

---

## **ALCOHOL AND DRUGS PARTNERSHIP (ADP) ANNUAL REPORT 2014-15**

---

**Report by Interim Director of Public Health**

### **COMMUNITY PLANNING PARTNERSHIP STRATEGIC BOARD**

**25 February 2016**

---

#### **1 PURPOSE AND SUMMARY**

- 1.1 **This report alerts Members to the Borders Alcohol and Drug Partnership (ADP) Annual Report for 2014-15.**
  
- 1.2 Borders ADP is a partnership of agencies and services involved with drugs and alcohol. It provides strategic direction to reduce the impact of problematic alcohol and drug use. The ADP is required to produce an Annual report on the ADP 2012-15 Delivery Plan. The Annual report has been prepared according to Scottish Government Guidance and provides information relating to:
  - i) A self assessment of ADP Processes and Structures and resulting actions for the ADP
  - ii) Core Outcomes, Core Indicators and Local Indicators
  - iii) Update on work to progress Ministerial Priorities for 2014-15 and address priorities for 2015-16.

#### **2 RECOMMENDATIONS**

- 2.1 **I recommend that the Community Planning Partnership Strategic Board Notes the Annual Report**

### **3 ADP SELF ASSESSMENT**

- 3.1 This is the third year that Scottish Government (SG) has required the assessment of ADP processes and structures relating to the following themes:
- analyse (e.g. of need)
  - plan
  - deliver (e.g. workforce)
  - review (e.g. evaluation of services).
- 3.2 There are 23 questions to be completed. The descriptors for RAG status (Red, Amber, Green) have been amended this year and following advice from SG we have re-evaluated assessment from previous year.
- 3.3 Summary: There are 0 Red items, 9 are Green and 11 are Amber (3 are non scoring).
- 1 item has moved from Amber to Green: 4. A coherent approach has been applied to selecting and prioritising investment and disinvestment options.
  - 3 items have moved from Green to Amber: work has progressed across these items but have been realigned due to SG advice:
    - 5. We have a shared vision and joint strategic objectives
    - 10. Joint Workforce plans are in place across all levels of service delivery
    - 13. A transparent performance framework is in place for all ADP partner organisations who receive funding thought the ADP.

### **4 CORE AND LOCAL OUTCOMES (Page 21)**

- 4.1 The core and local outcomes reflect national and local priorities from the ADP's 2012-15 Delivery Plan. Progress towards targets and benchmarking data is included. Based on the most recent data Borders has a significantly lower prevalence of problematic drug use in adults to Scotland and others in our benchmarking 'family' and similar levels of drug use and weekly drinking in 15 year olds.
- 4.2 Although our rate of drug and alcohol admissions is decreasing over time and is below Scottish average, we have similar levels compared to our benchmarking 'family'.
- 4.3 ADP's are also asked to report on outcomes for clients which are detailed on page 28. All funded services report progress in terms of alcohol and drug use but also in wider aspects of people's lives such as relationships and community involvement. All services evidence improvement in outcomes for clients. For example, employability work via Addaction supported 11 clients to start college and 9 into employment. Mindfulness groups delivered by Borders Addiction Service supported service users to develop skills to maintain their recovery.
- 4.4 The Children and Families service reports 100% of service users (young people and parents) demonstrated improved emotional well being outcomes and, 89% of children and young people for support around their own use of substances reported a reduction in alcohol use.

## **5 ADP AND MINISTERIAL PRIORITIES (Page 37)**

- 5.1 Significant progress was made on ADP Priorities during 2014-15. For example, over 330 delegates attended workforce development opportunities.
- 5.2 Ministerial priorities were progressed. 95% of people attending adult services started treatment within 3 weeks of referral and Borders continues as the best performing area for the reach of Take Home Naloxone distribution in Scotland. The aim of this national programme is to increase the availability of Naloxone and to improve the chance of it being available for use during an opiate overdose situation.
- 5.3 Training continues to be provided on new psychoactive substances (NPS/'legal highs') and an open Drug Trend Monitoring Group shares up to date local and national intelligence relating to drug use.
- 5.4 Tackling availability and licensing remains a strong focus of delivering a Whole Population Approach with ADP Support Team continuing to support the Local Licensing Forum in the production of the Alcohol Profile which outlines evidence of alcohol related harm to support Licensing Board Members in decision making. Through joint working with Safer Communities drug and alcohol tasking group and Borders Rape Crisis Centre, work has progressed with local event organisers and staff on preventing sexual violence with over 100 individuals attending training as well as reinforcing the message about ensuring all those involved in sale and supply of alcohol at local events over summer period are strictly enforcing 'challenge 25 policy' and refusing service to anyone drunk.
- 5.5 Compliance with the delivery of Alcohol Brief Interventions has continued. A reduction of delivery was noted in Antenatal setting however following support in training, recording processes and support materials this has increased.

## **6 IMPLICATIONS**

### **6.1 Financial**

Financial information is presented within the report. Costs are met within existing indicative budget.

### **6.2 Risk and Mitigations**

- (a) A Risk Log is maintained for the ADP Executive
- (b) Scottish Government has advised the national alcohol and drugs allocation will be reduced by approximately 20% for 2016-17. It is anticipated this is likely to be translated into a corresponding local reduction. Whilst all efforts will be made to minimise this impact, a budget reduction of this scale will impact on service delivery. Work is progressing with services, ADP colleagues and wider stakeholders to understand the potential impact of the reduction and subsequent model of delivery.

### **6.3 Equalities**

The ADP Strategy and Delivery Plan had Equalities Impact Assessments completed and it was anticipated that there are no adverse equality

implications.

#### **6.4 Acting Sustainably**

By undertaking an approach to reducing overall consumption in the whole population ('whole population approach') we will contribute to reducing alcohol and drug related harm both to individual and family circumstances but also social problems in communities such as crime and disorder.

#### **6.5 Carbon Management**

There are no significant effects on carbon emissions arising from the proposals contained in this report.

#### **6.6 Rural Proofing**

This report does not relate to new or amended policy or strategy and as a result rural proofing is not an applicable consideration.

#### **6.7 Changes to Scheme of Administration or Scheme of Delegation**

There are no changes to be made to either the Scheme of Administration or the Scheme of Delegation as a result of the proposals contained in this report.

### **7 CONSULTATION**

- 7.1 The Chief Financial Officer, the Monitoring Officer, the Chief Legal Officer, the Chief Officer Audit and Risk, the Chief Officer HR, and the Clerk to the Council are currently being consulted and their comments will be incorporated into the final report.
- 7.2 The Annual Report and Delivery Plan were developed in partnership with ADP Members and Third Sector colleagues and the Annual Report was validated at the Reducing Inequalities Theme Group prior to submission to Scottish Government.

#### **Approved by**

**Interim Joint Director of Public Health  
Chief Social Work Officer**

**Signature ...Tim Patterson  
Signature ...Elaine Torrance**

#### **Author(s)**

Name	Designation and Contact Number
Tim Patterson	Interim Joint Director of Public Health
Elaine Torrance	Chief Social Work Officer

**Background Papers: Nil**

**Previous Minute Reference: Nil**

**Note** – You can get this document on tape, in Braille, large print and various computer formats by contacting the address below. Jill Murray can also give information on other language translations as well as providing additional copies.

Contact us at NHS Borders Public Health on 01896 825560; Department of Public Health-NHS Borders, Education Centre, Borders General Hospital, Melrose, TD6 9BD; [public.health@borders.scot.nhs.uk](mailto:public.health@borders.scot.nhs.uk)