

**ALCOHOL AND DRUG PARTNERSHIP ANNUAL REVIEW 2020/21 (South Ayrshire ADP)**

- I. Delivery progress
- II. Financial framework

This form is designed to capture your **progress during the financial year 2020/2021** 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 2020/21. 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 ensure all sections are fully completed. **You should include any additional information in each section that you feel relevant to any services affected by COVID-19.**

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 monitoring and evaluation of drugs policy.

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 drugs policy monitoring and evaluation, and excerpts and/or summary data from the submission may be used in published 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 **Thursday 14th October 2021** to: [drugsmissondeliveryteam@gov.scot](mailto:drugsmissondeliveryteam@gov.scot)



**NAME OF ADP:** South Ayrshire

**Key contact:**

**Name:** Faye Murfet

**Job title:** ADP Coordinator

**Contact email:** [faye.murfet@south-ayrshire.gov.uk](mailto:faye.murfet@south-ayrshire.gov.uk)

**I. DELIVERY PROGRESS REPORT**

**1. Representation**

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

Community Justice Partnership	<input checked="" type="checkbox"/>
Children's Partnership	<input checked="" type="checkbox"/>
Integration Authority	<input checked="" type="checkbox"/>

1.2 What organisations are represented on the ADP and who was the chair during 2020/21?

Chair (*Name, Job title, Organisation*): [Scott Hunter, Chief Social Work Officer](#)

**Representation**

*The public sector:*

Police Scotland	<input checked="" type="checkbox"/>	
Public Health Scotland*	<input type="checkbox"/>	
Alcohol and drug services	<input checked="" type="checkbox"/>	
NHS Board strategic planning	<input type="checkbox"/>	
Integration Authority	<input checked="" type="checkbox"/>	
Scottish Prison Service (where there is a prison within the geographical area)**	<input type="checkbox"/>	
Children's services	<input checked="" type="checkbox"/>	
Children and families social work	<input checked="" type="checkbox"/>	
Housing	<input checked="" type="checkbox"/>	
Employability	<input checked="" type="checkbox"/>	
Community justice	<input checked="" type="checkbox"/>	
Mental health services	<input checked="" type="checkbox"/>	
Elected members	<input type="checkbox"/>	
Other	<input checked="" type="checkbox"/>	<a href="#">Scottish Fire and Rescue; South Ayrshire Council Licensing; South Ayrshire Council Community Safety; HSCP Contracts &amp; Commissioning; HSCP Adult Protection and Child Protection; HSCP Justice Social Work.</a>

\* Public Health, NHS Ayrshire & Arran

\*\*represented through ADP structure

*The third sector:*

Commissioned alcohol and drug services	<input checked="" type="checkbox"/>	
Third sector representative organisation	<input checked="" type="checkbox"/>	
Other third sector organisations	<input checked="" type="checkbox"/>	<a href="#">Third sector organisations are represented widely throughout the ADP structure.</a>



People with lived / living experience	<input checked="" type="checkbox"/>
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 publicly available (e.g. on a website)?

Membership	<input checked="" type="checkbox"/>
Papers and minutes of meetings	<input type="checkbox"/>
Annual reports/reviews	<input type="checkbox"/>
Strategic plan	<input checked="" type="checkbox"/> <a href="https://www.south-ayrshire.gov.uk/adp/">https://www.south-ayrshire.gov.uk/adp/</a> New ADP website under development.

1.4 How many times did the ADP executive/ oversight group meet during 2020/21?

The ADP met 4 times during 2020 / 21. Meetings took place via Teams due to the Covid-19 pandemic. All ADP sub groups also continued to meet, via Teams.

1.5 Please give details of the staff employed within the ADP Support Team

Job Title	Whole Time Equivalent
1. ADP Coordinator	1 FTE
2. ADP Assistant Analyst	0.2 FTE
3.	

Total WTE 1.2 FTE

## 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	<input checked="" type="checkbox"/>
Posters	<input type="checkbox"/>
Website/ social media	<input checked="" type="checkbox"/>
<a href="https://www.south-ayrshire.gov.uk/adp/">https://www.south-ayrshire.gov.uk/adp/</a> @southayradp Twiter @recoveryayr facebook.com.recoveryayr	
Accessible formats (e.g. in different languages)	<input type="checkbox"/>
All resources are available in accessible formats on request.	
Other	<input type="checkbox"/>
NHS Ayrshire & Arran Addictions App (via Google/Apple stores); credit card sized fold out leaflets. We Are With You Webchat service.	



2.2 Please provide details of any specific communications campaigns or activities carried out during 20/21 (E.g. Count 14 / specific communication with people who alcohol / drugs and/or at risk) (max 300 words).

South Ayrshire ADP work in close partnership with NHS Ayrshire & Arran's Public Health Department to tackle alcohol and drug related harms. Since March 2020, key colleagues in the department have had to prioritise working on Covid-related work, over and above their normal portfolio of work. This has impacted on the ability to deliver on key priorities during this time period. Staffing resource has been impacted with colleagues in key roles being seconded into Covid related work until March 2022 leaving gaps within the Department and limited capacity to undertake work linked with priorities. Tackling alcohol and drug related harm remains a key priority and part of wider remobilisation.

2.3 Please provide details on education and prevention measures/ services/ projects provided during the year 20/21 specifically around drugs and alcohol (max 300 words).

The Community Safety Team has developed the Targeted Approach to Young People (TAYP) (an ADP funded project) into a longer term support programme for young people engaging. This has been done with support of the wider Thriving Communities Team, and includes support from CLD, Health & Wellbeing Team and Employability and Skills. As well as offering the usual diversion and Life Choice input, the new teal look to engage longer term with young people, supporting on to positive destinations such as staying on to S5/6, college, other further education, employment or volunteering. Although this year has been difficult due to Covid regulations, there have still been a number of positive engagements. There have been referrals from every secondary school in South Ayrshire. The TAYP Extra programme is also supported by Police Scotland Campus officers who assist and nominate individuals for participation as well as assist with the deliverance if Police Scotland could be added in there.

Campus officers continue to provide targeted education around drugs and alcohol through police inputs to young people within the schools.

A film resource was developed with partners involved in South Ayrshire Community Justice Joint Action group. 'The Journey' is a powerful film which tells the story of a young man who is charged with an offence and depicts the processes, procedures and the reality of being in Police Custody. The film was written and directed by a member of the Community Safety team, and has been used as part of the TAYP, as a useful tool in starting discussions with young people who may be at risk of offending. The resource has also been used as a positive intervention for young people who have been discussed and referred through South Ayrshire's Whole Systems Approach process.

2.4 Please provide details of where these measures / services / projects were delivered

- Formal setting such as schools
- Youth Groups
- Community Learning and Development
- Other – please provide details

TAYP delivered to 12 young people in an outdoor setting through beach craft / campcraft / mountain biking and bothy visits. The Journey was delivered to 4 young people via online teams/zoom meeting. The Covid-19 restrictions impacted on the usual level of delivery of these projects.



2.5 Please detail how much was spend on Education / Prevention activities in the different settings above

Formal setting such as schools  
Youth Groups  
Community Learning and Development  
Other – please provide details

£1,600 spent on outdoor activities facilitated through Adventure Centre for Education (ACE). Delivery of the additional courses/activities were impacted due to Covid-19.

2.6 Was the ADP represented at the alcohol Licensing Forum?

Yes   
No

Please provide details (max 300 words)  
[Please see comments under 2.2.](#)

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

All   
Most   
Some   
None

Please provide details (max 300 words)  
[Please see comments under 2.2.](#)



### 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 2020/21 was there an Immediate Response Pathway for Non-fatal Overdose in place?

Yes

No

In development

Please give details of developments (max 300 words)

Immediate response pathways continue to be developed. Currently NHS Addictions Services receive notifications from Acute Services when an individual open to their service attends hospital. Pathways are also in place with ED/CAU and SAS for referrals to be made direct to the Connect4Change (C4C) Pilot for anyone experiencing a NFO or at risk of an alcohol or drug related death (C4C is multiagency and multidisciplinary team providing assertive outreach and intensive support for anyone disengaging from alcohol or drug services, or coming to the attention of emergency services). Both pathways were understandably impacted by the Covid-19 pandemic. The ADP remains committed to improving identification of people experiencing a NFO and ensuring immediate response pathways are available.

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 and during COVID-19. Are services fully open at normal levels / blended services on offer? (max 300 words).

Our three adult alcohol and drug services provide information on re-referral / support as part of the planned discharge processes. All services are open access / self-referral, whether the individual was previously known to the service or not. 3 Month Recovery Check-Up Calls are undertaken and individuals supported to refer into services where required. Individuals identified as high-risk during re-referral process can be referred to Connect 4 Change Pilot for intensive support. Services offer priority / rapid assessment for priority groups e.g. pregnant women, child protection / adult protection.

Our We Are With You recovery service also offers a direct access service, where people who have used the service can drop in and receive support and advice, assessment and re-engage with the service at the point of contact. The same service can also be offered by phone. We Are With You also offer a web chat service where people can access immediate support and advice and complete an online assessment. The assessment is then passed to the service on the day of completion of the assessment, so a local worker can make contact promptly. The web chat service is also available at evenings and weekends.

During the Covid-19 pandemic, all services remained open and rapidly adapted service delivery to a blended model of telephone and face to face contact (based on the Covid-19 guidelines). All services continued to meet Waiting Times standard.



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

- |  |  |
|--|--|
| Same day prescribing of OST                    | <input type="checkbox"/>                             |
| Methadone                                      | <input checked="" type="checkbox"/>                  |
| Buprenorphine and naloxone combined (Suboxone) | <input checked="" type="checkbox"/>                  |
| Buprenorphine sublingual                       | <input checked="" type="checkbox"/>                  |
| Buprenorphine depot                            | <input type="checkbox"/>                             |
| Diamorphine                                    | <input type="checkbox"/>                             |
| Naloxone                                       | <input checked="" type="checkbox"/>                  |
| BBV Screening                                  | <input checked="" type="checkbox"/>                  |
| Access to crisis support                       | <input type="checkbox"/>                             |
| Access to detox from opiates/benzos - rehab    | <input type="checkbox"/>                             |
| Other non-opioid based treatment options       | <input type="checkbox"/> Please provide details..... |

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 20/21 (max 300 words).

In response to the increase in drug related deaths and priority areas identified during consultation activities to develop the local strategy, the ADP committed to pilot Connect4Change, a multiagency and multidisciplinary colocated team, who offer intensive and flexible support (including assertive outreach) for vulnerable people at risk of an alcohol or drug related death who:

- Are beginning to disengage from alcohol and drug treatment and recovery services
- Are leaving hospital or prison
- Have experienced a recent non-fatal overdose
- Have had recent contact with emergency services

The pilot began in February 2020 and a phased roll-out of the referral routes. An additional referral pathway has been developed with Homeless Services and Justice Social Work. C4C is currently commissioned to March 2022 and an Independent Evaluation is underway.

We Are With You offer assessment at the point of contact with the service, where this is suitable for the individual. When this is not appropriate the service continue to work towards the organisational target of assessment within 72 hours, from the point of referral to assessment. Online assessments have also been introduced via the web chat service.

In partnership with Police Scotland, the ADP began a pilot project in September 2019 in Ayr Custody Office where Peer Workers visit individuals while they are in custody to build a connection and raise awareness of local services and recovery activities. The pilot paused for a period of time in 2020 due to the Covid-19 pandemic and is currently operating via a telephone system while people are in custody.

In response to concerns about vulnerable people services may lose contact with during the Covid-19 pandemic, the ADP established a weekly multiagency meeting, including 3<sup>rd</sup> sector and statutory partners from homelessness and housing, justice, Police Scotland, social work, alcohol and drug services, and individuals with lived experience. The multiagency approach allowed over 70 individuals to be located and additional support offered, including access and/or re-engagement with alcohol and drug services.



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

- Fibro scanning
- Alcohol related cognitive screening (e.g. for ARBD)
- Community alcohol detox
- Inpatient alcohol detox
- Alcohol hospital liaison
- Access to alcohol medication (Antabuse, Acamprase etc.)
- Arrangements for the delivery of alcohol brief interventions in all priority settings
- Arrangements of the delivery of ABIs in non-priority settings
- Other – Please provide details

*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	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Public sector	<input checked="" type="checkbox"/>	<input type="checkbox"/> *
Other	<input type="checkbox"/>	<input type="checkbox"/>

\*public sector children and family services do not come under the remit of the ADP for quality assurance purposes.

3.7 Please give details on how services were Quality Assured including any external validation e.g. through care inspectorate or other organisations? (max 300 words)

All ADP funded services are required to submit, as a minimum, 6-monthly Monitoring and Evaluation Reports, using a template provided by the ADP, and take part in monitoring meetings. For alcohol and drug services the monitoring requirements includes providing evidence in relation to the quality principles and ROSC principles. Individual services have mechanisms in place for internal case file audits, as well as clinical governance processes and reviews. All services have mechanisms in place for routinely gathering service user feedback to inform care planning and service developments.

In September 2020 the ADP commissioned an independent Learning Review of the ADP which is due to conclude in March 2022. The Learning Review involves three phases 1) process evaluation 2) outcome / impact evaluation and 3) summative evaluation, and aims to provide the ADP with an evidence base to review and consider our commissioning plan moving forward.

Thank you for completing the recent Scottish Government ADP Pathways Survey, which gathered data for 2019/20. The following questions look to gather the same data for 2020/21.

3.8 Were there pathways for people to access residential rehabilitation in your area in 2020/21?

- Yes
- No





Please give details below (including referral and assessment process, and a breakdown between alcohol and drugs referrals) (max 300 words)

Historically, access to residential rehabilitation in South Ayrshire has been provided through Ward 5, a hospital based inpatient detox and rehabilitation unit. The current model at Ward 5 provides an inpatient detox option (predominately alcohol), with 3 to 4 week residential rehabilitation and/or day attendance. In South Ayrshire, there were no processes or models in place to identify and support people to access longer term residential rehabilitation support.

In February 2021, the ADP commissioned a research and scoping study into long term residential rehabilitation. The Scoping Study included a review of the evidence base, engagement with individuals with lived and living experience, identification of critical success factors, and identified a range of models for consideration. The study was approved at the July 2021 ADP meeting, along with a short term and long term ambition for residential rehabilitation for the residents of South Ayrshire. The short term ambition, a funded placement model and community infrastructure, are being progressed as a matter of priority.

Ward 5 Woodland View provides 5 short term elective dual addictions / mental health detoxification and residential rehabilitation beds within local NHS Addictions Inpatient Unit. Due to Government Covid-19 restrictions, a number of changes took place including:

- Detox beds - Alcohol detox continued with the least disruption. Individuals were able to access this service via a Microsoft Teams MDT Pre-admission meeting, instead of a face to face meeting. This worked well and the detox process remained unchanged.
- Residential Rehabilitation - the numbers of individuals attending the groups were required to reduce allowing for social distancing. The group work programme was redesigned and reduced. This ensured individuals continued to get the full content of the rehabilitation programme without the ability for weekend passes. External agencies were required to stop attending the groups to promote their service and support individuals face to face. In the initial phase, medical staff were asked to only attend the unit in emergency situations, therefore all reviews took place via MS Teams.
- Day attendance – this was stopped in March 2020 and did not recommence during 2020/21. This is due to the requirement for all individuals to receive a PCR test on admission and remain isolated in their individual room area until a negative result is returned.

3.9 How many people started a residential rehab placement during 2020/21? (if possible, please provide a gender breakdown).

Please see Section 3.8 in relation to the impact of the Covid pandemic.

In 2020/21 there were 52 new referrals for inpatient alcohol detox Ward 5 in South Ayrshire, 28 males and 24 females. Of these referrals, 29 people (14 male, 15 female) received an inpatient detox. The average length of stay was 6 days.

In 2020/21 there were 14 new referrals for alcohol residential rehabilitation at Ward 5 in South Ayrshire, 8 males and 6 females. Of these referrals, 10 people (5 male, 5 female) started residential rehabilitation (this figure includes people who were detoxed immediately prior to rehabilitation). The average length of stay was 14 days. There were no referrals for drug related rehabilitation.



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

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

*For people with lived experience:*

- Feedback/ complaints process
- Questionnaires/ surveys
- Focus groups / panels
- Lived/living experience group/ forum
- Board Representation within services
- Board Representation at ADP
- Other

[Sharing recovery stories for inclusion in resources / social media etc.](#)

Please provide additional information (optional)

[Individuals with lived experience are represented across ADP structure \(e.g. ADP strategic groups\) and also across ADP services \(in paid and volunteer roles\). Local services support ADP consultation activities through encouraging individuals accessing their services to complete consultation surveys and/or taking part in discussion groups. Two recovery community surveys took part during Covid to gather information on the impact of Covid, to look at the types of support individuals would find beneficial, and also looking at the support people would like as the Covid restrictions were lifted. Recovery stories are published in a variety of resources including social media and newsletters.](#)

*For family members:*

- Feedback/ complaints process
- Questionnaires/ surveys
- Focus groups / panels
- Lived/living experience group/ forum
- Board Representation within services
- Board Representation at ADP
- Other  [See above.](#)

Please provide additional information (optional)

[See above.](#)

3.11 Had the involvement of people with lived/ living experience, including that of family members, changed over the course of the 2020/21 financial year?

- Improved
- Stayed the same
- Scaled back
- No longer in place

Please give details of any changes (max 300 words)

[There has been an increase in the number of people with lived experience moving into paid roles in local organisations.](#)



The ADP undertook as a series of workshops in relation thematic reviews of drug related deaths. There was a specific workshop for people with lived / living experience, and individuals with lived experience were also represented across the other workshops.

Individuals with lived experience were also a key part of the ADPs Residential Rehabilitation scoping study.  
3.12 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)

A second Peer Worker role was introduced to the pilot Connect 4 Change Team. The ADP also funded a new Recovery Advocacy Worker Post (lived experience) in the local Advocacy Service.

The ADP continues to deliver ADP Volunteer Peer Worker Project offering training and volunteering opportunities for individuals in recovery in local services. While the 5 month college induction went ahead (online), the placements were impacted due to the Covid-19 pandemic.

The ADP also agreed to develop a Test of Change in relation to peer to peer Naloxone supply, this will involve the recruitment of individuals with lived and living experience, and family members, and will be progressed during 2021/22.

RecoveryAyr, a local grassroots recovery charity, were successful with a proposal to the Corra Grassroots Fund for a Volunteer Coordinator to further develop volunteering activities for individuals and family members in 2021/22.

*People access interventions to reduce drug related harm*

3.13 Which of these settings offered the following to the public during 2020/21? (mark all that apply)

Setting:	Supply Naloxone	Hep C Testing	IEP Provision	Wound care
Drug services Council (N/A in South Ayrshire)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug Services NHS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Drug services 3rd Sector	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homelessness services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Peer-led initiatives	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Community pharmacies	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GPs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
A&E Departments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Women's support services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Family support services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Justice services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mobile / outreach services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other ... (please detail)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Click or tap here to enter text.](#)



*A person-centred approach is developed*

3.14 To what extent were Recovery Oriented Systems of Care (ROSC) embedded across services within the ADP area? ROSC is centred around 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   
Not embedded

Please provide details (max 300 words)

Our ADP continues to work collaboratively with individuals with lived experience and a wide range of local organisations to embed a ROSC model across South Ayrshire and significant progress has been made in recent years. We believe that a ROSC model continues to develop and adapt to local need and emerging evidence bases.

Our recovery community is well developed and embedded across South Ayrshire and a range of volunteer and paid Peer Workers roles exist across our services and recovery communities. Our family support groups continue to develop and we have expanded the provision of family support.

We continue to develop our collaborative approaches and are undertaking a range of Test of Change / Pilot activities which will inform the future model of services and support in South Ayrshire.

When considering the local ROSC in line with the Eight Point Plan for Treatment and Recovery in Rights, Respect and Recovery, we believe the ROSC is partially embedded. Areas work continue to be taken forward including piloting innovative approaches to engaging with people at risk of an alcohol or drug related death (e.g. Connect4Change, Police Custody Pilot), developing non-fatal overdose pathways and intensive and flexible support options where required, developing our surveillance and monitoring information and ensuring all of our services take a trauma informed approach.

3.15 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   
No

Please provide details (max 300 words)

NHS Addictions Service have a multidisciplinary team (MDT) approach, with Mental Health nurses and Psychiatrists employed who provide mental health support for individuals as required, in addition to MAT/substance use support. In addition, NHS Addiction Services and the Community Mental Health Team (CMHT) have a process for same day/next day for new assessments, which may require a joint appointment to determine the best support. Processes are in place for joint working, with mental health care for those with more severe mental disorder led by the CMHT (regardless of addictions co-morbidity) and addictions care led by NHS Addictions Service.

Is staff training provided (dual diagnosis)?

- Yes   
No

Please provide details (max 300 words)



Have mental health services requested Naloxone following updated guidelines from the Lord Advocate?

Yes

No

Please provide details (max 300 words)

The supply of Naloxone was already in place through Mental Health / Addiction Services.

*The recovery community achieves its potential*

3.16 Were there active recovery communities in your area during the year 2020/21?

Yes

No

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

Yes

No

3.18 Please provide a short description of the recovery communities in your area during the year 2020/21 and how they have been supported (max 300 words)

Delivery of face to face recovery activities in 2020/21 were significantly impacted by Covid with all activities pausing at the start of the first lockdown in March 2020. The RecoveryAyr/ADP Peer Workers rapidly created an online programme of activities running twice a day, 7 days a week,. All staff were home working, providing regular online and telephone based support to individuals previously attending face to face groups. Online activities included recovery meetings, mindfulness and yoga, as well as social activities including quizzes, arts and crafts and a weekly cooking group delivered by a trained chef where ingredients were delivered to people allowing them to take part. Over 100 people received the daily email with details of online activities, and a number of new people came forward for support during Covid, including an increased number of females. Goody bags were also provided to over 100 individuals and their families in July and at Christmas. The ADP allocated funding to support people with phones / credit to stay in touch with services, as well as smart phones / data to access online groups. A range of training and development courses, including Steps to Excellence, Steps 4 Change and the Volunteer Peer Worker Projected were delivered online. Remobilisation Plans and Risk Assessments, were developing, following Scottish Government and Scottish Recovery Consortium guidance, which allowed a phased return to face to face activities. The follow-up recovery community survey showed that a number of people would like the online groups to remain and a blended model of online, telephone and face to face support will be in place.

*A trauma-informed approach is developed*

3.19 During 2020/21 have services adopted a [trauma-informed approach](#)?

All services

The majority of services

Some services

No services

Please provide a summary of progress (max 300 words)

The ADP continue to work towards all services adopting a trauma informed approach, this work is led by a dedicated multiagency Trauma Sub Group. The group developed 'trauma skilled' practice level training which was delivered prior to the Covid lockdown. An evaluation report was considered by the ADP who are considering the ongoing roll out of training. A range of partners also developed in-house training across their organisations. The Sub Group are working to coordinate and support partners to become trauma informed organisations, and will continue to progress this activity as the Covid restrictions lift. The Sub Group are also taking forward relevant actions from the new MAT Standards.



*An intelligence-led approach future-proofs delivery*

3.30 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
- Alcohol death audits (work being supported by AFS)
- Drug death review group
- Drug trend monitoring group
- Other  Please provide details.....

NHS Ayrshire & Arran Public Health Department have established a Pan Ayrshire Alcohol Health Harms Group which is linked to the ADP. The groups role is to provide guidance, support and evidence base for each ADP to develop their own process for preventing and reviewing alcohol related deaths. The group does not review alcohol related deaths. Due to the impact of the Covid-19 pandemic the group has not met for some time, however it is hoped the group will begin to meet again in 2020/21 as the pressures of Covid ease and staff are able to return to their substantive roles. See 2.2 for further information.

ISD LIST analysts are undertaking a Children and Young People Needs Analysis for the ADP.

As part of the remobilisation and revitalisation of the Infant Children and Young People's Transformational Change Programme, a distinct "Infants Children and Young People Recovery from Covid-19" workstream has been added which will allow Pan Ayrshire working to look at both clinical and wider impacts of harm / recovery from Covid-19. This will consider a wide range of impacts including how alcohol and drug use both by ICYP themselves and family / carers has changed and impacted our population in the context of Covid-19.

Public Health have also continued to link in with relevant professionals in CAMHS in relation to data on the distressed children's pathway (for those CYP who attend ED as a result of self harm, including overdose etc) and plan to take this work forward as part of the CAMHS Mental Health and Wellbeing workstream within our NHS AA Corporate Parenting Taskforce action plan.

3.21 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. If none, please detail why (max 300 words)

There are currently no arrangements in place to review alcohol related deaths in South Ayrshire. The ADP are committed to reviewing the AFS guidance for undertaking Alcohol Related Deaths and will progress with this work as Covid pressures lifts and capacity increases.

3.22 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 (max 300 words)

The ADP Reducing Drug Related Deaths (RDRD) Sub Group has developed a process for reviewing all suspected drug related deaths in South Ayrshire. A root cause analysis methodology has been adopted which considers protective and contributing factors, along with key learning and recommendations. In 2020 thematic reviews of all suspected drug related deaths were undertaken. The review process identified a number of themes which were shared with partners through a series of 12 online workshops, between October 2020 and January 2021. Over 200 people attended the workshops, including 30 people with lived experience/family members. The sub group will consider the thematic reviews and the workshops feedback, which will all contribute to the development of services and support for individuals affected by drug use. The ADP Chair and Coordinator also presented papers to the Chief Officers Group, Integration Joint Board and Adult Protection Committee.



#### 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

No

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

The three adult alcohol and drug recovery support services in South Ayrshire (NHS Addictions Service, We Are With You, Ayrshire Council on Alcohol) are open in individuals aged 16 years and over. The ADP continue to fund a Young Persons Worker, based with Barnardos, to support young people, aged 12 – 25 years, with emerging substance use. The Young Persons Worker provides 1:1 (in school, home or community settings) as well as young people and family support via home visits and community links with partner agencies.

The ADP also commissioned young people consultation activities to increase the local understanding of the support needs of young people with emerging substance use. Phase 3 follow-up learning events, scheduled for 2020, were delayed due to the Covid pandemic and took place early in 2021. The findings for the consultation activities will be used to inform the services and support available to young people. A Children and Young People Needs Analysis is also underway with the ISD LIST analysts (see 3.3).

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

No

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

The ADP, in partnership with HSCP Children & Families Service, commission a service for children (under 12yrs) and families affected by others substance use. The Barnardos service provides 1:1 and group work support for children, parenting capacity support and individual 1:1 support for parents, family activities, Therapeutic group work and support for families to access and engage with other services. The ADP young people consultation activities and Needs Analysis (see 4.1 and 3.3) also included children and young people (aged 8 – 25 years) affected by others substance use (see above).

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

Yes

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? (max 300 words)

The ADP is represented across children service planning groups including the Community Planning Partnership (CPP) Children's Services Planning Group and the Child Protection Committee. HSCP Children & Families Services are represented on the ADP and a Senior Manager for HSCP Children & Families Joint Chairs the ADP Children, Young People and Families Sub Group. The ADP and HSCP also jointly commission a service for children and families affected by others substance use.

4.4 Did services for children and young people, with alcohol and/or drugs problems, change in the 2020/21 financial year?

Improved



- Stayed the same   
Scaled back   
No longer in place

Please provide additional information (max 300 words)

The model of service delivery changed to a blended model of telephone and online support, as well as face to face dependent on need, due to the Covid-19 pandemic, however services continued to operate and provide essential support to children and young people throughout the pandemic.

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 2020/21 financial year?

- Improved   
Stayed the same   
Scaled back   
No longer in place

Please provide additional information (max 300 words)

The model of service delivery changed to a blended model of telephone and online support, as well as face to face dependent on need, due to the Covid-19 pandemic however all service continued to operate and provide essential support to children and young people throughout the pandemic.

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

- Yes   
No

Please provide details (max 300 words)

The ADP commissions We Are With You to provide CRAFT 1:1 support and Family Support groups which offer evidenced based interventions and support for family members as individuals. Ayrshire Council on Alcohol offer families and love one's support and counselling. Both services offer support regardless of whether the individual is open to the service or not.

The ADP also supported a range of volunteers and staff from wider services to undertake the CRAFT training.

The ADP Volunteer Peer Worker project also developed to offer places to affected family members.

4.7 Did services for adult family members change in the 2020/21 financial year?

- Improved   
Stayed the same   
Scaled back   
No longer in place

Please provide additional information (max 300 words)

The model of service delivery changed to a blended model of telephone and online support, as well as face to face dependent on need, due to the Covid-19 pandemic however all service continued to operate and provide essential support to family members.

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	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mutual aid	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mentoring	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Social Activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Personal Development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Advocacy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Support for victims of gender based violence	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other ( <i>Please detail below</i> )	<input type="checkbox"/>	<input type="checkbox"/>

Please provide additional information (max 300 words)

Services provide counselling and support to family members and loved ones whether the individual affected by their own alcohol or drug use is in service or not. Individuals will be encouraged to look at coping strategies as to how best to deal with the impact of a loved one's substance use and behaviour on them. Specific family support groups are also available.

The ADP also funded a new pilot Recovery Advocacy Worker post (with lived experience) in the local advocacy service. This post holders provides specific advocacy support for individuals and family members affected by substance use.

## 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)

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

Upon release, is access

available to non-fatal

overdose pathways?

Other  Please provide details

Please provide details (max 300 words)

The ADP continues to support the development of the Peer Involvement Network Group (PING) community justice service user involvement group in South Ayrshire. The PING Development Worker (lived experience role) is based within the ADP/RecoveryAyr Peer Team and delivers a range of peer led activities specifically for people involved in justice services. During Covid the PING group was offered online as part of the team programme of activities. A Peer Worker post (funded by Justice Social Work) is based within the ADP Team, providing 1:1 support and group work for people involved with Justice Social Work.

As part of the response to Covid-19, and the Early Release scheme, the ADP Peer Workers worked closely with Justice Social Work Services, and utilised the Email A Prisoner system to contact individuals across



Scotland who were due to be liberated to South Ayrshire. The EAP aimed to provide a Peer Worker as a point of contact for people, and help connect people to additional support and services, and then offer ongoing support as they returned to the community. The EAP system continues to be used as a method of Peer Workers contacting individuals prior to support. .

The ADP continues to strengthened links with HMP Kilmarnock, and prior to Covid agreements were in place for Peer Workers to in-reach into the prison to delivery Steps 2 Excellence training, and establish a weekly peer led recovery group, these activities will resume as soon as Covid restrictions allow.

The ADP are lead commissioner for a pilot Navigator Project in HMP Kilmarnock, in partnership with the CJA, East Ayrshire ADP, North Ayrshire ADP and the Violence Reduction Unit. The Navigator Pilot provides support for individuals on remand or servicing long term sentences (who will have no statutory requirements on release). The Navigators engage with all men when remanded, to build a relationship, and offer follow-up support in the community on release. The Navigator pilot was established during the Covid pandemic and has progressed well, however has been significantly impacted by Covid in a number of ways e.g. Navigators unable to access the Wings for extended periods of time, gate pick-ups not being possible, court processes changing making follow-up more challenging etc. Due to the impact of Covid, the pilot has been extended to March 2022 and an evaluation is in place.

As an ADP partner, Justice Social Work Services staff ensure those on Community Payback Orders are signposted to appropriate recovery services for support as part of the Case Management Plan where there are alcohol or drug issues. The Diversion From Prosecution Service overseen by The Ayrshire Justice Services Partnership work in partnership with the Crown Service to identify those with alcohol/drug issues who are suitable to be diverted from the Criminal Justice System, placing an emphasis on providing direct support or signposting to recovery services where appropriate

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 activates
- Joint funding of activities
- Other  Please provide details

Please provide details (max 300 words)

The ADP and Community Justice Ayrshire (CJA) continue to have strong collaborative working arrangements, including CJA representation on the ADP groups and ADP representation at the CJA. The ADP have contributed to the strategic need's assessment and development of the CJA plan, including supporting the involvement of service user voice through workshop discussions arranged by PING.

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. (max 600 words)

a) Upon arrest

Individuals arrested, who report a drug or alcohol dependency as part of the Risk and Vulnerability Assessment, will see a Police Casualty Surgeon while in custody, and appropriate care put in place, including attendance at hospital if required.



In partnership with Police Scotland and RecoveryAyr, the ADP began a Police Custody Pilot in September 2019. Individuals in custody who have identified they are affected by alcohol or drug use are offered the opportunity to meet with a Peer Worker (with lived experience) while in custody. The project aims to build a connection with individuals and raise awareness of local services and recovery activities to support their recovery and hopefully reduce reoffending. The pilot was impacted by the Covid-19 pandemic when the custody suite closed, with individuals being held in East and North Ayrshire custody suits instead, and was relaunched later in 2020 using phone, and more recently video based support. An evaluation is underway and a development of the pilot in 2021 is planned, offering more assertive community-based support for these released on an undertaking or on bail, as well as follow-up support for those remanded.

**b) Upon release from prison**

Individuals who are released from prison, already in receipt of MAT or looking to access MAT, are offered a “safe talk” on the day of release to discuss treatment, allocate a community pharmacy, supports, provide overdose awareness, BBV testing, IEP and Naloxone. This is facilitated by NHS Addictions Service staff and a prescriber/medic who will meet face to face with the individual and carry out a brief review, with the plan that the individual will be allocated a named worker who will review the person within 2 weeks.

**6. Equalities**

Please give details of any specific services or interventions which were undertaken during 2020/21 to support the following equalities groups:

All services in South Ayrshire are open to all equality groups. All supports are provided in a person-centred manner, to meet the needs of the individuals at a pace they are comfortable with. Assessment considers any specific areas workers need to be aware of to ensure they are sensitive to each individual’s needs and circumstances.

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

Home visits are available to those who are physically unable to travel for appointments.

**6.2 People with physical disabilities**

Home visits are available to those who are physically unable to travel for appointments.

**6.3 People with sensory impairments**

All promotional literature for services can be provided in alternative formats on request e.g. as a Word Document format so that individuals with sight impairment can access these on audio or with their software at home.

**6.4 People with learning difficulties / cognitive impairments.**

Local services liaise with the Learning Disabilities Team as required.

**6.5 LGBTQ+ communities**

Click or tap here to enter text.

**6.6 Minority ethnic communities**

Click or tap here to enter text.

**6.7 Religious communities**

Click or tap here to enter text.

**6.8 Women and girls (including pregnancy and maternity)**

Priority appointments for pregnant women and individuals with caring responsibilities. Joint review appointments with specialist midwife, prescriber and named worker.

## II. FINANCIAL FRAMEWORK 2020/21

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 baseline funding	£ 977,558
Programme for Government Funding	£ 382,468
Drug Death Task Force funding	£ 49,189
National Drug Mission Funding	£ 68,382
Additional funding from Integration Authority	£ 314,908
Funding from Local Authority	£ 33,000
Funding from NHS Board	£ 0
Scottish Government carry forwards	£ 169,898
Other ( <i>allocations from East &amp; North Ayrshire, Community Justice Ayrshire and the Violence Reduction Unit for jointly funded services and projects</i> )	£ 152,010
<b>Total</b>	<b>£ 2,147,413</b>

### B) Total Expenditure from sources

	£
Prevention including educational inputs <sup>1</sup>	£ 100,126
Community based treatment and recovery services for adults	£ 1,334,205
Inpatient detox services	£ -
Residential rehabilitation services <sup>2</sup>	£ 29,623
Recovery community initiatives	£ 120,714
Advocacy Services	£ 18,208
Services for families affected by alcohol and drug use	£ 58,335
Alcohol and drug services specifically for children and young people	£ 57,500
Community treatment & support services specifically for people in the justice system	£ 152,635
Other <sup>3</sup>	£ 131,977
<b>Total</b>	<b>£ 2,003,323</b>

<sup>1</sup> Includes Alcohol Liaison Service, Education Projects, Police Prevention Activities and Alcohol Brief Interventions.

<sup>2</sup> Combined Detox and Residential Rehabilitation service.

<sup>3</sup> Includes ADP Coordinator, multiagency training and communication activities, ADP Support Costs, Covid Mitigation etc.

*All reserves are earmarked against specific projects in 2021/22. The reserves include £42k National Drug Mission Funding, £22k DTF and £64k baseline / P4G funding, £16k others. Reserves were accumulated due to the impact of Covid on delivery of projects in 2020/21 and the notification of NDM funding in February 2021.*



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 29<sup>th</sup> May 2020)

- Scottish Government funding via NHS Board baseline allocation to Integration Authority
- 2020/21 Programme for Government Funding

Yes

No

Please provide details (max 300 words)

The ADP have an agreed process in place, within the ADP structure and with the IJB.

The Commissioning & Performance Management (CPM) Sub Group is responsible for reviewing funding allocations and making recommendations to the ADP in line with local strategic priorities and needs. The CPM Sub Group includes the Chairs of all ADP sub groups, the ADP Chair, and the HSCP Chief Finance Officer, along with representatives from housing, community justice and public health.

The ADP considers the funding allocations and when approved by the ADP, the budget paper is submitted to the IJB for consideration and ratification.

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 (max 300 words)

Membership of the CPM Sub Group includes the membership outlined in 7.1. Both the ADP and CPM Sub Group include a wide range of partners including representatives from Community Justice and Children's Services. The budget paper approved by the ADP, is submitted to the IJB for consideration and ratification.