

**MINUTES of a meeting of the Highland Alcohol and Drugs  
Partnership Strategy Group  
Held on 6<sup>th</sup> February 2014 at NHS Highland  
John Dewar Building, Inverness**

<b>Present:</b>	Dr Margaret Somerville Alasdair MacDonald Hugh Fraser Suzy Calder Inspector Mairi MacInnes Dr Duncan Stewart Elisabeth Smart David Alston Dawn Grant Debbie Stewart David McRonal	Director of Public Health (Chair) Principal Investigator SFIU Director of Education Culture & Sport Head of Service – Substance Misuse Police Scotland Consultant Psychiatrist Consultant in Public Health Highland Councillor Children's Services Manager HADP Coordinator Head of Finance – Community Care
<b>In Attendance:</b>	Chief Supt Julian Innes  Cath King (Item 4 only)	Divisional Commander/Chair, Safer Highland Leadership Group Health Improvement Policy Manager, THC

Item	Discussion/Decision	Action
<b>1</b>	<p><b>WELCOMES / APOLOGIES</b></p> <p>The Chair welcomed those present and introductions were made for the benefit of Mairi MacInnes who has joined the Group and Julian Innes attending as an observer. It was noted that David Alston will take on the role of Political Champion for Alcohol and Drugs from Cllr Liz MacDonald. Margaret announced that she will be standing down as Chair before the end of the year and plans to discuss with Julian Innes how the Group should be taken forward. Julian stated that in his role as Chair of Safer Highland he and Scott Hay had been tasked with improving the Safer Highland structure.</p> <p>Apologies were intimated on behalf of Bill Alexander, Caroline Johnston, Karen Carson, Elspeth Lee and Sarah MacKenzie,</p>	
<b>2</b>	<p><b>MINUTES OF PREVIOUS MEETING</b></p> <p>The minutes of the meeting held on 6<sup>th</sup> November 2013 were read. On a point of accuracy at Item 9.1 it should state a letter of <i>concern</i> rather than <i>complaint</i>. Subject to this amendment, the minutes were approved.</p>	
<b>3</b>	<p><b>MATTERS ARISING AND ACTIONS</b></p> <p><b>3.1</b> <i>Actions and Matters arising from meeting 6<sup>th</sup> November 2013</i></p> <p><b>Action:</b> Suzy agreed to provide a report on the Recovery Pathway and outcomes from the DCAQ for discussion at the May meeting.</p>	Suzy
<b>4</b>	<p><b>SUBSTANCE MISUSE INTEGRATION PROJECT</b></p> <p><b>4.1</b> <i>Update on progress and proposed budget for 2014 (Cath King)</i></p>	

	<p>A progress report had been circulated and Cath provided an overview on year one of the 2 year Substance Misuse Prevention Project to involve the development of a toolkit for use by multi-agency contributors, teachers and other staff working with children and young people. Parents and young people themselves will also be encouraged to utilise the toolkit.</p> <p>A request was agreed to carry forward a £17,637 underspend which will reduce costs for year 2 to £38,363. Social marketing costs for year 2 are still to factor in costs of £16,766 for a band 6 post to work on the initiative 2 days per week for a year. These costs require to be deducted from the £38,363. If required HADP will commit to additional resources for the materials / products developed as a result of the insight gathering.</p> <p>The Finance &amp; Commissioning Group requested that best value for money is a priority for year 2 and that monies assigned to training are utilised to benefit the maximum amount of staff.</p> <p><i>(DA and HF joined the meeting)</i> Hugh Fraser endorsed the project as one which will work well within the Curriculum for Excellence and felt it had good potential.</p> <p>Suzy questioned who from health would input to schools as there is no capacity among substance misuse staff to do this. Previous discussions had taken place with public health nursing managers to encourage involvement.</p> <p>There was debate on the appropriateness of placing drug alerts on a website designed primarily for preventative use among school age children.</p> <p>The Group were happy with the proposal and would look forward to seeing a future demonstration of the Website. <i>(Cath left the meeting)</i></p> <p><b>Action:</b> Debbie to continue liaising with Cath and organise a future demonstration of the website.</p>	Debbie
<p><b>5</b></p> <p><b>5.1</b></p> <p><b>5.2</b></p>	<p><b>STRATEGY DEVELOPMENT</b></p> <p><b>Safer Highland – Revised Structure</b> A diagram illustrating the revised structure for Safer Highland was circulated.</p> <p>Julian emphasised that a key driver was to reduce the number of meetings and avoid duplication. It is anticipated that by the end of the financial year, the revised structure will be implemented. The plan shows a new Chief Officers Group which will sit between the Strategy Groups and the CPP identifying key priorities for action.</p> <p><b>HADP Strategy Development Plans</b> HADP expects that Scottish Government may request a revised Strategy for 2015 and it is considered timely to begin updating</p>	

	<p>the needs assessment and consider development of the current strategy.</p> <p><b>Action:</b> Sarah will begin to update the needs assessment and Debbie will confirm the requirement to update the strategy and begin identifying priorities for action.</p> <p>A performance monitoring report was submitted for discussion at the last NHSH Board. It outlined the expected direction of travel for the revised strategy including; a shift in emphasis to prevention, greater integration of services at a local level, increased collaboration to develop ROSC, workforce development and improved performance management.</p> <p><b>Action:</b> Debbie will continue to provide updates on strategy progress to the NHS board and other bodies when required.</p>	<p>Sarah, Debbie</p> <p>Debbie</p>
5.3	<p><b>Scottish Government Feedback on Annual Report</b> A letter from Scottish Government dated 16<sup>th</sup> January was circulated providing feedback on the annual report.</p> <p>Some of the feedback was general to ADP's, whilst other feedback was more specific to HADP. HADP were commended on work related to the licensing agenda as well as the level of analysis and presentation provided in relation to indicators and the performance framework. Good evidence was also provided to support the self assessment RAG status.</p> <p>Suzy pointed out that it is not the feedback mistakenly suggested the Finance &amp; Commissioning Group were leading on the development of ROSC work, whereas it is the service lead.</p> <p><b>Action:</b> Debbie to clarify with the Drug Policy Unit that although Suzy as service lead is a member of the Finance &amp; Commissioning Group, she is leading on ROSC as opposed to the group.</p> <p><b>Action:</b> Debbie will progress other suggestions provided in the feedback related to development of local indicators, revisiting local targets in the LDP, receiving feedback on the annual report from the CPP.</p> <p><b>Action:</b> Debbie will ensure that minutes of the strategy group are consistently made available for discussion at the Safer Highland Leadership Group and other relevant forums.</p>	<p>Debbie</p> <p>Debbie</p>
5.4	<p><b>Feedback Notes from ADP Chairs Meeting</b></p> <p>Liz represented the Chair at the meeting on 15<sup>th</sup> January and provided a brief update of the discussion. The Quality Principles were a key item for discussion although they have not yet been formally circulated to ADP's for consultation. They focus mainly on the quality of service provision and most chairs support them. Improvement methodologies were promoted as an effective means for facilitating service development.</p>	<p>Debbie</p>

	<p><b>Action:</b> Liz is familiar with the methodologies being promoted and offered to provide information and guidance if requested.</p>	All
	<p><b>Action:</b> Debbie to coordinate a HADP response to the consultation on the quality principles when they circulated more widely.</p>	Debbie
<b>6</b>	<b>STRATEGY DELIVERY</b>	
6.1	<p><i>HADP Progress Report - February 2014</i></p> <p><i>It should be noted that the progress report contains the updated information on strategy delivery. Although verbal updates are provided at the meeting, it has been decided not to reiterate them in the minute in order to avoid duplication. Only points additional to the content of the progress reports will be minuted.</i></p> <p><u>Protecting Communities-</u> Suzy had additional information which she wished to provide that had not been included in the progress report.</p> <p>A presentation will be given to the National Prisoner Network Group on Peer Trainer work which provided the opportunity to raise the profile.</p> <p>The worrying trend of “Nek nominations” was raised. Scottish Police are working with licensees to prevent these being practised in licensed premises. Alistair commented that exploration was underway in some areas related to consider whether the potential for a criminal charge related to incitement to reckless and dangerous conduct.</p> <p><b>Action:</b> Debbie to liaise with Alistair to ascertain whether charges are possible and likely to be pursued. As this information may help to deter some potential nominees.</p> <p><b>Action:</b> Debbie to liaise with partners to promote relevant safety messages via press releases and other opportunities.</p> <p><u>Recovery</u></p> <p>HEAT Standard A11</p> <p>Challenges remain and still under scrutiny by the Minister. However, Oct – Dec showing improvement. An improvement plan is being devised as requested by SG and a report will be put to the health improvement committee in March.</p> <p><b>Action:</b> Suzy will share the improvement plan and report for the health improvement committee with the HADP chair for comment.</p> <p>Duncan advised he had been approached by A &amp; E about development plans for drunk and disorderly people. Mairi advised that this is being carried forward under a gold group</p>	<p>Debbie</p> <p>Debbie</p> <p>Suzy</p>

	<p>established to take forward policy improvements at a national level on issues common to areas across the country.</p> <p><b>Action:</b> Debbie to liaise with Mairi for more detailed information on this development that can be fed back to A&amp;E.</p> <p><u>Children and Families</u></p> <p><b>Action:</b> Debbie and Margaret to attend separate meetings organised with community paediatricians to discuss the development of a care pathway.</p> <p>Dawn reported that formal feedback from the Inspectors following their visit in October was still to be received. Informal feedback was very good and FHC4 is a welcome addition to all the hard work already underway. However, there was suggestion that there may be missed opportunities to identify parental substance misuse as a key issue for children in some situations.</p> <p><b>Action:</b> Dawn will provide more detailed feedback on the inspectors report at future meetings.</p> <p>The CAPSM group have agreed to a sub-group progressing GOPR protocols and will begin with information sharing. Once completed the draft protocol would be circulated to the ADP and CPC for agreement.</p> <p><b>Action:</b> Dawn will provide ongoing feedback on the progress of the protocol and the relevancy of devising a Highland pledge to CAPSM.</p> <p><b>Action:</b> Suzy agreed to ensure Treatment Service representation at future CAPSM meetings.</p> <p>Duncan highlighted that CAPSM take up a lot of nursing time.</p> <p><b>Action:</b> Debbie and Dawn to include exploration of this issue in the proposed scoping work the Third Sector collaborative plan to undertake for the potential Lloyds TSB bid.</p> <p><u>Maximising Health</u></p> <p>Over 100 people have surprisingly taken part in the legal high / NPs survey pilot.</p> <p><b>Action:</b> Debbie to report on the legal highs/NPS survey at the next meeting.</p>	<p>Debbie, Mairi</p> <p>Debbie, Margaret</p> <p>Dawn</p> <p>Dawn</p> <p>Suzy</p> <p>Debbie</p> <p>Debbie</p>
7	<p><b>DRUG RELATED DEATHS CIRG</b></p> <p>A note of the DRD meeting held on 21<sup>st</sup> November 2013 was circulated for information.</p> <p>It was acknowledged that it was a loss that Scottish Police were no longer able to sustain the NFO warning system. It was</p>	

	<p>agreed that it should be a priority to establish an early warning system and that the Ambulance Service were best placed to support this but that the CIRG were experiencing difficulties getting a response.</p> <p><b>Action:</b> Debbie to liaise with chair of CIRG for support with getting a response from the Ambulance Service.</p> <p>Alasdair suggested that the relevant data on Fatal and Non Fatal Overdoses as well as minutes are required to come to the strategy group, perhaps twice a year. The new national drug-related database will have the facility to produce local reports if the bulk of the required information is accessible and inputted.</p> <p><b>Action:</b> Sarah and Debbie to provide an update for the August on prevalence and trends and progress with engaging the Ambulance Service in developing a NFO early warning system.</p> <p>Alasdair further requested that when the minutes are circulated to other groups, to ensure that any sensitive DRD information should be pulled out.</p> <p><b>Action:</b> Debbie to ensure sensitive DRD information is not included in any future circulation of minutes to other meetings/groups.</p>	<p>Debbie</p> <p>Debbie. Sarah</p> <p>Debbie</p>
<b>8</b>	<b>BUDGET</b>	
8.1.	<p>A financial statement for the 9 months to December 2013 was circulated. Overspends in South &amp; Mid Area had become evident at the previous meeting but it has been agreed that this area will act as guarantor, from the totality of their budget. To recognise this, the individual overspends are shown in the financial report as “budget equals actual”. However, further discussion is required.</p> <p>The overall financial performance is very similar to that reported in the previous quarter with a forecast under spend of £18,000.</p> <p>David asked Dawn whether a similar exercise could be done for Children’s Services. It would be useful to develop the previous HADP template in order to help move toward the requested form of reporting.</p> <p><b>Action:</b> Devise format for reporting outcomes based on Lanarkshire model.</p> <p><b>Action:</b> Dawn to feedback on how best to feed in reporting on outcomes from Children’s services at next meeting.</p> <p><b>Action:</b> HADP support to be provided to assist with devising models for reporting outcomes</p>	<p>David, Suzy</p> <p>Dawn</p> <p>Liz</p>
8.2	<b>HADP Finance &amp; Commissioning Group</b>	
	A meeting of the Group was held on 28 <sup>th</sup> January and the draft	

	<p>minutes of the meeting were circulated. Liz emphasised that a commissioning infrastructure was now in place but that the group had no access to monies to actually undertake commissioning and was unlikely to have access to funds in the near future. Strategic commissioning may not necessarily require funds but would involve devising a more systematic way of reporting on outcomes which is difficult given the lack of a performance management system for services in Highland. It was agreed that the group can drive some of the mechanisms in place by utilising the quality principles and working more closely with the Third Sector to attract additional resources to Highland.</p> <p><b>Action:</b> Liz and Debbie to organise a meeting / event with Third Sector partners to strengthen collaboration.</p>	Liz/ Debbie
9	<p><b>WELFARE REFORM – UNIVERSAL PATHFINDER</b></p> <p>There have been no Universal Credit claims in Inverness thus far under conditionality for drugs and alcohol. The north of England pilot has only thus far had 5 relevant claimants. The challenge will be to implement the system as the defined groups expand.</p> <p><b>Action:</b> Feedback on the meeting of the 29<sup>th</sup> November will be circulated for information.</p>	Debbie
10	<p><b>AOB</b></p> <p>The appeal for minimum pricing was taking place today.</p> <p>Private Eye Nightclub had been awarded a Best Bar None award by BID Inverness of which Scottish Police and Highland Council are members. This appears to contradict concerns raised by the VAW partnership of which all HADP members are also members’.</p> <p>Mairi clarified that the criteria for this award is purely based on how the licensed premises are managed. There was an element of debate over how narrow or broad the definition of the licensing objectives should be. It was suggested that Safer Highland needs to clarify its position and provide guidance on cross cutting issues.</p> <p><b>Action:</b> Margaret to raise the discrepancy with Safer Highland and request clarity on cross cutting issues.</p> <p>Suzy intimated that this was Duncan’s last meeting before he takes up his new post in Edinburgh. Margaret expressed her appreciation for his valuable contribution to the work of the ADP over the years and wished him well for the future. Suzy advised that the post will be recruited to but there may be a gap.</p>	Margaret
11	<b>DATE OF NEXT MEETING</b>	

	<p>The next meeting is scheduled for <u>Tuesday 13<sup>th</sup> May at 2 pm</u> in the Board Room, John Dewar Building.</p> <p><i>Future meetings -</i> Tuesday 26<sup>th</sup> August at 2 pm. – Highland Council HQ Thursday 13<sup>th</sup> November at 2 pm. – Board Room, John Dewar</p>	
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