

Borders Alcohol and Drug Partnership (ADP)

Action Plan including Ministerial Priorities 2019-20: Version (10.9.19)

1 Introduction

This plan has been produced following discussions at ADP Executive Group and ADP Board. Contributions have also been sought from the Children and Young People's Leadership Group and Community Justice Board. This action plan was originally developed in the absence of Scottish Government requesting a Delivery Plan, however, in September 2019 the Scottish Government's ADP Funding Letter outlined new ADP Ministerial Priorities and National Deliverables for 2019-20. This plan has therefore been updated to allow read across to the priorities and deliverables.

2 Structure of plan

The plan presents each of the four high level outcome areas in Rights, Respect and Recovery¹ (RR&R). Associated local actions relating to the Alcohol Framework² are included within the four outcome areas. There is a fifth table relating to the cross cutting work Ministerial Priority.

It should be noted that the Action Plan presents priority or new actions and does not include all ADP activity.

The four high level outcome areas are:

- Prevention and early intervention
- Developing Recovery Orientated Systems of Care
- Getting it right for children, young people and families
- Public Health Approach in Justice

In September 2019 the Scottish Government's ADP Funding Letter outlined new ADP Ministerial Priorities and National Deliverables for 2019-20 as follows:

1. A recovery orientated approach which reduces harms and prevents alcohol and drugs deaths
2. A whole family approach on alcohol and drugs
3. A public health approach to justice for alcohol and drugs
4. Education, prevention and early intervention on alcohol and drugs
5. A reduction in the attractiveness, affordability and availability of alcohol
6. Cross Cutting work

It can be seen from the above list that these priority areas broadly match across the outcome areas in RR&R and so there has not been a major revision to the original plan. However, the table now includes the Ministerial Priorities and Deliverables.

¹ <https://www.gov.scot/publications/rights-respect-recovery/>

² <https://www.gov.scot/publications/alcohol-framework-2018-preventing-harm-next-steps-changing-relationship-alcohol/>

Each outcome area is presented in a table containing:

- Outcomes described in RR&R
- Linked Ministerial Priority(ies)
- Targets based on ADP Core Outcome Areas (data baseline and source are included in Appendix)
- National deliverables and linked actions
- Local actions for 2019-20 and associated milestone and lead agency(ies)

There is a shorter section at the end relating to the cross cutting work.

There are a small number of local actions which were included in the original plan but which do not directly correspond to the national deliverables, however, they are agreed actions appropriate in response to RR&R and therefore continue to be included.

Outcome Area 1: Prevention and early intervention

Ministerial Priority: Education, prevention and early intervention on alcohol and drugs

Ministerial Priority: A reduction in the attractiveness, affordability and availability of alcohol

1.1 Outcomes		
1.11 Fewer people develop problem alcohol and drug use 1.12 Increased knowledge and awareness of drugs and alcohol issues including harmful effects 1.13 Increased skills to make positive choices around healthy lifestyles 1.14 Prevent and reduce the harm caused in pregnancy		
1.2 Targets		
1.21 Deliver 1312 alcohol brief interventions across Scottish Borders (80% priority settings, 20% wider settings) 1.22 Reduce prevalence of individuals over 16 yrs exceeding low risk guidelines by 5% by end 2020-21 to 19% 1.23 Reduce the percentage of 15 yr olds drinking on a regular basis by 10% by end 2020-21 to 12.6% 1.24 Reduce rate of 3 years aggregated alcohol related hospital stays per 100,000, aged 11-25 years by 10% by end 2020-21 to 275 1.25 Reduce rate of 3 years aggregated drug related hospital stays per 100,000, aged 11-25 years by 10% by end 2020-21 to 109		
1.3 National Deliverables		Related Actions/comment
1.31 Develop plans to address stigma surrounding alcohol and drugs, including: Ensure the appropriate use of language to address stigma; Identify and improve capacity for advocacy; Ensure those in leadership roles and integral to the ADP strategy engage within people with lived living experience of using services.		1.41, 1.42, 1.43,
1.32 Engage with Licensing Forums, local partners and Licensing Boards to address overprovision and control the availability of alcohol, in line with the licensing objectives, including the public health objective.		1.44, 1.45, 1.46
1.4 Actions		
Action	Milestone 2019-20	Lead
1.41 Develop engagement plan with Area Partnerships around reduction in stigma, alcohol and drugs, and links to wider Health Improvement	Tbc	ADPST/JHIT
1.42 Develop anti-stigma work and support human rights messages - deliver one SDF Stigma course (6.9.19) - ensure all communications via Area Partnership include mention of stigma and human	Review actions in November 2019	ADPST

rights - respond to actions arising from the SFAD needs assessment		
1.43 Complete and support re-commissioning of independent advocacy contract. Confirm updated contract will include dedicated time for alcohol and drug clients	New commission in place September 2020	SBC
1.44 Support to Local Licensing Forum and production of alcohol profile for 2017-18	Profile produced by October 2019	ADP Support Team (ADPST)
1.45 Increase community involvement in licensing: Contribute to SBC Alcohol and Public Places Consultation via Area Partnerships and raising at relevant multi-agency groups	Recommendation to Council by Dec 2019	ADPST
1.46 Increase community involvement in licensing: Support Galashiels Learning Community Partnership (Gala LCP) action plan relating to alcohol including SFAD community event	Event planned October 2019	ADPST/Gala LCP)
1.47 Review alcohol, drug and tobacco education and prevention within schools and within less traditional settings (e.g. youth groups, community learning and development) and produce a resource pack, CPD for teachers and parent information	Pilot pack from August 2019 and launch Nov 2019	Education
1.48 Increase awareness of the risks, increased awareness of, and improved diagnosis and support for Foetal Alcohol Spectrum Disorder based on SIGN guidance - CAMHS FASD working in partnership to develop diagnostic pathway - deliver two FASD training sessions (21 & 22.8.19) - deliver ABI and FASD refresher session for community midwives (16.6.19)	Diagnostic pathway in place by March 2020	CAMHS ADPST
1.49 Provide an accessible programme of workforce development/training to meet identified needs in partnership with Action for Children/Addaction/Borders Addiction Service/Child Protection	Programme available by May 2019 (achieved)	ADPST
1.50 Explore reinstating ABI LES within Primary Care, support increase in ABI delivery within adult health and social care teams and continue to deliver within other priority and wider settings	Attend LNC in June 2019	ADPST/PACS

Outcome area 2 Developing Recovery Orientated Systems of Care

Ministerial Priority: A recovery orientated approach which reduces harms and prevents alcohol and drugs deaths

2.1 Outcomes	
2.11 People in need will have good access to treatment and recovery services, particularly those at most risk	
2.12 Improved retention in effective high quality treatment and recovery services	
2.13 Improve access to key interventions which will reduce harm, specifically focussing on those who inject drugs	
2.14 Reduction in drug-related deaths	
2.15 Reduction in drug-related general hospital admissions	
2.16 Reduction in drug-related psychiatric hospital admissions	
2.2 Targets	
2.21 95% of clients wait no longer than 3 weeks for treatment (ongoing)	
2.22 Ensure no one waits longer than 6 weeks for treatment (ongoing)	
2.23 Reduce rate of alcohol related hospital stays per 100,000 by 10% by end 2020-2021 to 406	
2.24 Reduce rate of 3 years aggregated drug related hospital stays per 100,000 by 10% by end 2020-21 to 68	
2.25 Reduce the rate of 5 year aggregated alcohol-related mortality by 10% by end 2020-21 to 11	
2.26 Reduce the 5 year rolling average of drug related deaths investigated by Borders Drug Death Review Group by 10% by end 2020-21 to 10	
2.27 Maintain engagement in adult services to 60% of population of estimated problem drug users: 306 (60% of 510)	
2.3 National Deliverables	Related Actions/comment
2.31 Update and implement plans to reduce alcohol and drug deaths local and national public health surveillance and evidence of best practice including the Staying Alive in Scotland and the Dying for a Drink reports	2.41, 2.42, 2.43, 2.44, 2.45, 2.46, 2.47
2.32 Continue to improve access to naloxone in the community and on release from custodial and hospital settings	2.48
2.33 Establish protocols between mental health and alcohol and drug services to support access and outcomes for people who experience mental health and alcohol and drug problems	2.49, 2.50
2.34 Services are delivered in line with the Quality Principles: Standard Expectations of Care and Support in Drug and Alcohol Services, including clear plans to respond to the individualised recommendations within the Care Inspectorate Reports, which examined the local implementation of these Principles	Ongoing - led by Quality Principles Group
2.35 Ensure mechanisms are in place for people with lived and living experience of addiction/recovery and of participating in services to be involved in delivering, planning and developing services	2.51
2.36 Continued delivery against the HEAT Waiting Times Standard.	Ongoing
2.37 Implementation of DAISy before the end of 2019 in line with national DAISy implementation plans	Ongoing

2.4 Actions		
Action	Milestone 2019-20	Lead
2.41 Complete recruitment to Assertive Engagement Service including relevant communications with partners and stakeholders and identify key performance indicators.	Service implemented by July 2019, KPI's available from September	Addaction/Borders Addiction Service (BAS)
2.42 Complete recruitment to Recovery Worker post and develop new opportunities for recovery in areas other than Galashiels	Service implemented by July 2019, KPI's available from September	Addaction
2.43 Drug services support delivery of the recommendations within the Hepatitis C virus Case Finding and Access to Care report	Action plan in place by August 2019	BBV MCN
2.44 Implement 'Assessment of Injecting Risk' tool in Addaction	September 2019	Addaction
2.45 Continue provision of Injecting Equipment Provision with annual monitoring and review visit	Review visits for 2019 completed by June (complete)	ADPST/Pharmacy/Addaction
2.46 Work with BAS to consider evidence on suboptimal OST prescribing and current activity	Timescale tbc	ADPST/BAS/Pharmacy
2.47 Complete assessment of strengths and weakness in delivering key harm reduction initiatives to those most at risk <i>need more info from Scottish Government on how this is envisioned</i>	Tbc	SG/ADPST
2.48 Continue provision of Take Home Naloxone Programme	Issue 27 first time kits in 2019-20	BAS/Addaction/Pharmacy/ED
2.49 Work with mental health, assertive engagement team to deliver on improved pathways for people with co-morbidity	Initial scoping paper to Mental Health Governance October 2019	Mental health services/Assertive Engagement Team
2.50 Drug and alcohol services develop trauma informed approaches by implementing actions from LPASS (Lead Psychologist in Addiction Services Scotland) report	Action plan in place by August 2019	Quality Principles Group*
2.51 Develop process for people with lived and living experience to be involved in service design, development and delivery	Process in place by March 2020	Addaction/ADPST

*Quality Principles Group membership: ADPST, Addaction, BAS, Action for Children, Scottish Drugs Forum

Outcome Area 3 Getting it right for children, young people and families

3.1 Outcome		
3.11 Children and families affected by alcohol and drug use will be safe, healthy, included and supported in their own right and where appropriate will be included in their loved ones treatment and support		
3.2 Targets		
tbc		
3.3 National Deliverables		Related Actions/comment
3.31 Improve understanding of the experience of family members whose loved one is in treatment / uses alcohol and/ or drugs problematically in preparation for national work on defining the principles of family inclusive practice		3.41, 3.43
3.32 Map existing investment in and scope of family support services used by people with alcohol and drug problems in preparation for the development of a whole families approach		3.41, 3.43
3.4 Actions	Milestone 2019-20	Lead
3.41 Complete Families Needs Assessment (SFAD) and develop an action plan in response to findings which includes: <ul style="list-style-type: none"> • Online survey and interviews (April 2019) • Community event through Gala – LCP (July 2019) • Staff and partner training (May –June 2019) 	Complete needs assessment and deliver training by June 2019 Develop action plan by November 2019	SFAD ADPST
3.42 Involve children, parents and other family members in the planning, development and delivery of services	TBC following discussion at CYPLG	TBC
3.43 Complete recruitment and implement Link Worker service including relevant communications with partners and stakeholders	Service implemented by July 2019, KPI's available from September.	Action for Children
3.44 Deliver one early years training (Oh Lila) and evaluate impact 3 months post training	August 2019	SBC Early Years/ADPST

Outcome Area 4 Public Health Approach in Justice
Ministerial Priority a Public Health approach to justice

4.1 Outcome		
4.1 Vulnerable people are diverted from the justice system wherever possible and those within justice settings are fully supported		
4.2 Targets		
TBC via Community Justice Board		
4.3 National Deliverables		Related Actions/comment
4.31 Identify the investment, outcomes and outputs delivered by alcohol and drug services which act as a diversion measure from justice including those services which work with people: - as a condition of sentence - in prison - leaving prison / voluntary throughcare		4.31, 4.32, 4.33
4.32 Develop improvement plans as needed		As required
4.4 Actions	Milestone 2019-20	Lead
4.41 Support development of health improvement post in Justice setting	<i>Under discussion</i>	Justice Services/JHIT
4.42 Assist women whose behaviour is affected by drugs and or alcohol to remain outwith the Court system through partnership delivery of the new Arrest Referral Service. The service is aimed at engaging with women on a voluntary basis, who come into contact with community police services at the earliest opportunity.	Performance Indicators and quality assurance measures to be developed and implemented. KPI returns to be available from July 2019 onward.	Justice Service
4.43 Develop robust health and wellbeing diversion opportunities that will be offered to the Procurator Fiscal for consideration.	Criminal Justice Officer to be recruited, June 2019 to support development, including strengthening links with drug and alcohol support services. Increased KPI returns to be available from Autumn 2019.	Justice Service

5 Ministerial Priority Cross cutting work

5.1 National Deliverables		Related Actions/comment
5.11 Implement the Partnership Delivery Framework to Reduce the Use of and Harm from Alcohol and Drugs		5.21, 5.22
5.2 Actions	Milestone 2019-20	Lead
5.21 Discuss governance with Integrated Joint Board	October IJB meeting	ADP Chair
5.22 Confirm timetable and implement development of Strategic Plan	Plan in place by April 2020	ADP Exec Group

Appendix Data Baseline and Sources

Target	Baseline (most recent data)
Outcome Area 1	
1.21 Deliver 1312 alcohol brief interventions across Scottish Borders (90% priority settings/10% wider settings) (<i>Source: ADP Performance Report</i>)	579 (2017-18)
1.22 Reduce prevalence of individuals over 16 exceeding low risk guidelines by 5% by end 2020-21 to 19 (<i>Source: Scottish Health Survey</i>)	21%
1.23 Reduce the percentage of 15 yr olds drinking on a regular basis by 10% by end 2020-21 to 12.6% (<i>Source: SALSUS 2019 data expected Winter 2019</i>)	14% (2013)
1.24 Reduce rate of 3 years aggregated alcohol related hospital stays per 100,000, aged 11-25 years by 10% by end 2020-21 to 275 (<i>Source: ScotPHO profiles</i>) ³	306
1.25 Reduce rate of 3 years aggregated drug related hospital stays per 100,000, aged 11-25 years by 10% by end 2020-21 to 109 (<i>Source: ScotPHO profiles</i>)	121 (2014-17)
Outcome Area 2	
2.21 95% of clients wait no longer than 3 weeks for treatment (ongoing) (<i>Source: ISD – Drug and Alcohol Waiting Times Database</i>)	96% (2018-19) (470 of 492 referrals)
2.22 Ensure no one waits longer than 6 weeks for treatment (ongoing) (<i>Source: ISD – Drug and Alcohol Waiting Times Database</i>)	0 (2018-19)
2.23 Reduce rate of alcohol related hospital stays per 100,000 by 10% by end 2020-2021 to 406 (<i>Source: ScotPHO profiles</i>)	412 (2016-17)
2.24 Reduce rate of 3 years aggregated drug related hospital stays per 100,000 by 10% by end 2020-21 to 68 (<i>Source: ScotPHO profiles</i>)	75 (2013/2014-2016-17)
2.25 Reduce the rate of 5 year aggregated alcohol-related mortality by 10% by end 2020-21 to 11 (<i>Source: ScotPHO profiles</i>)	12 (2013-2017)
2.26 Reduce the 5 year rolling average of drug related deaths investigated by Borders Drug Death Review Group by 20% by end 2020-21 to 10 (<i>Source: Borders Drug Related Deaths Review Group</i>)	10 (2014-18)

³ ScotPHO profiles available at: https://scotland.shinyapps.io/ScotPHO_profiles_tool/

<p>2.27 Maintain engagement in adult service at 60% of population of estimated problem drug users* to 306 (60% of 510) (<i>Source: ISD – Drug and Alcohol Waiting Times Database – BAS clients only therefore assume some underreporting</i>)</p> <p>* Problem drug use is defined as the problematic use of opioids (including illicit and prescribed methadone use) and/or the illicit use of benzodiazepines, and implies routine and prolonged use as opposed to recreational and occasional drug use.</p>	<p>31/3/2019</p> <p>BAS Active Drug Clients = 307</p>
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