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Agenda Item: 17.

Integration Joint Board

Date of Meeting: 9 December 2020.

Subject: Orkney Alcohol and Drugs Partnership Annual Report 2019/20.

1. Summary

1.1. This report introduces the Alcohol and Drugs Partnership's Annual report for discussion and noting.

2. Purpose

2.1. To present the Orkney Alcohol and Drugs Partnership's Annual Report for the period 2019/20.

3. Recommendations

The Integration Joint Board is invited to:

3.1. Scrutinise the Alcohol and Drugs Partnership's Annual Report 2019/20, attached as Appendix 1 to this report.

3.2. Seek assurance on the progress made by the Alcohol and Drugs Partnership during 2019/20 against the Rights, Respect and Recovery Strategy, including the Drug Deaths Task Force emergency response paper and the Alcohol Framework 2018, as detailed in Appendix 1 to this report.

3.3. Note that the Alcohol and Drug Partnership's Annual Report 2019/20 was submitted to Scottish Government on 8 October 2020.

4. Background

4.1. Each Alcohol and Drugs Partnership is required to produce an annual report to Scottish Government reporting on their performance against the agreed ministerial priorities and national deliverables.

5. Annual Report

5.1. The Annual Report details that, during 2019/20, the Orkney Drug and Alcohol Treatment Service was able to offer access to treatment via alternative options such as 'Near Me' and other tele-health options. The service introduced a home delivery service for Opioid Replacement Therapies (ORT) during the COVID-19 outbreak.

5.2. A pilot project was commissioned to deliver assertive outreach for those individuals who required additional support to get into, and stay in, treatment. The findings and evaluation will be reviewed by the Alcohol and Drugs Partnership's Strategy Group for future consideration.

5.3. During 2019/20, Orkney Alcohol and Drugs Partnership commissioned delivery of the Community Reinforcement and Family Training (CRAFT) project which aims to support children and family members of people misusing alcohol and drugs. All those engaged with the service have their own unique person-centred recovery plan which can be adapted to meet the needs of the individual and is reviewed on a weekly basis.

5.4. Orkney Alcohol and Drugs Partnership continues to promote the Older Adults and Alcohol information booklet that was previously commissioned and locally made to support older adults and carers. Whilst delivering interventions and promotional campaigns, such as the Scottish Government's Count 14 Campaign, targeted audiences of older males through initiatives such as 'The Men's Shed' were engaged with.

6. Contribution to quality

Please indicate which of the Orkney Community Plan 2019 to 2022 visions are supported in this report adding Yes or No to the relevant area(s):

Resilience: To support and promote our strong communities.	Yes.
Enterprise : To tackle crosscutting issues such as digital connectivity, transport, housing and fuel poverty.	No.
Equality : To encourage services to provide equal opportunities for everyone.	Yes.
Fairness : To make sure socio-economic and social factors are balanced.	Yes.
Innovation : To overcome issues more effectively through partnership working.	Yes.
Leadership : To involve partners such as community councils, community groups, voluntary groups and individuals in the process.	Yes
Sustainability: To make sure economic and environmental factors are balanced.	No.

7. Resource implications and identified source of funding

7.1. There are no financial implications directly arising as a result from this report.

8. Risk and Equality assessment

8.1. There are no risks or equality implications directly arising as a result from this report.

9. Direction Required

Please indicate if this report requires a direction to be passed to:

NHS Orkney.	No.
Orkney Islands Council.	No.
Both NHS Orkney and Orkney Islands Council.	No.

10. Escalation Required

Please indicate if this report requires escalated to:

NHS Orkney.	No.
Orkney Islands Council.	No.
Both NHS Orkney and Orkney Islands Council.	No.

11. Authors

11.1. Gillian Morrison (Interim Chief Officer), Integration Joint Board.

11.2. Lynda Bradford (Acting Head of Health and Community Care), Orkney Health and Care.

11.2. Katie Spence (Alcohol and Drugs Partnership Co-ordinator), Orkney Health and Care.

12. Contact details

12.1. Email: <u>gillian.morrison@orkney.gov.uk</u>, telephone: 01856873535 extension 2611.

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12.2. Email: <u>katie.spence@nhs.scot</u>.

13. Supporting documents

13.1. Appendix 1: Orkney Alcohol and Drugs Partnership Annual Report 2019/20.



1.1 ALCOHOL AND DRUG PARTNERSHIP ANNUAL REVIEW 2019/20 (Orkney ADP)

I. Delivery progress

II. Financial framework

This form is designed to capture your **progress during the financial year 2019/20** against the <u>Rights</u>, <u>Respect and Recovery strategy</u> including the Drug Deaths Task Force <u>emergency response paper</u> and the <u>Alcohol Framework 2018</u> We recognise that each ADP is on a journey of improvement and it is likely that further progress has been made since 2019/20. Please note that we have opted for a tick box approach for this annual review but want to emphasise that the options provided are for ease of completion and it is not expected that every ADP will have all options in place. We have also included open text questions where you can share details of progress in more detail. Please also ensure all sections in yellow are fully completed.

The data provided in this form will allow us to provide updates and assurance to Scottish Ministers around ADP delivery. The data will also be shared with Public Health Scotland (PHS) evaluation team to inform the <u>monitoring and evaluation of rights, respect and recovery</u> (MERRR). This data is due to be published in 2021.

We do not intend to publish the completed forms on our website but encourage ADPs to publish their own submissions as a part of their annual reports, in line with good governance and transparency. All data will be shared with PHS to inform the MERRR and excerpts and/or summary data from the submission will be used in published MERRR reports. It should also be noted that, the data provided will be available on request under freedom of information regulations.

In submitting this completed Annual Review you are confirming that this partnership response has been signed off by your ADP, the ADP Chair and Integrated Authority Chief Officer.

The Scottish Government copy should be sent by Wednesday 14th October 2020 to: alcoholanddrugdelivery@gov.scot



NAME OF ADP: Orkney Alcohol & Drugs Partnership

Key contact:	
Name:	Katie Spence
Job title:	ADP Co-ordinator
Contact email:	katiespence@nhs.net

I. DELIVERY PROGRESS REPORT

1. Representation

Community Justice Partnership☑Children's Partnership☑Integration Authority☑

1.2 What organisations are represented on the ADP and who was the chair during 2019/20?

Chair (Name, Job title, Organisation): Sally Shaw, Chief Officer, Orkney Health & Care

Representation <i>The public sector:</i>	
Police Scotland	
Public Health Scotland	
Alcohol and drug services	
NHS Board strategic planning	
Integration Authority	
Scottish Prison Service (where there is a prison wi	thin the geographical
area)	n/a
Children's services	
Children and families social work	
Housing	$\mathbf{\nabla}$
Employability	$\mathbf{\nabla}$
Community justice	
Mental health services	
Elected members	
Other	Scottish Fire & Rescue Service
The third sector:	
Commissioned alcohol and drug services	
Third sector representative organisation	
Other third sector organisations	☑ Women's Aid Orkney
People with lived/ living experience	
Other community representatives	Please provide details
Other	Please provide details



1.3 Are the following details about the ADP publically available (e.g. on a website) ?		
Membership Papers and minutes of meetings Annual reports/reviews Strategic plan	 ☑ ☑ ☑ ☑ ☑ Www.orkneyadp.org.uk 	

1.4 How many times did the ADP executive/ oversight group meet during 2019/20?

4 times (February 2020, October 2019, August 2019 and May 2019. The minutes are on the website at https://www.orkneyadp.org.uk/about-orkney-adp/minutes-of-meetings?start=0

2. Education and Prevention

2.1 In what format was information provided to the general public on local treatment and support services available within the ADP? *Please tick those that apply (please note that this question is in reference to the ADP and not individual services)*

Leaflets/ take home information	
Posters	
Website/ social media	
https://www.orkneyadp.org.uk/services/local-service	ce-directory
https://www.facebook.com/OrkneyADP/	
Click or tap here to enter text.	
Accessible formats (e.g. in different languages)	
Please provide details	
Other	
Please provide details	

2.2 Please provide details of any specific communications campaigns or activities carried out during 19/20 (*E.g. Count 14 / specific communication with people who alcohol / drugs and/or at risk*) (max 300 words).

PubWatch Basic Drug Awareness Sessions

In conjunction with the local PubWatch scheme, basic drugs awareness sessions have been delivered within the local hospitality sector in Orkney. The training covered different types of drugs, the signs and symptoms of use, awareness of drug use in premises and supporting those in distress or under intoxication.

Benzodiazepine Awareness Training

Following local concerns around the use of benzodiazepines and consequent hospital admissions a bespoke awareness session was delivered within the secondary school for teaching staff. The session covered signs and symptoms of intoxication, withdrawal, common benzodiazepines in circulation and the services available for pupils and staff.



S6 Leavers Sessions

Sessions were delivered to both secondary schools S6 pupils in Orkney in advance of their departure from school onward to further education or employment where it is recognised that pupils can be quite vulnerable during this transition period. The sessions covered awareness of substances, harm reduction advice and what to do in an overdose emergency.

Connect Project Sessions

The Connect Project facilitated by Voluntary Action Orkney is a project working with young people aged 15 to 21 not in education, training or employment. A series of four sessions were delivered across a month on basic drugs awareness and harm reduction.

Alcohol Awareness Week 2019

A number of pop-up information hubs were set up across the community including the library, local leisure centre and the Balfour Hospital giving visual displays and information on the recommended drinking guidelines. Alcohol calculators, unit measuring cups and 'spikeys' were available for people to take away.

Count 14 Campaign

The Scottish Government's alcohol awareness campaign, Count 14 was promoted across Orkney at a number a venues including the Orkney College and in the secondary schools. As one of the target groups for this campaign was older males, an interactive session was delivered at the Orkney Men's Shed.

For more information on these communications and others delivered over 2019/20, please go to:

https://www.orkneyadp.org.uk/information-resources/reports-publications-of-interstlocal?task=document.viewdoc&id=180

Click or tap here to enter text.

2.3 Please provide details on education and prevention measures/ services/ projects provided during the year 19/20 specifically around drugs and alcohol (max 300 words).

Orkney ADP offered a number of education and prevention training opportunities during 2019/20, they included:

Crew: Training for Trainers Course on Drugs Awareness & Drug Trends

Re-Solv: Volatile Substance Abuse Training

Motivational Interview Training

Scottish Drugs Forum Training

- Introduction to Trauma, Adverse Childhood Experiences and Substance Use;
- Understanding & Responding to Stigma;
- Engagement Skills for Working with People who use Drugs & Alcohol;
- Listening & Responding to Children Affected by Parental Substance Use



Click or tap here to enter text.

2.4 Was the	ADP represented at the alcohol Licensing Forum?
Yes	$\mathbf{\nabla}$
No	
Please provi	de details (max 300 words)
which there local Licens	p-ordinator is a member of the local Licensing Forum and attends the meetings of are approximately 3 to 4 per year. Additionally there is an annual joint meeting of the sing Board and Forum to meet to discuss matters jointly as a development session. censing Standards Officer (Environmental Health Manager) is a member of the ADP oup.
2.5 Do Public	c Health review and advise the Board on license applications?
All	
Most	
Some	
None	
Please provide details (max 300 words) Public Health receives all new license applications of which they review and respond accordingly.	



3. RRR Treatment and Recovery - Eight point plan

People access treatment and support – particularly those at most risk (where appropriate please refer to the Drug Deaths Taskforce publication <u>Evidence-Based Strategies for Preventing Drug-</u> <u>Related Deaths in Scotland</u> : priority 2, 3 and 4 when answering questions 3.1, 3.2, 3.3 and 3.4)	
3.1 During 2019/20 was there an Immediate Response Pathway for Non-fatal Overdose in place? Yes □ No □ In development ☑	
Please give details of developments (max 300 words) The pre-existing Drug Related Death Sub Group have already embedded a referral process following a non-fatal overdose presenting to A&E which triggers the opportunity of referral into treatment and / or provision of Take Home Naloxone if appropriate. Further to this a draft non- fatal overdose pathway with Scottish Ambulance Service is currently being finalised for approval and use in the future.	
3.2 Please provide details on the process for rapid re-engagement in alcohol and/or drug services following a period of absence, particularly for those at risk 19/20 (max 300 words). There is a duty system at the Community Mental Health Team which is open 9am-5pm, Monday to Friday where advice is given and cases can be picked up directly. This has not changed during COVID. The service also accepts direct referral from the Hospital for follow up. Telephone and Near Me can be offered and if deemed appropriate face to face with PPE. Majority of patients are seen within the 21 days target for treatment.	
3.3 What treatment or screening options were in place to address <u>drug</u> harms? (mark all that apply)	

Same day prescribing of OST		
Same day prescribing of UST		
Methadone	\checkmark	
Buprenorphine and naloxone combined (Suboxone)		
Buprenorphine sublingual		
Buprenorphine depot		
Diamorphine		
Other non-opioid based treatment options		
Other	All pharmacology treatment	
options are offered alongside psychosocial support through episode of care. Currently investigating and developing pathways for Buprenorphine depot.		

3.4 What measures were introduced to improve access to alcohol and/or drug treatment and support services during the year, particularly for those at risk 19/20 (max 300 words).

NHS Orkney Drug & Alcohol Treatment Service able to offer access to treatment via alternative options such as 'Near Me' and other tele-health options. The service introduced a home delivery service for Opioid Replacement Therapies (ORT) during the Covid-19 outbreak. Also reduced supervised supervised dispensing and increased prescription lengths. In addition a pilot project was commissioned to deliver assertive outreach for those individuals who require additional



support to get into and stay into treatment. The findings and evaluation is to be reviewed by the ADP Strategy Group for future consideration.

3.5 What treatment or screening options were in place to address <u>alcohol</u> harms? (mark all that apply)	
Fibro scanning	
Alcohol related cognitive screening (e.g. for ARBD)	
Community alcohol detox	
Inpatient alcohol detox	
Alcohol hospital liaison	
Access to alcohol medication (Antabuse, Acamprase etc.)	
Arrangements for the delivery of alcohol brief interventions	
in all priority settings	\square
Arrangements of the delivery of ABIs in non-priority settings	
Other	Please provide details

People engage in effective high quality treatment and recovery services			
review performance		e following services (examples could include linical governance reviews, case file audits, <i>Children and Family Services</i>	
Third sector		\square	
Public sector			
Other			
though care inspects All Third Sector co ADP with six mont Commissioning Su	3.6 Please give details on how services were Quality Assured including any external validation e.g. though care inspectorate or other organisations? (max 300 words) All Third Sector commissioned services work to a Service Level Agreement (SLA) and provide the ADP with six monthly accountability reports which are in turn scrutinized by the ADP Commissioning Sub Group. Additionally an annual visit to each commissioned service was undertaken by the ADP Co-ordinator, Vice Chair and Head of Health & Community Care in		

3.7 Were there pathways for people to access residential rehabilitation in your area in 2019/20?				
Yes				
No				

Please give details below (including referral and assessment process) (max 300 words)

2. Protocol for referral to Rehabilitation for alcohol or Drugs Rehabilitation is suitable for:

• Adults age 18 -65 years



• Male or female (some areas offer single sex treatments)

Criteria

- substance free for at least two months prior to placement and some evidence to support that this is the case. Self-reporting is not enough. Evidence of BAC or drug screens should be included.
- Engaged with local services for alcohol or drugs ie OACAS, AA, SMART Recovery and have attended at least one appointment with each in the previous two months. Feedback from these other services is also useful in making an assessment.
- suitable for one to one counselling.
- Suitable for groupwork
- Recognise a need to change lifestyle
- able to commit to a minimum period of 4 weeks outside of Orkney.
- Have a home to return to at any time
- able to live in a group environment and prepared to abide by house rules.
- have identified Goals to be achieved through Rehabilitation.

Must be engaged with current Service provision.

- attend appointments on time
- attend all appointments as arranged or cancel and rearrange.
- attend appointments substance free.

Have an assessment completed by a member of the CMHT in relation to substance misuse

Rehabilitation is not suitable for :

- those who are not currently engaged with any local Service in relation to substance misuse
- those who do not see abstinence as an option
- those who have active symptoms of Mental Illness eg. severe depression or Psychosis
- those who are actively suicidal
- those who have severe impairments that limit learning capability eg Korsakoffs

Click or tap here to enter text.

3.8 How many people started a residential rehab placement during 2019/20? (if possible, please provide a <u>gender</u> breakdown)

NIL during this period.



People with lived and living experience will	be involved in service design, development and delivery		
3.9 Please indicate which of the following approaches services used to involve lived / living experience			
(mark all that apply).			
For people with lived experience :			
	_		
Feedback/ complaints process	$\mathbf{\nabla}$		
Questionnaires/ surveys	$\mathbf{\nabla}$		
Focus groups			
Lived/living experience group/ forum	$\mathbf{\nabla}$		
Board Representation within services	$\mathbf{\nabla}$		
Board Representation at ADP			
Other			
Stici	¥_		
Please provide additional information (optic	nal)		
	tation on the ADP Strategy Group there has been		
	e with areas such as strategy development through		
	ce user forum is currently being prepared via the Third		
Sector and will be fully functioning for 2			
, ,			
For family members:			
Feedback/ complaints process	\checkmark		
Questionnaires/ surveys	$\mathbf{\nabla}$		
Focus groups	$\mathbf{\nabla}$		
Lived/living experience group/ forum	\checkmark		
Board Representation within services	$\mathbf{\nabla}$		
Board Representation at ADP			
•			
Other	Please provide details		
Please provide additional information (optic			
Click or tap here to enter text.	nai)		
Click of tap here to enter text.			
3 10 Had the involvement of people with liv	ed/ living experience, including that of family members,		
changed over the course of the 2019/20 fin			
Improved			
Stayed the same			
Scaled back			
No longer in place			
Diseas give details of any changes (may 2)			
Please give details of any changes (max 30			
	Service Level Agreement, each service must demonstrate		
	they involve service users and their family providing fluence changes to service delivery for example. During		
	to adapt delivery to more virtual means during the Covid		
	led via those means such as survey monkey online		
questionnaires etc.			



3.11 Did services offer specific volunteering and employment opportunities for people with lived/ living experience in the delivery of alcohol and drug services?
Yes
No

Please give details below (max 300 words)

During 2019/20, Orkney ADP commissioned a third sector service, Orkney Blide Trust who offer both a drop-in service as well as operating a 'Club House' where there are volunteering and employment opportunities available to people with lived and living experience in areas such as catering, gardening and administration. In addition the service also supports a small number of transitional employment opportunities alongside local businesses and organisations. Additionally, the Job Centre is represented on the ADP Strategy Group and play an active role in supporting individuals get back into work and / or update their skills.

People access interventions to reduce drug related harm

3.12 Which of these settings offered the following to the public during 2019/20? (mark all that apply)

Setting:	Supply Naloxone	Hep C Testing	IEP Provision	Wound care
Drug services Council				
Drug Services NHS				
Drug services 3rd Sector				
Homelessness services				
Peer-led initiatives				
Community pharmacies				
GPs				
A&E Departments				
Women's support services				
Family support services				
Mental health services				
Justice services				
Mobile / outreach services				
Other (please detail)			\checkmark	
Needle Exchange Service				



A person-centred approach is developed
3.13 To what extent were Recovery Oriented Systems of Care (ROSC) embedded across services within the ADP area? ROSC is centred around recognising the needs of an individual's unique path to recovery. This places the focus on autonomy, choice and responsibility when considering treatment.
Fully embedded 🖌
Partially embedded
Not embedded
Please provide details (max 300 words) All ADP commissioned services as per their Service Level Agreement must have person-centred recovery plans in place which is demonstrated through their accountability reports and on-site visits. Plans demonstrated that service users are involved in setting and reviewing their own plans and that they meet the unique needs of each individual holistically. Each service uses a Recovery Outcome measurement tool to monitor ad track progress.
3.14 Are there protocols in place between alcohol and drug services and mental health services to provide joined up support for people who experience these concurrent problems (dual diagnosis)? Yes ☑ No □
Please provide details (max 300 words) Our Tier 3 Alcohol and Drug Treatment Service sits within the Community Mental Health Team with a dedicated Dual Diagnosis Community Psychiatric Nurse employed.
The recovery community achieves its potential
3.15 Were there active recovery communities in your area during the year 2019/20?
Yes 🗆
No 🗹
 3.16 Did the ADP undertake any activities to support the development, growth or expansion of a recovery community in your area? Yes ✓ No
3.17 Please provide a short description of the recovery communities in your area during the year 2019/20 and how they have been supported (max 300 words) There are no dedicated recovery communities currently set up in Orkney however we did commission a third sector service which delivered the Club House ethos of supporting recovery by having an alcohol and drug free place for people to engage in activities, volunteering and transitional employment placements. The ADP and the third sector service supported individuals to attend the Scottish Recovery Walk in Inverness. Recovery remains a priority for Orkney ADP and recovery initiatives will continue to be investigated for future developments.



A trauma-informed approach is developed		
3.18 During 2019/20 have se	ervices adopted a trauma-informed approach?	
All services		
The majority of services		
3		
Some services		
No services		
Please provide a summary of progress (max 300 words) Orkney ADP hosted an event for members of the ADP and commissioned services on the LPASS (Lead Psychologists in Addiction Services Scotland) report. In addition Orkney has maintained its 100% rate at individuals being seen within 21 days of referral into drug and alcohol treatment services. Within NHS Orkney's Community Mental Health Team a 'Transforming Psychological Trauma Implementation Co-ordinator' is working actively to provide training and support services to be trauma-informed. Progress on this is monitored through the commissioned services accountability reports.		
Trauma Implementation Co to be trauma-informed. Pr	o-ordinator' is working actively to provide training and support services	
Trauma Implementation Co to be trauma-informed. Pr	o-ordinator' is working actively to provide training and support services	
Trauma Implementation Co to be trauma-informed. Pr accountability reports.	o-ordinator' is working actively to provide training and support services ogress on this is monitored through the commissioned services	
Trauma Implementation Co to be trauma-informed. Pr accountability reports.	b-ordinator' is working actively to provide training and support services ogress on this is monitored through the commissioned services <u>future-proofs delivery</u> ares were in place to inform surveillance and monitoring of alcohol and drug	
Trauma Implementation Co to be trauma-informed. Pr accountability reports. An intelligence-led approach 3.19 Which groups or structu	b-ordinator' is working actively to provide training and support services ogress on this is monitored through the commissioned services <u>future-proofs delivery</u> ares were in place to inform surveillance and monitoring of alcohol and drug	
Trauma Implementation Co to be trauma-informed. Pr accountability reports. An intelligence-led approach 3.19 Which groups or structu harms or deaths? (mark all to Alcohol harms group	b-ordinator' is working actively to provide training and support services ogress on this is monitored through the commissioned services <u>future-proofs delivery</u> ares were in place to inform surveillance and monitoring of alcohol and drug	
Trauma Implementation Co to be trauma-informed. Pr accountability reports. An intelligence-led approach 3.19 Which groups or structu harms or deaths? (mark all t Alcohol harms group Drug death review group	b-ordinator' is working actively to provide training and support services ogress on this is monitored through the commissioned services <u>future-proofs delivery</u> irres were in place to inform surveillance and monitoring of alcohol and drug hat apply) □ ✓	
Trauma Implementation Co to be trauma-informed. Pr accountability reports. An intelligence-led approach 3.19 Which groups or structu harms or deaths? (mark all to Alcohol harms group	b-ordinator' is working actively to provide training and support services ogress on this is monitored through the commissioned services <u>future-proofs delivery</u> irres were in place to inform surveillance and monitoring of alcohol and drug hat apply) □ ✓	

3.20 Please provide a summary of arrangements which were in place to carry out reviews on <u>alcohol</u> <u>related deaths</u> and how lessons learned are built into practice (max 300 words) A local sub group has been established to undertake the reviews of alcohol deaths in preparation of the publishing of the Alcohol Related Deaths Review Guidance by Alcohol Focus Scotland (AFS). In the interim a regional sub group of the Island ADPs have been meeting with the Policy & Development Co-ordinator from AFS to support the roll out locally.

3.21 Please provide a summary of arrangements which were in place to carry out <u>reviews on drug</u> related deaths and how lessons learned are built into practice (max 300 words)

There is a dedicated local Drug Related Death Group who aims to meet at least twice per year regardless of the number of deaths that have occurred. There are very low numbers of drug related deaths in Orkney and can vary from year to year. In the 2019/20 reporting period there was one drug related death. There is a protocol in place for the group to review deaths with recommendations and points of learning to be shared with relevant committees. Each review is undertaken on a case by case review.



Λ	Cotting	it Dia	ht for C	bildron	Vouna	Doonlo	and	Eamiliae
4.	Getting	ιι κια	ni ior c	hildren,	roung	People	e anu i	rammes

4.2 Did you have specific treatment and support services for children and young people (under the age of 25) <u>affected</u> by alcohol and/or drug problems of a parent / carer or other adult?
Yes

No

Please give details (E.g. type of support offered and target age groups)

 \square

During the 2019/20 period Orkney ADP commissioned the delivery of the Community Reinforcement and Family Training (CRAFT) project which aims to support children and family members of people misusing alcohol and drugs. All those engaged with the service have their own unique person-centred recovery plan which can be adapted to meet the needs of the individual and is reviewed on a weekly basis.

No 🗆

Please provide details on how priorities are reflected in children's service planning e.g. collaborating with the children's partnership or the child protection committee? (max 300 words)

The ADP is represented on the Child Protection Committee via the ADP Co-ordinator who attends the quarterly meetings and the annual development day. Additionally the ADP is represented on the Child Protection Training Sub Group to ensure that components relating to familial alcohol



and drug use are covered through the local Child Protection training and any relevant local	l
communications work.	

4.4 Did services for children and young people, <u>with alcohol and/or drugs problems</u> , change in the 2019/20 financial year?			
Improved Stayed the same Scaled back No longer in place			
	ional information (max 300 words) nissioned by the ADP were in the second year of their commissioning cycle.		
4.5 Did services for children and young people, <u>affected</u> by alcohol and/or drug problems of a parent / carer or other adult, change in the 2019/20 financial year?			
	 ional information (max 300 words) inissioned by the ADP were in the second year of their commissioning cycle. 		

4.6 Did	the ADP have specific support services for adult family members?
Yes 🖌	
No [
Adult fa	provide details (max 300 words) amily members could access support through our commissioned adult counselling service he aforementioned CRAFT project.

4.7 Did services for adult family members change in the 2019/20 financial year?		
Improved Stayed the same Scaled back No longer in place		



4.8 Did the ADP area provide any of the following adult services to support family-inclusive practice? *(mark all that apply)*

Services:	Family member in treatment	Family member not in treatment	
Advice	\checkmark		
Mutual aid			
Mentoring			
Social Activities			
Personal Developme	ent 🖌		
Advocacy			
Support for victims o	fgender		
based violence			
Other (Please detail	below)		

Please provide additional information (max 300 words)

In 2019-20 OADP commissioned Relationships Scotland Orkney to deliver Community Reinforcement and Family Training (CRAFT) sessions of which 8 were offered and 6 were attended. In addition to this specialist work, Family Support Workers continue to provide a range of support to individuals and families, including mentoring and personal development, practical tools and coping strategies. In total we offered 518 Family Support sessions and 420 were attended in 2019-20. Of course many of these cases do not involve substance misuse, but across all our clients approx. 9% present with risk factors associated with alcohol (7%) or drugs (2%), and 76% present with at least one risk factor (63% mental health concerns, 17% domestic abuse, 23% risk of suicide), many presenting with more than one.



5. A Public Health Approach to Justice

, , ,	your area, were arrangements in place and executed to ensure prisoners who
are identified as at risk left	Srison with haloxone?
Yes	
No	
No prison in ADP area	
Despite there not being a to support individuals up	ow effective the arrangements were in making this happen (max 300 words) prison in our area, our local Criminal Justice Service works proactively on release of prison to provide them with quick access to the drug and and allow the provision of Take Home Naloxone to be made if it is

5.2 Has the ADP worked wi	th community justice partners in the following ways? (mark all that apply)
Information sharing Providing advice/ guidance Coordinating activates	
Joint funding of activities	
	 Please provide details 300 words) member of the Community Justice Partnership who attends the local he discussions and the local plans and reports.

5.3 Has the ADP contribute following ways? (mark all the second s	d toward community justice strategic plans (E.g. diversion from justice) in the <i>at apply</i>)
Information sharing	

Providing advice/ guidance	$\mathbf{\nabla}$
Coordinating activates	
Joint funding of activities	
Other	Please provide details
Please provide details (max 300 words) Orkney ADP has contributed to the Orkney Community Justice Improvement Plan which can be found at: https://www.orkneycommunities.co.uk/COMMUNITYPLANNING/index.asp?pageid=658992. OADP also contributes to the Annual Report Return for the Community Justice Partnership.	



5.4 What pathways, protocols and arrangements were in place for individuals with alcohol and drug treatment needs at the following points in the criminal justice pathway? Please also include any support for families. (max 600 words)

a) Upon arrest

All individuals who enter local custody settings are offered an Alcohol Brief Intervention to assess their drinking levels. A handout of local and national support services and helplines is also given in a paper format for people to take away with them if desired. In some occasions where there is concern for the individual's wellbeing an entry would be made on the Vulnerable Person's Database for consideration by the concern hub and appropriate sharing thereafter.

b) Upon release from prison

The Criminal Justice Service in Orkney would only have contact with those subject to statutory licence and referral would be made by the allocated supervising officer to alcohol/ drug service if required. Again if the individual is known to criminal justice a pre-release Integrated Case Management conference is held 4 months prior to release for the purpose of identifying outstanding needs such as substance use and referrals are placed accordingly to maintain continuity of treatment/support. However, the team are not involved in cases where a short term sentence has been served and the individual is not known to justice services. For those without statutory licence, it is relied upon Scottish Prison Service to contact our local alcohol and drug treatment service prior to release to provide referral into local services. Due to the small numbers and the nature of the community this usually is managed well however there can be difficulties with prisoners being placed at a range of prisons across Scotland and each prison operating slightly differently.



6. Equalities

Please give details of any specific services or interventions which were undertaken during 2019/20 to support the following equalities groups:

6.1 Older people (please note that C&YP is asked separately in section 4 above) Orkney ADP continues to promote the Older Adults and Alcohol information booklet that was previously commissioned and locally made to support older adults and carers. Whilst delivering interventions and promotional campaigns such as the Scottish Government's Count 14 Campaign, targeted audience's of older males through initiatives such as 'The Men's Shed' were engaged with.

6.2 People with physical disabilities

Our Substance Misuse Development Officer contributes to an education programme at the Orkney College aimed at students with additional needs due to physical disabilities, sensory impairments and learning difficulties. The programme is designed to support individuals for independent living covering topics around looking after your health and personal safety.

6.3 People with sensory impairments

Our Substance Misuse Development Officer contributes to an education programme at the Orkney College aimed at students with additional needs due to physical disabilities, sensory impairments and learning difficulties. The programme is designed to support individuals for independent living covering topics around looking after your health and personal safety.

6.4 People with learning difficulties / cognitive impairments .

Our Substance Misuse Development Officer contributes to an education programme at the Orkney College aimed at students with additional needs due to physical disabilities, sensory impairments and learning difficulties. The programme is designed to support individuals for independent living covering topics around looking after your health and personal safety.

6.5 LGBTQ+ communities

Whilst not directly commissioned by the Orkney ADP, the Orkney Youth Cafe has been pivotal in providing a venue and supporting the set up of a young person's LGBTQ+ group in Orkney which has been very successful in engaging with young people who can often feel marginalised and vulnerable in a small close-knit community. OADP frequently visit the cafe to deliver bespoke training and information sessions.

6.6 Minority ethnic communities

A number of our services now offer information in translated formats or can provide a translator to encourage access and quality of service provision.

6.7 Religious communities

Orkney ADP continues to deliver annual drug and alcohol training to the Orkney Street Pastors Group who provides support on the streets at the weekends. Whilst the initiative is not religious based the volunteer pastors are made up from across the religious denominations in Orkney.

6.8 Women and girls (including pregnancy and maternity)

The OADP is a member of the Domestic Abuse Forum and contributes to the quarterly meetings as well as the Domestic Abuse (incorporating violence against women) action plan. The ADP have supported the co-ordination and set up of a Women's only mutual aid peer group (SMART Recovery) facilitated by Women's Aid Orkney. Following a successful application to the



programme for funding, a Foetal Alcohol Spectrum Disorder Group has been formed, overseen by the ADP. The group is focusing on developing a pathway for neurodevelopmental screening, support for families and professionals as well as training and preventative work, this includes support and delivery within maternity and health visiting services.



II. FINANCIAL FRAMEWORK 2019/20

Your report should identify all sources of income <u>(excluding Programme for Government funding)</u> that the ADP has received, alongside the funding that you have spent to deliver the priorities set out in your local plan. It would be helpful to distinguish appropriately between your own core income and contributions from other ADP Partners. It is helpful to see the expenditure on alcohol and drug prevention, treatment & recovery support services as well as dealing with the consequences of problem alcohol and drug use in your locality. You should also highlight any underspend and proposals on future use of any such monies.

A) Total Income from all sources

Funding Source	£
(If a breakdown is not possible please show as a total)	
Scottish Government funding via NHS Board baseline allocation to Integration Authority	427,044
2019/20 Programme for Government Funding	34,029
Additional funding from Integration Authority	0
Funding from Local Authority	0
Funding from NHS Board	0
Total funding from other sources not detailed above	0
Carry forwards	48,000
Other	0
Total	509,073

B) Total Expenditure from sources

	£
Prevention including educational inputs, licensing objectives, Alcohol Brief Interventions)	29,700
Community based treatment and recovery services for adults	39,000
Inpatient detox services (includes community detox and CMHT)	202,873
Residential rehabilitation services	0
Recovery community initiatives (Hub pilot)	10,000
Advocacy Services	0
Services for families affected by alcohol and drug use	20,963
Alcohol and drug services specifically for children and young people	28,721
Community treatment and support services specifically for people in the justice system	0
Other (Needle Exchange, ADP Support, Training, Travel)	121,289
Total	452,546



	e all investments against the following streams agreed in partnership through ADPs with approval JBs? (<i>please refer to your funding letter dated 29th May 2020</i>)
•	Scottish Government funding via NHS Board baseline allocation to Integration Authority 2019/20 Programme for Government Funding
Yes No	
The A Office	e provide details (max 300 words) ADP Chair is also the Chief Officer of the Integration Joint Board (IJB) and the Chief Finance er of the IJB sits on the ADP Strategy Group this ensures that the budget, monitoring and untability of the ADP is fed into the IJB for approval.

7.2 Are all investments in alcohol and drug services (as summarised in Table A) invested in partnership through ADPs with approval from IJBs/ Children's Partnership / Community Justice Partnerships as required?

Yes ☑ No □

Please provide details (max 300 words)

All investments made by the ADP are undertaken following NHS Orkney Procurement processes by the ADP Commissioning Sub Group, both the IJB Chief Officer and the IJB Chief Finance Officer are members of this group. There are plans to follow a joint commissioning approach with the IJB in the future but this is still in development.