



Alcohol & Drug Partnership  
*gabh an rathad eile*

# Outer Hebrides Alcohol & Drug Partnership

Co-ordinating action to prevent and reduce problem drinking and substance use

## Delivery Plan 2015 – 2018



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## Foreward

The Outer Hebrides Alcohol & Drug Partnership (ADP) exists to prevent and reduce the harmful effects of alcohol and drugs in our community, to promote sustained recovery and deliver better outcomes for those affected.

We will work in partnership within our priority areas of early years, early intervention, reducing health inequalities, problem drinkers and substance users, and promotion of a healthy Outer Hebrides.

We will use evidence of positive sustained impact and better outcomes to drive our use of resources, working together with the third sector, community planning, statutory partners, and you; we will make a difference.

**Gordon Jamieson**  
**ADP Chair**

## 1. Introduction

The Outer Hebrides Alcohol and Drug Partnership (ADP) comprises a range of organisations and stakeholders from NHS Western Isles, Comhairle nan Eilean Siar, Police Scotland, Third Sector and community representatives. It is currently chaired by the Chief Executive of NHS Western Isles.

The Outer Hebrides ADPs vision and aims are as follow:

### **Vision:**

The Outer Hebrides is a healthy community where the problems of substance use are prevented and reduced.

### **Aims:**

- Prevent problems arising from substance use
- Reduce problems and harm caused by substance use

Our 2015 - 18 strategic priorities focus on action to meet priorities and objectives under the broad headings of:

#### **1. Early years:**

- Children 0 -5 affected by substance use
- Children affected by parental substance use

#### **2. Early intervention:**

- Young people aged 5 – 25 affected by substance use
- Families and young people affected by substance use
- Vulnerable groups
- Harmful and hazardous drinkers and substance users

#### **3. Problem drinkers and substance users**

- Dependent drinkers and substance users
- Persistent heavy drinkers and persistent substance users

#### **4. Assist in the promotion of a healthy Outer Hebrides (with our partners)**

- Promote positive attitudes

- Promote positive choices

In order to continue to work towards the above strategic priorities and to assist in the delivery of the Alcohol Framework and The Road to Recovery, our three year Delivery Plan will focus on delivering key strategic changes in the areas outlined below:

1. Development and implementation of a Recovery Orientated System of Care (ROSC)
2. Commissioning
3. Workforce Development
4. Review of Governance

## 2. ADP Partner Organisations

The Outer Hebrides ADP plays a significant role in the local delivery of national addiction strategies to tackle drug and alcohol misuse problems. Members are drawn from a wide range of agencies and groups. All partner agencies listed below have been directly engaged in the development and preparation of this Delivery Plan.

As of March 2015, the Outer Hebrides ADP consists of representatives from:

- NHS Western Isles
- Police Scotland
- Comhairle nan Eilean Siar
- The Third Sector
- Service user representation

The Outer Hebrides ADP Partnership members are as follows:

Name	Designation	Organisation	Member of Workgroup/ Subgroup
<b>Outer Hebrides ADP Chair:</b>			
G Jamieson	Chief Executive	NHS Western Isles	<b>ADP &amp; Executive Subgroup</b>
<b>Outer Hebrides ADP Vice Chair:</b>			
(Temporary Vice Chair) Dr. M. Watts	Director of Public Health	NHS Western Isles	<b>ADP &amp; Executive Subgroup</b>
<b>Members:</b>			
M Stewart	Criminal Justice Service	Comhairle nan Eilean Siar	<b>ADP</b>

	Manager		
G Macleod	Chief Inspector	Police Scotland	<b>ADP &amp; Executive subgroup</b>
B Chisholm	Head of Children's Services and Resources	Comhairle nan Eilean Siar	<b>ADP &amp; Executive Subgroup</b>
I MacKenzie	Housing Strategy & Development Officer	Comhairle nan Eilean Siar	<b>ADP</b>
M Bremner	Member	Community Representative	<b>ADP &amp; Executive Subgroup Uist &amp; Barra Subgroup (Vice Chair)</b>
M MacInnes	Member	Service User Representative	<b>ADP Uist &amp; Barra Subgroup</b>
M Munro	Manager, Harris Voluntary Sector	Voluntary Sector	<b>ADP</b>
M Campbell	Member	Job Centre Plus	<b>ADP</b>
D Blaney	Licensing Board member	Comhairle nan Eilean Siar	<b>ADP</b>
G McKay	Child Protection Co-ordinator and Development Officer	Comhairle nan Eilean Siar	<b>ADP</b>

**In Attendance:**

<b>Name</b>	<b>Designation</b>	<b>Organisation</b>	<b>Workgroup/ Subgroup</b>
D MacKenzie	Management Accountant	NHS Western Isles	<b>Executive Subgroup</b>

**Outer Hebrides ADP Support Team:**

<b>Name</b>	<b>Designation</b>	<b>Organisation</b>	<b>Support of Workgroup/ Subgroup</b>
W Ingledew	ADP Coordinator	NHS Western Isles	<b>ADP Executive Subgroup Lewis &amp; Harris Subgroup Uist &amp; Barra Subgroup</b>
S Macaulay	ADP Development Officer (Job share)	NHS Western Isles	<b>ADP Executive Subgroup Lewis &amp; Harris Subgroup Uist &amp; Barra Subgroup</b>
K Peteranna	ADP Development Officer (Job share)	NHS Western Isles	<b>ADP Executive Subgroup Lewis &amp; Harris Subgroup Uist &amp; Barra Subgroup</b>
F Hall	Health Intelligence	NHS Western Isles	<b>ADP Executive Subgroup Lewis &amp; Harris Subgroup Uist &amp; Barra Subgroup</b>
K Peteranna	ADP Administrator	NHS Western Isles	<b>ADP Executive Subgroup Lewis &amp; Harris Subgroup</b>

## **3. Governance and financial accountability**

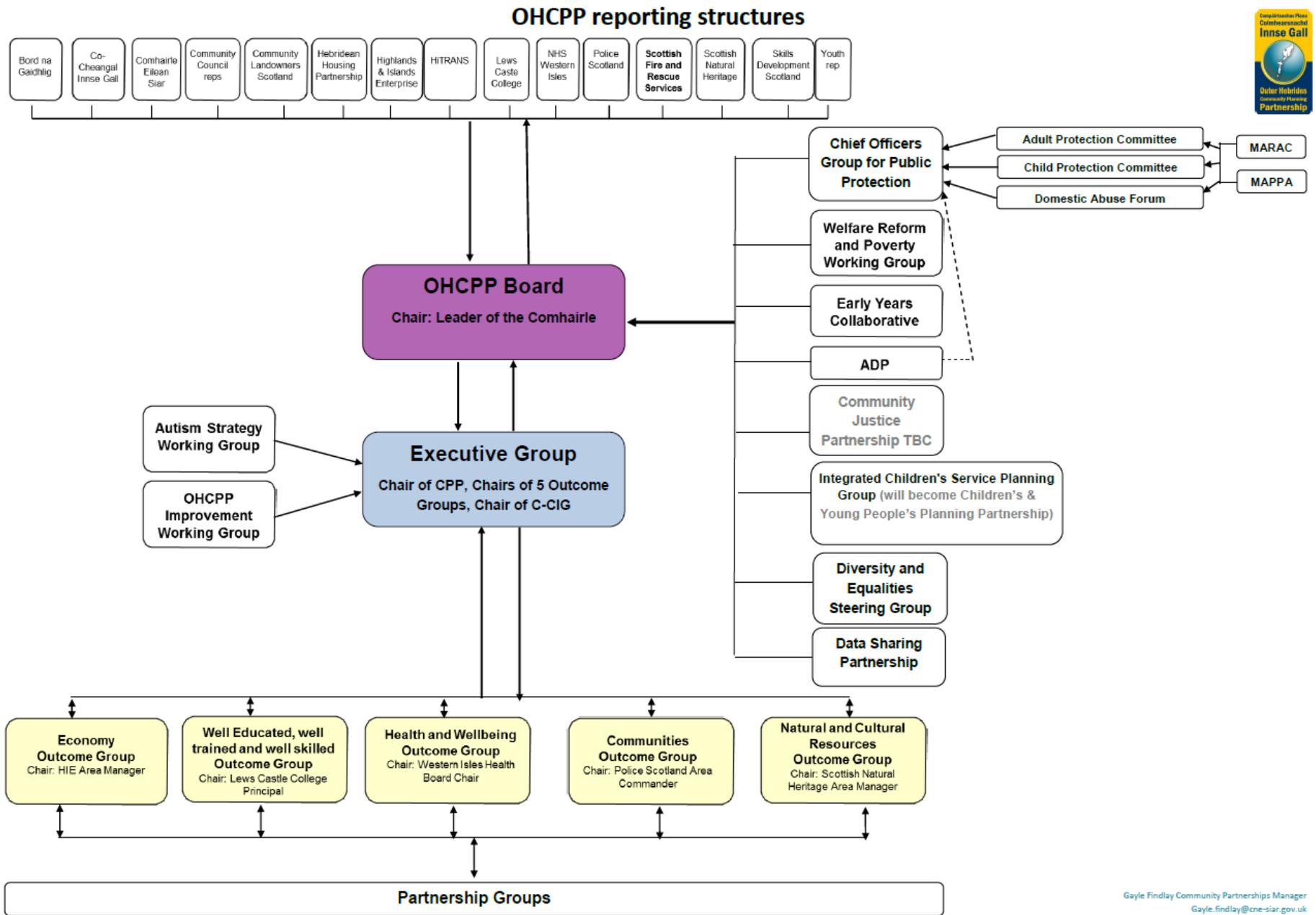
### **3.1 Governance**

Governance arrangements and roles of the Outer Hebrides ADP committee, Executive Finance Group and subgroups are detailed in Appendix 1.

Please note we have identified a review of the Outer Hebrides ADP Governance as one of our four key strategic priority areas over the next three years in order to update and align it to our Recovery Orientated Systems of Care (ROSC) development.

Figure 1: 'OHCPP Reporting Structures' outlines the Outer Hebrides ADP's relationship with the Outer Hebrides Community Planning Partnership (OHCPP).

Figure 1:



## 3.2 Financial accountability

NHS Western Isles holds ring fenced budgets on behalf of the Outer Hebrides ADP. Our Governance document (Appendix 1) states that the Outer Hebrides ADP will adopt the financial governance procedures of the host organisation, therefore the procedures of NHS Western Isles are currently in place. NHS Western Isles provide quarterly finance reports which are monitored by the Outer Hebrides ADP Executive Finance Sub Group and Outer Hebrides ADP Committee, with an Annual Report containing detailed finance information submitted to Scottish Government and the OHCPP.

The Outer Hebrides ADP Committee are responsible for finance decisions. However, as per Governance arrangements, the Outer Hebrides ADP Finance Executive Sub Group also has the power to make decisions on the Partnerships behalf when short timescales so not allow the full Outer Hebrides ADP to make a decision, with a subsequent update to the next full Outer Hebrides ADP meeting which are held on a 3monthly basis.

The Outer Hebrides ADP has prioritised commissioning as one of our four key strategic changes to be delivered over the 2015 – 18 period. As outlined in Section 4, a Commissioning Strategy will be developed to take this strategic change forward and will contain financial governance procedures to guide this process.

## 4. Ministerial and ADP Priorities

Our three year Delivery Plan will focus on delivering key strategic changes in the areas outlined below and are aligned with the following national policy initiatives and frameworks :

- Alcohol Framework: Changing Scotland's Relationship with Alcohol
- The Road to Recovery: A New Approach to Tackling Scotland's Drug Problem
- Quality Principles: Standard Expectations of Care and Support in Drug and Alcohol Services
- Scottish Governments' National Performance Framework
- Scottish Governments' Quality Alcohol Treatment and Support (QATS)

The Delivery Plan will also align to the OHCPP Single Outcome Agreement (SOA) 2013 – 2023 and build on locally existing outcomes and indicators including those from NHS Western Isles, Comhairle nan Eilean Siar, SALSUS, Police Scotland and the Scottish Fire and Rescue Service.

During 2015 – 2018, Outer Hebrides ADP will ensure the delivery of the following four key strategic changes:

### **1. Development and implementation of a Recovery Orientated System of Care (ROSC)**

We will develop and implement a ROSC in the Outer Hebrides in line with Scottish Government policy to ensure that local treatment, review and aftercare are integrated and priority is given to empowering people to sustain their recovery.

### **2. Commissioning**

We intend to begin development of a commissioning approach from 2016 onwards. The Outer Hebrides ADP Needs Assessment which is due to be completed in 2016 will be used as a foundation for the development of the commissioning process. We will design and implement evidence based service commissioning for voluntary, statutory and public bodies which will strengthen local partnership working & joint accountability.

### **3. Workforce Development**

We will undertake a Training Needs Analysis (TNA) in 2015-16. Following the TNA the Outer Hebrides ADP will work in partnership with STRADA in 2015-16 on compiling a Strategic Workforce Development (SWFD) blue print for the Outer Hebrides alcohol and drug workforce.

The Outer Hebrides ADP will develop a Strategic Workforce Development (SWFD) blue print for the Outer Hebrides alcohol and drug workforce in 2015-16 and implement this in 2016-17. This work will assist the Outer Hebrides ADP in implementing a robust ROSC for the Outer Hebrides.

### **4. Review of Governance**

We will undertake a review of our Governance procedures in 2015/16 in order to align with our ROSC development, strengthen links with local partners and improve audit and scrutiny.

## 5. Core & Local Outcomes and Indicators to be achieved

### 5.1 National core outcomes and indicators

This section demonstrates progress made in the Outer Hebrides against the national core outcomes and indicators as set by the Scottish Government.

HEALTH:						
People are healthier and experience fewer risks as a result of alcohol and drug use						
ID	Indicator	Outer Hebrides		Goal/Target	R A G	Scotland
		Baseline	Latest available information			
1.1	Drug related hospital admission (Rate per 100,000 population)	2011/12: <i>41.3 per 100,000 pop</i>	2013/14: <i>37.9 per 100,000 pop</i>	2017/18: Reduce and remain below Scottish rate	A	2013/14: <i>124.6 per 100,000 pop</i>
1.2	Alcohol-related hospital discharges (Rate per 100,000 population)	2011/12: <i>929.9 per 100,000 pop</i>	2013/14: <i>862.1 per 100,000 pop</i>	2017/18: <i>Reduce below Scottish rate</i>	R	2013/14: <i>696.9 per 100,000 pop</i>
1.3	Alcohol-related mortality (Rate per 100,000 population)	2011: <i>27.0 per 100,000 pop</i>	2013: <i>26.3 per 100,000 pop</i>	2017/18: <i>Reduce below Scottish rate</i>	R	2013: <i>21.4 per 100,000 pop</i>
1.4	Drug-related mortality (Rate per 100,000 population)	2011: 4.4 per 100,000 pop	2013: 6.7 per 100,000 pop	2017/18: Reduce and remain below Scottish rate	A	2013: 10 per 100,000 pop
1.5	Prevalence of hepatitis C among people who inject drugs (Percentage)	No information available for this indicator	No information available for this indicator	Maintain current levels	A	2011/12: 53%

**PREVALENCE**

Fewer adults and children are drinking or using drugs at levels or patterns that are damaging to themselves or others

ID	Indicator	Outer Hebrides		Goal/Target	R A G	Scotland
		Baseline	Latest available information			
2.1	Prevalence of problem drug users (Percentage)	2006: 0.38%	2012/13: 0.7%	Reduce and remain below the Scottish rate	G	2012/13: 1.7%
2.2	Prevalence of injecting drug users (Percentage)	No information available for this indicator	No information available for this indicator	Maintain current levels	A	No information available for this indicator
2.3	Drug use last month – pupils age 15 years (Percentage)	2006: 9.0%	2013: 4.0%	Reduce and remain below the Scottish rate	G	2013: 9.4%
2.4	Drug use last year – pupils age 15 years (Percentage)	2006:18.0%	2013:8.2%	Reduce and remain below the Scottish rate	G	2013: 15.5%
2.5	Above limit drinkers – daily and/or weekly (Percentage)	All Islands (incl. Orkney, Shetland and Western Isles) 2003: 17.9%	2008-2011: Males – 35.5% Females – 23.6% Total – 29.4% (Next update is 2012-15)	Reduce and remain below the Scottish rate	G	2008-2011: Males – 48.7% Females – 38.6% Total – 43.4%
2.6	Binge drinkers – twice daily limits (Percentage)	All Islands (incl. Orkney, Shetland and Western Isles) 2003: 28.8%	2008-2011: Males – 18.5% Females – 7.3% Total – 12.8% (Next update is 2012-15)	Reduce and remain below the Scottish rate	G	2008-2011: Males – 26.0% Females – 16.7% Total – 21.1%

2.7	'Problem' drinkers	<i>All Islands (incl. Orkney, Shetland and Western Isles)</i> 2003: 14.1%	2008-2011: Males – 14.4% Females – 8.6% Total – 11.6% <i>(Next update is 2012-15)</i>	<i>Reduce and remain below the Scottish rate</i>	A	2008-2011: Males – 13.9% Females – 9.5% Total – 11.7%
2.8	Weekly drinkers – pupils age 15 years (Percentage)	2006:25.0%	2013: 7.6%	<i>Reduce and remain below the Scottish rate</i>	G	2013: 11.6%

**RECOVERY**

Individuals are improving their health, well-being and life-chances by recovering from problematic drug and alcohol use

ID	Indicator	Outer Hebrides		Goal/Target	R A G	Scotland
		Baseline	Latest available information			
3.1	Drugs spend reduction	<i>No information available for this indicator</i>	<i>No information available for this indicator</i>	<i>Not applicable</i>	A	<i>No information available for this indicator</i>
3.2	Injecting drugs reduction	<i>No information available for this indicator</i>	<i>No information available for this indicator</i>	<i>Not applicable</i>	A	<i>No information available for this indicator</i>
3.3	Drug abstainers (12 weeks)	<i>No information available for this indicator</i>	<i>No information available for this indicator</i>	<i>Not applicable</i>	A	<i>No information available for this indicator</i>
3.4	Drug user's employment/education improvement	<i>No information available for this indicator</i>	<i>No information available for this indicator</i>	<i>Not applicable</i>	A	<i>No information available for this indicator</i>

CAPSM/FAMILIES

Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life chances

ID	Indicator	Outer Hebrides		Goal/Target	R A G	Scotland
		Baseline	Latest available information			
4.1	Maternities with drug use (Rate per 1,000 maternities)	<i>No information available for this indicator</i>	2010/11 – 2012/13: 0	Maintain current levels	G	2010/11 - 2012/13: 19.7 per 1,000 maternities
4.2	Maternities with alcohol use (Rate per 1,000 maternities)	<i>No information available for this indicator</i>	<i>No information available for this indicator</i>		A	<i>No information available for this indicator</i>
4.3	Children protection with parental alcohol/drug misuse (Rate per 10,000 population aged less than 18+ years)	<i>No information available for this indicator</i>	As at 31/7/14 Alcohol and/or drug abuse: 9.9 Drug misuse: n/a Alcohol misuse: 9.9 (all per 10,000 pop. aged <18 years)	Reduce and remain below the Scottish rate	A	As at 31/7/14 Alcohol and/or drug abuse: 10.9 Drug misuse: 6.7 Alcohol misuse: 6.2 (all per 10,000 pop. aged <18 years)
4.4	Positive ABI screening (in ante-natal setting)	2012/13: 0	2014/15: 0	Maintain current levels	G	Not collected nationally

**COMMUNITY SAFETY**

Communities and individuals live their lives safe from alcohol and drug-related offending and anti-social behaviour

ID	Indicator	Outer Hebrides		Goal/Target	R A G	Scotland
		Baseline	Latest available information			
5.1	Drug use funded by crime (Percentage)	No information available for this indicator	No information available for this indicator	Not applicable	A	2011/12: 20.9%
5.2	Reconviction of DTTO-ers	No information available for this indicator	No information available for this indicator	Not applicable	A	No information available for this indicator
5.3	ASBO rate (Rate per 10,000 population)	2011/12: <u>Serious assault</u> 4.69 per 10,000 pop <u>Common assault</u> 71.87 per 10,000 pop <u>Vandalism</u> 61.76 per 10,000 pop <u>Breach of the peace</u> 47.67 per 10,000 pop	2012/13: <u>Serious assault</u> 5.8 per 10,000 pop <u>Common assault</u> 67.1 per 10,000 pop <u>Vandalism</u> 57.3 per 10,000 pop <u>Breach of the peace</u> 20.7 per 10,000 pop	Reduce and remain below the Scottish rate  Reduce and remain below the Scottish rate  Reduce and remain below the Scottish rate  Reduce and remain below the Scottish rate	G	2012/13: <u>Serious assault</u> 6.1 per 1,000 pop <u>Common assault</u> 102.5 per 1,000 pop <u>Vandalism</u> 100.3 per 1,000 pop <u>Breach of the peace</u> 46.8 per 1,000 pop
5.4	CPOs with alcohol/drug treatment	No information available for this indicator	No information available for this indicator (update in May)	Not applicable	A	No information available for this indicator
5.4	Alcohol/drug fuelled offences	No information available for this indicator	No information available for this indicator	Not applicable	A	No information available for this indicator

**LOCAL ENVIRONMENT**

People live in positive, health-promoting local environments where alcohol and drugs are less readily available

ID	Indicator	Outer Hebrides		Goal/Target	R A G	Scotland
		Baseline	Latest available information			
6.1	Pupils age 15 years being offered drugs (Percentage)	2006: 44%	2013: 21.7%	Reduce and remain below the Scottish rate	G	2013:35.6%
6.2	Drug misuse in neighbourhood	2009/10: 2.2%	2013: 2.0%	Reduce and remain below the Scottish rate	A	2013: 11.9%
6.3	People perceiving rowdy behaviour very/fairly common in their neighbourhood	2009/10: 5.1%	2013: 3.1%	Reduce and remain below the Scottish rate	G	2013: 12.6%
6.4	Number of premises licences in force	2012/13: On sale licence – 30.4 Off sale licence – 13.9 Total – 44.3 (all per 10,000 pop. aged 18+ years)	2013/14 On sale licence – 30.0 Off sale licence – 14.8 Total – 44.8 (all per 10,000 pop. aged 18+ years)	Reduce below the Scottish rate Reduce below the Scottish rate Reduce below the Scottish rate	R	2013/14 On sale licence – 26.6 Off sale licence – 11.4 Total – 38.0 (all per 10,000 pop. aged 18+ years)
6.5	Number of personal licences in force	2011/12: 117.2 per 10,000 pop. aged 18+ years	2012/13: 118.6 per 10,000 pop. aged 18+ years	Reduce and remain below the Scottish rate	G	2012/13: 123.5 per 10,000 pop. aged 18+ years
6.6	Number of new applications for premise licences and the number refused	2011/12 On sale applications: 1 Off sale applications: 0 Applications refused: 0	2012/13 On sale applications: 0 Off sale applications: 0 Applications refused: 0	Maintain current levels	G	2012/13 On sale applications: 219 Off sale applications: 172 Applications refused: 12

**SERVICES**

Alcohol and drug prevention, treatment and support services are high quality, continually improving, efficient, evidence-based and responsive, ensuring people move through treatment into sustained recovery

ID	Indicator	Outer Hebrides		Goal/Target	R A G	Scotland
		Baseline	Latest available information			
7.1	<i>Number of screenings (using a validated tool) for alcohol use disorders delivered and the percentage screening positive with the breakdown of:</i>	<b>A&amp;E :</b> 27 <b>Well North:</b> 424 <b>GPs:</b> 390 <u>Wider settings</u> 17 <b>TOTAL</b> 1,001	<b>A&amp;E :</b> 311 <b>Well North:</b> 361 <b>GPs:</b> 639 <u>Wider settings</u> 177 <b>TOTAL</b> 1,488	To increase	G	No information available for this indicator
7.2	i) % eligible for ABI	<b>i) A&amp;E:</b> 48% <b>Well North:</b> 23% <b>GPs:</b> 35% <u>Wider settings</u> 76% <b>TOTAL</b> 26%	<b>i) A&amp;E:</b> 33% <b>Well North:</b> 27% <b>GPs:</b> 22% <u>Wider settings</u> 21% <b>TOTAL</b> 25%	Decrease	A	
7.3	ii) % eligible for referral to treatment services	<b>ii) A&amp;E:</b> 30% <b>Well North:</b> 2% <b>GPs:</b> Unknown <u>Wider settings</u> Unknown <b>TOTAL</b> 2%	<b>ii) A&amp;E:</b> Unknown <b>Well North:</b> 1% <b>GPs:</b> Unknown <u>Wider settings</u> Unknown <b>TOTAL</b> 1%	Decrease	A	
7.4	<i>Number of alcohol brief interventions delivered in accordance with the HEAT Standard guidelines</i>	2012/13: 74.6%	2014/15: 104%	To achieve set target	G	2014/15: Not yet published

7.5	Percentage of clients waiting for more than 3 weeks between referral to a specialist drug and alcohol service and start of treatment	<b>2012/13:</b> <i>Alcohol – 2.8%</i> <i>Drugs – 5.8%</i>	<b>2013/14:</b> <i>Alcohol – 3.0%</i> <i>Drugs – 10.0%</i>	<i>Reduce and remain below the Scottish rate</i>	<b>A</b>	<b>2013/14:</b> <i>Alcohol – 3.2%</i> <i>Drugs – 4.9%</i>
7.6	SDMD initial completeness – the number of patients in SDMD divided by number of patients in DATWT	2011/12: 87.5%	2012/13: 60.5%	<i>Increase to 100%</i>	<b>R</b>	2012/13: 62.9%

## 5.2 New outcomes and indicators – 2015/16 onwards

The Outer Hebrides ADP have agreed key priorities for 2015/18 and therefore decided on new indicators which will demonstrate progress made against these priorities as well as the local Single Outcome Agreement and national outcomes. The following indicators were discussed and agreed for reporting purpose.

Baseline data has been collected from a range of national sources and will be updated annually where possible. Furthermore, local indicators will be reviewed on an annual basis to ensure that they align with the key priorities and actions set out by the Outer Hebrides ADP over the coming reporting period.

<b>National Outcome 1. HEALTH</b>				
<b>People are healthier and experience fewer risks as a result of alcohol and drug use</b>				
<b>I.D</b>	<b>Local outcome</b>	<b>Local Indicator</b>	<b>Outer Hebrides Baseline information</b>	<b>Scotland</b>
<b>1.6</b>	<b>SOA local outcome 4: The physical and mental health and wellbeing of the people throughout the Outer Hebrides is improved.</b>	<b>Rate of alcoholic liver disease hospital admissions</b>	<b>2013/14: 99.6 per 100,000 pop</b>	<b>2013/14: 127.7 per 100,000 pop</b>
		<b>Rate of partially attributable alcohol-related hospital admissions</b>	<b>2013/14: 494 per 100,000 pop</b>	<b>Unknown</b>

<b>National Outcome 2. PREVALENCE</b>				
<b>Fewer adults and children are drinking or using drugs at levels or patterns that are damaging to themselves or others</b>				
<b>ID</b>	<b>Local outcome</b>	<b>Local indicator</b>	<b>Outer Hebrides</b>	<b>Scotland</b>
			<b>Baseline information</b>	
<b>2.9</b>	<b>SOA local outcome 7: The services of the Outer Hebrides are of high quality, continuously improving and reflective of local needs.</b>	<b>Number of SMR25 a's &amp; b's</b>  (SMR 25a – Initial assessments SMR 25b – Follow up)	<b>2014/15: SMR 25a – 16 SMR 25b - 30</b>	<b>Unknown</b>
<b>2.10</b>		<b>Prescribing rate of:</b> <b>Benzodiazepines</b> <b>Diazepam</b> <b>Hypnotics and anxiolytics</b> <b>Anti-depressants</b>	<b>2014: 511.86 DDDs per 1,000 patients</b> <b>2014: 2946.84 DDDs per 1,000 patients</b> <b>2014: 9482.71 DDDs per 1,000 patients</b> <b>2014: 35,054.95 DDDs per 1,000 patients</b>	<b>2014: 432.14 DDDs per 1,000 patients</b> <b>2014: 3225.64 DDDs per 1,000 patients</b> <b>2014: 8471.25 DDDs per 1,000 patients</b> <b>2014: 39,931.83 DDDs per 1,000 patients</b>
<b>2.11</b>		<b>Proportion of children who have experienced at least one negative effect of drinking alcohol</b>  <b>Proportion of children who have experienced at least one negative effect of taking drugs</b>	<b>2013: 40%</b>  <b>2013: 51%</b>	<b>2013: 55%</b>  <b>2013: 395</b>

<b>National Outcome 3. RECOVERY</b>				
<b>Individuals are improving their health, well-being and life-chances by recovering from problematic drug and alcohol use</b>				
<b>ID</b>	<b>Local outcome</b>	<b>Local indicator</b>	<b>Outer Hebrides</b>	<b>Scotland</b>
			<b>Baseline information</b>	
<b>3.5</b>	<b>SOA local outcome 4: The physical and mental health and wellbeing of the people throughout the Outer Hebrides is improved.</b>	<b>No. Of mutual aid groups available</b>	<b>tbc</b>	<b>tbc</b>
<b>3.6</b>		<b>Proportion of Incapacity Benefit/Severe Disablement Allowance claimants with alcohol misuse as main disabling condition</b>	<b>March 2014 – May 2014: 0%</b>	<b>March 2014 – May 2014: 1.6%</b>
		<b>Proportion of Employment and Support Allowance claimants with alcohol misuse as main disabling condition</b>	<b>March 2014 – May 2014: 2.2%</b>	<b>March 2014 – May 2014: 3.6%</b>

<b>National Outcome 4. CAPSM/FAMILIES</b>				
<b>Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life chances</b>				
<b>ID</b>	<b>Local outcome</b>	<b>Local indicator</b>	<b>Outer Hebrides</b>	<b>Scotland</b>
			<b>Baseline information</b>	
<b>4.5</b>	<b>SOA local outcome 7:</b>	<b>Proportion of children who get their alcohol from their home either with or without permission</b>	<b>2013:33%</b>	<b>2013: 27%</b>
		<b>Proportion of children who said parents always let them drink alcohol</b>	<b>2013: 1%</b>	<b>2013: 5%</b>
<b>4.6</b>	<b>The services of the Outer Hebrides are of high quality, continuously improving and reflective of local needs.</b>	<b>Rate of domestic violence</b>	<b>2011/12: 437 per 100,000 pop</b>	<b>2011/12: 1,139 per 100,000 pop</b>
<b>4.7</b>		<b>Rate of referrals to Children's Reports</b> <b>Rate of referrals for non-offences</b> <b>Proportion due to alcohol/drug misuse</b> <b>Proportion due to lack of parental care</b>	<b>2013/14: 24 per 1,000 pop</b> <b>2013/14: 21 per 1,000 pop</b> <b>2013/14: 11%</b> <b>2013/14: 38%</b>	<b>2013/14: 21 per 1,000 pop</b> <b>2013/14: 19 per 1,000</b> <b>2013/14: 2%</b> <b>2013/14: 32%</b>

<b>National Outcome 5. COMMUNITY SAFETY</b>				
<b>Communities and individuals live their lives safe from alcohol and drug-related offending and anti-social behaviour</b>				
<b>ID</b>	<b>Local outcome</b>	<b>Local indicator</b>	<b>Outer Hebrides</b>	<b>Scotland</b>
			<b>Baseline information</b>	
<b>5.5</b>	<b>SOA local outcome 5: The communities of the Outer Hebrides are stronger and more able to identify, articulate and take action and responsibility regarding their needs and aspirations</b>	<b>Accidental dwelling fires</b>	<b>2013/14: 40.1 per 100,00 pop</b>	<b>2013/14: 100 per 100,000 pop</b>
		<b>Proportion with suspected alcohol/drug use</b>	<b>2013/14: 9%</b>	<b>2013/14: 15%</b>
<b>5.6</b>		<b>Rate of driving under the influence</b>	<b>2013/14: 14 per 10,000</b>	<b>2013/14: 11 per 10,000</b>
<b>5.7</b>		<b>Percentage of recorded offences for supply and possession with intent to supply that relate to class A drugs</b>	<b>Northern Police Force 2012/13: 28%</b>	<b>Scotland 2012/13: 32%</b>
<b>5.8</b>		<b>Number of alcohol related A&amp;E attendances and proportion aged ≤16 years (Western Isles Hospital ONLY)</b>	<b>2014/15: 282 attendance Aged ≤16 years: 6%</b>	<b>Unknown</b>

<b>National Outcome 6. LOCAL ENVIRONMENT</b>				
<b>People live in positive, health-promoting local environments where alcohol and drugs are less readily available</b>				
<b>ID</b>	<b>Local outcome</b>	<b>Local indicator</b>	<b>Outer Hebrides</b>	<b>Scotland</b>
			<b>Baseline information</b>	
<b>6.7</b>		<b>Service info is readily available in local communities</b>	<b>tbc</b>	<b>tbc</b>
<b>6.8</b>	<b>SOA local outcome 4: The physical and mental health and wellbeing of the people throughout the Outer Hebrides is improved.</b>	<b>Percentage of households in temporary accommodation</b>	<b>As at 31 March 2014: 0.61%</b>	<b>As at 31 March 2014: 0.42%</b>
		<b>Percentage of households with children in temporary accommodation</b>	<b>As at 31 March 2014: 0.64%</b>	<b>As at 31 March 2014: 0.43%</b>

**National Outcome 7. SERVICES**

**Alcohol and drug prevention, treatment and support services are high quality, continually improving, efficient, evidence-based and responsive, ensuring people move through treatment into sustained recovery**

ID	Local outcome	Local indicator	Outer Hebrides	Scotland
			Baseline information	
7.7	SOA local outcome 4: The physical and mental health and wellbeing of the people throughout the Outer Hebrides is improved.	Demographic breakdown of users of services (by gender, age, race, disability and sexual orientation)	<p align="center"><b><u>Gender</u></b></p> <p align="center">Male: 71%</p> <p align="center">Female: 29%</p> <p align="center"><b><u>Age</u></b></p> <p align="center">≤15 years: 9%</p> <p align="center">16-24 years: 18%</p> <p align="center">25-34 years: 12%</p> <p align="center">35-44 years: 16%</p> <p align="center">45-54 years: 18%</p> <p align="center">55-64 years: 19%</p> <p align="center">65-74 years: 7%</p> <p align="center">75+ years: 2%</p>	Unknown
7.8	SOA local outcome 7: The services of the Outer Hebrides are of high quality, continuously improving and reflective of local needs.	DNA rate for waiting times	2013/14: 1.8%	Unknown

### 5.3 Local outcomes and indicators – 2014/15<sup>1</sup>

This section demonstrates progress made against the Outer Hebrides ADP local indicators. ADP funded services are required to report on these indicators on a bi-annual basis through the Outer Hebrides ADP Outcomes Database.

HEALTH							
People are healthier and experience fewer risks as a result of alcohol and drug use							
ID	Indicator	April 11 – March 12	July 12 – Feb 13	April 13 – March 14	April 14 – March 15	Goal/Target	R A G
1.7	Experience an improvement in physical health	342 (44%)	199 (42%)	205 (28%)	336 (45%)	Increase	G
1.8	Experience an improvement in mental health	306 (40%)	148 (31%)	239 (32%)	323 (43%)	Increase	G
1.9	Experience an improvement in co-occurring health issues	138 (18%)	64 (14%)	87 (12%)	140 (19%)	Increase	G

PREVALENCE							
Fewer adults and children are drinking or using drugs at levels or patterns that are damaging to themselves or others							
ID	Indicator	April 11 – March 12	July 12 – Feb 13	April 13 – March 14	April 14 – March 15	Goal/Target	R A G
2.12	Are alcohol dependent	277 (36%)	165 (35%)	104 (14%)	236 (32%)	Decrease	R
2.13	Are drug dependent	n/a	20 (4%)	32 (4%)	72 (10%)	Decrease	R
2.14	Are currently stable	249 (32%)	201 (42%)	188 (25%)	320 (43%)	Increase	G
2.15	Are intravenous drug users	0 (0%)	2 (0.4%)	4 (0.5%)	3 (0.4%)	Decrease	A
2.16	Have reduced their risk-taking behaviour	263 (34%)	234 (49%)	189 (26%)	303 (41%)	Increase	G
2.17	Is an Armed Forces Veteran	n/a	0 (0%)	2 (0.3%)	4 (0.5%)	Monitor for changes	A
2.18	Has a gambling problem	n/a	2 (0.4%)	1 (0.1%)	6 (0.8%)	Monitor for changes	A

<sup>1</sup> This information excludes figures reported by RADICAL due to the nature of this project.

RECOVERY							
Individuals are improving their health, well-being and life-chances by recovering from problematic drug and alcohol use							
ID	Indicator	April 11 – March 12	July 12 – Feb 13	April 13 – March 14	April 14 – March 15	Goal/Target	R A G
3.7	Has reduced their daily drug spend	n/a	14 (3%)	20 (3%)	56 (8%)	Increase	G
3.8	Has reduced their daily alcohol spend	n/a	122 (26%)	211 (29%)	315 (42%)	Increase	G
3.9	Are in recovery process	n/a	85 (18%)	125 (17%)	193 (26%)	Increase	G
3.10	Have moved from recovery to maintenance	n/a	81 (17%)	94 (13%)	117 (16%)	Increase	G
3.11	Are unemployed	238 (31%)	148 (31%)	235 (32%)	288 (39%)	Decrease	R
3.12	Are in full-time employment	111 (14%)	50 (11%)	79 (11%)	99 (13%)	Increase	G
3.13	Are in part-time employment		12 (3%)	20 (3%)	22 (3%)	Increase	A
3.14	Are in education/training	132 (17%)	80 (17%)	99 (13%)	182 (24%)	Increase	G
3.15	Is retired	n/a	25 (5%)	66 (9%)	81 (11%)	Monitor for changes	R
3.16	Is on sickness/disability allowance	n/a	39 (8%)	99 (13%)	130 (17%)	Monitor for changes	R
3.17	Alcohol/drugs has affected their employment e.g. Absenteeism	n/a	57 (12%)	79 (11%)	76 (10%)	Decrease	G
3.18	Alcohol/drugs has affected their education e.g. Absenteeism	n/a	28 (6%)	35 (5%)	27 (4%)	Decrease	G
3.19	Experienced an improvement in employability status	124 (16%)	79 (17%)	75 (10%)	111 (15%)	Increase	G
3.20	Experienced an improvement in educational attainment	61 (8%)	40 (8%)	49 (7%)	35 (5%)	Increase	R
3.21	Have moved into employment	30 (4%)	19 (4%)	32 (4%)	30 (4%)	Increase	A
3.22	Have moved into education/training	34 (4%)	12 (3%)	47 (6%)	16 (2%)	Increase	G
3.23	Has moved out of employment	n/a	2 (0.4%)	4 (0.5%)	9 (1.2%)	Decrease	R
3.24	Has moved out of education/training	n/a	1 (0.2%)	5 (0.7%)	1 (0.1%)	Decrease	G

3.25	Have achieved qualifications in this period	43 (6%)	24 (5%)	54 (7%)	37 (5%)	Increase	R
3.26	Increased knowledge of the consequences and risks of alcohol and drugs	666 (86%)	*	557 (75%)	605 (81%)	Increase	G
3.27	Are in settled housing	357 (46%)	246 (52%)	420 (57%)	528 (71%)	Increase	G
3.28	Are in temporary accommodation	52 (7%)	31 (7%)	45 (6%)	43 (6%)	Decrease	A
3.29	Are homeless	18 (2%)	11 (2%)	39 (5%)	51 (7%)	Decrease	R
3.30	An improved ability to sustain a tenancy	108 (14%)	38 (8%)	181 (24%)	67 (9%)	Increase	R
3.31	Improved independent living skills	136 (18%)	56 (12%)	101 (14%)	172 (23%)	Increase	G
3.32	Improved personal relationships	328 (42%)	163 (34%)	205 (28%)	266 (36%)	Increase	G
3.33	Feel involved in their local community	239 (31%)	161 (34%)	132 (18%)	164 (22%)	Increase	G
3.34	Increased ability to make positive choices <sup>4</sup>	512 (66%)	*	174 (24%)	366 (49%)	Increase	G
3.35	Increased confidence and self-esteem <sup>4</sup>	460 (60%)	*	288 (39%)	385 (52%)	Increase	G
3.36	Improved ability to maintain their finances	230 (30%)	346 (73%)	183 (25%)	251 (34%)	Increase	G
3.37	Improved school/college/training attendance rates	117 (15%)	42 (9%)	56 (8%)	43 (6%)	Increase	R

CAPSM/FAMILIES							
Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life-chances							
ID	Indicator	April 11 – March 12	July 12 – Feb 13	April 13 – March 14	April 14 – March 15	Goal/Target	R A G
4.8	Improved their parenting skills	60 (8%)	25 (5%)	51 (7%)	68 (9%)	Increase	G
4.9	Providing an improved supportive environment for children	71 (9%)	27 (6%)	56 (8%)	59 (8%)	Increase	A
4.10	Participating in family activities	102 (13%)	36 (8%)	77 (10%)	87 (12%)	Increase	G
4.11	Experiencing improved protection of children	66 (9%)	36 (8%)	51 (7%)	50 (7%)	Increase	A
4.12	Children affected by substance misuse with improved school attendance rates	67 (9%)	15 (3%)	11 (1%)	23 (3%)	Increase	G
4.13	Children affected by substance misuse with improved school attainment	22 (3%)	13 (3%)	15 (2%)	25 (3%)	Increase	A
4.14	Children affected by substance misuse with improved self-confidence and resilience skills	44 (6%)	29 (6%)	40 (5%)	22 (3%)	Increase	R
4.15	Increased number of children having positive relationship with parents	97 (13%)	31 (7%)	81 (11%)	69 (9%)	Increase	R
4.16	Improved accommodation profile for service users with children living with them	15 (2%)	11 (2%)	20 (3%)	27 (4%)	Increase	A
4.17	Improved illicit drug/alcohol profile for service users with children living with them	33 (4%)	14 (3%)	51 (7%)	26 (3%)	Increase	R
4.18	Increased understanding of the impact substance use has on carers/family members/children	103 (13%)	59 (12%)	113 (15%)	131 (18%)	Increase	G
4.19	Local authority has been involved with children	n/a	30 (6%)	81 (11%)	34 (5%)	Monitor for changes	G
4.20	Children have had a Statutory Child Protection intervention by Social Work Services	n/a	16 (3%)	35 (5%)	22 (3%)	Monitor for changes	G
4.21	Children looked after by the Local Authority	n/a	13 (3%)	21 (3%)	22 (3%)	Monitor for changes	A

<b>COMMUNITY SAFETY</b>							
<b>Communities and individuals live their lives safe from alcohol and drug-related offending and anti-social behaviour</b>							
<b>ID</b>	<b>Indicator</b>	<b>April 11 – March 12</b>	<b>July 12 – Feb 13</b>	<b>April 13 – March 14</b>	<b>April 14 – March 15</b>	<b>Goal/Target</b>	<b>R A G</b>
5.9	Report funding their drug use through crime	6 (0.8%)	2 (0.4%)	11 (1.5%)	8 (1.1%)	Decrease	<b>G</b>
5.10	Are on a DTTO/probation	45 (6%)	38 (8%)	38 (5%)	58 (8%)	Decrease	<b>R</b>
5.11	Has a criminal case pending	n/a	15 (3%)	25 (3%)	44 (6%)	Decrease	<b>R</b>
5.12	Is on a Community Payback Order (with alcohol treatment required)	n/a	17 (4%)	32 (4%)	47 (6%)	Decrease	<b>R</b>
5.13	Is on a Community Payback Order (other)	n/a	9 (2%)	9 (1%)	13 (2%)	Decrease	<b>R</b>
5.14	Is on bail	n/a	2 (0.4%)	5 (0.7%)	10 (1.3%)	Decrease	<b>R</b>
5.15	Has been in prison in the previous 12 months	n/a	19 (4%)	24 (3%)	39 (5%)	Decrease	<b>R</b>
5.16	Alcohol use has resulted in involvement with the Criminal Justice System within the reporting period	n/a	68 (14%)	74 (10%)	118 (16%)	Decrease	<b>R</b>
5.17	Service user given a DTTO who has been reconvicted within one year	n/a	1 (0.2%)	10 (1.4%)	18 (2%)	Decrease	<b>R</b>
5.18	Service user who has been convicted of vandalism (malicious mischief), breach of the peace, assault or anti-social behaviour within the reporting period	n/a	43 (9%)	53 (7%)	67 (9%)	Decrease	<b>R</b>
5.19	Service user who has had a drink driving conviction within the reporting period.	n/a	6 (1%)	8 (1%)	14 (2%)	Decrease	<b>R</b>

<b>SERVICES</b>							
<b>Alcohol and drugs prevention, treatment and support services are high quality, continually improving, efficient, evidence-based and responsive, ensuring people move through treatment into sustained recovery</b>							
<b>ID</b>	<b>Indicator</b>	<b>April 11 – March 12</b>	<b>July 12 – Feb 13</b>	<b>April 13 – March 14</b>	<b>April 14 – March 15</b>	<b>Goal/Target</b>	<b>R A G</b>
7.9	New referrals received	293 (38%)	248 (52%)	494 (67%)	549 (74%)	Monitor for changes	A
7.10	Returning referrals	123 (16%)	96 (20%)	85 (12%)	126 (17%)	Decrease	R
7.11	Referrals to other agencies	115 (15%)	141 (30%)	17 (24%)	200 (27%)	Monitor for changes	G
7.12	Signposted to other agencies	n/a	64 (14%)	80 (11%)	171 (23%)	Monitor for changes	G
7.13	Discharges from the service	166 (22%)	164 (35%)	341 (46%)	310 (42%)	Monitor for changes	A
7.14	Unplanned discharges from the service	55 (7%)	65 (14%)	102 (14%)	120 (16%)	Monitor for changes	R
7.15	Initial care plans agreed	307 (40%)	198 (42%)	422 (57%)	391 (53%)	Increase	R
7.16	Have an individual focused care plan	265 (34%)	161 (34%)	386 (52%)	349 (47%)	Increase	R
7.17	Care plans reviewed	243 (31%)	137 (29%)	249 (34%)	332 (45%)	Increase	G
7.18	Care plans completed	186 (24%)	135 (28%)	239 (32%)	277 (37%)	Increase	G

## 6. Financial Investment

The 2015 – 2018 Scottish Government funding allocation to ADP's has not been announced, at this time. Therefore, draft financial investment plans have been outlined based on the 2014 – 2015 allocation. It has been noted by the Outer Hebrides ADP that 1 year funding periods do not allow for effective future planning.

A key action from 2015 – 2018 will be to review our current financial investment and allocation of resources to align funding to our strategic priorities and key strategic changes for this period in order to achieve our local and national outcomes. Please see our baseline spend from 2014 – 2015 in Figure 2: 'Outer Hebrides ADP Spend Breakdown for 2014-2015'.

In 2015 – 18 we plan to increase financial investment to activities that support the development and implementation of a ROSC, the development of our Commissioning approach and our priorities of Early Years and Early Intervention.

### 6.2 Additional Resources

Additional alcohol and drug service resources for the Outer Hebrides in 2015/2016 are listed below:

- **Comhairle nan Eilean Siar:**

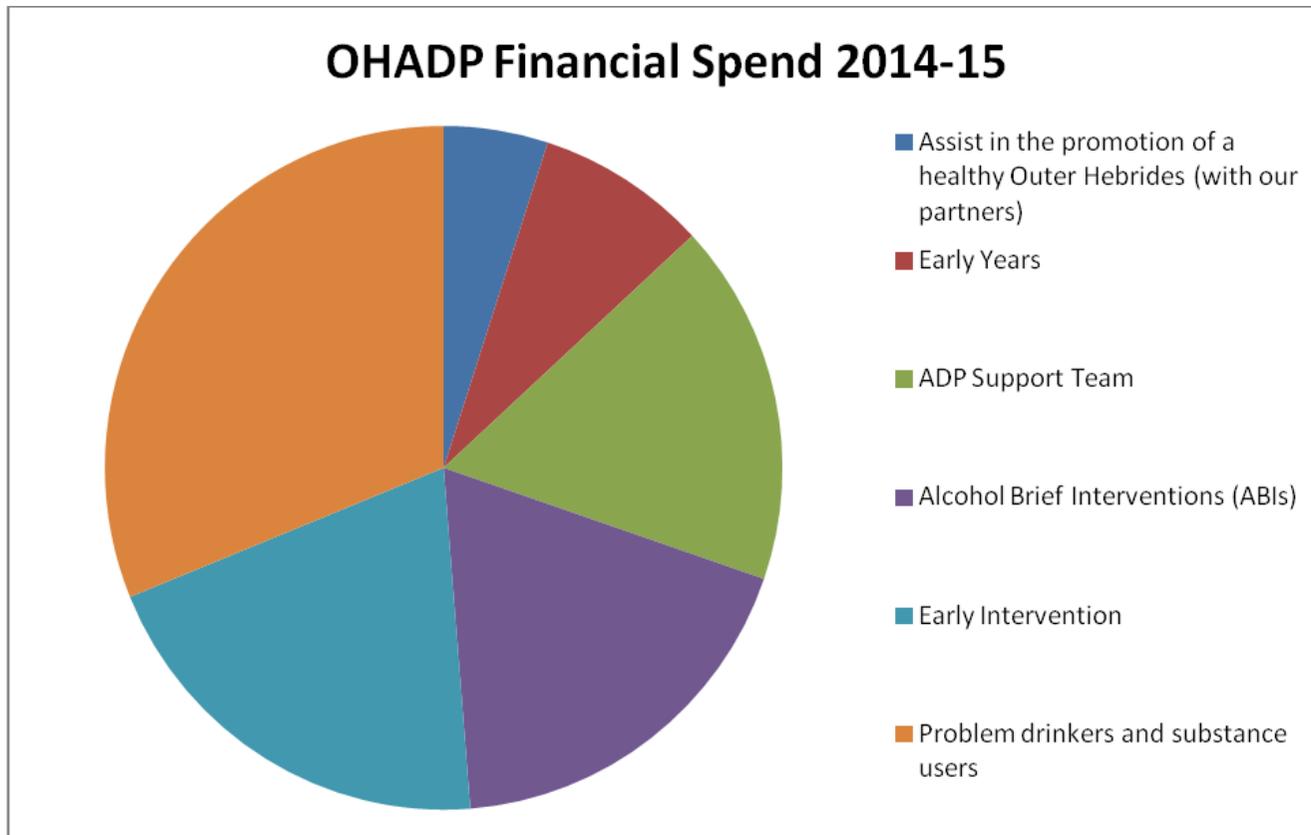
Alcohol Support Worker	£40,000
Drug Support Worker	£40,000
  
- **NHS Western Isles:**

CAMHS	£108,000
Community Nurse (Alcohol Misuse)	£43,000

**Figure 2**

**Outer Hebrides ADP Spend Breakdown for 2014-15**

Assist in the promotion of a healthy Outer Hebrides (with our partners)	35,000	
Early Years	57,333	
ADP Support Team	120,650	
Alcohol Brief Interventions (ABIs)	130,000	
Early Intervention	141,407	
Problem drinkers and substance users	219,280	
TOTAL	703,670	100%



## 7. Priority Actions & Interventions to improve outcomes

From 2015 – 18 we will deliver on the existing Outer Hebrides ADP strategy along with our four key strategic changes in line with national and local outcomes. In order to achieve this, priority actions will be delivered.

### 7.1 National Outcomes

The Scottish Government has set out a set of seven core outcomes for Alcohol & Drug Partnerships across Scotland to deliver on, The outcomes, as stated in Section5, are as follow:

<p><b>1. HEALTH</b></p>	<p><b>People are healthier and experience fewer risks as a result of alcohol and drug use:</b> a range of improvements to physical and mental health, as well wider well-being, should be experienced by individuals and communities where harmful drug and alcohol use is being reduced, including fewer acute and long-term risks to physical and mental health, and a reduced risk of drug or alcohol-related mortality.</p>
<p><b>2. PREVALENCE</b></p>	<p><b>Fewer adults and children are drinking or using drugs at levels or patterns that are damaging to themselves or others:</b> a reduction in the prevalence of harmful levels of drug and alcohol use as a result of prevention, changing social attitudes, and recovery is a vital intermediate outcome in delivering improved long-term health, social and economic outcomes. Reducing the number of young people misusing alcohol and drugs will also reduce health risks, improve life-chances and may reduce the likelihood of individuals developing problematic use in the future.</p>
<p><b>3. RECOVERY</b></p>	<p><b>Individuals are improving their health, well-being and life-chances by recovering from problematic drug and alcohol use:</b> a range of health, psychological, social and economic improvements in well-being should be experienced by individuals who are recovering from problematic drug and alcohol use, including reduced consumption, fewer co-occurring health issues, improved family relationships and parenting skills, stable housing; participation in education and employment, and involvement in social and community activities.</p>
<p><b>4. FAMILIES</b></p>	<p><b>Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life-chances:</b> this will include reducing the risks and impact of drug and alcohol misuse on users'</p>

	children and other family members; supporting the social, educational and economic potential of children and other family members; and helping family members support the recovery of their parents, children and significant others.
<b>5. COMMUNITY SAFETY</b>	<b>Communities and individuals are safe from alcohol and drug related offending and anti-social behaviour:</b> reducing alcohol and drug-related offending, re-offending and anti-social behaviour, including violence, acquisitive crime, drug-dealing and driving while intoxicated, will make a positive contribution in ensuring safer, stronger, happier and more resilient communities
<b>6. LOCAL ENVIRONMENT:</b>	<b>People live in positive, health-promoting local environments where alcohol and drugs are less readily available:</b> alcohol and drug misuse is less likely to develop and recovery from problematic use is more likely to be successful in strong, resilient communities where healthy lifestyles and wider well-being are promoted, where there are opportunities to participate in meaningful activities, and where alcohol and drugs are less readily available. Recovery will not be stigmatised, but supported and championed in the community.
<b>7. SERVICES</b>	<b>Alcohol and drugs prevention, treatment and support services are high quality, continually improving, efficient, evidence-based and responsive, ensuring people move through treatment into sustained recovery:</b> services should offer timely, sensitive and appropriate support, which meets the needs of different local groups (including those with particular needs according to their age, gender, disability, health, race, ethnicity and sexual orientation) and facilitates their recovery. Services should use local data and evidence to make decisions about service improvement and re-design.

## 7.2 Local Outcomes

In order to deliver the agreed national and local outcomes, the Outer Hebrides ADP will ensure that our strategic priorities link to the OHCPP Single Outcome Agreement. Please see Appendix 2 for Logic Models on the OHCPP local outcomes. The Outer Hebrides ADP will contribute to these outcomes from 2015-18, as evidenced in Section 5.

<b>OH CPP Local Priority Area</b>		<b>Scottish Government Priorities</b>
Communities are safer and healthier by preventing, and reducing the harmful effects of alcohol		<ul style="list-style-type: none"> <li>• Health inequalities and physical activity</li> <li>• Safer and stronger communities</li> </ul>
<b>OHCPP Local Outcomes</b>		
<b>SOA local outcome 4:</b>	<b>The physical and mental health and wellbeing of the people throughout the Outer Hebrides is improved.</b>	
<b>SOA local outcome 5:</b>	<b>The communities of the Outer Hebrides are stronger and more able to identify, articulate and take action and responsibility regarding their needs and aspirations</b>	
<b>SOA local outcome 7:</b>	<b>The services of the Outer Hebrides are of high quality, continuously improving and reflective of local needs.</b>	

## 7.3 Priority Actions

### i. ROSC

#### Summary

ROSC development will align with the Scottish Governments' Quality Principles: Standard Expectations of Care and Support in Drug and Alcohol Services quality improvement framework and the Scottish Governments' recommendations from the QATs report to ensure 2015 – 2018 service development in the Outer Hebrides is focused on the development of an effective, recovery oriented system of care that will be measurable at service, local and national levels. A care system will be developed that enables people to progress at their own pace with a planned and integrated care pathway from their first entry into services to their return to non-specialist services. We will continue to develop joint working with mental health and addiction services. We have identified existing resource to allow additional development work with service users and local communities during the move to a ROSC from 2015 onwards and will make use of the Scottish Governments 'Developing Recovery Oriented Systems of Care through Service Redesign Driver Diagram' to support us through this process of service redesign.

In 2015/ 16 we will complete service mapping and an epidemiology update which will inform a subsequent Needs Assessment to be carried out across the Outer Hebrides by 2016. The results of these exercises will inform an Outer Hebrides ADP ROSC Strategy and Implementation Plan which will be produced by 2016/17. We will implement this plan from 2017 onwards.

<b>ROSC Priority Action</b>	<b>Planned timescale</b>
Undertake and complete service mapping exercise	2015
Undertake and complete comprehensive alcohol and drugs Needs Assessment of Outer Hebrides	2016
Development of a ROSC Strategy and Implementation Plan	2015 - 17
Implement ROSC Strategy	2016 - 18
Ongoing development work with service users, mental health and addiction services, community and partners to develop ROSC	2015 - 18

## ii. Commissioning:

### Summary:

The development and implementation of a Commissioning approach to alcohol and drug services within the Outer Hebrides will ensure services are being delivered in line with the Scottish Governments' Quality Improvement Framework. Services will be commissioned based on evidence of meeting these principles of care and we will continue to strengthen links to mental health, addiction services and mutual aid organisations. The Outer Hebrides ADP are working towards an integrated approach to service planning, commissioning and service design and delivery.

Commissioning Priority Actions	Planned timescale
Review findings of service mapping exercise	2015
Undertake and complete comprehensive alcohol and drugs Needs Assessment of Outer Hebrides	2016
Develop a Commissioning Strategy to link in with ROSC development	2016 - 17
Implement Commissioning Strategy	2017 - 18
Ongoing development work with service users, community and partners to develop services and support service users to develop Recovery networks	2015 - 18

## iii. Workforce Development

### Summary:

The Outer Hebrides ADP Workforce Development Strategy will contribute to the local indicators of the Outer Hebrides Community Planning Partnership (CPP) Single Outcome Agreement (SOA):

- The people of the Outer Hebrides are well educated, well trained and well skilled.
- The physical and mental health and wellbeing of the Outer Hebrides is improved.
- The communities of the Outer Hebrides are stronger and more able to identify, articulate and take action and responsibility regarding their needs and aspirations.
- The services of the Outer Hebrides are of high quality, continuously improving and reflective of local needs.

Workforce Development Priority Actions	Planned timescale
Develop a Training Needs Analysis in partnership with STRADA	2015
Compile and produce a Strategic Workforce Development (SWFD) blue print for the Outer Hebrides alcohol and drug workforce	2016
Implement SWFD	2016 – 18
Develop awareness of local workforce in relation to required and available training	2016 - 18

#### iv. Review of Governance:

##### Summary:

The Outer Hebrides ADP will conduct a review of current procedures and update Governance procedures in 2015. In 2016 we will review the Outer Hebrides ADP’s monitoring and evaluation processes to ensure they are fit for purpose. In 2016, we will also review the evaluation tools used by alcohol and drug services to align with the Scottish Governments focus on improving performance through greater transparency and innovation as stated in the Quality Principles. This will improve our available data and evidence to assist with planning and reporting. This strategic change will contribute to the delivery of the Quality Principles as part of an effective local ROSC.

The Outer Hebrides ADP will continue to submit the number of screenings and Alcohol Brief Interventions (ABIs) on a quarterly basis as required by ISD. We will continue to monitor the Drug and Alcohol Treatment Waiting Times Database on a monthly basis with services being sent individualised monthly summary reports. Additionally, the Outer Hebrides ADP will continue to submit the Compliance Checklist to ISD on a quarterly basis.

All correspondence with regards to SMR25s will continue to be disseminated to services by the Outer Hebrides ADP on a quarterly basis when circulated by ISD.

<b>Governance Priority Actions</b>	<b>Planned timescale</b>
Review current Outer Hebrides ADP Governance in relation to Outer Hebrides ADP Committees and Subgroups	2015
Review current Outer Hebrides ADP monitoring and evaluation processes	2015 - 16
Review evaluation tools in use by local alcohol and drug services	2016
Identify appropriate evaluation tools for use by local alcohol and drug services	2016 - 18
Implement changes in Outer Hebrides ADP monitoring and evaluation processes	2016 - 18
Implement changes in evaluation tools for use by funded alcohol and drug services	2016 -18

## 8. Request for National Support

The Outer Hebrides ADP has welcomed the support received from the Scottish Government's Alcohol and Drug Delivery Units during 2014 – 2015 and intend to continue to access this support in the future.

The Outer Hebrides ADP will continue to access the training and guidance on offer from:

- Scottish Drugs Forum (SDF)
- Alcohol Focus Scotland (AFS)
- Scottish Training on Drugs and Alcohol (STRADA)
- Scottish Recovery Consortium (SRC)
- Scottish Families Affected by Alcohol and Drugs (SFAAD)
- CREW2000
- Scottish Health Action on Alcohol Problems (SHAAP)
- NHS Education for Scotland (NES)
- Information Services Division

We have attended and contributed to Joint Improvement Team (JIT) national meetings and will continue to send representation in the future.

The Outer Hebrides ADP requests the following support from the Scottish Government:

### 8.1 Evaluation:

Support would be welcomed to identify effective evaluation tools for use by alcohol and drug services that are aligned with the Quality Principles. Further information on the Drug and Alcohol Improvement Game (DAIG) and the National Alcohol and Drug Agencies (NADA) Network will be sought.

### 8.2 Workforce Development

As previously stated in section 7, following the TNA the Outer Hebrides ADP will work in partnership with STRADA in 2015-16 on compiling a Strategic Workforce Development (SWFD) blue print for the Outer Hebrides alcohol and drug workforce. It would be of benefit to the Outer Hebrides ADP to receive clarification on national pathways for the alcohol and drug workforce. Support to identify affordable, accessible and appropriate training for our workforce would also be welcomed.

### 8.3 Commissioning

Commissioning of alcohol and drug services will be developed and implemented during the 2015 – 18 period within the

Outer Hebrides, as stated in section 7. Support to develop a Commissioning Strategy will be sought from the Scottish Governments' Alcohol and Drug Delivery Units.

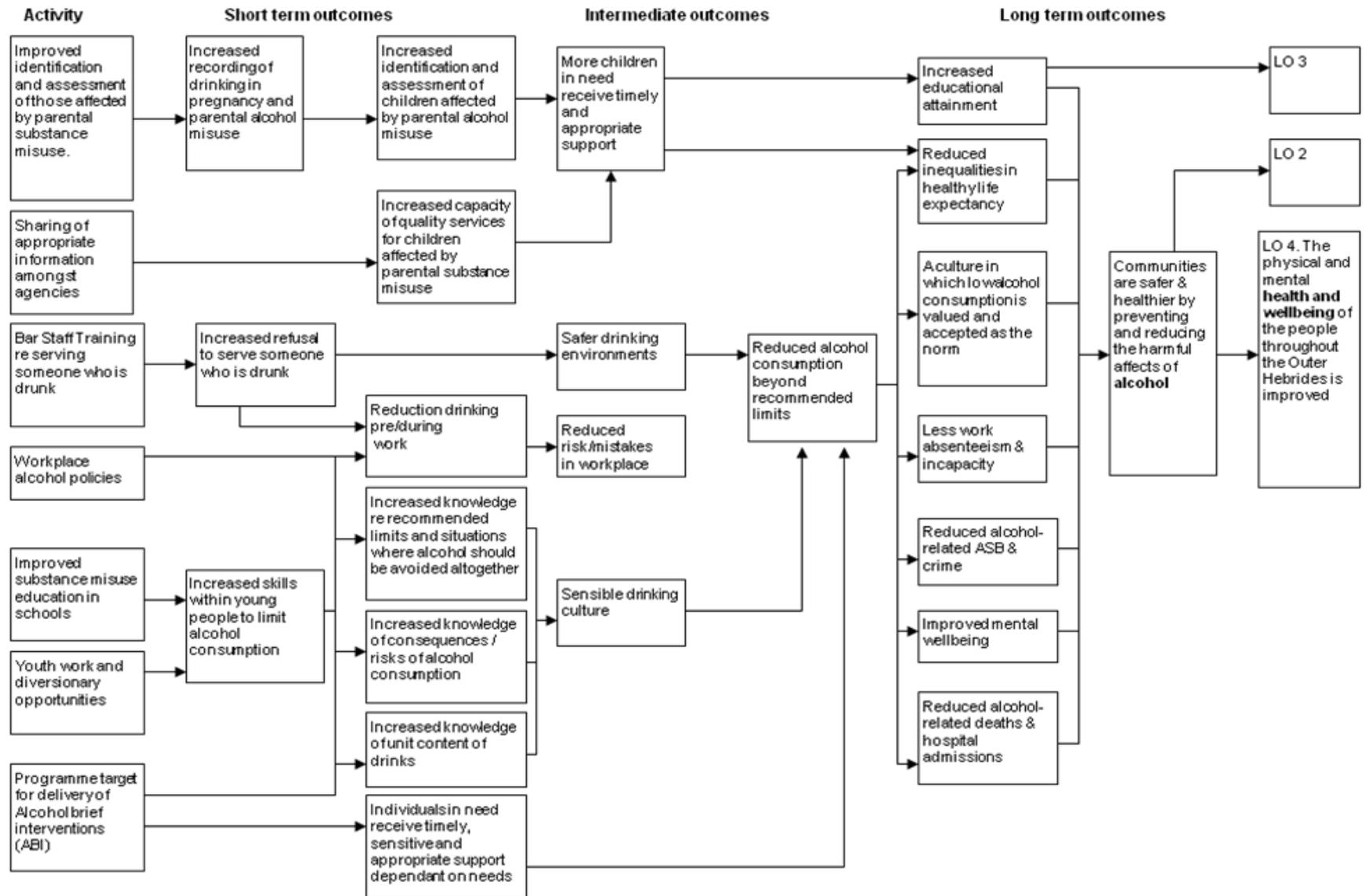
## Appendix 1: Outer Hebrides ADP Governance Document

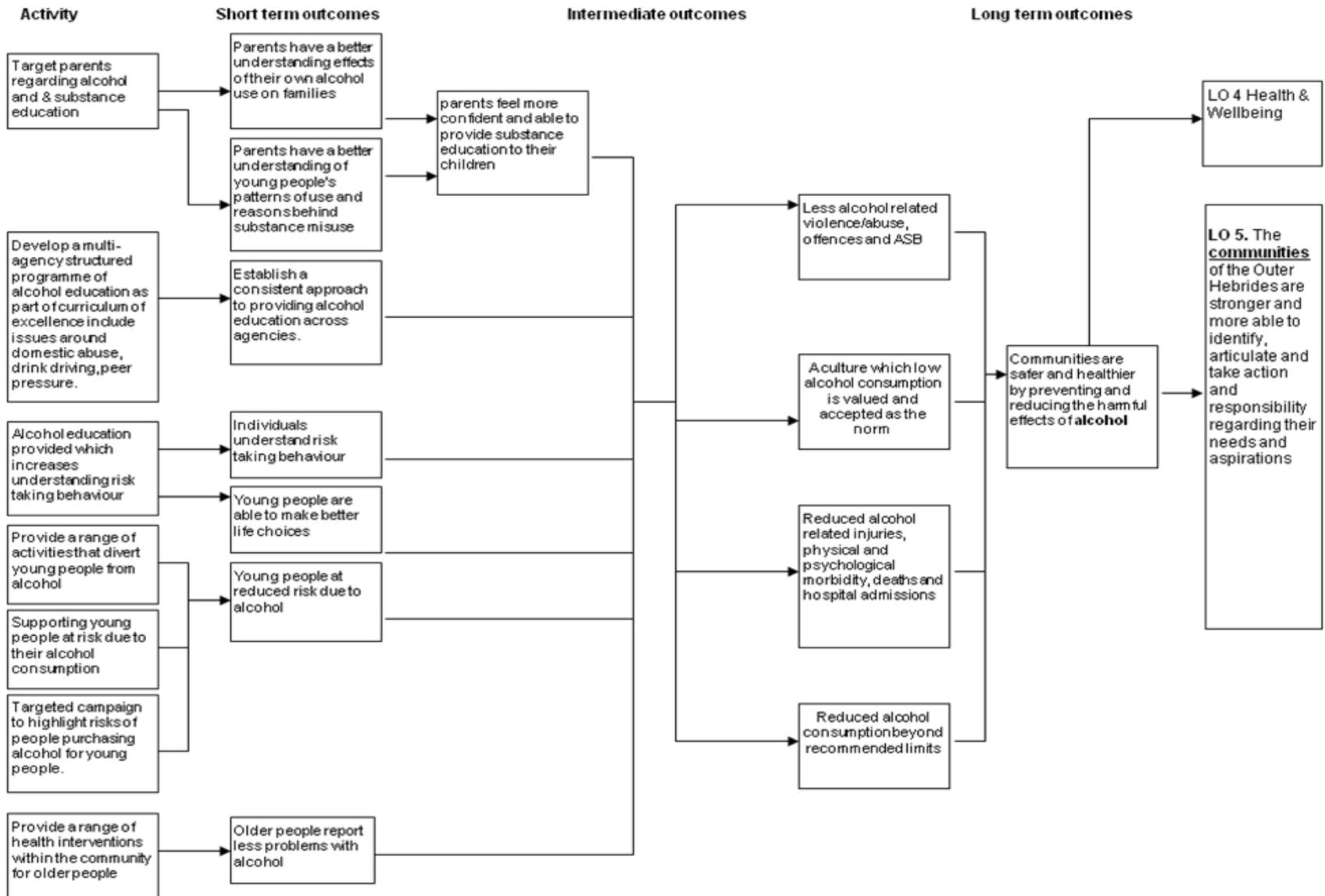
- i. Please click the icon below 'Outer Hebrides ADP Governance Paper.'



Outer Hebrides ADP  
Governance Paper Se

## Appendix 2: Outer Hebrides Community Planning Partnership Logic Models





**For further information please contact:**

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