector Funding Workshop, National Recovery Walk, Planet Youth Schools Event, Lived Experience Panel Getting Involved Event, Highland Families Are Recognised and Included (FARI) Events, Alcohol Awareness via Payslips (NHS/HC) Use of Social media, Twitter/Facebook, website HOPE App downloads >400 / digital inclusion Planet Youth survey, results, presentations, action planning (Caithness, Sutherland & Tain)	Resources in different languages Increase HOPE App downloads, Service Directory Evidence positive outcomes Review of occasional licenses Review/redesign HADP website

			<p>Consistent representation on licensing forum</p> <p>Adherence to alcohol overprovision statement</p> <p>Education/prevention test of change in primary school setting</p>	
2	Quality Treatment & Recovery		<p>Increase in residential rehab capacity</p> <p>Housing First pilot improving health/wellbeing outcomes for people with complex needs & drug alcohol problems</p> <p>Expected drug/alcohol screening/treatment options available in Inverness and surrounding area</p> <p>Involvement of PLE in policy development</p> <p>Recovery Workers Training Project</p> <p>Mutual aid networks</p> <p>Trauma-informed training opportunities</p> <p>Peer distribution of naloxone</p> <p>Increase in availability of positive activities</p> <p>Surveillance and monitoring of alcohol and drug deaths</p>	<p>Alcohol Related Cognitive Screening</p> <p>Medication Assisted Treatment (MAT) Standards 1- 5 embedded by April 2023</p> <p>Rapid access to treatment (remote and rural)</p> <p>Increase residential rehab and out of area placements</p> <p>Integrated drug/alcohol/mental health support/protocols</p> <p>Living/lived experience panel involvement in service planning</p> <p>Development of recovery communities</p> <p>Uptake of trauma informed training/workforce development</p> <p>Deliver OD immediate response pathway</p> <p>Reduce alcohol deaths/establish review process</p> <p>Reduce drug deaths/strengthen review process</p> <p>Embed family inclusive practice</p> <p>Increase family support mutual aid groups</p> <p>Advocacy development</p> <p>Expand Third Sector non-medical drug and alcohol provision</p>
3	Children, Young People & Families		<p>Joint working/improvement plan with Child Protection Committee (CPC), Integrated Children's Services Partnership (ICSP) via joint committee</p> <p>Ongoing funding of Whole Family Coordinator post (Action for Children), Psychologist (drugs/alcohol) with (CAMHS), Specialist midwife (drugs/alcohol), Health Development Officer and Workforce Development post (Highland Council) and Third Sector (Youth Highland)</p> <p>Action for Children successful application to CORRA to establish Family First Service</p>	<p>Expand whole family approaches/family inclusive practice</p> <p>Reduce drug deaths among young people</p> <p>Expand support for adult family members</p> <p>Develop nurse specialist posts to provide whole family support</p>
4	Public Health Approach to Justice		<p>HMP Inverness distribution of naloxone embedded</p> <p>Cognitive Behavioural Therapy</p> <p>Membership crossover with Community Justice Partnership (CJP)</p> <p>Funding for community justice/drug and alcohol posts including; DTTO2, Harm Reduction Police Officer, Cognitive Behavioural Therapist (Prison/community)</p> <p>Custody link workers (CJP) and Medics Against Violence (Police) providing in-reach and outreach support</p> <p>Community Integration Plans (CIP) process via Criminal Justice</p>	<p>Strengthen partnership working/joint funding with Community Justice Partnership (CJP)</p> <p>Increase uptake of DTTO2</p> <p>Maximise treatment/support/diversionary opportunities across multi-agency criminal justice pathway</p>

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4. Investment Plans (2022/23)

HADP has received the following funding for investment in 2022/23 to deliver on the; Programme for Government to deliver Rights, Respect and Recovery and the National Mission to reduce drug deaths. The monies are to develop/strengthen a range of service developments e.g. an immediate response pathway for non-fatal overdose (NFOD), assertive outreach, living/lived experience panel, increased access and capacity for residential rehabilitation, Medication Assisted Treatment (MAT) Standards, Whole Family approach and family inclusive practice. The HADP decision-making process on allocation is informed by: People (improved outcomes), Partnership (joint perspective), Package (suite of measures), Policy (delivery of priorities) and Public (best value for money). Funding letters were received in June 2022. Slippage accumulated from delayed start of initiatives and recruitment challenges will require shorter-term investment in 2022/23. Additional proposals are being developed to fully utilise the resource for 2022/23. Due to Highland having a different model of integration, slippage cannot currently be carried forward. Representation has been made to Scottish Government to resolve this challenge. Please note the amounts below are likely to require revision in relation pay settlements in 2022/23.

4.1 Total Uplift in Resource = £1,811,196

Programme for Government Monies (Implementation of Rights, Respect and Recovery) = £799,000 p.a.

Service Development	Investment
Prevention and Education (HC, NHS, Third Sector) Health Development Officer (drugs & alcohol) based with HC. Planet Youth pilot in Caithness, Sutherland and Tain, Health improvement development initiatives/campaigns.	£78,065
Policy Links / Evidence-base	What Works in Drug Education and Prevention Planet Youth
Whole Family Approach (Third Sector) Whole Family Coordinator based with Action for Children	£54,651
Policy Links / Evidence-base	Improving Holistic Family support
Housing First Urban (HC, NHS, Third Sector) Multi-disciplinary co-located team of Housing Officer (HC), Drug/Alcohol Nurse (NHS) and Support Worker (Salvation Army)	£133,546
Policy Links / Evidence-base	Preventing Homelessness Housing First Evidence
Naloxone/Nyxoid (NHS)	£17,500
Policy Links / Evidence-base	Targeted Distribution of Naloxone
DTTO2 (HC)	£102,418

Multi-disciplinary co-located team of Social Workers and Nurse	
Policy Links / Evidence-base	Rights, Respect and Recovery
Recovery Workers Training Project (Third Sector) Employability support to 3 – 5 people in recovery	£76,407
Harm Reduction Officer (Police) Diversion into treatment services	£46,268
Policy Links / Evidence-base	Rights, Respect and Recovery
Recovery Support Workers (NHS) 6.5 based with Drug and Alcohol Recovery Service	£203,724
CAMHS Psychologist (drugs and alcohol) (NHS)	£37,083
Specialist Midwife (drugs and alcohol) (NHS)	£27,826
Policy Links / Evidence base	Rights, Respect and Recovery
MAT Coordinator (NHS) - contribution	£10,000
Policy Links / Evidence-base	Medication Assisted Treatment (MAT) Standards
Total	£787,488

National Mission Monies (Implementation of National Mission and Ministerial Priorities) = £1,012,196 p.a.

Service Development	Investment Costs
Cognitive Behavioural Therapist (Prison/Community)	£64,229
Policy Links / Evidence-base	Trauma-Informed Practice
Rural Housing First - Caithness Multi-disciplinary co-located team of Housing Officer (HC), Drug/Alcohol Nurse (NHS) and Support Worker	£133,546
Policy Links / Evidence-base	Housing First Evidence
Positive Activities Coordinator (Third Sector) Based with Newstart with service to Housing First, DARS, CJSW and other clients/families with drug and alcohol problems	£49,448
Policy Links / Evidence-base	Rights Respect and Recovery
Medication Assisted Treatment Standards MAT Coordinator, CBT Therapist, Admin Officer (NHS)	£172,174
Policy Links / Evidence-base	Medication Assisted Treatment (MAT) Standards
Crossreach/Beechwood House (Third Sector) Increase in bed capacity from 8 to 13, increase in pre and post rehab support, increase in detox capacity, feasibility of repurposing properties to provide safety and stabilisation support	£234,516
Policy Links / Evidence-base	Pathways into, through and out of Residential Rehabilitation in Scotland
NFOD Immediate response pathway – multi-agency team including drug/alcohol/mental health nurse, social worker, support worker. Team to	£150,875

provide assertive outreach, intensive short-term support, bridge into treatment and support services	
Assertive Outreach – Third Sector partner to be commissioned	£120,545 (Currently unallocated)
Living/lived experience panel – Third Sector partner to be identified	£23,452 (Currently unallocated)
Taskforce Response Fund	£73,260 (Currently unallocated)
Policy Links / Evidence-base	Six Strategies to Save Lives
Total	£1,022,045

4.2 Additional Resource

- £100,000 per year for 5 years was secured by Action for Children from CORRA in March 2022 with support from HADP and the Integrated Children's Services Partnership (ICSP) to establish a Family First service to meet the needs of children and young people affected by parental drug and/or alcohol problems and promote a whole family approach. HADP's contribution may require to be increased in 2022/23 for match funding purposes.

4.3 Local Improvement Fund

Highland Third Sector Interface (HTSI) secured £380,000 in 2021/22 to administer a Third Sector grant scheme over the next three years. The purpose of the scheme is to invest in growing the Third Sector role in providing drug and alcohol related support across Highland. The collaboration will enable HADP to benefit from HTSI expertise and achieve better reach into local communities affected by drug and alcohol issues.

4.4 Challenges

- Support urgently required for formal commissioning process to improve choice, access to treatment/support and achievement of MAT/Waiting Times Standards
- Effectively utilising slippage in current financial year accumulated from delayed start/recruitment challenges
- Model of integration does not currently enable slippage to be carried over in to the next financial year
- Many partners already stretched resulting in limited capacity to manage/progress projects/service developments
- HADP Support Team has limited capacity to effectively monitor and evaluate the growing number of projects/service developments
- Single system IT solution required for integrated teams e.g. Housing First, Immediate Response Pathway Team to maximise clinical/contact time and avoid duplication

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