

Dumfries and Galloway
Integration Joint Board

22nd June 2023

This Report relates to
Item 10 on the Agenda

Dumfries and Galloway Alcohol and Drug Partnership Strategy and Delivery Plan 2023-2026

Paper presented by Jackie Davies

For Noting

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Approved for Submission by:	Valerie White – Director of Public Health
List of Background Papers:	Not applicable
Appendices:	Appendix 1 - DGADP Strategy 2023-2026 Appendix 2 - Draft ADP Strategy Delivery Plan 2023-2026 Appendix 3 - ADP Strategy Equality and Diversity Impact Assessment

Direction Required to Council, Health Board or Both	Not applicable	
	Title	Reference Number
	Direction to:	
	1. No Direction Required	
	2. Dumfries and Galloway Council	
	3. NHS Dumfries and Galloway	
	4. Dumfries and Galloway Council and NHS Dumfries and Galloway	

1. Introduction

- 1.1 The Scottish Government and COSLA coproduced the Partnership Delivery Framework to Reduce the Use of and Harm from Alcohol and Drugs (2019), this sets out the expectations for Alcohol and Drug Partnerships (ADPs). This includes leading the development and delivery of a local comprehensive and evidence based strategy to deliver local outcomes. This is expected to be achieved through applying a whole system approach to deliver sustainable change for the health and wellbeing of local populations.
- 1.2 A new three year Alcohol and Drug Strategy and Delivery Plan 2023 – 2026 has been developed, with people who have lived/living experience at its heart. Families, people with drug and alcohol problems, people in recovery, staff members and communities have contributed to this Strategy by way of focus groups, online surveys and an ADP Development Day.
- 1.3 The Strategy was approved by the ADP in April 2023. The accompanying delivery plan is a draft template which shows the connection between the Strategy and what the ADP will do. The Strategy will rely on partners contributing to and leading on delivery of areas relevant to their agency or organisation. The ADP Support Team will also provide support to the relevant ADP subgroups, organisations and partnerships.
- 1.4 An updated populated delivery plan will be submitted to IJB once completed.

2. Recommendations

- 2.1 **The Integration Joint Board is asked to:**
- **Note the development of the ADP Strategy 2023-2026 and draft Delivery Plan**

3. Background and Main Report

- 3.1 The Strategy provides an overview, background, context and the challenges facing the ADP, including the rise in drug related deaths, rise in alcohol referrals, reducing and challenging stigma, workforce challenges and the health needs of an aging population of problem drug and alcohol users.
- 3.2 The key areas of focus within the ADP strategy are:
- Prevention and Early Intervention
 - Recovery Orientated Systems of Care (ROSC)
 - Getting it Right for Children, Young People and Families
 - A Public Health Approach to Justice
- 3.3 Each section sets out “What we will do” which was developed listening to the voices of those with lived/living experience, partners and other key stakeholders. This has helped shape the draft Delivery Plan 2023-2026
- 3.4 Note that not all the “What we will do’s” slotted into the key areas of focus, so further sections were developed on Governance, Harm Reduction and Priorities for the ADP.
- 3.5 Each section has a relevant ADP subgroup, partnership or Team assigned to

populate their area of expertise and progress their actions. This will provide a true partnership collaboration which ensures a whole systems approach is taken to prevention, treatment and recovery of drug and alcohol harm

4. Conclusions

- 4.1 The IJB is responsible for issuing directions to the ADP and has responsibility to ensure that ADP funding is used in accordance with national priorities for alcohol and drugs in prevention, treatment and recovery.
- 4.2 The ADP aims to ensure that these priorities are progressed through the ADP Strategy and Draft Delivery Plans for 2023-2026.

5. Resource Implications

- 5.1 There are financial implications in relation to staffing and service resource in relation to the priorities set out in the Strategy and draft Delivery Plan. For example, Dumfries and Galloway ADP is making good progress on implementation of the Medicated Assisted Treatment (MAT) Standards programme in the region. However, there are financial challenges both in achieving and making the MAT Standards sustainable in Dumfries and Galloway. Financial challenges to continue implementing the MAT Standards are in relation to: (1) Shared Care arrangements for patients on Opiate Substitution Therapy (OST) through a Local Enhanced Service (LES); (2) ongoing costs for Buprenorphine & (3) Peer researcher(s) funding and potential costs associated with MAT standard 3 which is looking at developing assertive outreach and multi-agency risk assessment. Further modelling and working with the Finance Team is required to refine costs and a detailed paper or papers are to be developed in relation to this.

Furthermore, there are financial implications in relation to the Residential Rehabilitation Pathway, which has proven to be a valuable resource for those requiring drug and/or alcohol support. It has been recognised by the ADP that the need for Residential Rehabilitation in Dumfries and Galloway outweighs the financial allocation from the Scottish Government (SG), indicating the financial pressures and risk on the ADP to ensure this service continues to receive funding after SG allocations have been used.

- 5.2 These financial challenges are not unique to Dumfries and Galloway, in relation to the MAT Standards and Residential Rehabilitation funding, with other ADPs finding similar challenges which have been raised with Scottish Government. Further papers giving detailed costs for funding for the MAT Standards and Residential Rehabilitation will be presented to the ADP Finance and Performance Subgroup for discussion.

6. Impact on Integration Joint Board Outcomes, Priorities and Policy

- 6.1 The Strategy and draft Delivery Plan links with the National Health and Wellbeing Outcomes for Health and Social Care:
- People who use health and social care services have positive experiences of those services, and have their dignity respected,
 - Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services,
 - Health and social care services contribute to reducing health inequalities,

- People who use health and social care services are safe from harm,
- People who work in health and social care services are supported to continuously improve the information, support, care and treatment they provide,
- Resources are used effectively and efficiently in the provision of health and social care resources.

6.2 The Strategy and draft Delivery Plan contribute to the IJB Strategic Commissioning Intentions:

- Fewer people experience health and social care inequalities,
- People and communities are enabled to self manage and are supported to be more resilient,
- People have access to the care and support they need,
- People’s care and support is safe, effective and sustainable,
- People who deliver care and support feel valued, are supported to maintain their wellbeing and enabled to achieve their potential.

7. Legal and Risk Implications

7.1 In connection with the resource implications, this inherits further risk implications in relation to the sustaining and provision of services in relation to the MAT Standards and Residential Rehabilitation. Without funding to support both initiatives, individuals will not receive the support they require which would potentially impact non-fatal overdose, drug related death and alcohol specific death rates in Dumfries and Galloway. Without this provision, there would be a risk and negative impact on those who require drug and/or alcohol support, their friends and family members and the wider community.

8. Consultation

8.1 The Strategy and the draft Delivery Plan for 2023-2026 have been supported in consultation by representatives from:

- The ADP Board
- The Health and Social Care Partnership Leadership Group
- ADP Partners
- Lived and Living Experience

9. Equality Impact Assessment

9.1 An EQIA was completed in relation to the Strategy and the draft Delivery Plan in April 2023. Thus EQIA reports the impact of applying the Strategy and draft Delivery Plan in to practice.

Through the EQIA it was identified that those who are most affected by this activity are people who use drug and alcohol services, people who do not use drug and alcohol services but could benefit, family members/friends, people providing the drug and alcohol services, the population of Dumfries and Galloway, and key partners and stakeholders.

The impact will be that the strategy will reflect the voices of those with lived and living experience, and what they feel the priorities are for the ADP. As part of this strategy we have engaged with the population including those who have lived and living experience and their families.

10. Glossary

10.1

ADP	Alcohol and Drug Partnership
COSLA	Convention of Scottish Local Authorities
DGADP	Dumfries and Galloway Alcohol and Drug Partnership
EQIA	Equality Impact Assessment
IJB	Integration Joint Board
LES	Local Enhanced Service
MAT	Medication-Assisted Treatment
OST	Opiate Substitution Therapy
SG	Scottish Government

Dumfries and Galloway Integration Joint Board



DIRECTION

(ISSUED UNDER SECTIONS 26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014)

1.	Title of Direction and Reference Number	<i>Reference Number will be added once the direction is formally logged</i>
2.	Date Direction Issued by Integration Joint Board	<i>Date of the IJB Meeting which issued the Direction</i>
3.	Date from which Direction takes effect	<i>Date which is confirmed by the IJB</i>
4.	Direction to	<p><i>This can be either:</i></p> <ul style="list-style-type: none"> • <i>NHS Dumfries and Galloway</i> • <i>Dumfries and Galloway Council</i> • <i>Both</i>
5.	Does this direction supersede, amend or cancel a previous Direction? If yes, include the reference number(s)	<i>This information is required to provide context to the subject of the Direction</i>
6.	Functions covered by Direction	<i>List of all the functions/services to which the Direction relates e.g. Occupational Therapy, Mental Health</i>
7.	Full text of Direction	<i>Outline what you are asking the authorities to carry out (this description should include a consideration of the role of the third sector)</i>
8.	Budget allocated by Integration Joint Board to carry out Direction	<i>Financial information must be provided and will be the resource allocated to NHS DG, DG Council or both to carry out the Direction. The Direction should consider the potential role of the third sector and the financial implications. Where the direction relates to multiple functions the financial allocation for each function needs to be specified. The Direction should also outline any savings to be made.</i>
9.	Desired Outcomes	<i>Detail what the Direction is intended to achieve. Ensure this is linked to</i>

		<i>the Strategic Commissioning Plan, the National Health and Wellbeing Outcomes and any other relevant information.</i>	
10.	Is there a need for engagement with the third sector in delivery of this direction?	<i>YES</i>	<i>NO</i>
		<i>Tick or Cross</i>	<i>Tick or Cross</i>
		<i>If there is a possibility that the service is to be delivered via third sector organisations there should be consultation with the third sector on the design of the service.</i>	
11.	Performance Monitoring Arrangements	<i>Directions will be reported to the relevant IJB Committee on a 6 monthly basis. An annual report of all current Directions will be presented to the IJB</i>	
12.	Date Direction will be Reviewed	<i>Date no more than 1 year in advance</i>	