Agenda Item 3iii.

Highland Alcohol and Drugs Partnership – Strategy Group Meeting

Tuesday 19th May 2026; 2pm-4:30pm
New Start Highland, Inverness and via Microsoft Teams

Present:	Carron McDiarmid - Independent Chair
	Caroline Robertson – Managing Coordinator, CrossReach
	Cathy Steer – Head of Health Improvement, NHS Highland
	Cllr. Kate MacLean - Elected Member, Highland Council
	Debbie Sutherland - Third Sector Rep, Change Mental Health
	Donna Munro – Lead Officer, Child Protection Committee, Highland Council
	Dr Rob Henderson - Consultant in Public Health Medicine, NHS Highland
	Eve MacLeod – Coordinator, Highland Alcohol & Drugs Partnership
	Frances Matthewson – Research & Intelligence Specialist, Highland Alcohol & Drugs Partnership
	Hannah Sinclair - Peer Research Development Officer, Scottish Drugs Forum
	Ian Kyle – Head of Integrated Children's Services – Highland Council
	Ian MacKay - Lived/Living Experience Rep, Scottish Drugs Forum
	James Dunbar - Director, New Start Highland and HADP Vice Chair
	Jennifer Baughan, Programme Manager for the Whole Family Wellbeing Programme, Highland Council
	Nina Semple - Development Manager, Highland Alcohol & Drugs Forum
	Superintendent Judy Hill - Police Scotland
	Lucia Dahlby - Edinburgh University (Guest)
	Elizabeth Gilchrist - Edinburgh University (Guest)
Apologies:	Acting Inspector Chris Murray - Police Scotland
	Barry Muirhead, Head of Mental Health, Learning Disability and Drug & Alcohol Recovery Service, NHS Highland
	Bev Fraser - Strategic Lead, NHS Highland, Drug & Alcohol Recovery Service
	Catherine Russell – Training and Development Manager, Highland Violence Against Women Partnership
	Dr Alex Keith – Consultant Psychiatrist, NHS Highland
	Dr Andrea Broad - Consultant Gastroenterologist, NHS Highland
	Dr Bruce Davidson - Consultant Psychiatrist, NHS Highland
	Fiona Shearer - Head of Education, Highland Council
	Fiona Simpson - Acting Team Manager, Justice Service
	Frances Gordon - Interim Head of Finance, NHS Highland
	Iain Templeton - Third Sector Rep, Highland Third Sector Interface
	Janet Miles - Chief Officer, Highland Third Sector Interface
	Kerry O'Hagan - Head of Offender Outcomes, HMP Inverness, Scottish Prison Service
	Kevin Flett - Manager, Community Justice Partnership (HTSI)
	Lesley Campbell - Interim DARS Service Manager
	Margaret Ross – Assistant Housing Manager, Highland Council
	Maria Cano - Acting Principal Officer, Criminal Justice Service
	Sergeant Graham Cameron - Police Scotland
	Steven McGowan - Peer Research Development Officer, Scottish Drugs Forum

	Tracey Porter – Management Accountant, NHS Highland
Notes:	Steph Tyrer

1. Welcome/Apologies

- The Chair welcomed everyone to the meeting and introduced Elizabeth Gilchrist and Lucia Dahlby from Edinburgh University who presented on the Advance-D project.

- Matters arising were noted as:
  - The relocation of Drug & Alcohol Recovery Services (DARS) in Inverness – there is no update on this as yet.
  - Public Health Scotland (PHS) has shared new drug related death review guidance with those involved in drug related death reviews. Work is planned on local processes, and a briefing will be shared at a future meeting.
  - Highland and Islands Enterprise have agreed to help facilitate another Risk Workshop which will take place over the summer.

2. Declarations of Interest

- For transparency, the Chair raised her connection with items where PHS is noted, in relation to her position as a non-executive director with PHS – no conflict arises with these items.
- No other declarations of interest were raised.

3. Minutes of Previous Meeting and Actions

3.1 The minutes of the meeting held on 10th February 2026

- The minutes from the meeting held on 10th February 2026 were agreed.

3.2 Action Tracker for the Strategy Group, progress and actions to close

- The action tracker was updated with the following actions agreed to close: 83, 92, 114, 118, 121, 129, 130, 131, 132, 133, 135, 136, 137, 138, 139, 140, 142, 143, 144.

3.3 Positive developments to highlight since 10th February 2026

Planet Youth Community Fund

- Funding has been provided by The Whole Family Wellbeing Fund with 13 third sector organisations being awarded £8,923 per year, for two years, to support the Planet Youth work in their communities. The successful organisations were:
  - Fox & Friends – Alness
  - Safe Strong & Free – Nairn
  - Highland Thrive – Dornoch
  - Brora Development Trust – Golspie
  - Aban Outdoor – Inverness High School
  - Invergordon Community Café – Invergordon
  - Linnhe Leisure The Nevis Centre – Lochaber
  - Mikeysline – Dingwall & Culloden
  - Thurso Community Café – Thurso
  - Caithness KLICS – Wick
  - Skye Bridge Studios – Plockton
  - Tain YMCA – Tain

Together We Can

- The actions from the final Together We Can online event in January have been included in the new HADP Strategy. EM extended her thanks to everyone for their involvement.

Support to Vote Event

- The original Support to Vote even was unsuccessful, however, Nina Semple (HADP) and Andrew Kyle (NHS Highland, Health Improvement Team) supported an alternative approach to raise awareness. EM extended her thanks to the Highland Council and Scottish Recovery Consortium for their support.

- The Substance Aware School awards took place for the 8th year. The winning schools were:
  - Lochaber High School - £1000 (Gold Award)
  - Glenurquhart Primary School - £500 (Silver Award)
  - Alness High School - £250 (Bronze Award)

HADP Spring Newsletter

- The HADP Spring newsletter was shared on the 9th of April 2026.

3.4 Advance-D presentation from Liz Gilchrist and Lucia Dahlby, Edinburgh University

- Professor Elizabeth Gilchrist, with support from her colleague Lucia Dahlby, provided an overview of the ADVANCE-D programme - a programme aimed at the perpetrators of intimate partner abuse who also use substances.
  - The programme aims to address harmful behaviours through group-based interventions, helping participants develop insight, accountability, and pro-social goals.
  - It is delivered by practitioners with expertise in domestic abuse and substance use.
  - Facilitators report that group-based delivery is more effective than one-to-one support, as participants can challenge and learn from each other.
  - Online delivery has improved accessibility, privacy, and engagement, particularly for people living in rural and island communities.
  - The programme works flexibly with individuals affected by substance use while maintaining accountability for abusive behaviour.
  - A strong emphasis is placed on participant-led change, focusing on realistic and sustainable behaviour change.
  - There are plans to expand the programme and strengthen partnership involvement as it progresses.
  - Future work includes follow-up studies, publication of findings, and further exploration of the links between gambling harms, mental health, substance use, and abusive behaviour.
  - Partners were encouraged to provide feedback, raise questions, and contribute to the programme's ongoing development.
- The Partnership welcomed the presentation and expressed interest in receiving a further update as the project develops.

4. Finance

4.1 Update from Finance

- At the February Strategy Group meeting, it was agreed that the 2025/26 underspend would be split between the Custody Link Project and Action for Children (for their Contextual Safeguarding work). The Custody Link Project received £39,388, plus £6,967 from the Local Improvement Fund underspend, totalling £46,355. Action for Children also received £46,355.
- Highland Third Sector Interface received £65,000 to continue to support the Local Improvement Fund.
- The final balance of 2025/26 saw a £254 underspend which is a significant improvement from previous years.
- The budget for 2026/27 is stated in the letter of comfort from the Scottish Government as being the same as 2025/26:
  - £1,909,914 ADP Allocation plus;
  - £468,374 MAT Standards allocation totalling;
  - **£2,378,288**
- The finance report showed a projected overspend of £14,051 in the MAT Standards allocation. This was queried with an update required for the next meeting.
- It was noted that not all ADP funding has been allocated at this time. Most contracts have only been extended for 6 months (to September 2026) which leaves the current ADP allocation balance at:

- **£459,014** taking into account any potential overspend in MAT funding (still to be confirmed) this leaves a balance of **£444,963** available. Funding all current projects to March 2027 would leave a projected underspend of £58,000. However, as some extensions were paid from the 2025/26 budget, funding all projects from the current allocation would result in an £88,000 overspend, leaving no funding available for the National Traineeship or new service developments. The Panel was funded through the 2025/26 allocation to ensure its continuation.

It was noted that the new Programme for Government is expected in September and that may affect ADP funding. Ministerial appointments were expected in May.

- **HADP Community Fund**
  - The HADP Community Fund is open to applications from statutory and third sector organisations across the Highland Council area.
  - Grants of up to £2,500 are available for one-off, small-scale projects that contribute to one or more HADP Strategic Plan Outcomes.
  - Application guidance is available here.

2026/27 Application Windows (subject to remaining funds):

  - Q1: 1 May 2026 (9:00am) – 31 May 2026 (5:00pm)
  - Q2: 1 August 2026 (9:00am) – 31 August 2026 (5:00pm)
  - Q3: 1 November 2026 (9:00am) – 30 November 2026 (5:00pm)
  - Q4: 1 February 2027 (9:00am) – 28 February 2027 (5:00pm)
  - Further information is available on the SCVO Funding Scotland website.

4.2 Commissioning & Contracts

Prioritisation Exercise

- The Chair thanked everyone attending the recent prioritisation workshop and to those responding to EM with comments on the first circulation of the matrix. All funded services had now been assessed using the prioritisation matrix and the completed matrix and scores had been shared with partners. EM presented key findings and proposals for next steps. It was noted that:
  - Several progress reports have been continually amber throughout the year. The prioritisation workshop reinforced the need to improve performance reporting on funded services and for improvements to be made where performance was reported as amber or red.
  - It was acknowledged that some services may not be delivering as intended, and continued funding should be reviewed.
  - At least £88,000 of savings are required if we are to continue with all of the services currently funded by the partnership.
  - In addition, the partnership was aware of gaps in service delivery including from our assessment of risk, with risks rated red on effective partnership working including for support to recovery and on harm prevention and early intervention.
  - Other pressures included two strategic actions also rated as red for support targeted interventions to address young people who are at risk of harms associated with alcohol and drugs, including exploitation and to scope options for harm reduction vending machines.

- It was acknowledged that the partnership faced financial challenges along-side service pressures and that it has an appetite to develop new services. Consequently, it was agreed that:

1. A review would be undertaken of the relationship between ADP and NHS budgets where the ADP currently funds NHS service delivery. This would assess whether the right fit it is found and if it is appropriate for the ADP to continue to fund all of the services currently funded given statutory obligations. The new Partnership Delivery Framework produced by the Scottish Government would be helpful in clarifying funding responsibilities. The core

ADP team would take this forward with the finance team and budget holders and report back to the next meeting.

2. We need to query whether some funded services with similar outcomes and functions can be better connected, aligned or combined to improve efficiency and effectiveness. Some examples included:
   - SDF Employability/New Start Positive Activities
   - Housing First/Assertive Outreach
   - Police Harm Prevention/Custody Links/Assertive Outreach

   This would be taken forward by the core team contacting services providers affected.
3. Where services have contract dates extended, they are to be asked to identify savings of up to 10% to see what resource can be freed up. There would be exemptions to this for those services just newly commissioned as they had undergone a best value test through procurement (Partners in Advocacy and With You) along with CrossReach and residential rehabilitation services as there is specific allocation for residential rehabilitation.

- In taking these 3 steps forward it was noted that:
  - Partners agreed a shared responsibility for the savings and service review process; and that
  - Any service changes must consider risks, gaps in provision, equity of service and available alternatives, with mitigation plans in place.

- For future budget planning it was noted that:
  - Contracts for any new funded services should include an outline of the expectations for longer term funding and exit strategies; and
  - The need to balance impact, cost, and reach when shaping future service provision and identifying opportunities for reinvestment.

Action	Lead	Timescale
• The HADP Support Team, in conjunction with NHS finance and DARS colleagues, will review the relationship between ADP and NHS budgets where the ADP currently funds NHS service delivery and assess whether this is still appropriate.	RH / EM	Next Strategy Group
• Look at whether some funded services with similar outcomes and functions can be better connected, aligned or combined to improve efficiency and effectiveness.	HADP Support Team	Next Strategy Group
• Services that have had their contract dates extended are asked to identify savings of up to 10% to see what resources can be freed up.	All	Next Strategy Group

5. HADP Strategic Plan 2025/2026-2029/2030

5.1 Update on Outcome Measures and Core Indicators

- FM provided an update on the development of the new performance framework drawing on national guidance, existing plans, and examples from government and public health.
- Work has progressed on a plan setting out the stages for developing and agreeing required indicators (including collation, mapping to strategy, prioritisation, consideration of what's in and embedding those where data is already available).
- Existing indicators are being drawn together e.g. from NPPLG and HADP Strategic Plan. A working group is being set up to further progress and will meet and feedback at the next meeting. Anyone who wants to be part of the working group please get in touch.

Action	Lead	Timescale
• Partners are encouraged to get involved in the working group for the new performance framework.	All	Next Strategy Group

Please get in touch with the HADP Support Team if you would like to do so.		

5.2 Feedback from subgroups

The Innovation and Development Subgroup

- The group met on the 22nd of April and decided to focus on supporting options for assertive outreach to support people at risk, and the direction from the PHS Briefing, Drug Deaths in Scotland – scale of the problem and actions required.
- An opportunity was also highlighted to get involved with the Highland Council Mobile Unit work with links already established.

The Prevention Subgroup

- The group met on the 29th of April with a focus on mapping existing activity against the PHS Consensus Statement.
- The Integrated Children's Service Plan update was discussed noting that the Alcohol and Drug Delivery Plan is included within the plan and identifies a key priority for each age group - Starting Out, Growing Up and Moving On – supported by three outcome statements for each priority. These priorities have been informed by the HADP Health Needs Assessment, the HADP Strategic Plan and the PHS Consensus Statement.

Lived and Living Experience Panel

- HS provided an update from the Lived and Living Experience Panel, accompanied by panel member IM. Apologies were noted from NM.
- Residential rehabilitation remains a priority for the group including pre, during and post rehabilitation pathways and feedback processes. Caroline Robertson (Managing Coordinator) from Beechwood House attended the group yesterday to provide some insight into the service and answer any questions. This visit was well received by panel members and helped address concerns.
- NS attended a meeting in March, contributing to discussions on residential rehabilitation pathways.
- The group have a working action planner, and an established feedback loop with EM.
- There has been a review of panel processes, including confidentiality, group agreements, and Terms of Reference, to strengthen structure and trust.
- The group are keen to explore wider topics including links with the Police and community harm reduction and detox pathways.
- Panel members feel valued and are keen to continue contributing feedback and engaging with services.

6. Performance Reporting & Scrutiny

6.1 Outcomes/Performance Dashboard

- FM gave an overview of the updated Dashboard.
  - The main thing to highlight is the BBRAG status from the MIST team around the MAT Standards.
  - All sections of the dashboard have been updated, and the main update is for the MAT Standards. RAGB status issued by MIST for DARs community service with a separate one expected for HMP Inverness.
  - While overall performance against the MAT Standards has been maintained, Standard 4 and Standard 7 have moved from Green in 2025 to Provisional Green in 2026 reflecting a change in the interpretation or application of the standards.
  - For Standard 4, a multi-disciplinary working group is being formed to pilot the delivery of Hepatitis B vaccinations within MAT services.
  - For MAT Standard 7, in 2026, scoring has been applied more rigorously at a whole-Highland level, meaning that partial or locality-specific provision no longer meets the threshold for full Green.
  - The Provisional Green rating therefore reflects variation in availability rather than regression in practice and highlights the need to extend shared care more consistently to ensure equitable access across Highland.

- Further information will be available from the benchmarking report expected in July.
- The number of suspected drug related deaths to date in 2026 remain in line with the number of deaths for the same period in each of the 3 previous years.
- Prison reporting on MAT Standards will be included for the first time.
- There remains some uncertainty regarding the accuracy of the ratings, particularly for MAT Standard 3 (Assertive Outreach), which is currently rated blue despite ongoing inequities in service provision across localities. As a result, the rating may not fully reflect the challenges experienced in practice.
- It was noted that 'all people' referred to in the report refers to adults and is not representative of children and young people.
- Improvements have been attributed to increased staffing capacity and initiatives aimed at reducing missed appointments.
- Work is ongoing work within DARS to improve appointment attendance and reduce waiting times. BF can provide further update at the next meeting.

HADP Strategic Plan 2025-2030 - Plan on a Page

- EM has developed this new report and applied RAGBB colours to show how things are progressing:
  - Black means on hold
  - Blue means complete
  - Red means not progressing due to barriers
  - Amber means progressing with some barriers
  - Green means progressing well
  - No colour means not yet started
- Two are marked red:
  1. Targeted support interventions to address young people who are at increased risk of harms associated with alcohol and drugs including exploitation.
  2. Scoping options for the harm reduction vending machines.

Action	Lead	Timescale
• BF will provide an update on the work being undertaken by DARS to improve appointment attendance and reduce waiting times.	BF	Next Strategy Group

6.2 Drug Death Reviews

- There have been no drug death reviews since the last HADP Strategy Group meeting in February.
- It was agreed that RH, as Chair of the Drug Related Death Review Group, will give future updates at Strategy Group meetings.
- Public Health Scotland and the Scottish Government shared a national report highlighting a significant increase in suspected drug related deaths from December 2025 continuing into 2026. Deaths recorded between December 2025, and February 2026 were over 30% higher than the previous quarter with the contaminated heroin supply, and the re-emergence of street benzodiazepines, identified as key contributors to the sustained increase in harm.
- The Chair noted that this issue was discussed at the National Public Protection Leadership Group (NPPLG) where a concern was raised that falling drug prices may be increasing accessibility. JH was unable to comment on pricing trends but will seek further information. She noted that new county lines are constantly being established with different drugs coming into the area. Although there is strong partnership working in Highland there are known anxieties around sharing information.
- DM welcomes the link to child protection and the impact on children and young people being included in the report.
- HS shared a link to Scottish Drugs Forums Drug Intelligence Conversation Starter which is a useful set of structured questions that can be used when talking to people about the drugs they use.

- EM noted that Housing colleagues had highlighted the increased risk to women – the Chair will also bring this to the COG.
- RH mentioned that key colleagues are meeting to look at these issues including how an assertive outreach service can be provided in areas that currently don't have it.

Action	Lead	Timescale
• Find out if there is any intelligence that drug prices have fallen.	JH	Next Strategy Group
• Present the drug related death briefing to the Chief Officers Group to look at what a more concerted partnership approach to county lines could look like considering how Aberdeen use their civil contingencies framework to allow different levels of data sharing.	The Chair	Next strategy Group
• The Chair will raise concerns from Housing colleagues regarding the increased risk faced by women with the COG.	The Chair	Next Strategy Group
• DM raised that the CPC are going to be looking at deaths of babies through co-sleeping where drugs and alcohol have been involved and would welcome some joined up working with the HADP.	DM / EM	Next Strategy Group

6.3 Risk Assessment & Mitigation

- The Chair presented the updated risk register, with one risk improving to green following alignment with the strategic plan.
- Two risks remain red and were discussed earlier in the meeting:
  1. Effective partnership working, including for support to recover.
  2. Harm prevention and early intervention.
- The current risk report was approved, and it was noted that a review of the risk descriptions, scoring, and register will be undertaken at a future workshop, facilitated by HIE, to ensure they remain current and relevant.

6.4 Reviewing Progress with Partnership Funded Services

EM provided an overview of the progress reports received for quarter 4 2025/26

- No progress reports were marked red

Updates on those marked amber

- Health Improvement Team – there have been some staffing challenges, and some reduced engagement from target staff.
- CAMHS Psychologist post – referrals are not always appropriate for the level of intervention that's available.
- NES – referrals versus engagement seems low. There are concerns about the potential move of the service.
- Housing First – a more detailed report would be welcomed, and consideration of how to extend beyond existing provision is needed.
- Contextual Safeguarding – marked amber due to funding uncertainties. A request from schools is highlighted within the report however there may be opportunities to link with Planet Youth and the Substance Awareness Toolkit rather than delivering one-off pieces of work. There could be more work done to identify those at risk of exploitation.
- Custody Links reported that they were seeing a number of people excluded from services ie a person might not be allowed to engage with their GP until a period of positive behaviour which is another barrier for a vulnerable person. EM highlighted the importance of people having rights to access services and the sustainable level of health.
- EM noted a recurring theme across the reports regarding training and suggested exploring opportunities to extend training provision more widely.

Updates on those marked green

- Good practice examples included:
  - The family work being undertaken by Action for Children.
  - The detailed report received from With You.

- The HADP support team reviewing the progress reporting process and will look to move from Word to Forms, as previously agreed, to make the process more streamlined for everyone.

6.5 HADP Support Team Review

- EM extended her thanks to partners for completing the short survey that was shared re the Development Manager post. The SBAR has been shared with the Director of Public Health, and the Depute Director of Public Health - feedback is awaited.

6.6 Community Planning Partnership Board

The Chair's update report had been circulated. It was noted that:

- The Community Planning Partnership Board reviewed and noted the partnership's self-assessment report and endorsed the proposed improvement actions.
- Improvement actions should be incorporated into the partnership action tracker to ensure progress is monitored and actions are not lost; some actions are already underway or completed.
- The new Partnership Delivery Framework includes a series of checklists and challenge questions to support partnership self-assessment and continuous improvement.
- It is anticipated that these checklists will form part of future self-assessment processes, although guidance on frequency, process, and assurance arrangements has not yet been provided.
- EM and CM / The Chair will attend a Scottish Government ADPs meeting, which may provide further clarification on the new framework and expectations.

6.7 Public Protection Chief Officers Group

The Chair's update report had been circulated. It was noted that:

- The Public Protection Chief Officers Group received updates from the partnership, including the HADP risk register and concerns regarding funding shortfalls affecting the Custody Links and Action for Children Contextual Safeguarding projects.
- In response, the Chief Officers Group initiated work to review these services and identify sustainable solutions, with the aim of preventing future short-term funding issues.
- Reflecting on COG practice is being supported by new leadership within the Chief Officers Group, with Police Scotland taking a leading role in driving improvements.
- The COG also agreed to undertake a development session in August to review its effectiveness, governance arrangements, and strategic priorities for public protection.
- This work is expected to help clarify priorities, improve alignment across partnerships, and strengthen reporting and collaborative approaches to reducing harm and risk across public protection..
- The next Strategy Group meeting has been rescheduled to 1st September 2026 due to a conflict with the COG development session.

Action	Lead	Timescale
• Strategy Group members are requested to accept the revised meeting invitation for the Strategy Group meeting rescheduled from the 25th of August to the 1st of September 2026.	All	Next Strategy Group

6.8 Integrated Children's Service Planning Board/Leaders' Forum

- Already discussed at item 5.2.
- The new Highland Children's Services Partnership Plan 2026-29 is progressing to the verification stage. HADP has been fully involved throughout this process.

6.9 Scottish Government Reporting/Updates

- Preventing Harm, Promoting Recovery: Scotland's Alcohol & Drugs Strategic Plan 2026 – 2035 and
- Alcohol and Drugs: Partnership Delivery Framework - 2026
    - In the interest of time, EM will present slides on these two reports at the next meeting.

- Alcohol and Drug Partnerships: Annual Survey 2024 to 2025
    - Alcohol and Drug Partnerships are required to complete an annual survey which is then taken to the Community Planning Board for review. The 2025/26 survey has not yet been received therefore the survey, along with the HADP Annual Report, will be presented at the CPP Board meeting in September.

- Alcohol and Drugs Services: National Specification
    - Link included for information.

- Residential Rehabilitation Services: Recommendations on Clinical Governance
    - Link included for information.

- Helping Care Leavers
    - Colleagues from the Youth Action Team highlighted concerns about the £2,000 leaving care grant available to care-experienced young people moving into independent living from age 16 and the potential risks for young people with existing alcohol or drug-related issues having access to a substantial one-off payment. The issue has been shared with the Children and Young People's Commissioner for consideration.

6.10 HADP Annual Report

- It was noted that the annual reporting timeline may require elements to be approved by the Scottish Government before returning to the CPP for formal approval, with updates to be shared by email if required.
- Concerns were raised about the financial sustainability of third sector organisations, with many facing significant funding uncertainty that could impact service delivery and outcomes.
- The Partnership recognised the need to consider this as a risk and explore mitigation measures, including understanding the specific challenges faced by partners, prioritising funding, supporting collaboration between services, and seeking greater funding stability.
- Members highlighted that short-term funding can limit innovation, long-term planning, and the ability to demonstrate impact.
- The annual report and annual survey report will be shared together with the CPP to provide a more comprehensive overview of the Partnership's work. The annual report remains in development and will be circulated for comment in due course.

7. Partnership Improvement & Learning

7.1 ADP Chairs Leadership Forum

- There has not been a meeting since the last Strategy Group meeting. Coordinators will also attend the next meeting on the 3rd of June, and an update will be provided at the next Strategy Group meeting.

7.2 Summary Feedback from the National Public Protection Leadership Group (NPPLG)

- The last meeting was on 28th April and an update across all workstreams will be included in the newsletter, and this will be circulated to partners when available. A recommendation to move towards a unified risk register across all public protection strands was agreed. Further guidance on this is to be developed.

7.3 Belladrum

- The welfare subgroup is still running with all arrangements in place.

- The Anchor Project have provided a guardianship team; all of the welfare and medical providers are in place.
- The medical providers have naloxone on site, but a query has been raised about whether that should also be available to the welfare and or guardianship team. This issue will be raised by Andrew Kyle (NHS representative) at the welfare subgroup meeting next Tuesday and feedback will be provided at the next Strategy Group meeting.
- Harm reduction messaging continues to be reviewed.

8. New and Emerging Risks and Opportunities

- It was agreed that the influence of the alcohol industry will be added to the Risk Register. This follows concerns about Community Alcohol Partnerships, which are funded by the alcohol industry, being brought to the Partnership's attention

9. AOB

- DM highlighted concerns from third sector and statutory partners that short-term contracts of 6, 9, or 12 months make it difficult to recruit and retain suitably skilled staff due to the lack of job security.

Date and time of next meeting:	**Tuesday 1st September 2026; 2pm-4:30pm**