

Agenda Item 13

Falkirk Alcohol and Drug Partnership – Progress Report



Falkirk Integration Joint Board

19 March 2021

Falkirk Alcohol and Drug Partnership – Progress Report

For Noting

1. Executive Summary

- 1.1 The report provides an update to the Integration Joint Board (IJB) on progress since the transfer of Falkirk Alcohol and Drug Partnership (FADP) to the Health and Social Care Partnership from October 2019.
- 1.2 The report provides assurance to the IJB that the transfer of FADP to the Health and Social Care Partnership is compliant with the expectations laid out within the Public Bodies (Joint Working) Scotland Act 2014.
- 1.3 The FADP Delivery Plan is now aligned to the HSCP Strategic Plan and Community Planning Partnership objectives, which will enable delivery of a range of outcomes across the strategic landscape in Falkirk.

2. Recommendations

The Integration Joint Board is asked to:

- 2.1 note the transfer of the Falkirk Alcohol and Drug Partnership into the Health and Social Care Partnership structure is in line with Public Bodies (Joint Working) Scotland Act 2014
- 2.2 note the activity and achievements within FADP Annual Report 2019/ 20
- 2.3 note an update on progress against the FADP Delivery Plan will be presented to the Board meeting in September 2021.

3. Background

- 3.1 Alcohol and Drug Partnerships (ADPs) were established in 2009 and are responsible for:
 - strategic planning and commissioning, contract monitoring of drug and alcohol treatment and support services in each local authority area
 - developing strategies for tackling reducing and preventing problem drug and alcohol use across the whole population
 - applying a whole systems approach to deliver sustainable change for the health and well-being of the population.

- 3.2 The Public Bodies (Joint Working) Scotland Act 2014 set out a framework for integrating adult health and social care services. The Act created new public bodies – Integration Joint Boards with a statutory responsibility to co-ordinate local health and social care services. Alcohol and Drug Partnerships sit within this structure and report to IJB's.
- 3.3 The transfer will strengthen partnership working across all multi-agency partnerships in the area and increase opportunities for joint planning and improved integrated working practice.
- 3.4 The Falkirk Alcohol and Drug Partnership contributes to the delivery of the HSCP Strategic Plan priority “early intervention, prevention and harm reduction that improve support for people with substance use issues, their families and communities.”
- 3.5 This process will enhance opportunities for the FADP to work more closely with carers of those with drug and alcohol issues.
- 3.6 The focus of the FADP will be to deliver on the Scottish Government's Rights, Respect and Recovery (2019): Drug Strategy, and the Alcohol Framework (2018). Scotland's key strategies to improve health by preventing and reducing alcohol and drug use harms.
- 3.7 At a local level the FADP Strategic direction comes from the Forth Valley Health Improvement Strategy. This strategy is currently being revised and ADPs are being fully consulted on the priorities within relating to substance use as substance use has been identified as a national Public Health priority for the next decade.
- 3.8 The FADP has a proven track record of delivery. The area has been recognised as a high performing ADP by the Care Inspectorate (2017) Leadership and partnership working being highlighted as two key strengths. There is clear commitment to ensure that the ADP will continue to flourish and develop further under the new arrangements.
- 3.9 The FADP currently has strong links with the local community Mental Health Services team and planning infrastructure, to ensure that substance use issues are prioritised and supported, both within these services and the associated strategic plans.

4. Falkirk ADP Update

- 4.1 Falkirk Health and Social Care Partnership (HSCP) now fully meet the requirements of the Act by transferring the ADP function for Falkirk into the HSCP. Strengthened governance arrangements and aligned performance reporting, will make best use of the collective resource.

4.2 The FADP will continue to:

- work with the third and independent sectors, to maximise their role in supporting people affected by drug and alcohol issues, their families and carers
- assess population need, commission and monitor services to provide high quality care and support services for people affected by drugs and alcohol, in line with the national Health and Social Care Standards
- contribute to, and where appropriate, lead the wider Community Planning agendas across both Council areas
- link with Child Protection Committee and Adult Protection Committee
- work closely with Falkirk Council Licensing
- work in partnership with NHS Forth Valley on strategic projects, service improvement, performance and workforce development.

4.3 The FADP Annual Report 2019 and the FDAP Delivery Plan 2020 – 2023 are attached at appendix 1 and 2. The HSCP and FADP will work jointly to deliver outcomes for local communities and to relieve the burden of alcohol and drug related harm across the Partnership. This will be done through better alignment of area wide drug and alcohol and HSCP mental health services, this will support improved joint working opportunities within the partnerships.

4.4 The ADP Lead Officer resource has now transferred into the HSCP. Work is underway with the recruitment process to fill this vacancy. Management and accommodation arrangements have been considered as part of the transfer of the post to the HSCP.

4.5 The IJB is asked to note that a further progress report on the FADP Delivery Plan will be presented to the Board meeting in September 2021.

5. Conclusions

5.1 The transfer of the Falkirk Alcohol and Drug Partnership into the HSCP provides enhanced opportunities to align closely with the transforming care agenda, enhancing and improving outcomes for those affected by alcohol and drugs.

Resource Implications

Further work is required to transfer a number of budgets currently held by Falkirk Council, which were previously aligned to FADP adult care but have not yet been transferred to the IJB. This will be actioned in the new financial year.

A newly formed FADP finance group which is attended by the Chief Finance Officer and FADP Chair will oversee the FADP funding allocated by Scottish Government. The group's purpose is to aid planning, provide advice on budget management and the allocation of ADP funding, in an open and transparent way.

Impact on IJB Outcomes and Priorities

The FADP Delivery Plan is aligned to the Strategic Plan outcomes and priorities.

Directions

New Directions will require to be issued from 1 April 2021 to reflect the transfer of ADP historical budget strands from Falkirk Council as referred to above.

Legal & Risk Implications

Transfer has aligned the ADP with the requirements of the Public Bodies (Joint Working) Scotland Act 2014.

Consultation

No consultation required.

Equalities Assessment

This report does not require an EQIA.

6. Report Author

- 6.1 Elaine Lawlor, Alcohol and Drug Partnership Coordinator

List of Background Papers

Rights Respect Recovery – National Drug Strategy 2019
Alcohol Framework – 2018
ADP Partnership Agreement 2018

7. Appendices

Appendix 1: FADP Annual Report 2019

Appendix 2 FADP Delivery Plan 2020- 2023

**ALCOHOL AND DRUG PARTNERSHIP ANNUAL REVIEW 2019/20 – Falkirk ADP**

- I. **Delivery progress**
- II. **Financial framework**

This form is designed to capture your **progress during the financial year 2019/20** against the [Rights, Respect and Recovery strategy](#) including the Drug Deaths Task Force [emergency response paper](#) and the [Alcohol Framework 2018](#). We recognise that each ADP is on a journey of improvement and it is likely that further progress has been made since 2019/20. Please note that we have opted for a tick box approach for this annual review but want to emphasise that the options provided are for ease of completion and it is not expected that every ADP will have all options in place. We have also included open text questions where you can share details of progress in more detail. Please also ensure all **sections in yellow** are fully completed.

The data provided in this form will allow us to provide updates and assurance to Scottish Ministers around ADP delivery. The data will also be shared with Public Health Scotland (PHS) evaluation team to inform the [monitoring and evaluation of rights, respect and recovery](#) (MERRR). This data is due to be published in 2021.

We do not intend to publish the completed forms on our website but encourage ADPs to publish their own submissions as a part of their annual reports, in line with good governance and transparency. All data will be shared with PHS to inform the MERRR and excerpts and/or summary data from the submission will be used in published MERRR reports. It should also be noted that, the data provided will be available on request under freedom of information regulations.

In submitting this completed Annual Review you are confirming that this partnership response has been signed off by your ADP, the ADP Chair and Integrated Authority Chief Officer.

The Scottish Government copy should be sent by **Wednesday 14th October 2020** to: alcoholanddrugdelivery@gov.scot



NAME OF ADP: Falkirk ADP

Key contact:

Name: Elaine Lawlor
Job title: Forth Valley ADPs Co-ordinator
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I. DELIVERY PROGRESS REPORT

1. Representation

1.1 Was there representation from the following local strategic partnerships on the ADP?

Community Justice Partnership	X
Children's Partnership	X
Integration Authority	X

1.2 What organisations are represented on the ADP and who was the chair during 2019/20?

Chair (*Name, Job title, Organisation*): Martin Thom, Head of Integration, Falkirk Health and Social Care Partnership.

Representation

The public sector:

Police Scotland	X
Public Health Scotland	X- Public Health – NHS Forth Valley
Alcohol and drug services	X
NHS Board strategic planning	<input type="checkbox"/>
Integration Authority	X
Scottish Prison Service (where there is a prison within the geographical area)	X
Children's services	X
Children and families social work	X
Housing	X
Employability	X
Community justice	X
Mental health services	X
Elected members	<input type="checkbox"/>
Other	X Health Promotion, Recovery Community, Adult Support and Protection Coordinator.

The third sector:

Commissioned alcohol and drug services	X
Third sector representative organisation	X
Other third sector organisations	X - Barnardo's
People with lived/ living experience	X Forth Valley Recovery Community - ADP Member
Other community representatives	<input type="checkbox"/> Please provide details.....
Other	<input type="checkbox"/> Please provide details.....



1.3 Are the following details about the ADP publically available (e.g. on a website)?

Membership	<input type="checkbox"/>
Papers and minutes of meetings	<input type="checkbox"/>
Annual reports/reviews	X
Strategic plan	X https://forthvalleyadp.org.uk/

1.4 How many times did the ADP executive/ oversight group meet during 2019/20?

Falkirk ADP held 4 meetings during 19/20.

2. Education and Prevention

2.1 In what format was information provided to the general public on local treatment and support services available within the ADP?

Please tick those that apply (please note that this question is in reference to the ADP and not individual services)

Leaflets/ take home information	X
Posters	X
Website/ social media	X
https://forthvalleyadp.org.uk/	

Accessible formats (e.g. in different languages) X

All language requirements will be met through NHS Translation Services. Polish language information routinely available via the ADP. The ADP has as directory of services which is available in hard copy, electronically and online via our website.

Other X

The Clackmannanshire and Stirling ADP and Forth Valley Recovery Community supported the development of a smart phone application known as "Forth Valley Recovers". The app was launched on International Overdose Awareness Day in August 2019. During its first year, use has exceeded the set (KPI) Key Performance Indicators and, it is helpful to know that use of the app will be promoted during the COVID-19 lockdown period. This is accessible across the whole of Forth Valley.

Our website was updated and revamped during the reporting period and is now hosted within the NHS Forth Valley web site.

The ADP Service Directory was updated and redesigned.

All ADP Services were added to the national HSCP service directory.

The ADP continued to pursue the goals of our whole population approach campaigns. Maximising our community reach through local radio stations, including hospital radio in an attempt to reach all groups within FV.



2.2 Please provide details of any specific communications campaigns or activities carried out during 19/20 (E.g. Count 14 / specific communication with people who alcohol / drugs and/or at risk)

We endorsed the national Count 14 campaign and promoted it widely throughout our partner agencies including the NHS and Local Authorities. This included communications via social media, website posts as well as displaying campaign literature in appropriate venues.

To compliment the above, we continued to promote our local Rethink Your Drink Campaign, which now has specific focus on a summer message, festive message and avoiding alcohol during pregnancy.

We have also developed information packs for a number of settings including Police Scotland (For use in supporting families with Drug Related Deaths, Police Operations to remove drugs within communities) We have developed bespoke communications for the promotion of Bereavement Support, local service promotion for Police Custody and Homeless Settings. This work has provided a range of information for people at times when they may be more vulnerable and might need it most.

Forth Valley Recovery Community has had several articles published in local and national newspapers, all of which promoted the work of the community and shared a message of hope and recovery.

Forth Valley Family Support Service has also been campaigning to increase referral. We triangulate information with Scottish Families Affected by Alcohol and Drugs, which comes in via their national helpline from local families, to ensure that local people can access support.

Through the work of our Drug Related Critical Incidents Group, we started strategic discussions regarding a whole system approach to tackling substance use in order to support those who present at Forth Valley Royal Hospital. This will hopefully mean that naloxone will be more widely prescribed within the setting and that an assertive outreach model can be introduced to engage those not in treatment.

2.3 Please provide details on education and prevention measures/ services/ projects provided during the year 19/20 specifically around drugs and alcohol.

Education Setting

We provided support to education colleagues re evidence based practice, workforce development and risk management as required.

Social Influence Programme

For many years, the ADP have built on the success of the education and prevention programme that has been delivered within our secondary schools, in an effort to reduce risk taking behaviours in young people. The programme continues to yield excellent results and a business case was made for a permanent post to be funded to support continuation and growth of the project. There is evidence from data collated from participating schools that a reduction in tobacco, alcohol and drug use is evident post intervention. Falkirk schools have been engaged with this programme and have taken steps to embed the practice, this work will continue to grow and develop.

General Practitioner Evening Event

An evening session with local General Practitioners was warmly welcomed by participants, The Director of Public Health gave an overview of drug harms and it provoked much discussion. It is planned to continue with these meetings and create a support network for those general practitioners who are involved in the delivery of Medicine Assisted Treatment (MAT).



DRD Learning Event

In October 2019, we held a multi-agency learning seminar in which partners came together to listen to the findings from the 2018 Forth Valley DRD Research. This involved a range of partners who could contribute to the recommendations within the report. The findings from this research have been incorporated into ADP work plans. We have also reviewed these work plans against the Staying Alive in Scotland document.

In addition, the ADP Support Team presented the findings of the Forth Valley DRD Report to a number of other strategic partnerships.

Community Planning Engagement Event

Meetings were held with the Community Planning Partnership following on from the partnership event, which was held in response to issues of concern being raised relating to increased deaths from substance use. All of these key findings and actions are included with our revised delivery plan 2020-2023.

Town Centre Management

The TCM Team raised concern with the Community Planning Partnership relating to a cohort of people who were accessing the town centre. Assumptions were that these individuals were people who used drugs and that there was anti-social behaviour associated with the gatherings. On investigation by both Police Scotland and Harm Reduction Workers, it was found to be people who were accessing the town centre for social reasons, shopping and medicines. The ADP offered advice, training and resources to alleviate the concerns of those who brought the situation to light.

Pre Birth Planning Pathway

During the reporting period work was coming to a conclusion on the PBPP. The pathway offer support for those who are deemed to have any degree of vulnerability, which may relate to their substance use, domestic abuse etc during pregnancy.

Alcohol Pathway Development

The ADP invested in a review of the FV alcohol pathway. Several sessions were held with key partners to examine local process against best evidence. The pathway is in the final stages of development.

Strategic Service Review

A review of services was undertaken to ascertain the reach and responsiveness to those affected by alcohol and or drugs, the finding of this work was incorporated into our delivery plan.

NFO Research

The ADP conducted research which involved those who have experienced a non-fatal overdose, the results of which were incorporated into our revised delivery plan.



Cyrenians Peer Mentor Project

The ADP invested in a Peer Support Project in partnership with Cyrenians. The programme offered a supportive structure within the workplace to allow those furthest away from employment to gain skills and improve their employability experience. The project was successful and the participants of the programme progressed into employment.

Recovery Housing

This programme offers support and secure tenure for a prolonged period to those who wish to change their lifestyle and engage in treatment to stabilise their drug and or alcohol use. The project is working well and will be further complimented by the other novel programmes which are available via housing in Falkirk.

2.4 Was the ADP represented at the alcohol Licensing Forum?

Yes X
No

2.5 Do Public Health review and advise the Board on license applications?

All ☐
Most ☐
Some X
None ☐

Please provide details

Public Health is a statutory objector to licensing applications as an independent body rather than as a member of the ADP. .

3. RRR Treatment and Recovery - Eight point plan

People access treatment and support – particularly those at most risk (where appropriate please refer to the Drug Deaths Taskforce publication [Evidence-Based Strategies for Preventing Drug-Related Deaths in Scotland](#): priority 2, 3 and 4 when answering questions 3.1, 3.2, 3.3 and 3.4)

3.1 During 2019/20 was there an Immediate Response Pathway for Non-fatal Overdose in place?

Yes X
No ☐
In development ☐

Please give details of developments

CGL, our commissioned service from October 2019, have continued with the assertive outreach service that has been in place since approximately 2006. We continue to audit and analyse the prevalence of NFO incidents and discuss this data in our drug related death prevention meetings. This allows us to dispatch harm reduction support to areas of need. We refreshed the training for Scottish Ambulance Service as well as the resources that Crews have available to leave with people who they attend.



3.2 Please provide details on the process for rapid re-engagement in alcohol and/or drug services following a period of absence, particularly for those at risk 19/20.

In the main, a same day or next day assessment appointment would be offered via telephone. In person assessment would be offered if the individual has no telephone access or there are significant risks where a visual assessment is required.

If the referral is from a professional, the service user is contacted on same day that the referral is received – by telephone wherever possible – and offered the above.

If the service user does not have a phone, then we need to send a letter, which presents a slight delay.

At assessment, we complete triage and AUDIT and SADQ for (alcohol) and allocate a key worker if suitable for service. If suitable for another higher tariff service, service users would then go to Single Point of Referral (SPR). However, if we feel it is urgent and the SPR is not due for a few days, we would contact the service directly for a discussion. We agreed some time ago not to delay for SPR if there is necessity to discuss urgently.

If a service user were on MAT, at present, we would need to follow the current guidelines of two positive drug tests, one week apart to evidence opiate use as part of the referral process to MAT. We try to expedite this as quickly as possible and get patients booked into the titration clinic.

We continue to exceed the expected performance levels for the access target for drug and alcohol services meaning that people can re-engage with local services quickly.

3.3 What treatment or screening options were in place to address drug harms? *(mark all that apply)*

Same day prescribing of OST ☐

Methadone X

Buprenorphine and naloxone combined (Suboxone) X

Buprenorphine sublingual X

Buprenorphine depot X

Diamorphine ☐

Other non-opioid based treatment options

Other X

Our services are substance use services so will respond according to presenting need regardless of substance type. We have addiction psychology services available for substances such as cocaine in line with the evidence base. We have also continued to develop our pathway for young people and are currently working to recruit to a nursing post, which will support transitions for young people between youth and adult services as well as mental health services.

3.4 What measures were introduced to improve access to alcohol and/or drug treatment and support services during the year, particularly for those at risk 19/20?

Service Promotion / referral drives

As a Partnership, we continue to promote services widely to encourage referral from an array of sources. We also know from our most recent needs assessment that our treatment ratios are not as good as we would like them to be so service promotion and raising awareness of available support is one way in which we hope to address this. All of our campaigns are shared via the digital platforms available within the partnership.

Social Inclusion Project



During the reporting period, there were 128 new referrals to the SIP project in Falkirk. 71% of these individuals reduced their substance use and 67% improved their financial situation through being supported to address debts, set up payment plans for arrears, accessing the correct benefits and applying to the Scottish Welfare Fund for assistance.

Alcohol Brief Intervention

Locally, we continue to exceed the Forth Valley target in relation to ABI Delivery within priority settings. The early identification of harmful drinking patterns is part of our approach to reduce alcohol related deaths.

Throughout the reporting period, 9030 ABI screenings were delivered across Forth Valley with 7829 being within priority settings and 1210 within wider settings.

In the year 2019-2020, ABI training was delivered via online learning (Learnpro) and face-to-face training. ABI training is promoted through the Health Promotion Service Training Brochure.

Workforce Development

Workforce development continues to be a key priority for us locally. During the reporting period, we have delivered training to a wide variety of services and practitioners. Due to word constraints, it is not possible to include details around all of this but it included core SDF training, bespoke training, locally resourced training around the Getting Our Priorities Right agenda. Locally, we are also able to evidence a positive uptake in the e learning modules provided through the Scottish Drugs Forum, FV being one of the best performing areas. Developing a more competent and confident workforce, supports access to specialist drug and alcohol services as more practitioners are able to identify that substance use may be an issue and how to access support.

Impact of Parental Substance Use Assessment Tool

As reported last year, the Forth Valley IPSU was formally launched on 3rd December 2018. Since then, there has been ongoing support offered to services to embed the tool within teams and organisations. The IPSU continues to be endorsed by Senior Leaders across all relevant organisations. Over the next weeks and months, the focus is on supporting the further development of electronic recording systems in relation to IPSU. This will also be supported by a programme of workforce development for new staff and those who would benefit from a refresh. During the reporting period, the ADP Support Team visited other ADP areas to highlight the work and offer support to implement in other local areas.

Police Packs

We have extended the range of information packs that are available to colleagues from Police Scotland to use when supporting individuals and families. We now have three packs which are available electronically as well as paper copies - Where to get help for substance use, a family support information pack and information to be left with families following a suspected drug related death.

3.5 What treatment or screening options were in place to address alcohol harms? *(mark all that apply)*

Fibro scanning	X
Alcohol related cognitive screening (e.g. for ARBD)	X
Community alcohol detox	X
Inpatient alcohol detox	X
Alcohol hospital liaison	X



Access to alcohol medication (Antabuse, Acamprase etc)	X
Arrangements for the delivery of alcohol brief interventions in all priority settings	X
Arrangements of the delivery of ABIs in non-priority settings	X
Other	X Alcohol Related Brain Injury Team

People engage in effective high quality treatment and recovery services

3.6 Were Quality Assurance arrangements in place for the following services (examples could include review performance against targets/success indicators, clinical governance reviews, case file audits, review against delivery of the quality principles)?

	<i>Adult Services</i>	<i>Children and Family Services</i>
Third sector	X	<input type="checkbox"/>
Public sector	X	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

3.6 Please give details on how services were Quality Assured including any external validation e.g. though care inspectorate or other organisations?

Locally, we have an Integrated Governance Group for commissioned and statutory adult substance use services, which oversees governance and quality assurance. A Quality Improvement Framework Group is also in place. We await the national Quality Assurance template that has been discussed for some time that will support more structured audits of quality assurance.

The local ADP does not commission Children's Substance services but does provide advice to Children and Families colleagues where appropriate.

3.7 Were there pathways for people to access residential rehabilitation in your area in 2019/20?

Yes ☒
No ☐

Please give details below (including referral and assessment process) (max 300 words)

Access to residential rehabilitation is open and available to our services with the protocol having been refreshed in 2019. Forth Valley Recovery Community (FVRC) attend liaison meetings to support individuals about to enter residential rehabilitation and to aid transition plans for people returning home to Forth Valley. The assessments for rehabilitation placements are based on clinical assessment, there is a clear defined process re when this treatment modality would be utilised.

3.8 How many people started a residential rehab placement during 2019/20? (If possible, please provide a gender breakdown) 1 male accessed residential rehab during the reporting period.

People with lived and living experience will be involved in service design, development and delivery

3.9 Please indicate which of the following approaches services used to involve lived / living experience (mark all that apply).

For people with lived experience:

Feedback/ complaints process	X
Questionnaires/ surveys	X



Focus groups	X
Lived/living experience group/ forum	X
Board Representation within services	X
Board Representation at ADP	X
Other	X

Please provide additional information (optional)

Forth Valley Recovery Community as a key asset to the ADPs in respect of involving people with lived and living experience. This has included conducting surveys on behalf of the ADP, being represented on the ADP partnership and building more effective links and relationships with local services. In addition to this influence at a local level, the FVRC has also contributed to a number of national consultations and reviews including the Scottish Affairs Committee inquiry into drug use in Scotland.

For family members:

Feedback/ complaints process	X	
Questionnaires/ surveys	X	
Focus groups	X	
Lived/living experience group/ forum	X	
Board Representation within services	<input type="checkbox"/>	
Board Representation at ADP	<input type="checkbox"/>	
Other	<input type="checkbox"/>	Please provide details.....

Please provide additional information (optional)

As noted, we have a commissioned Family Support Service who supports family members both on a one to one basis and through group work provision. The service operates a robust complaints policy and supports individuals to complete exit questionnaires when their contact with the service is ending. The service provide a level of advocacy support to families to ensure that they and their loved ones are aware of their rights and responsibilities. Families are made aware of the complaints processes of all statutory and commissioned services. We plan to survey families across the area and will feed back the findings in the next reporting period. The ADP have provided additional help and support to family members to partake in well-being activities to support and sustain them during periods of high stress.

3.10 Had the involvement of people with lived/ living experience, including that of family members, changed over the course of the 2019/20 financial year?

Improved	X
Stayed the same	<input type="checkbox"/>
Scaled back	<input type="checkbox"/>
No longer in place	<input type="checkbox"/>

Please give details of any changes

FVRC continues to grow and develop to maintain its position as one of the most visible and valued Recovery Communities in Scotland. The FVRC is represented on the national Drug Death Taskforce with staff also presenting at the Scottish Drug Death Summit towards the end of the reporting period.

A vast array of recovery activities is now available across the Forth Valley area, seven days per week.

The Recovery Cafes continue to evidence steady and sustained growth with attendance figures of 5958 individual visits during the reporting period.



In addition, a range of additional recovery activity continues to provide holistic health and wellbeing opportunities for Community members including walking groups, Tai Chi and fitness circuits.

3.11 Did services offer specific volunteering and employment opportunities for people with lived/living experience in the delivery of alcohol and drug services?

Yes ☒

No ☐

Please give details below (max 300 words)

Although not established as an employability project, it is one of FVRC's aims to develop suitable pathways for people to develop personally and professionally. All community members are encouraged to progress from considering a career to acquiring suitable education, experience and then, where desired, to commence relevant employment. In the reporting period, 14 community members from the Falkirk area moved into a positive destination through either further education or work. We have found over the years that many people have naturally transitioned into substance service as workers after a positive engagement with FVRC. It is reported by management that these workers are exemplar employees.

Local substance services employ a number of people with lived experience and this is set to increase within the 2020/21 reporting period

People access interventions to reduce drug related harm

3.12 Which of these settings offered the following to the public during 2019/20? (mark all that apply)

Setting:	Supply Naloxone	Hep C Testing	IEP Provision	Wound care
Drug services Council – we do not have these locally.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug Services NHS	X	X	<input type="checkbox"/>	X <input type="checkbox"/>
Drug services 3rd Sector	X	X	X	X
Homelessness services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer-led initiatives	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community pharmacies	X	X	X	X
GPs	X	X	<input type="checkbox"/>	X
A&E Departments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X
Women's support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



services – at this time we do not have gender specific services locally.

Family support services	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health services	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Justice services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobile / outreach services	X	X	X	X
Other ... (please detail)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A person-centred approach is developed

3.13 To what extent were Recovery Oriented Systems of Care (ROSC) embedded across services within the ADP area? ROSC is centred on recognising the needs of an individual's unique path to recovery. This places the focus on autonomy, choice and responsibility when considering treatment.

Fully embedded ☐
Partially embedded X
Not embedded ☐

Please provide details (max 300 words)

Falkirk ADP and the associated partners continue to deliver priority actions, which contribute to the ongoing development of our local ROSC. While we have all components of a ROSC in place, with some well-developed activity, we believe that our ROSC cannot be considered complete if treatment ratios are still lower than we would hope and alcohol and drug related deaths continue to rise.

3.14 Are there protocols in place between alcohol and drug services and mental health services to provide joined up support for people who experience these concurrent problems (dual diagnosis)?

Yes X
No ☐

Please provide details

Locally, there are protocols in place but we acknowledge that improvements are still required. Work is currently underway to address these issues, which includes revising and reinvigorating formal referral processes and pathways. To support colleagues working in mental health, during the reporting period we developed resource boxes for mental health nurses working within primary care settings. Improvements in this area are also a key priority for the Health and Social Care Partnership Strategic Plan.

The recovery community achieves its potential

3.15 Were there active recovery communities in your area during the year 2019/20?

Yes X
No ☐



3.16 Did the ADP undertake any activities to support the development, growth or expansion of a recovery community in your area?

Yes ☒ X
No ☐

3.17 Please provide a short description of the recovery communities in your area during the year 2019/20 and how they have been supported.

The FVRC Annual Report is included as an Appendix to this report. This provides a full over view of activity. The ADP continued to support the FVRC financially as well as ongoing support to develop FVRC activity etc.

A trauma-informed approach is developed

3.18 During 2019/20 have services adopted a [trauma-informed approach](#)?

All services ☐
The majority of services ☒ X
Some services ☐
No services ☐

Please provide a summary of progress.

All ADP commissioned services and the NHS statutory service for addiction are operating within a trauma informed model and are supported by our local Lead Consultant in Addiction Psychology. Services follow the recommendations that were made within the LPASS report. We have also undertaken workforce development with the wider workforce through programmes provided by SDF and wider NES modules. Prisoner Healthcare staff are included equally as partners and are included in all that we plan for community services, as they are a key part of our local workforce.

We were also able to offer personal development opportunities for staff from Forth Valley Recovery Community who undertook placements within the NHS Addiction Psychology Team to develop their knowledge in Trauma Informed Care.

An intelligence-led approach future-proofs delivery

3.19 Which groups or structures were in place to inform surveillance and monitoring of alcohol and drug harms or deaths? *(mark all that apply)*

Alcohol harms group ☐
Drug death review group ☒ X
Drug trend monitoring group ☒ X
Other ☒ X ARBI Steering Group, Family Support Monitoring Group, Tobacco Action Group, Forth Valley Recovery Community Steering Group, Integrated Clinical Governance Group. All these groups can provide us with local information and intelligence as to current issues within our local communities. The communication process is mutual in that the ADP Support Team can also communicate trends, issues, opportunities direct to services to provoke a response.

3.20 Please provide a summary of arrangements which were in place to carry out reviews on [alcohol related deaths](#) and how lessons learned are built into practice.

The ARBI teams reviews all alcohol related deaths for people who have died whilst accessing that service. Furthermore, we also review alcohol related deaths for people who have died within our wider



service portfolio. We are also currently preparing a business case which outlines the need for additional resource to include all suicide deaths in Forth Valley and to extend to review any additional alcohol deaths once the resource is identified and in place.

3.21 Please provide a summary of arrangements which were in place to carry out reviews on drug related deaths and how lessons learned are built into practice.

Locally we have two groups – a Strategic DRD Group and a Case Review Group. These are multi agency meetings, which support the examination of the deaths and oversee the development plan, which contains any actions, which have been identified from the deaths. The strategic group is chaired by the Director of Public Health. The DRD work plan is based on the Staying Alive document and is monitored through the Strategic Group. We utilise the evidence gleaned in our DRD review meetings to populate the national database for DRDs. Each year, we commission external research to review of our local deaths to further deepen our understanding and identify potential improvement and development areas.

4. Getting it Right for Children, Young People and Families

4.1 Did you have specific treatment and support services for children and young people (under the age of 25) with alcohol and/or drugs problems?

Yes ☒ X
No ☐

Please give details (E.g. type of support offered and target age groups)

The local ADP does not commission services for young people with alcohol and/or drug problems. These are commissioned directly by Children's Services. The ADP does offer support to these services in terms of strategic development, access to workforce development and other opportunities. We also advise colleagues in Children's Services as to the evidence base for YP services. During the reporting period, we also undertook an audit of the caseloads of the local YP services. From that, we identified that a nursing post would be beneficial to further support YP with concerning substance use and mental health concerns. For those young people aged 18 – 25, the expectation is that all of these young people will be co worked between the NHS Nurse and the YP service. Some young people under the age of 18 may also require this support dependent on need and risk assessments.

4.2 Did you have specific treatment and support services for children and young people (under the age of 25) affected by alcohol and/or drug problems of a parent / carer or other adult?

Yes ☒ X
No ☐

Please give details (E.g. type of support offered and target age groups)

Forth Valley Family Support Service offers support for individuals age 16+ affected by another person's substance use. In addition, Young Carer's projects are available locally.

4.3 Does the ADP feed into/ contribute toward the integrated children's service plan?

Yes ☒ X
No ☐



Please provide details on how priorities are reflected in children's service planning e.g. collaborating with the children's partnership or the child protection committee?

The ADP has contributed to Children's Services planning in Falkirk.

The ADP has been an active member of the Child Protection Committee (CPC) for some time. There are key actions within the CPC improvement plan which relate to substance use. Furthermore, the ADP has led the development of the Impact of Parental Substance Use (IPSU) Risk Assessment Tool to date, which was endorsed by the CPC.

4.4 Did services for children and young people, with alcohol and/or drugs problems, change in the 2019/20 financial year?

Improved ☐
Stayed the same ☒
Scaled back ☐
No longer in place ☐

Please provide additional information (max 300 words)

Funding for drug and alcohol services for young people is provided directly from the Local Authority. However, the ADP does provide support in terms of workforce development activity, advice and guidance as well as respond to and offer strategic development opportunities in relation to the support offered to young people.

4.5 Did services for children and young people, affected by alcohol and/or drug problems of a parent / carer or other adult, change in the 2019/20 financial year?

Improved ☐
Stayed the same ☒
Scaled back ☐
No longer in place ☐

Please provide additional information

Local investment in Forth Valley Family Support stayed the same. The ADP is not aware of any reductions to the provision of Young Carer services. Locally, we have heavily promoted the national provision for family members including the bereavement service. We also ensured promotion of family support within the local custody setting.

4.6 Did the ADP have specific support services for adult family members?

Yes ☒
No ☐

Please provide details



Our Forth Valley Family Support Service is a tri authority agreement between the three Local Authorities in Forth Valley and has been in place for many years. The service supports individuals age 16+ and investment has been maintained during the 19/20 reporting period.

4.7 Did services for adult family members change in the 2019/20 financial year?

Improved ☐
Stayed the same ☒
Scaled back ☐
No longer in place ☐

Please provide additional information.

We secured agreement to continue with funding for the Family Support Service during this period. This has provided stability for the Family Support Service for a further three years.

4.8 Did the ADP area provide any of the following adult services to support family-inclusive practice? (mark all that apply)

Services:	Family member in treatment	Family member not in treatment
Advice	X	X
Mutual aid	X	X
Mentoring	X	X
Social Activities	X	X
Personal Development	X	X
Advocacy	X	X
Support for victims of gender based violence	X	X
Other (Please detail below)	<input type="checkbox"/>	<input type="checkbox"/>

Please provide additional information.

The bespoke benefits and advice service provided by CAB continued to be funded during the reporting period. In the four years that the service has operated, there has been £30,092 of financial gain for Falkirk service users. In addition to this, CAB has provided advocacy support and advice for service users including during medical assessments and tribunals.

The ADP also provides Police Scotland with Family Packs. These can be left with families affected by alcohol and drug related harm through Police Scotland operations, as well as those families who are directly impacted by drug related death. The information provides detail on a range of services including those for bereavement and advocacy support. Our local commissioned Family Support Service also provides advice, information and guidance as required as well as signpost individuals to relevant community based supports.

In terms of mutual aid, details of mutual aid support are available within our service directory as well as being regularly promoted by services and the Forth Valley Recovery Community. The SMART Recovery licence is funded by the ADP and SMART Recovery meetings are available at every Recovery Café. The SMART Recovery Group network in Forth Valley is reported by FVRC to be the biggest in Scotland.



The Recovery Community offer a full range of social activities, which promote and support holistic health and well-being. In addition, they have a group of Recovery Volunteers and Peer Supporters who not only support the smooth running of recovery activity but who also provide a peer support network. Other recovery activity also includes the annual Recovery Olympics, Recovery Ramblers walking groups, yoga classes and cookery classes. Also, where appropriate, social events are family inclusive.

5. A Public Health Approach to Justice

5.1 If you have a prison in your area, were arrangements in place and executed to ensure prisoners who are identified as at risk left prison with naloxone?

Yes ☒
No ☐
No prison in ADP area ☐

Please provide details on how effective the arrangements were in making this happen (max 300 words)

Forth Valley has three prison establishments in the area; excellent working arrangements exist between the ADP and these settings. Prisoner healthcare staff and their commitment to the naloxone programme have always been exemplary in Forth Valley. The data on naloxone is shared quarterly with ADP for national reporting. Within the Prisons in Forth Valley we have commissioned Change Grow Live (CGL) to deliver the same level of interventions as are available in the community, working in partnership within the Prisoner Healthcare Service.

5.2 Has the ADP worked with community justice partners in the following ways? *(mark all that apply)*

Information sharing ☒
Providing advice/ guidance ☒
Coordinating activities ☒
Joint funding of activities ☐
Other ☐ Please provide details

Please provide details.

The ADP has been active contributors to the Falkirk Community Justice Partnership. Services have also been involved at an operational level. For example, repeated issues were identified when individuals were transitioning from one particular SPS establishment. This issue was flagged to the ADP who co-ordinated a meeting with the relevant people and improvement actions identified. The outcome from this will be reported in the 2020/21 return.

5.3 Has the ADP contributed toward community justice strategic plans (E.g. diversion from justice) in the following ways? *(mark all that apply)*

Information sharing ☒
Providing advice/ guidance ☒
Coordinating activities ☒



Joint funding of activities ☐
Other ☐

Please provide details.

At present, Community Justice Partnerships do not have dedicated funding. However, locally, the ADP has ensured that the design and outcomes of commissioned alcohol and drug services are of mutual benefit to the Community Justice Partnerships.

The ADP have been involved in the regional custody improvement work which has included improving the uptake of Arrest Referral through co-location of the team, bringing Forth Valley Recovery Community into the custody setting to pro-actively engage people into the Forth Valley recovery network.

The ADP provided resources for the public areas and recovery resources for the charge bar area within the suite. We also worked to improve the uptake of naloxone and implement the provision of IEP within the custody setting. Custody nursing staff provides the ADP with ABI data and naloxone data for national reporting purposes.

5.4 What pathways, protocols and arrangements were in place for individuals with alcohol and drug treatment needs at the following points in the criminal justice pathway? Please also include any support for families.

a) Upon arrest

A pathway for direct referral to local services is in place through the Arrest Referral Service. NHS Custody nurses are aware of local services and make referrals to the service as required. Throughout the year meetings were held to improve the treatment and care of those who are held in Police Custody. This included audit of referrals from Custody Nurses and piloting a new system of referral, co – location of workers on site has enhanced relationships.

b) Upon release from prison

Contingency planning is undertaken to continue treatment in the community post release from prison. Good relationships are in place with local Justice Services who are fully aware of the services available to support recovery.

We developed a FV resource for those individuals eligible for early release during the pandemic in an attempt to maximise engagement with community support upon liberation. This was widely distributed across the SPS Estate to all of those who were being liberated to FV

6. Equalities

Please give details of any specific services or interventions, which were undertaken during 2019/20 to support the following equalities groups:

6.1 Older people (*please note that C&YP is asked separately in section 4 above*)

Workforce development opportunities offered to Adult SW workforce to include ABI, Older People's Drinking (National Project) and our local Rethink Your Drink Campaign.



These opportunities were also offered to the new mental health nurses within Primary Care. This work was underpinned by the provision of ADP resource in the form of a Recovery Tool Box, to aid their engagement with those affected by substance use who present in GP practice.

6.2 People with physical disabilities

We provide inclusive services that adapt to the needs of those who present for support. Our service directory captures accessibility information and the steps that can be taken to support and enable accessibility for all.

Our staff within services are expected to undertake equality and diversity training to ensure that their awareness relating to our legal responsibility is fully understood. Informed and equipped staff that enables swift action to be taken where required.

6.3 People with sensory impairments

As above.

6.4 People with learning difficulties / cognitive impairments.

As above.

6.5 LGBTQ+ communities

The ADP Support Team actively engages in the work of the Blood borne Virus and Sexual Health Managed Care Network. The work has a focus on those marginalised communities who may require additional support services to meet their needs. .

6.6 Minority ethnic communities

As above. Services all have access to interpreter services.

6.7 Religious communities

As above.

6.8 Women and girls (including pregnancy and maternity)

As above.

In addition, there is a Women's only Recovery Café. Our commissioned service is currently considering potential gender sensitive practice and developments that can be progressed.

We have recently worked on a revised pathway for pre-birth planning for women which offers earlier support to pregnant women who may be experiencing multiple disadvantage.

II. FINANCIAL FRAMEWORK 2019/20

Your report should identify all sources of income (excluding Programme for Government funding) that the ADP has received, alongside the funding that you have spent to deliver the priorities set out in your local plan. It would be helpful to distinguish appropriately between your own core income and contributions

from other ADP Partners. It is helpful to see the expenditure on alcohol and drug prevention, treatment & recovery support services as well as dealing with the consequences of problem alcohol and drug use in your locality. You should also highlight any underspend and proposals on future use of any such monies.

A) Total Income from all sources

Funding Source (If a breakdown is not possible please show as a total)	£
Scottish Government funding via NHS Board baseline allocation to Integration Authority	2,653,555
2019/20 Programme for Government Funding	87,600
Additional funding from Integration Authority	144,424
Funding from Local Authority	3,535,320
Funding from NHS Board	3,087,042
Total funding from other sources not detailed above	0
Carry forwards	0
Other	0
Total	9,507,941

B) Total Expenditure from sources

	£
Prevention including educational inputs, licensing objectives, Alcohol Brief Interventions)	62,672
Community based treatment and recovery services for adults	6,024,229
Inpatient detox services	6,750
Residential rehabilitation services	1,918,587
Recovery community initiatives	224,515
Advocacy Services	52,130
Services for families affected by alcohol and drug use	385,830
Alcohol and drug services specifically for children and young people	180,889
Community treatment and support services specifically for people in the justice system	384,152
Other	252,719
Total	9,492,472

7.1 Are all investments against the following streams agreed in partnership through ADPs with approval from IJBs? (please refer to your funding letter dated 29th May 2020)

- Scottish Government funding via NHS Board baseline allocation to Integration Authority
- 2019/20 Programme for Government Funding



Yes ☒

No ☐

Please provide details

All new / reviewed investments are proposed, discussed and agreed in partnership with the ADP members, all are based on our local assessment of need. Final approval is granted by the Chief Officer of the HSCP.

7.2 Are all investments in alcohol and drug services (as summarised in Table A) invested in partnership through ADPs with approval from IJBs/ Children's Partnership / Community Justice Partnerships as required?

Yes ☒

No ☐

Please provide details

All new investments for alcohol and drug services would be discussed with other local partnerships where there is a direct interest/ impact. As the key members of these partnerships are ADP members, their interests would be reflected in any planning.



FALKIRK ALCOHOL AND DRUG PARTNERSHIP DELIVERY PLAN 2020 – 2023

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Our Vision

The 2020 – 2023 Delivery Plan for the Falkirk Alcohol & Drug Partnership (ADP) is a call to action for all services and partnerships that have a role in reducing the harm caused by alcohol and drugs. This plan is for Strategic Planners, Services, individuals and families in need of support and wider communities. The priority actions highlighted are not an exhaustive list and provide a strategic framework in which other areas of activity will be developed and responded to over the life span of the plan.

The Falkirk ADP recognises that substance use is intrinsic to society and is very much an issue of inequality. Ultimately our primary role needs to be about driving action to improve the health and wellbeing outcomes for individuals and families affected by substance use. To do so, the ADP promotes collaborative activities which address the determinants of health and which adopt a whole population and preventative approach where required. Collective action across the Community Planning landscape must address the issues caused by poverty which often drive inequality and disadvantage.

The Falkirk ADP will localise the Scottish Government vision of creating an environment where “we live long, healthy and active lives regardless of where we come from and where individuals, families and communities:

- have the right to health and life – free from the harms of alcohol and drugs;
- are treated with dignity and respect;
- are fully supported with communities to find their own type of recovery.”

(Rights, Respect & Recovery, 2018).

We believe that we have made significant progress over recent years and, as an ADP, have continued to exceed in key performance areas as well as deliver innovative approaches to supporting individuals and families as well as to promote and facilitate recovery. However, it is important to recognise the significant challenges that remain for people and services and, as such, the ADP remains committed to working with our range of partners to plan, invest and deliver the interventions required to reduce the harm caused by alcohol and drugs.

We will continue to ensure that local services are fully compliant with the Health and Social Care Standards. This will provide assurances to Senior Leaders as well Service Users and their families as to the quality of local service provision.

Within this plan, we will outline how we will continue to work in partnership to understand and prevent drug related deaths. Locally, the situation mirrors the national trend in that our drug related deaths continue to increase. This is a key area of activity for the ADP and we commit to remaining close to the work of the National Drug Death Taskforce and to continuing to seek improvements in local processes and provision as appropriate.

We will also remain committed to the children affected by parental substance use agenda (including those bereaved through drug related death) and we will continue to seek service improvements and innovation in this area. The development of the Forth Valley Impact of Parental Substance Use Assessment Tool (IPSU) was led by the ADP and a local substance use service and we will continue to proactively seek full implementation within the relevant services.

Locally, we are extremely proud of the Forth Valley Recovery Community and its significant contribution to promoting and supporting recovery not only within local communities but across

Scotland. The ADP will continue to support and encourage the FVRC to deliver a message of hope, peer support and encouragement for those individuals and families about to embark on their own recovery journeys. To maximise this impact, we must continue to look beyond traditional public services and reach out to wider community services, groups and community members to fully utilise the recovery capital that we know exists within our local communities.

ADP Performance

The ADP has continued to exceed key performance targets in relation to waiting times for drug and alcohol services, Alcohol Brief Interventions (ABIs) and naloxone distribution. Throughout the course of this revised Delivery Plan, The ADP Support Team will continue to monitor these targets to ensure continued excellent performance.

In addition, Falkirk ADP will undertake the necessary preparatory work in relation to implementation of the national Drug and Alcohol Information System (DAISy) as directed by Scottish Government.

The ADP analyst will support the ADP to monitor performance through the regular updating of a relevant data bank of relevant outcome measures.

Outcomes from commissioned services will be closely scrutinised through contract monitoring processes.

The Strategic Landscape

The Partnership Delivery Framework to Reduce the Use of and Harm from Alcohol and Drugs (2019) states that ADPs will continue to “lead the development and delivery of a local comprehensive and evidence based strategy to deliver local outcomes”.

The local ADP sits within the local Community Planning Framework as well as being aligned to the Falkirk Health and Social Care Partnership and Community Justice Partnership. Work must continue to ensure that clear governance and oversight arrangements are in place locally to enable timely and effective decision making about service planning and delivery.

Through the development of the ADP Delivery Plan, the ADP will be able to deliver against the following national and local strategies and partnerships:

National Policy Drivers

[Rights, Respect and Recovery \(2018\)](#) is Scotland’s strategy to improve health by preventing and reducing alcohol and drug use, harm and related deaths. The strategy focuses on prevention with the aim of addressing the individual, family and societal factors which increase the likelihood of alcohol and drug related harm. The strategy endorses an improved Public Health approach as well as a person centred, whole systems approach which responds to individuals and families experiencing difficulties, with a particular focus on those most at risk.

[The Alcohol Framework 2018: Preventing Harm](#) outlines the Scottish Government’s future steps for changing Scotland’s relationship with alcohol. The document highlights three central themes namely:

- Reducing consumption
- Positive attitudes, positive choices
- Supporting families and communities

We will continue to adopt a whole population approach and work with partners such as Licensing Boards to address availability and affordability issues.

Local Landscape

Community Planning -Falkirk

In 2015, Community Planning became a statutory requirement and placed a legislative duty on core partners to work together to improve outcomes and reduce inequality and disadvantage. Through the Community Empowerment (Scotland) Act (2015), partners must work with local communities to address and respond to what are often complex and deep rooted issues.

In Falkirk, the Community Planning Board sets the strategic direction for the area and monitors progress on the delivery of the Falkirk [Strategic Outcomes and Local Delivery Plan \(2017-2027\)](#). The current outcomes are:

1. Our area will be a fairer and more equal place to live

2. We will grow our local economy to secure successful business, investment and employment
3. Our children will develop into resilient, confident and successful adults
4. Our population will be healthier
5. People will live full, independent and positive lives within supportive communities
6. Our area will be a safer place to live.

In addition to these outcomes there are four key priorities for the Board, one of which is 'minimising the impact of substance use.' Individuals and families affected by alcohol and/or drug use are seen as a priority group.

Falkirk Community Planning Partnership is currently developing a new *Falkirk Plan* for 2021 to 2030, which will target resources on a small number of priorities so the Partnership can add the most value and concentrate on tackling the biggest and most persistent problems.

Health & Social Care Integration

The vision for the Falkirk Health and Social Care Partnership is to enable individuals in the local area to "live full and positive lives within supportive communities". Within the 2019 – 2022 Health & Social Care Strategic Plan, alcohol and drugs have been identified as a key priority. The ADP and the HSCP will work jointly to deliver outcomes for local communities and to the relieve the burden of alcohol and drug related harm, together, across the Partnership. We will continue to strengthen joint governance arrangements and align performance reporting as well as make best use of our collective resources and ensuring best value principles apply to all our investments.

Community Justice Partnerships

The Falkirk ADP will work with the Community Justice Partnership and parity in support for those within the justice system in Falkirk. Driving change through identifying improvements and challenges to aid improve outcomes. The Community Justice Partnership has identified substance use as a key priority area.

NHS Forth Valley

[Health Improvement Strategy \(NHS Forth Valley\) 2017 - 2021](#)

The above strategy which provides strategic direction for the FADP sets out the vision for tackling preventable illness; reduce the inequality gap and promoting physical and mental wellbeing. The five priority strategic themes identified in this document are:

1. Children and early years
2. Mental Health and Well Being
3. Worthwhile work
4. Substance use
5. Population wide health improvement programmes.

Our Priorities

In line with Rights, Respect and Recovery (2018), our priority actions will be grouped as follows:

Theme	Outcome
Prevention and Early Intervention	Fewer people will develop problem drug use.
Developing Recovery Oriented Systems of Care	People access and benefit from effective, integrated person centred support to achieve their recovery.
Getting it Right for Children, Young People and Families	Children and families affected by alcohol and drug use will be safe, healthy, included and supported.
Public Health Approach in Justice	Vulnerable people are diverted from the justice system wherever possible, and those within justice settings are fully supported.
Alcohol Framework 2018	A Scotland where less harm is caused by alcohol.

Our intention is for the plan to proactively address the challenges that face individuals, families, communities and services. However, we recognise that, at times, we will also need to be reactive. On the following pages, we highlight key activity that we need to continue to drive forward in partnership.

RRR Thematic Area: Prevention & Early Intervention				
RRR Outcome: Fewer people develop problem drug use				
Improvement Action	Team around activity	Timescale	Milestones	RAG
Deliver a comprehensive workforce development programme which supports both specialist and universal service provision where appropriate.	ADP Support Team	Throughout course of Delivery Plan.	<ul style="list-style-type: none"> • March 2020 - Agree annual development programme with Scottish Drugs Forum. • April 2020 - Publicise programme across appropriate partnerships. • Consider requests for bespoke training as appropriate. • April 2021 - Receive annual report from SDF regarding learning outcomes achieved. 	
By April 2021, embed the Social Influence Prevention Programme within all Secondary Schools across Falkirk.	ADP Support Team NHS Forth Valley Education services (Falkirk Council)	April 2021	<ul style="list-style-type: none"> • July 2020 - Recruitment of dedicated post within NHS Forth Valley (Health Promotion). • September 2020 - Contact to be made with schools, project plan established and approved by education leads. • April 2021 - Programme to be implemented on a rolling basis across all schools and further education establishments as required. 	

Improvement Action	Team around activity	Timescale	Milestones	RAG
By August 2021, undertake a review and redesign of the current Curriculum for Excellence substance use framework in Falkirk. Ensure the developed framework aligns with Education Scotland. Progression Pathways. Benchmarks, local and national strategy and changes in drugs and alcohol legislation.	Children's Services -Education (Falkirk Council) Implementation Group	August 2021	<ul style="list-style-type: none"> • Nov 2020 - Draft Framework completed. • Dec 2020 - Framework consultation with Stakeholders. • April 2021 - Test of change to take place to evaluate the improvement expected from the framework delivery. • August 2021 – Launch • March 2021 – Review (along with Health and Wellbeing strategy review). • August 2021 – On line consultation with parents / pupils / partners. • Jan 2021- Review (to align with Health and Wellbeing Strategy Review) • Aug 2021 - On-line consultation with parents/pupils/partners 	
Provide substance use curriculum support to targeted Falkirk educational establishments who indicated development needs in relation to substance use.	Children's Services - Falkirk Council Implementation Group	June 2020	<ul style="list-style-type: none"> • April 2020 – Test of change to take place to evaluate the improvement expected from the focussed action planning associated with PSE self-evaluation information. • March 2020 – Update GLOW page to include current local resources. • June 2020 – All targeted educational establishments have substance use as a key priority within the Health and Well Being / NIF priorities of School Improvement Planning. 	
Ensure all frontline Education staff are aware of, and can refer to, local substance use support services for young people.	Falkirk Council Education Services (ASN & Wellbeing)	April 2021	<ul style="list-style-type: none"> • March 2020 - Embed information in Safeguarding GLOW tile which is accessible to all teaching staff. 	

Provide professional learning opportunities to Education workforce in line with findings from Falkirk audit of approaches to substance use.	Falkirk Council Education Services (ASN & Wellbeing) ADP	April 2021	<ul style="list-style-type: none"> • TBC - Promote training opportunities through Education's e-bulletins. • March 2021 - Monitor participation numbers from Schools, Learning and Education. 	
Embed the use of the national Relationships, Sexual Health and Parenthood (RSHP) resources with a specific focus on consent and the use of alcohol and/or drugs.	Falkirk Council Education Services (ASN & Wellbeing)	June 2021	<ul style="list-style-type: none"> • December 2020 – Interim feedback to be gathered from schools regarding use of the resource. • June 2021 – All secondary schools to be using RSHP resource in PSHE programmes. 	
Ensure robust policies are in place to improve access to BBV testing, treatment and screening.	BBV MCN	June 2021	<ul style="list-style-type: none"> • April 2021 – Increase uptake of dry blood spot testing within Assertive Outreach Service. • June 2021 – Increase dry blood spot testing in all ADP services by 10%. 	
Reduce alcohol and drug use in pregnancy.	ADP NHS Forth Valley – Midwifery Services and Health Promotion	April 2021	<ul style="list-style-type: none"> • August 2020 – Implementation of pre-birth planning pathway. • April 2021 - Increase workforce competency in ABI within midwifery services and Family Nurses Partnership staff through on line and face to face training opportunities. • April 2021 - Increase delivery of alcohol brief intervention within maternity settings by 10%. 	

Reduce tobacco use and promote smoke free environments.		October 2021	<ul style="list-style-type: none"> • December 2020 - Review and develop current tobacco and cannabis training. • March 2021 – increase engagement and referrals into stop smoking service to support to meet NHS FV LDP target • March 2021 - Increase provision of smoking cessation training to support person centred referral pathway to ensure smoking is discussed in all care settings. • March 2021 - Promotion of No Smoking Day • March 2021 - Promote and embed the smoke free school policy in line the ASH Charter. • October 2021 - Delivery of IMPACT advice training on the relationship between smoking and mental health care. • October 2021 - Support implementation of NHS Smoke Free Ground policy following legislation. 	
Refresh Forth Valley Substance Use Needs Assessment.	ADP Support Team	April 2021	<ul style="list-style-type: none"> • August 2020 - Seek approval to refresh needs assessment. • December 2020 – Commission researcher to complete needs assessment. • April 2021 – Process complete and update document available for service planning purposes. 	

RRR Thematic Area: Developing Recovery Oriented Systems of Care				
RRR Outcome: People access, and benefit from effective, integrated person-centred support to achieve their potential.				
Improvement Action	Team around activity	Timescale	Milestones	RAG
To continue to promote FVRC across community planning networks and to encourage all relevant practitioners to successfully engage with the Community.	Forth Valley Recovery Community ADP Support Team Community Planning Partners	April 2021	<ul style="list-style-type: none"> • August 2020 - promotion of FVRC via Council intranet and internet sites. • December 2020 – Sustain café provision across Forth Valley. • Jan 2021 – Support FVRC to develop more comprehensive evaluation methods to better evidence impact of recovery activity. • April 2021 – increase overall engagement with community based recovery activity. • April 2021 – improve FVRC links with community food initiatives. • April 2021 – enhance FVRC links with employability services and DWP. 	
Develop inclusive methods for ensuring that individuals and families with lived / living experience are able to influence the ADP strategic agenda.	ADP partners Forth Valley Recovery Community Health and Social Care Partnership Barnardo's	April 2021	<ul style="list-style-type: none"> • October 2020 – Establish an open forum to engage with young people and learn from their experiences of services (led by Barnardo's). • DATE TBC – Identify effectiveness of current methods and research good practice models if gaps are identified. 	

Work with partners to ensure language used in policies and documents is non-stigmatising and person centred. This will include patient / client literature and relevant signage.	ADP Community Planning Partnerships	April 2021	<ul style="list-style-type: none"> • Feb 2020 – Presentation to Community Planning Executive Board (Falkirk). • April 2021 – Work with Community Planning partners to develop / refresh appropriate policies and documentation. 	
Strengthen and further develop the alcohol pathway to ensure that Social Care, Primary Care and Health are more proactive in initiating referral for those with alcohol concerns.	ADP Support Team NHS Forth Valley		<ul style="list-style-type: none"> • December 2020 - Promote revised pathway to key staff groups within the Health & Social Care Partnership. • April 2022 – Increased alcohol treatment ratio achieved due to increase in referrals. • April 2021- Workforce Development relating to older peoples drinking awareness sessions to be delivered, to ensure that all are familiar with the revised pathway. 	
Further develop the knowledge and competence of Housing staff to identify opportunities for early referral to substance use services to maximise access to specialist advice and support people to sustain their housing.	Falkirk Council Housing Services. ADP Support Team	April 2021	<ul style="list-style-type: none"> • June 2020 – Housing management to identify training needs for appropriate staff. • December 2020 – Improve referral pathways to specialist substance services when Housing identifies substance use issues during any formal action (e.g. ASB or rent arrears). • April 2021 – Review impact and consider if referrals from Housing department have increased. • April 2021 – Ensure Housing staff are appropriately trained to be able to signpost tenants to substance use services if alcohol / drug concerns are identified through annual tenancy visits. 	

Improvement Action	Team around activity	Timescale	Milestones	RAG
Ensure that staff from relevant services (including Adult Care Social Work, Acute Hospital and Housing settings) make timely referrals to the Alcohol Related Brain Injury Team (ARBI) to ensure that the opportunities for recovery are maximised.	ARBI Team ADP Health and Social Care Partnership	April 2021	<ul style="list-style-type: none"> • April 2021– ARBI team to regularly promote service to relevant staff teams. • April 2021 – Continue to increase referrals to ARBI team. 	
Complete the development of the Young People's Pathway to support the transition between young people's and adult substance services.	ADP Support Team NHS Forth Valley	December 2020	<ul style="list-style-type: none"> • August 2020 – Formalise pathway. • December 2020 - Resource a specialist nursing post that will provide in reach to young people's substance use services for vulnerable young people with high risk substance use and mental health concerns. • June 2021 – Audit impact of YP nursing post on treatment outcomes. 	
By April 2021 , increase the referrals between substance use services and adult mental health services for those who experience co-morbid mental health and substance use difficulties.			<ul style="list-style-type: none"> • November 2020 - Acute referral pathway to community substance services be revisited and refreshed. • June 2021 - Workforce Development to be undertaken by Adult Mental Health Teams Acute and Community – Substance Use. 	

Improvement Action	Team around activity	Timescale	Milestones	RAG
In line with Scottish Government timescales, implement the new national drug and alcohol information system (DAISy) and utilise the data to track performance and outcomes.	Scottish Government ADP Support Team	December 2020 (Scottish Government target)	<ul style="list-style-type: none"> • August 2020 - Local ISA to be finalised and signed off by Information Governance in each Local Authority area where appropriate. • September 2020 – Revise local implementation plan including workforce development plan. 	

RRR Thematic Area: Getting It Right for Children, Young People and their families				
RRR Outcome: Children and families affected by alcohol and drug use will be safe, healthy, included and supported.				
Improvement Action	Team around activity	Timescale	Milestones	RAG
Fully embed refreshed Forth Valley Getting Our Priorities Right guidance within services.	Agency Leads	June 2020	<ul style="list-style-type: none"> • May 2020 – All agency leads to ensure that Gopr document is circulated to all staff members. • May 2020 - All agency leads to consider workforce development needs in relation to Gopr. • April 2021 – Additional sessions to be delivered to Community Pharmacy and Police Scotland colleagues. • April 2021 – All agencies to report progress to the ADP. 	
Fully embed the Impact of Parental Substance Use (IPSU) tool across Social Care, Health and Third Sector Services.	Agency Leads	December 2020	<ul style="list-style-type: none"> • Feb 2020 – IPSU challenges to be discussed at CPC. • April 2020 – Facilitate practitioner workshop to ascertain opportunities and challenges associated with IPSU implementation. • May 2020 – CGL to have agreed electronic IPSU available for staff use. • May 2020 – Resolve all IT issues across agencies. • May 2021 – Audit impact of IPSU implementation. 	
Consider additional methods and approaches to support adults accessing the Time 4 Us service to	Time 4 Us	August 2021	<ul style="list-style-type: none"> • October 2020 – Consultation with Parents & Carers. • January 2021 – Terms of Reference developed and agreed. • March 2021 – Funding Applications submitted. 	

develop and enhance their parenting skills.			<ul style="list-style-type: none"> • June 2021 – Group space set up. • August 2021 – Group established 	
Raise awareness of and increase referrals to the Forth Valley Family Support Service.	ADP Partners SFAD	August 2020	<ul style="list-style-type: none"> • April 2020 – Establish agreed procurement route with colleagues from the three Local Authorities. • August 2020 – Re commission Forth Valley Family Support Service. • Throughout 2020 – Promote family support across relevant groups and partnerships. • Throughout 2020 – Monitor uptake of service through contract monitoring process. 	
Contribute to relevant activity across the identified Public Protection thematic areas.	ADP Public Protection Lead Officers	April 2021	<ul style="list-style-type: none"> • May 2020 – Support the CPC to refresh CPC improvement plan outlining substance use as a priority area. • April 2021 – Support relevant developments within the Adult Support and Protection Committee. • April 2021 - Continue to build relationship with COG Partners. • November 2020- EEI Sub Group operational and reviewing cases of vulnerable Falkirk Citizens. 	
Further consider the specific needs of women and girls affected by substance use.	CGL GBV Partnerships ADP Partners	April 2021	<ul style="list-style-type: none"> • April 2021 - Consider process and service developments that may reduce barriers for women to access substance use services. • April 2021 – ADP to continue to be represented on local Violence against Women Partnerships. 	

RRR Thematic Area: Public Health Approach in Justice				
RRR Outcome: Vulnerable people are diverted from the justice system wherever possible, and those within justice settings are fully supported.				
Improvement Action	Team around activity	Timescale	Milestones	RAG
Work in partnership with Police Scotland (Justice / Custody) to enhance the support available within Police Custody settings.	Police Scotland ADP Support Team	April 2021	<ul style="list-style-type: none"> • September 2020 - Increase visibility of recovery in custody setting through presence of FVRC members. • April 2021 - Increase arrest referral numbers from custody settings - data to be monitored quarterly. • April 2021 - Continue to facilitate and promote the presence of relevant external partners in custody settings including Families Outside. • April 2021 - Continue to attend the Forth Valley Custody meeting to monitor improvements. • April 2021 - Continue to provide ADP resources for individuals and families attending custody suites. • April 2021 - Encourage Police Scotland to undertake appropriate WFD including ABI and MI. 	
Continue to deliver substance use and recovery support within local Prison establishments.	ADP Change, Grow, Live	Throughout course of delivery plan.	<ul style="list-style-type: none"> • April 2021 - Continue to work with Prisoner Healthcare on workforce development and compliance with waiting times targets. 	
Support the Community Justice Partnerships to improve the effectiveness of transition support between the community	Community Justice Partnerships	March 2021	<ul style="list-style-type: none"> • March 2020 – Community Justice Workforce conference to be held with a focus on improvement of transitions. • October 2020 – Establish framework to support information sharing and effective utilisation of prison admissions and 	

to custody and custody to the community.	ADP Partners.		liberations data. <ul style="list-style-type: none"> • March 2021 – Developed outcome reporting. 	
Develop more effective procedures to assist with the provision of housing advice pre-liberation from prison.	Falkirk Council Housing Services Falkirk Community Justice Partnership		<ul style="list-style-type: none"> • April 2020 – Appoint Homeless Prevention co-ordinator to progress action in this area. • June 2020 – Make initial contact with SPS to agree protocols/processes. • September 2020 – Alongside launch of new Allocations Policy, launch new Housing Advice service (which will include pre-liberation advice). • June 2021 – Review effectiveness of protocol in reducing homelessness upon liberation. 	

Thematic Area: Drug Related Deaths – National Drug Death Taskforce Recommendations				
Outcome: Prevention of alcohol and drug related deaths				
Improvement Action	Team around activity	Timescale	Milestones	RAG
Ensure the targeted distribution of naloxone to individuals most and risk and to those services who may be supporting vulnerable individuals.	ADP Support Team ADP partners (including Community Planning partners).	April 2021	<ul style="list-style-type: none"> • May 2020 – Review policy for naloxone provision within Falkirk Council homelessness settings. • August 2020 – Review of Falkirk Council Corporate Naloxone Policy. • December 2020 – ADP support offered to any relevant partner where naloxone may be appropriate for their setting (for emergency use. • December 2020 – Naloxone to be prescribed to all PWID within NHS acute settings as core part of discharge plan. • April 2021 – Increase local naloxone provision by 20% • April 2021 – increase naloxone distribution within prisoner healthcare settings. 	
Ensure that there is an immediate response for non-fatal overdose. This will include maintaining the protocol with the Scottish Ambulance Service.	ADP Support Team Scottish Ambulance Service Substance use services.	April 2021	<ul style="list-style-type: none"> • Ensure appropriate pathways are in place from the Hospital Addiction Team to Community Services. • Develop assertive outreach referral pathways from the Emergency Department FVRH. • Maintain information sharing protocol with Scottish Ambulance service 	

Optimising opiate substitute treatment (OST).	NHS Forth Valley ADP Partners	April 2022	<ul style="list-style-type: none"> April 2022 - Implement Taskforce recommendations re MAT and improvements required to deliver on these. These actions should be detailed in Quality Improvement Framework Board work plan. 	
Targeting people most at risk from drug related death.	ADP Partners Community Planning Partners National Task Force	Throughout course of delivery plan	<p>Detail to be agreed but will include:</p> <ul style="list-style-type: none"> December 2020 - Implement Acute Hospital Assertive Outreach process in partnership with Change Grow Live. Increase flu vaccination and BBV testing. Increase referral rates to services and improve treatment ratios. Promote and increase support available to families through SFAD Bereavement Service. Deliver appropriate workforce development to all relevant partners including naloxone and overdose awareness. Link with Housing First approaches in each LA area to ensure that they promote recovery and reduce risks around drug related deaths. 	
Optimising public health surveillance.	National Task Force ADP Partners	April 2021	<ul style="list-style-type: none"> June 2020 – Submit bid to National Taskforce to support improvement in Hospital Addiction Team capacity and the timely surveillance and review of drug related deaths and suicide. April 2021 – Continue to support the Drug Trend Monitoring group to maximise intelligence in an attempt to reduce harm. April 2021- Consider business case for increased surveillance of alcohol deaths. 	
Ensuring equivalence of support for people in the criminal justice	ADP Partners	April 2021	<ul style="list-style-type: none"> September 2020 - Ensure synergy between Community Justice 	

system.	Community Justice Partnerships		<p>Plans and ADP Plans to maximise outcomes for individuals involved in the Community Justice System.</p> <ul style="list-style-type: none"> • December 2020 - Improve pathways and transition from Prison to Community Services to reduce risk to individuals. • April 2021 - Increase referrals from CJSW to substance use services by 20%. • April 2021 – support Community Justice Partnerships to explore barriers to services for those involved in the community justice system. 	
Increase the uptake of bereavement support offered to family members by Scottish Families Affected by Alcohol and Drug Use (SFAD).	ADP Support Team SFAD	April 2021	<ul style="list-style-type: none"> • April 2020 – Promotion of family support service via partner intranet and internet sites as well as social media outlets. • April 2020 – Cascade promotional material throughout relevant partnerships including those working directly with communities. • March 2021- Measure impact of ADP /Police Scotland project re bereavement packs being distributed to all families affected by drug death. 	

RRR Thematic Area: Alcohol Framework				
RRR Ambition A Scotland where less harm is caused by inactivity.				
Improvement Action	Team around activity	Timescale	Milestones	RAG
Work with partners to deliver a Whole Population approach as part of the ADP prevention strategy.	NHS Forth Valley Health Promotion ADP Support Team	April 2021	<ul style="list-style-type: none"> • July 2020 – Promote “Rethink Your Drink” Summer Campaign across partnership networks. Local campaigns will maximise the marketing message of the national Count 14 programme. • December 2020 – Promote “Rethink Your Drink” Festive campaign across partnership networks. Local campaigns will maximise the marketing message of the national Count 14 programme. • December 2020 – Maximise communication through on line platforms for the key messages from ‘Count 14’ national campaign. 	
Continue to deliver Alcohol Brief Interventions in line with HEAT Standard	ABI Priority Settings. ADP Partners	April 2021	<ul style="list-style-type: none"> • September 2020- Develop ABI training for post COVID environment including virtual delivery and LEARNPRO. • April 2021- Increase ABI Training by 10% • December 2020 – Consider additional settings where ABI may be appropriate. • April 2021 – Continue to meet targets within HEAT Standard guidance. 	
Continue to support the Licensing agenda in Falkirk.	ADP Partners	April 2021	<ul style="list-style-type: none"> • April 2021 – Maximise opportunities for ADP to support and influence the licensing framework in the Falkirk area. 	