

Gillian Morrison (Interim Chief Officer)

Orkney Health and Care

01856873535 extension: 2611

OHACfeedback@orkney.gov.uk



Agenda Item: 13

Integration Joint Board

Date of Meeting: 10 February 2021.

Subject: Orkney Alcohol and Drugs Partnership – Operational Framework and Scheme of Delegation.

1. Summary

1.1. This report presents an operational framework and scheme of delegation for the Orkney Alcohol and Drugs Partnership (OADP) regarding commissioning decisions and actions in line with the direction of the Integration Joint Board (IJB) issued in the form of the Commissioning Framework 2018 – 2020 as approved by the IJB.

2. Purpose

2.1. This report proposes delegation regarding commissioning decisions to the Alcohol and Drugs Partnership (ADP) Strategy Group on a permanent basis after an initial two-year period (April 2018 to March 2020) which was previously approved by the IJB on 14 March 2018.

3. Recommendations

It is recommended:

3.1. That the ADP Operational Framework and Scheme of Delegation, attached as Appendix 1 to this report, be approved.

4. Background

4.1. The Scottish Government has confirmed that funding for alcohol and drug services in Scotland, as delivered through local ADPs, was transferred to NHS Boards as part of their baseline budget and that this funding was delegated to Integration Authorities. In Orkney terms this mean delegation to the IJB.

4.2. At its meeting held on 28 June 2017, the Board approved a governance framework to support the ongoing effective working of the ADP while also fulfilling the new governance role of the Board. Specifically, the following matters were delegated to the ADP Strategy Group:

- To set and agree the annual budget from Scottish Government in line with local need.
- To set commissioning outcomes.
- To direct and scrutinise the work of the Commissioning Group to achieve.
- To commission services to meet identified needs that are safe, effective, efficient and demonstrate best value for money.
- To scrutinise any decommissioning decisions including consideration of impact assessments.

4.3. It is now proposed that strategic level decisions in relation to the ADP and setting proportions of spend, aligned to types of activity be delegated to the ADP Strategy Group.

4.4. Delivery of drug and alcohol treatment services and mandatory targets are directly funded by the ADP, with a requirement for submission of performance reports in line with the expectations on commissioned services.

4.5. Preparation and submission of the ADP’s Annual Report to Scottish Government lies with the ADP Strategy Group. Sign off lies with the Chief Officer and the IJB receives the Annual Report as part of performance monitoring purposes.

4.6. Preparation of the ADP Strategy is the responsibility of the ADP Strategy Group with progress monitoring on the outcomes via the Delivery Plan to be scrutinised at the quarterly meetings of the ADP Strategy Group, with regular updates being provided to the IJB where appropriate. The ADP Strategy will be formally approved by the IJB.

5. 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.	No.
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.	No.
Fairness: To make sure socio-economic and social factors are balanced.	No.
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.	No.
Sustainability: To make sure economic and environmental factors are balanced.	No.

6. Resource implications and identified source of funding.

6.1. The budget for ADP funded activities in Orkney is delegated to the IJB. The commissioning framework has been designed to be accommodated within the budget allocated by the Scottish Government which locally has been agreed to be available to the ADP for delivery of drug and alcohol services. However, any underspend that is not ring fenced will be returned to the IJB to either be retained within reserves or cover overspends within other commissioned services.

7. Risk and Equality assessment

7.1. An Equality Impact Assessment is attached as Appendix 2.

8. 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.

9. 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.

10. Author

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

11. Contact details

11.1. Email: gillian.morrison@orkney.gov.uk, telephone: 01856873535 extension 2611.

12. Supporting documents

12.1. Appendix 1: Alcohol and Drug Partnership Operational Framework and Scheme of Delegation.

12.2. Appendix 2: Equality Impact Assessment.

Orkney Alcohol and Drugs Partnership
Operational Framework and
Scheme of Delegation

Contents

Orkney Alcohol and Drugs Partnership	1
1. Introduction.....	3
2. Governance of the work of the OADP.....	3
3. Draft Framework for Orkney ADP	6

Version	Status	Date	Amended by	Reason / overview
1	Final	14.3.2018	Caroline Sinclair	Final draft to IJB
2	Final	27.1.2021	Katie Spence	Final for Approval at IJB.

1. Introduction

1.1. Orkney Alcohol and Drugs Partnership (OADP) is a multi-agency partnership incorporating a wide range of service providers and agencies, including NHS Orkney, Orkney Islands Council, Police Scotland, and the Third Sector.

1.2. The OADP works towards the following a mission:

"We are committed to promoting positive change by addressing all aspects of substance misuse within Orkney. Through effective and efficient Partnership working, we will empower and support individuals, families, and communities to move towards a safe and healthy lifestyle, free from the negative impacts of substance misuse".

1.3. This is the 'Orkney Alcohol and Drug Partnership's (OADP) operational framework for 2021 onwards. The purpose of the framework is to clearly set out how the OADP functions and responsibilities are governed, organised, and reported. It is the intention of the framework to create the conditions to allow OADP, as a group, to work flexibly and responsively while accommodating the new governance role of Orkney's Integration Joint Board as set out below.

1.4. The goal is to build on the positive and effective partnership working relationships that have been established through the OADP and maximise the opportunities for the work of the OADP to link in to, be informed by, and in turn inform, wider strategic planning work and the emerging approach to locality level planning, which is channelled through the Strategic Planning Group and is something the OADP had not previously been linked into.

2. Governance of the work of the OADP

2.1. The Scottish Government's annual allocation of funding for alcohol and drug services in Scotland, as delivered through local Alcohol and Drugs Partnerships (ADPs), will be transferred to NHS Boards as part of their baseline budget.

2.2. The Scottish Government has specified that this funding is to be delegated to Integration Authorities. In Orkney terms this mean delegation to the Integration Joint Board.

2.3. The Scottish Government also advises that supporting the delivery of agreed service levels for alcohol and drug partnerships is to be a priority for Integration.

2.4. This clarification brought about the need for a revision to what had been the local arrangements for governance of the OADP, which previously sat as an autonomous decision-making group. After consultation and consideration of options it was agreed that from 2017 – 2018 the OADP Strategy Group would become a dedicated subgroup, or thematic group, of the Integration Joint Board's Strategic Planning Group (SPG). Individual members of this group are accountable to their respective agencies and to the OADP. It was also agreed that the already established Commissioning Group would be joined up with the group in place to oversee the commissioning of aspects of the work of the Strategic Planning Group,

providing one joined up commissioning group supporting the totality of the work of the Strategic Planning Group. The relationship between groups can be illustrated as follows:



2.5. There are already in existence two subgroups of OADP, the remit of which is not affected by changes to the governance structure.

2.5.1. The OADP Services Subgroup – this group is focused on ensuring opportunities for developing appropriate services for those misusing substances in Orkney.

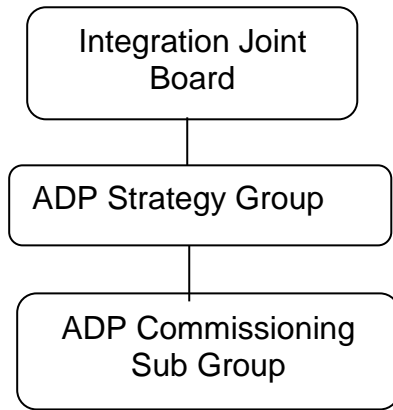
2.5.2. The Services Subgroup will comprise representatives from any services commissioned or receiving funding from OADP who have a part to play in the provision of services for those individual’s and their families who misuse substances. The Services Sub-Group remit is set out in the OADP Terms of Reference and the group reports directly to the OADP Strategy Group.

2.6. The Drug Related Deaths group. This is a statutory requirement from the Scottish Government – this group is required to be appointed by OADP and meet at least once a year.

2.6.1. The group’s work is focused on reviewing drugs related deaths to identify learning for the development of further pro-active and preventative approaches in the future. The remit of the group is set out in the OADP Terms of Reference and the group reports directly to the OADP Strategy Group.

2.7. In deciding on this governance arrangement, the IJB also recommended that a framework for delegation be developed to enable the OADP to be responsive and timely in its actions, within the agreed strategy direction set by the IJB.

2.8. Following a review of the scheme of delegation and the framework based on previous years’ activities, it is proposed that a revised scheme of delegation be followed from 2021 onwards:



2.9. Within this framework the roles of the various aspects of the governance structure can be described as follows.

3. Draft Framework for Orkney ADP

Forum.	Level of Delegation / Activity.
Integration Joint Board.	<ul style="list-style-type: none"> • Agree strategic level decisions based on recommendations from the ADP Strategy Group. • Scrutiny and approval of final version of annual reports / performance reports. • Approval of final version of new strategy documents. • Receive reports from OADP Strategy Group on progress against OADP agreed outcomes.
OADP Strategy Group.	<ul style="list-style-type: none"> • Set proportions of spend to be aligned to types of activity. • Development of annual reports and annual plans. • Development of new strategy documents. • Development and reporting on ADP Delivery Plan with provision of quarterly updates against work streams. • Mapping the range of existing services and identifying gaps in service delivery • Making recommendations to the IJB in relation to the proportions of spend to be aligned to types of activity utilising funding from the Scottish Government to address gaps, ensure delivery of key objectives and achievement of agreed outcomes. • Set commissioning outcomes. • Direct and scrutinise the work of the Commissioning Group to achieve commissioning of services to meet identified needs that are safe, effective, efficient and demonstrate best value for money. • Scrutinise any decommissioning decisions including consideration of impact assessments. • Receive performance reports re all OADP funded services. • Scrutinise budget spend. • Maintain an overview of any risks to delivery of OADP objectives and action to address these. • Lead communications and engagement work for OADP. • Undertake training needs analysis and development of workforce development strategy.

Forum.	Level of Delegation / Activity.
	<ul style="list-style-type: none"> • Commissioner and provision of training utilising national and local trainers. • Reporting of statistical information to ISD (Naloxone provision and Drug Related Death data. • Monitoring and scrutinising of the Quality Principles for Substance Misuse Services action plan of recommendations following the Care Inspectorate visit in 2016.
ADP Commissioning Group.	<ul style="list-style-type: none"> • Implement the decisions of the OADP Strategy Group in terms of commissioning services. • Undertake the mechanics of the commissioning process – develop service specifications and reporting frameworks. • Issue the commissioning documents. • Overview submissions and make recommendations for award of contracts to the OADP Strategy Group. • Negotiate and agree outcome-focused, recovery orientated contracts or written agreements, which incorporate the Quality Principles for Misuse Services with all service providers. • Receive and review performance reports, ensuring recording and reporting arrangements are in place to monitor performance, and assess and manage progress and achievement of agreed outcomes. • Scrutinise the output from visits to commissioned services. • Support commissioned services to build capacity to continuously review, improve, and develop a quality and outcomes focused approach to service delivery. • Report performance of commissioned services to OADP Strategy Group (and any other SPG sub groups that the commissioning group is undertaking the role for).



Equality Impact Assessment

The purpose of an Equality Impact Assessment (EqIA) is to improve the work of the Integration Joint Board (Orkney Health and Care) by making sure it promotes equality and does not discriminate. This assessment records the likely impact of any changes to a function, policy or plan by anticipating the consequences, and making sure that any negative impacts are eliminated or minimised and positive impacts are maximised.

1. Identification of Function, Policy or Plan	
Name of function / policy / plan to be assessed.	Orkney Alcohol and Drugs Partnership Scheme of Delegation and Operational Framework 2021
Service / service area responsible.	Orkney Alcohol and Drugs Partnership (ADP)
Name of person carrying out the assessment and contact details.	Katie Spence
Date of assessment.	26 th January 2021
Is the function / policy / plan new or existing? (Please indicate also if the service is to be deleted, reduced or changed significantly).	Existing – proposed change to move from commissioning and budget decisions to being delegated to the ADP Strategy Group on an ongoing basis.

2. Initial Screening	
What are the intended outcomes of the function / policy / plan?	To allow the ADP Strategy Group to agree spend against the annual allocation from the Scottish Government including commissioning of services based on the recommendations from the ADP Commissioning Group.
State who is, or may be affected by this function / policy / plan, and how.	Service providers who seek to tender for services within the remit of the framework and people with substance misuse service needs that fall within the remit of the services commissioned under this framework.
Is the function / policy / plan strategically important?	Yes, the Framework allows the expertise of the ADP Strategy Group to make decisions around the spend of the annual allocation from the Scottish Government in a timely and efficient

	manner.
How have stakeholders been involved in the development of this function / policy / plan?	ADP Strategy Group makes decisions on commissioning of services through with representation of stakeholders built into the Terms of Reference of the group.
Is there any existing data and / or research relating to equalities issues in this policy area? Please summarise. E.g. consultations, national surveys, performance data, complaints, service user feedback, academic / consultants' reports, benchmarking (see equalities resources on OIC information portal).	The ADP commissioning process takes account of the collection of outcomes data from the services that receive funding and this data collection informs commissioning decisions. The outcomes that are to be collected are specified in the commissioning documentation.
Is there any existing evidence relating to socio-economic disadvantage and inequalities of outcome in this policy area? Please summarise. E.g. For people living in poverty or for people of low income. See The Fairer Scotland Duty Interim Guidance for Public Bodies for further information.	Please complete this section for proposals relating to strategic decisions).
Could the function / policy have a differential impact on any of the following equality strands?	(Please provide any evidence – positive impacts / benefits, negative impacts and reasons).
1. Race: this includes ethnic or national groups, colour and nationality.	No adverse impact on any particular race.
2. Sex: a man or a woman.	No adverse impact due to gender.
3. Sexual Orientation: whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.	No adverse impact due to sexual orientation.
4. Gender Reassignment: the process of transitioning from one gender to another.	No adverse impact due to gender reassignment.
5. Pregnancy and maternity.	No adverse impact due to pregnancy.

6. Age: people of different ages.	No adverse impact due to age.
7. Religion or beliefs or none (atheists).	No adverse impact due to religion.
8. Caring responsibilities.	No adverse impact in relation to caring roles.
9. Care experienced.	No adverse impact to those that are care experienced.
10. Marriage and Civil Partnerships.	No adverse impact on people who are married or in civil partnerships.
11. Disability: people with disabilities (whether registered or not).	The approach is intended to have a positive impact on people who have become disabled in terms of being unable to work due to substance misuse issues.
12. Socio-economic disadvantage.	The approach is intended to have a positive impact on people who have become socio-economically disadvantaged in terms of their dependency and / or to substance misuse issues by commissioning of services specific to their needs.
13. Isles-Proofing	No. Commissioning of alcohol and drug treatment services on the outer-isles of Orkney do not occur separately but all services commissioned are expected to be inclusive of the outer islands. The adoption of the use of digital health options such as Near Me enables improved service delivery and accessibility. There are no residential detoxification services available in Orkney and those needing these services are required to leave Orkney to access them in the Mainland.

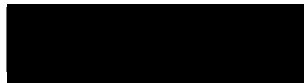
3. Impact Assessment

Does the analysis above identify any differential impacts which need to be addressed?	No.
How could you minimise or remove any potential negative impacts?	Not required.
Do you have enough information to make a judgement? If no, what information do you require?	Yes

4. Conclusions and Planned Action

Is further work required?	No.
What action is to be taken?	Continue to monitor ADP Commissioned Services in line with the Commissioning Framework.
Who will undertake it?	ADP Co-ordinator & ADP Commissioning Sub Group.
When will it be done?	Six monthly accountability templates and annual service visits within the duration of the commissioning period.
How will it be monitored? (e.g. through service plans).	ADP Strategy Group ultimately accountable following recommendations from the ADP Commissioning Group.

Signature:



Date: 26th January 2021

Name: Katie Spence