Alcohol and Drug Partnerships

Partnership Delivery Framework

Self Assessment Tool

June 2022

Introduction to the Self Assessment Tool

This Self Assessment Tool has been developed to support Alcohol and Drug Partnerships to deliver the Partnership Delivery Framework, Rights Respect and Recovery and the National Mission to Reduce Drug Deaths and Improve Lives.

The Scottish Government and COSLA coproduced the <u>Partnership Delivery Framework for Alcohol and Drug Partnerships</u> which was published in 2019. It sets out the expectations for the role of Alcohol and Drug Partnerships (ADPs

The purpose of the self-assessment

The purpose of the self-assessment is to give local ADPs a tool to engage and discuss opportunities and barriers to delivery.

Strategic Planning follows a cycle of

- Assessing need
- Aligning resources
- Agreeing delivery plans and priorities
- Reporting and learning from outcomes

ADPs are strategic planning partnerships that set out plans to delivery national and local priorities. To effectively deliver these priorities ADPs undertake strategic planning, formulate delivery plans and report outcomes. They do this on a partnership basis that aims to be inclusive and transparent with representation from stakeholders affected by alcohol and drug harms. Increasingly alcohol and drug harms are seen as a "whole system" issue and not just the realm of specialist drug and alcohol services.

ADPs are not Statutory Public Bodies, i.e. they are not "organisations" and therefore rely on the Integration Authority for financial governance and ratification of investment as well as performance oversight. Community Planning Partnerships hold the overall responsibility for population level outcomes set out in the National Outcomes Framework for Scotland and therefore provide ADPs with an overarching forum for reporting achievement of outcomes. Local areas will also have other strategic partnerships which are required in statute such as Children Service Boards, Community Justice Partnerships etc and it is important to ensure that there are strong links between ADPs and these partnerships.

The self-assessment is designed to help local stakeholders ensure that these key relationships are in place and that the local system is supporting the work of the ADP and vice versa. The self-assessment should be agreed and signed off with the relevant Chief Officers and stakeholders. Completed Self Assessments should be publically available locally. Aggregated findings may be published to help inform progress.

The Scottish Government use of the Self Assessment reports

As stated, the self-assessment tool is for local stakeholders to ensure that they are creating the right conditions and operating environments for ADPs to function effectively. The Scottish Government will have oversight of the self-assessment reports and the information will be used to help develop programmes of support for local areas when required and will help facilitate peer discussions with ADPs about best practice and achievements. Where an ADP signals it would like further discussion or support in responding to local barriers, this will initially be provided through discussion with the ADP Liaison leads within the ADP Support Team in the Scottish Government.

External Validation

ADPs are asked to assess their own ability to deliver against the Quality Standards and highlight any issues. At a future point the Scottish Government will seek to validate the self-assessment through a third-party organisation such as the Care Inspectorate or Health Improvement Scotland. On that basis, ADPs should complete the self-assessment from the perspective of "if an external person reviewed our approach would they find the same evidence we are presenting?"

How to complete the Self Assessment Tool

The self-assessment should tell a story about where the local ADP and relevant partners are in relation to the Partnership Delivery Framework:

- 1. Strategic planning
- 2. Financial arrangements
- 3. Quality improvement and Outcomes
- 4. Governance and Oversight
- 5. The relationship between the ADP and the Integration Authority

A representative national working group agreed the following five standards in relation to the Partnership Delivery Framework. The five quality standards are:

Quality Standard 1: The ADP has a Strategic Plan for delivery of identified outcomes which ensures adequate alignment with other aligned strategic plans

Quality Standard 2: The ADP can demonstrate public money is used to maximum benefit to deliver measurable outcomes for the local population in delivery of the Strategic Plans

Quality Standard 3: The ADP can demonstrate Quality Improvement in delivery of outcomes

Quality Standard 4: The ADP can demonstrate appropriate Governance and Oversight in delivery of the Strategic Plan

Quality Standard 5: The work of the Integration Authority and the ADP is aligned and the Integration Authority is able to provide Directions to partners in support of the ADP Strategic Plan

Structure of the Self Assessment Tool

The Self Assessment Tool should be completed in conjunction with the Self Assessment Criteria (Appendix 1 page 25-34). The criteria outline the minimum supporting evidence required to demonstrate the ADP is delivering and working in line with the Partnership Delivery Framework.

The first part of the Self Assessment asks ADPs to assess themselves against the Self Assessment Criteria and to map themselves against the Criteria using the definitions Maintain, Explore, Develop outlined in the table below.

	Definition
Maintain	
We are confident that we are fully demonstrating this standard. We have evidence to support this, including stakeholder confirmation and need to maintain this focus over time.	To meet this definition the ADP needs to be confident that it has policies and practice in place. ADP members and senior stakeholders support this statement. The ADP has feedback processes in place and is confident that an external process could independently gather similar feedback locally. The ADP is confident in maintaining this standard as core practice.
Explore	
We partially demonstrate this standard and we feel we can improve	The ADP feels it has some evidence to support the standard but isn't confident it is consistently maintained. The ADP and stakeholders feel there is room for improvement on some elements of the standard.
Develop	
We don't demonstrate this standard and need to develop / discuss this further.	The ADP is not confident it is achieving the standard. Further work is required to generate support for improvement or progress

The self-assessment then asks the ADP to demonstrate their assessment with narrative in line with the headings of:

- 1. How effective is the ADP in respect of this area?
- 2. How do you know this?
- 3. How will you do it and by when?

For each of the elements described above, please outline in no more than 250 words each what you need to maintain, improve or do differently and provide a timeframe for these to be implemented.

Please be open and honest in your response and consider the self-assessment in collaboration with relevant stakeholders, including local communities, children, young people and families. This will provide opportunities to:

- review what progress has been made and what development and learning has happened
- provide assurance about the quality of delivery
- highlight areas of good practice for sharing
- highlight areas for improvement and levels of priority

Those completing the self-assessment are encouraged to use information from different sources to triangulate evidence of the quality of service delivery.

The completed Self Assessment should focus on outcomes rather than activities. This could include a description of the impact of changes or improvement activities on the delivery or information on how potential impact is being monitored.

The Self Assessment Tool

ADP area: Dumfries and Galloway

Please use the box below to highlight relevant contextual and background information about the ADP including:

- -Population data for context
- -Outlining Governance and accountability arrangements (particularly in relation to ADP, Community Planning Partnership, Integration Joint Boards and Chief Officer Groups)
- -Links to other local statutory plans/partnerships (and how they link to local delivery) e.g. what links / role does the ADP have in relation to delivery of outcomes against their Local Outcome Improvement Plan / Children's Services Plan

Dumfries and Galloway is a mostly rural region in South-west Scotland. It covers 6,426 square kilometres (2,481 square miles), with population of approximately 150,800 people.

The region is divided into four localities:

Nithsdale + Annandale & Eskdale in the east of the region

Stewartry + Wigtownshire in the West of the region

The main towns are Dumfries (including Locharbriggs, which combined have 38,900 residents), Stranraer (10,600), Annan (9,000), Lockerbie (4,300), Dalbeattie (4,200) and Castle Douglas (4,200). All other towns and settlements have populations of fewer than 4,000 people and are shown in the table of settlements below (minimum 500 residents). At the 2011 Census, around one third of people (31.6%) in Dumfries & Galloway were living in settlements with fewer than 500 people.

In order to further develop the governance arrangements of the ADP, work has been progressed to formally constitute the ADP as one of the thematic partnerships that reports to the Community Planning Senior Leadership Group and the Community Planning Partnership Board. This ensures that the ADP has an overarching forum (which is focused on delivering improved outcomes in our Communities) to report

progress/challenges/improvements.

The ADP reports to the IJB annually for sign off on the annual reporting template. ADP are required to provide updates to the IJB Audit, Risk and Governance committee for discussion and scrutiny. This Committee replaces the previous Clinical and Care Governance Committee of the IJB. In recent years reports have been around drug deaths, assertive outreach and ABIs.

The ADP Chair will provide assurance and updates to Chief Officers for Health, Local Authority and Police via the Community Planning structures highlighted above.

The ADP contributes to the Community Justice Outcome improvement Plan in relation to drug deaths and arrest referral. The CJP manager is a member of the ADP and contributes to the ADP Strategic Plan.

The ADP Independent Chair attends PPC meetings. This ensures that there is good communication around both ADP and PPC agendas which highlight areas for joint working. This ensures that functions of the ADP which impact on public protection are considered in the wider Public Protection arena.

The VAWG Development Officer is a member of the ADP and is also a member of the PPC. This ensures there are joint links with the developments across both agendas. The ADP, CJP and VAWG have also hosted a joint event to raise awareness around the three partnerships. Training has also been provided where cross cutting matters are discussed.

ADP contributes to the Children's Services Plan and has conducted a Children and YP Needs Assessment. The recommendations from this will be taken forward by Children and Families SW under a Whole Families Approach to substance misuse.

Section 1: Strategic Planning

Quality Standard 1: The ADP has a Strategic Plan for delivery of identified outcomes

		Maintain	Explore	Develop
		We are confident that we are fully demonstrating this standard. We have evidence to support this, including stakeholder confirmation and need to maintain this focus over time.	We partially demonstrate this standard and we feel we can improve	We don't demonstrate this standard and need to develop / discuss this further.
1.1	Transparency and Effectiveness		✓	
1.2	Inclusion		✓	
1.3	Planning Cycle		✓	
1.4	Needs Assessment			✓
1.5	Whole System Approach		✓	
1.6	Resources and Delivery		✓	
1.7	Outcomes		✓	

Q. For each of the elements of this Quality Standard, please provide evidence for your ranking (e.g. details of processes, feedback, website links, etc)

1.1 Transparency and Effectiveness (max 250 words)

- The ADP Strategy 2022-2025 is currently out for engagement. The final strategy will be submitted to the ADP October meeting for sign off.
- The Strategy will then be published on the ADP webpage https://dghscp.co.uk/alcohol-drugs-partnership-adp/
 and will be shared on the ADP social media pages https://www.facebook.com/ActionondrugsandaclcoholDumfriesandGalloway/
 https://twitter.com/ADPDUMGAL
- The ADP Chair is a member of the Public Protection Partnership. The ADP has membership from Community Justice Partnership and contributes to their Strategic Plan. Children and Families Social Work are also members of the ADP and we also contribute to the Children's Services Plan. The Violence Against Women and Girls Development Officer is also a member of the ADP. The ADP has two Co-Vice Chairs The Director of Public Health and Senior Children and Families Manager for Social Work
- Examples of the improvement activities include funding a Branching out programme that allows people with drugs and alcohol problems to participate in forest crafts which supports their mental health and wellbeing and allows them to socialise with others. Recovery communities have been developed across the region and have contributed to reducing isolation and provided members with opportunities to take part in activities such as walking groups and arts and crafts and training. Funding also provided to Youth Beatz, a free music festival for Young People. ADP provides materials and resources at the Youth Beatz event including staff who talk to young people and their parents about drug and alcohol issues..
- Strategic planning takes into account the national priorities for drugs and alcohol and combines with the needs of people with lived/living experience and their families. The ADP contracts require services to use the quality standards for substance misuse services and sets out the outcomes that are to be achieved

1.2 Inclusion (max 250 words)

- Throughout the year the ADP Support Team and Partner agencies such as Police Scotland, Third Sector and Statutory Services engage in local community events providing information and advice to local communities. These include The Eden festival, Knockengorroch festival, Youth Beatz music festival, International Overdose Awareness Day (locally engaged with communities throughout August with pop up stalls across the region), Recovery Walk and festive season alcohol and drug awareness campaigns. https://www.facebook.com/ActionondrugsandaclcoholDumfriesandGalloway and Twitter https://twitter.com/ADPDUMGAL
- The ADP is inclusive in the planning, delivery and evaluation of services. People with lived experience are consulted around the service provision needed for contract specifications; they are part of the service selection process and are key to the annual evaluations of the service contracts.
- We demonstrate any barriers to involvement by offering individuals a choice of how they would like to engage with the ADP/activities/consultations.
- We will ensure confidentiality is kept and anonymity in our service evaluations and strategy engagement.
- We engage with service providers to provide support/transport to ADP engagement events, as this is a real barrier in a rural area.
- The ADP Strategy 2022-2025 is currently out for engagement with a range of stakeholders including ADP members, service
 managers and staff, people with lived/living experience/ family members, general public. The ADP Strategy will be published on
 the ADP webpage https://dghscp.co.uk/alcohol-drugs-partnership-adp/ and will be shared on the ADP social media pages
 https://twitter.com/ADPDUMGAL

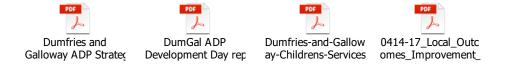
https://docs.google.com/forms/d/e/1FAlpQLSd1aDez2Yc7FPO6wyTNswhQ_7PNMr9slXG8GBDqczSjD_Kvg/viewform?usp=sf_link

- ADP Development Day included a wide range of stakeholders including staff, family members and people with lived/living experience to help shape the priorities for the ADP.
- Links to LOIP Outcome 3 health and wellbeing inequalities are reduced

Outcome 6 people are safe and feel safe

Children's Services Plan Priority 1 1.2 Children are better protected by the early identification of and response to supporting children and families affected by substance misuse

Equality Impact assessments are completed for new strategies. This is an area we have identified for improvement going forward.



1.3 Planning Cycle (max 250 words)

ADP conducts a needs assessment prior to developing contract specifications. This then is then put out for tender. The
successful organisation/agency is then monitored on a quarterly basis against the service specification which includes outcomes,
progress and any issues.









Service Objectives ADP - Regionwide ADS TT Q2 2020 We Are With You and description ConsiDrug and Alcohol RecContract Monitoring.cContract monitoring t

1.4 Needs Assessment (max 250 words)

Public health needs assessment process based on national needs assessment template with plans to conduct in early 2023 Community Justice has conducted their own needs assessment this year which will inform their priorities.

1.5 Whole System Approach (max 250 words)

- Strategic planning is based on national and local priorities (see Strategic plan section 1.2)
- ADP has no current representation of people with Lived Experience as a member. Discussions will be taken forward with ADP Community Development Officer to identify appropriately.
- A Lived/living Experience panel to be established in 2023.
- Local Partnerships incorporate and complement activity to reduce alcohol and drug harms (see 1.1)
 The ADP Partners subgroup has membership from a range of services who contribute the work of the ADP





Reference -constitutic

1.6 Resources and Delivery (max 250 words)

The ADP Strategy is still out for engagement. Once this is completed we will develop a delivery plan for the remaining 6 months of this financial year and then an annual plan for the following financial years that will be based on the medium and long term objectives and outcomes.

1.7 Outcomes (max 250 words)

The ADP has used the outcomes set out in the Rights Respect Recovery and Alcohol Framework and the National Mission Outcomes Framework to develop its draft Strategy. (see1.1 above).

The ADP Support Team workplan underpins the current work of the ADP in line with the national outcomes and objectives It also links with local Strategic Commissioning Intentions and DG PH Objectives.

The ADP Delivery Plan which has still to be developed will include all the relevant outcomes.



Q. What do you want to maintain, improve or change, how will you do it and by when?

- Improve ADP representation by including Lived Experience by engaging with Recovery Communities, service users to establish how they would like the representation on the ADP. Aim to achieve this by 31st March 2023
- Improve the use of equality impact assessments. Training for staff will be required. Aim to achieve this by 31st March 2023
- Work with PH colleagues to produce a local needs assessment. Support PH where necessary. Timescale to be determined
- Develop an annual delivery plan. Work with partner organisations to determine resources and outcomes by 31st March 2023

Any further comments?

D&G ADP is in transition this year, with the introduction of a New Independent Chair. There have been a lot of changes and developments this year that will take time to come to fruition. This self assessment has allowed us the opportunity to reflect on areas we need to improve.

Section 2: Financial Governance

Quality Standard 2: The ADP can demonstrate public money is used to maximum benefit to deliver measurable outcomes for the local population in delivery of its Strategic Plan

		Maintain	Explore	Develop
		We are confident that we are fully demonstrating this standard. We have evidence to support this, including stakeholder confirmation and need to maintain this focus over time.	We partially demonstrate this standard and we feel we can improve	We do not fully demonstrate this standard currently and need to develop / discuss this further.
2.1	Investment		✓	
2.2	Governance	✓		
2.3	Accountability	✓		
2.4	Reporting	✓		
2.5	Financial Planning	✓		

Q. For each of the elements of this Quality Standard, please provide evidence for your ranking (e.g. details of processes, feedback, website links, etc.)

2.1 Investment (max 250 words)

The Local Authority invests in the delivery of outcomes via funding for services including Talking Therapies and Regionwide drug and alcohol service (part funded with ADP). The Health Board also funds the Statutory drug and alcohol service together with ADP funding (see page 15 Annual reporting template below).

The ADPs quarterly financial plan update lists the areas where funding has been allocated and demonstrates that investment is in line with government priorities.

Effectiveness and outcomes are monitored using annual reports and evaluations of service delivery. ADP also requires funding applications to detail what outcomes they hope to achieve.

Disinvestment is an area that hasn't really been practised by the ADP and this needs to be considered further. Only one project has been disinvested in the past few years. Other investments have continued e.g. NHS Statutory drug and alcohol service, but the way the service has been delivered has evolved to meet the changing needs of service users.

The ADP has conducted specific needs assessments around service delivery and children and young people. These tend to be as and when required.









template 2021-22.do Financial Plan Update Performance Report Form ADP V2 2021.d

2.2 Governance (max 250 words)

The ADP has clear policies and procedures for aligning resources for investment with strategic planning using the Standing Financial Instructions and the scheme of delegation policies. The Finance and Performance group established in May 2022 has oversight on funding and make recommendations to ADP.

The ADP seeks authorisation for investment is in the local scheme of delegation.

The ADP clear policies with members and the IJB on the treatment of underspends using the Standard Financial Instructions.

The ADP had a finance workshop in early Spring 2022 and also a development day in June 2022 which allowed for open and transparent discussion. Regular financial reports are provided to each ADP meeting for discussion.

Investments in Third Sector are commissioned in line with procurement regulations. Service specifications contain performance indicators and outcomes that are expected to be achieved. Contract monitoring ensures the commissioned services are delivering on both performance and outcomes.

The ADP Tender specification sets out what is expected in the way of quality in line with the Quality Standards for Substance Misuse (section 2.1 input)

Contract Monitoring also provides feedback on training undertaken by staff (see 1.3 above)









Live Standing Financial Instructions Delegation V21.pdf

Scheme of

Performance Group T

ADP - Regionwide Drug and Alcohol Rec

2.3. Accountability (max 250 words)

The ADP Annual Reporting Template (Finance section) clearly shows that IJB delegate all funding to the ADP.

ADP has accountability for all its investments in drugs and alcohol. Reporting goes through the Finance and Performance group. ADP has representation from the NHS Board and Local Authorities which ensures accountability.





ADP Reporting Item 3.1 ADP template 2021-22.do/Financial Plan Update

2.4 Reporting (max 250 words)

The Health and Social Care Partnership Chief Finance Officer is a member of the ADP (see 1.5 ADP TOR)

NHS Finance provides a quarterly spend report to the ADP.

ADP provides its annual finance report to the Scottish Government by way of the Annual Reporting Template. (see 2.3) The IJB provides quarterly returns to the Scottish Government.



2.5 Financial Planning (max 250 words)

The ADP provides regular financial reports to local governance structures including NHS Board reports, monthly finance reports to ADP Strategic Lead, performance reviews for the finance operational teams.



Q. What do you want to maintain, improve or change, how will you do it and by when?

We want to maintain the local structures and continue to improve on evidencing investment and develop processes for disinvestment. We will maintain the overall accountability structures and also aim to improve further with clear documented governance documentation.

Any further comments?

Some of the wording was confusing and felt repetitive.

Section 3: Quality Improvement

Quality Standard 3: The ADP can demonstrate Quality Improvement in delivery of outcomes

		Maintain	Explore	Develop
		We are confident that we are fully demonstrating this standard. We have evidence to support this, including stakeholder confirmation and need to maintain this focus over time.	We partially demonstrate this standard and we feel we can improve	We do not fully demonstrate this standard currently and need to develop / discuss this further.
3.1	Methodology		✓	
3.2	Reporting	✓		
3.3	Sustainability			✓

Q. Q. For each of the elements of this Quality Standard, please provide evidence for your ranking (e.g. details of processes, feedback, website links, etc.)

3.1 Methodology (max 250 words)

The ADP uses engagement methods to gather feedback from a range of stakeholders which informs strategy development as well as service specification development.

https://docs.google.com/forms/d/e/1FAIpQLSd1aDez2Yc7FPO6wyTNswhQ 7PNMr9sIXG8GBDqczSjD Kvg/viewform?usp=sf link

The ADP also conducts annual service evaluations to gain feedback from staff and service users on their experiences of service delivery.

Quarterly Contract Monitoring with commissioned services ensures they are meeting their service specification and agreed targets. It also helps identify any areas for concern.

Evaluation of the Recovery Communities are underway

Members - https://forms.office.com/r/if2GwYegh9

Non-Members - https://forms.office.com/r/ZM3k4fFwzi

Staff - https://forms.office.com/r/HVkvBAHAWf

Service User Toolkit was developed in conjunction with Scottish Drugs Forum to provide service staff a means of engaging with their services users to develop quality services.

Practitioner Forums have been re-established to allow staff involved with ROSC to learn from each other and identify areas for improvement.















We Are With You

ADS O4 Apr - Jun Contract monitoring (22 Contract Monitoring Involving-People-To Addaction evaluation Addaction service olkit-Digital.pdf

staff.docx

users.docx

THERAPIES service uTHERAPIES staff.doc

3.2 Reporting (max 250 words)

Improvements include the number of people who had never been in service but had experienced a non fatal overdose receiving an intervention from the Assertive Outreach Team.

The Service specification for regionwide alcohol and drug service was based on engagement with service users. Service now offers evening and weekend appointments based on this. This has proved a success in particular for people who are working.

The ADP will develop an outcomes delivery plan based on the new Strategy when it is finalised.









Dumfries and

AO Stats by Month Galloway Regionwide March 21 - Aug 22.xl service user questions questions Final 03042

Co-production

Co-production staff

3.3 Sustainability (max 250 words)

The ADP ensures improvement becomes part of service specifications and funding plans as per the documents in the previous sections.

Q. What do you want to maintain, improve or change, how will you do it and by when?

ADP will maintain the engagement with service users around all aspects of service delivery and quality by means of annual service evaluations and needs assessments for service specifications.

Ensure Practitioner Forums are established annually. The first to be established in Oct 22.

Develop a workplan based on the outcomes required nationally and locally.

Ensure services are using the Involving People Toolkit by including evidence of use in their contract monitoring. To be started in 2023.

Any further comments?

Section 4: Governance and Oversight

Quality Standard 4: The ADP can demonstrate appropriate Governance and Oversight in delivery of the Strategic Plan

		Maintain	Explore	Develop
		We are confident that we are fully demonstrating this standard. We have evidence to support this, including stakeholder confirmation and need to maintain this focus over time.	We partially demonstrate this standard and we feel we can improve	We do not fully demonstrate this standard currently and need to develop / discuss this further.
4.1	Oversight		✓	
4.2	Governance		✓	
4.3	Risk Management		✓	
4.4	Accountability		✓	

Q. For each of the elements of this Quality Standard, please provide evidence for your ranking (e.g. details of processes, feedback, website links, etc.)

4.1 Oversight (max 250 words)

ADP has regular performance reporting through ADP meetings and its working groups.

ADP can demonstrate a governance system is in place but the recent development day highlighted that many of the wider partners are unclear about these systems.

Aware the link between Children's' services, the IJB and ADP have been weak and there is active pieces of work underway to improve those links. CSE planning group are looking for representation from the ADP to sit on the group. There are plans underway around the Whole Family Approach.

There are close alignments with PPC and CJP. A revised governance structure has recently been implemented wherein the ADP is one of the thematic partnerships that will report to the Community Planning Senior Leadership Group and the Community Planning Board. The ADP also provides annual reports to the IJB as the Commissioning body. ADP Support Team are working closely with Justice Social Work on their strategy to make sure they are aligned.

4.2 Governance (max 250 words)

Conflicts of Interest are asked for at the start of each ADP meeting. How to resolve issues and disputes has yet to be developed; this will be in conjunction with the ADP Vice Chairs.

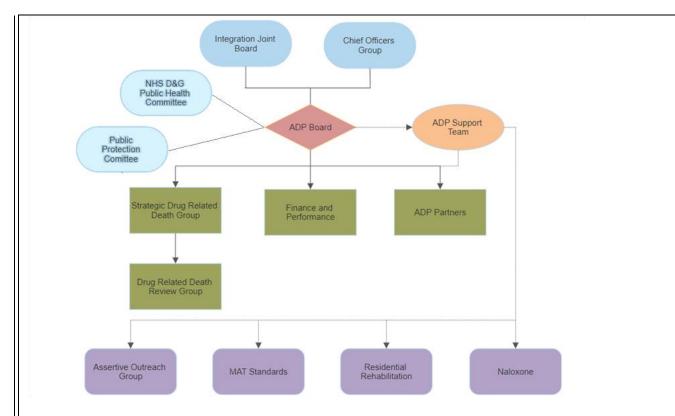
There is also strong links with DG Public Health Directorate, with the Director of Public Health being a member of the ADP and the Support Team based in the directorate.

ADP provides assurance through performance reporting. Service Providers are required to provide safe, effective and compassionate services as part of their contract. The contracts require the service providers to ensure they are working to the national standards for substance services. There is an assumption that this is currently happening. In the past this formed part of the services evaluations and will need to be progressed again through a robust quality assurance method.

There are processes in place which allows the Independent Chair to report to the Chief Officers Group. The Independent Chair also links directly with the Chief Officer for the HSCP/IJB if there are concerns raised.

There is an informal process in place that ensures ADP contribution to align plans.

The ADP links with the CPP is currently in development.



Think we will need to revise this to include CPPB

4.3 Risk Management (max 250 words)

A Risk Register is in Development with NHS D&G Public Health dept around local priorities. Risk management is conducted by the ADP Partners who have their own in place.

There is also clear process for individual services but further discussion is required around this at ADP level.

Once the new strategy is developed ADP will develop a risk register based on the strategy's priorities as a multi-agency risk register. The ADP has no processes in place to deal with any service who hasn't met their contractual obligations. Any service issues are identified through the contract monitoring process with the ADP Strategic Lead and managed accordingly. Issues are identified and learning agreed with the service managers.

Only one project has not been extended in the past few years due to prioritisation of other funding requirements, and this was a decision based on overall outcome of the project not proving value for money.

4.4 Accountability (max 250 words)

The IJB Chief Operating Officer and Chief Finance Officer are members of the ADP. The Independent Chair for Public Protection is also a member of the ADP. The ADP Independent Chair reports at each Chief Officers Group meeting on drug related deaths, and the learning taken from the drug deaths review group. A strategic drug deaths group has been established to identify any further learning and establish actions to reduce the harms of drug use.





Strategic DRD Group Reference -constitutio ToR V2 Aug 22.docx

Q. What do you want to maintain, improve or change, how will you do it and by when?

ADP will aim to improve on its communication on the governance structures to ensure future transparency. A further development day is planned for January 2023.

A formal process will be developed to align other partners' strategic plans by March 23.

Links with the CPP will be developed by March 2023.

Risk register will be developed once strategy has been approved December 22.

Any further comments?

We felt the word failure was not appropriate and this could've been worded better.

We also felt that there is cross over with other questions previously responded to.

Section 5: The relationship between the ADP and the Integration Authority

Quality Standard 5: The work of the Integration Authority and the ADP is aligned and the Integration Authority is able to provide Directions to partners in support of the ADP Strategic Plan

		Maintain	Explore	Develop
		We are confident that we are fully demonstrating this standard. We have evidence to support this, including stakeholder confirmation and need to maintain this focus over time.	We partially demonstrate this standard and we feel we can improve	We do not fully demonstrate this standard currently and need to develop / discuss this further.
5.1	Alignment and Governance		✓	

Q.	. For each of the elements of this Quality Standard, please provide evidence for your ranking (e.g.	details of
	processes, feedback, website links, etc.)	

5.1 Alignment and Governance (max 250 words)

The ADP provides the annual reporting template to the IJB Chief officer for Sign off. The ADP Strategic Lead contributes information to DG Health and Social Care Partnership to support the development of the IJB annual performance report. The ADP Finance Officer provides the financial reporting to the IJB.

Since Covid, the ADP has not been asked to provide reports to the IJB and the Clinical and Care Governance Committee. There has been a new committee structure created within the IJB and from 2023/24, the ADP will report to the Audit, Risk and Governance committee of the IJB.

Adult treatment services are delivered in line with the ADP Strategy through partnership working. The ADP Partners subgroup consists of service managers who are committed to delivering adult treatment services in line with the ADP strategy.

Q. What do you want to maintain, improve or change, how will you do it and by when?

ADP and IJB should re-instate the regular reporting as happened pre Covid. There are opportunities to improve communication between the ADP and the IJB in order to ensure sufficient oversight of the work of the ADP within the IJB.

Any 1	furthe	er com	nments?
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This Self-Assessment of Partnership Delivery Framework is agreed and ratified by:

Senior System Stakeholders	
ADP Lived Experience Stakeholder/s / Representative	
Chair of the Alcohol and Drug Partnership	
Chair of the Community Planning Partnership	
The Chief Executive of the Local Authority	
The Chief Executive of the NHS Board	
Director of Public Health	
The Chair of the Integration Joint Board	
The Chair of the Chief Officers Group	
Divisional Commander for Police Scotland	
Chief Executive of Third Sector Interface	
The Chief Officer of the Health and Social Care Partnership	

APPENDIX 1

Self Assessment Criteria

1	Quality Standard 1: The ADP has a Strategic Plan for delivery of identified outcomes which ensures adequate alignment with other aligned strategic plans
1.1	Transparency and Effectiveness The strategic plan is agreed by the ADP The strategic plan is published and publically available The ADP can demonstrate effective strategic linkage with other local partnership groups and local communities The ADP can demonstrate examples of improvement activities and positive outcomes for the local population The ADP can demonstrate evidence that Strategic Planning is safe, effective, compassionate and person-centred
1.2	Inclusion The ADP can describe how they engage with local communities The ADP can demonstrate how any potential barriers to involvement or engagement are removed The ADP strategic planning is inclusive of people affected by drug and alcohol harms and their family members, those who use services, those who deliver services, and the local population The ADP embeds equality impact assessment processes to understand the diverse needs of local populations and uses this information to inform pathways and provision in its strategic planning and ensure human rights are met The ADP Strategy effectively aligns to other statutory plans / priorities on delivery in support to families in crisis or at risk of being in crisis as a result of drug / alcohol use (e.g. Child Protection, Adult Protection)

1.3	 Planning Cycle ☐ The ADP can demonstrate that it delivers in line with a strategic cycle for planning which includes: needs assessment, delivery, commissioning, review and reporting of outcomes / progress ☐ ADP Strategic Planning is based on population health approaches and includes primary, secondary and tertiary prevention
1.4	Needs Assessment ☐ The ADP has a local assessment of the needs of people who use alcohol / drugs led by NHS Public Health and involving partners
1.5	Whole System Approach The ADP can demonstrate that their strategic planning is based on national and local priorities, is evidence based and aligns with delivery of local supports and services The ADP has representatives of: Health and Social Care Partnership: mental health, primary care, adult services etc Specialist drug / alcohol services Health (e.g. emergency department, relevant acute wards, health improvement / public health) Children's services Police Justice services Housing / accommodation / homelessness services Employment services

	Community Lived experience Education Third Sector Interface The ADP can demonstrate that other local planning partnerships and services incorporate and complement ADP activity to reduce alcohol and drug harms
1.6	Resources and Delivery The ADP has an annual delivery plan agreed by member organisations that details resources aligned in support of delivery, including the following: direct resource, local financial investments and "in kind" resources. It details cross-system prioritisation and responsibilities within, for example, Health and Social Care Partnerships, Children's Services Planning Partnerships, Community Justice Partnerships and Community Planning Partnerships to be deployed to implement the Annual Delivery Plan and the outcomes to be achieved
1.7	Outcomes ☐ The ADP uses the outcomes and priority actions set out in <i>Rights, Respect and Recovery</i> and the <i>Alcohol Framework</i> 2018: Preventing Harm and the National Mission Outcomes Framework ☐ The ADP outcomes are measureable and reportable ☐ The ADP routinely reports on progress against strategic outcomes

2	Quality Standard 2: The ADP can demonstrate public money is used to maximum benefit to deliver measurable outcomes for the local population in delivery of the Strategic Plans
2.1	Investment ☐ The ADP is able to demonstrate that investment in the delivery of outcomes comes from a range of sources, including the Local Authority, Health Board and the Integration Authority, as well as outside of the public sector ☐ The ADP can demonstrate investment is in line with Scottish Government priorities ☐ The ADP can demonstrate that investment is based on evidence of effectiveness and outcomes ☐ The ADP can demonstrate ability to disinvest based on evidence of effectiveness and outcomes and in line with changing priorities articulated though formal needs assessment
2.2	Governance The ADP has clear policies and procedures for aligning resources for investment with strategic planning The ADP seeks authorisation for investment from the Integration Authority and local scheme of delegation The ADP has a clear policy agreed with members and the Integration Authority on the treatment of underspends / overspends The ADP can demonstrate effective and transparent governance arrangements are in place The ADP can relate investments in third sector and public sector to performance and outcomes The ADP can describe arrangements in place to ensure quality assurance of service delivery and that services are safe, effective and compassionate

2.3	Accountability ☐ The ADP and the Integration Authority can demonstrate all funding allocated to NHS Boards for onward delegation to ADPs is available to the ADP ☐ The ADP has full accountability for the totality of funding allocated for drugs / alcohol from its NHS Board and Local Authority
2.4	Reporting The Health and Social Care Partnership Chief Finance Officer is a member (or formally represented) on the ADP There is regular routine financial reporting to the ADP on the total spend on alcohol and drug services The ADP and Integration Authority provide an quarterly and annual financial report to the Scottish Government The ADP reports to local governance structures on investments
2.5	Financial Planning The ADP strategy includes investment to increase activity over time in relation to prevention and early intervention aligned with other such preventative spend across local partners / partnerships
3	Quality Standard 3: The ADP can demonstrate quality improvement in delivery of outcomes

3.1	 Methodology ☐ The ADP has or uses an underpinning quality improvement methodology ☐ ADP staff and members are supported to use improvement methodologies through training and other workforce development activities
3.2	Reporting The ADP can demonstrate examples of where improvement methods have had a positive impact The ADP can demonstrate links with outcome reporting, needs assessment and financial investment / disinvestment
3.3	Sustainability The ADP can demonstrate how achieved improvements are embedded and sustained The ADP benchmarks performance with other areas (e.g. other ADPs, other partnership groups)
4	Quality Standard 4: The ADP can demonstrate appropriate Governance and Oversight in delivery of the Strategic Plan
4.1	Oversight ADP Members can demonstrate effective oversight arrangements are in place to deliver the local strategy

	☐ The ADP can demonstrate processes to ensure oversight, coordination and alignment of ADP activity with other relevant local partnerships and strategies
4.2	Governance
	☐ The ADP has published the roles and remit for members setting out how decisions are made, issues and disputes are resolved, conflicts of interest are managed
	☐ There is a organogram that sets out the relationship of the ADP with the Integration Authority, with other planning boards
	(e.g. Children's Partnership and the Community Justice partnership), and with areas of statutory responsibility (e.g. Child Protection and Adult Protection)
	☐ The ADP can demonstrate how they know governance structures provide appropriate assurance of safe, effective, compassionate and person-centred delivery
	☐ There are process in place for the ADP Chair to escalate and progress discussions with local partners / responsible
	officers when a priority is not being delivered and a process in place to ensure ADP contribution to aligned plans is being progressed
	☐ The ADP strategic plan forms part of the overall Community Planning Partnership (CPP) offer, is ratified via CPPs, and
	aligns with the priorities of other key statutory plans
4.3	Risk Management
	☐ There is a clear process for identifying and managing risk in relation to delivery of national and local priorities
	☐ There are clear controls in place to reduce impact of identified risks
	☐ The ADP can demonstrate how failure is reported, analysed and learning facilitated

4.4	Accountability The ADP can describe clear accountability to appropriate Chief Officer(s) responsible for the delivery of relevant policy, system or targets The ADP can demonstrate clear articulation of the relationship with senior accountable officers, and specifically, the relationship between the ADP and Public Protection that sit with the local Chief Officers Group and can demonstrates that processes are in place to ensure learning from drug deaths and responsibility for reducing substance use mortality and harm
5	Quality Standard 5: The work of the Integration Authority and the ADP is aligned and the Integration Authority is able to provide Directions to partners in support of the ADP Strategic Plan
	 □ The ADP has a clear policy on taking investment plans and business cases to the Integration Authority Joint Board for ratification □ The ADP provides performance and financial reporting to enable support the development of the Integration Authority's Annual Performance Report □ The ADP regularly reports to the Integration Authority on performance □ The work of the ADP is reflected in the objectives of the Integration Authority Strategic Plan □ Governance and oversight arrangements for ADP business are supported by the Integration Authority □ Adult treatment services are delivered in line with ADP strategy □ The ADP and the Integration Authority have a clear policy on how decisions and directions are managed for services out-

with the scope of the Integration Authority (e.g. children's services, police, housing will be issued) The Integration Authority ensures governance arrangements support the deployment of resources at pace to support the Mission	e