

Outer Hebrides Alcohol & Drug Partnership

Outer Hebrides ADP Meeting

Date: Wednesday 18th September 2013 10am – 2pm

Venue: Conference Room, Police Station, Church Street, Stornoway

PRESENT:

Gordon Macleod	ADP Chair; Chief Inspector, Police Scotland (Outer Hebrides)
Gordon Jamieson	ADP Vice Chair; Chief Executive, NHS Western Isles
Michael Stewart	Criminal Justice Service Manager, CnES
Emelin Collier	Head of Planning & Development, NHS WI
Marine Munro	Development Manager, Harris Voluntary Service
Mary MacInnes	Service User Representative
Joan Matheson (for Mairi Campbell)	Jobcentre Plus

IN ATTENDANCE:

Wendy Ingledew	ADP Coordinator, NHS WI
Fiona Hall	ADP Substance Misuse Information and Research Officer, NHS WI
Suzanne Macaulay	ADP Substance Misuse Development Officer, NHS WI
Donnie Mackenzie	Principal Accountant, NHS WI

NOTE TAKER:

Karen Peteranna	ADP Administrative Assistant, NHS WI
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1. APOLOGIES

Apologies were received from David Blaney, Bernard Chisholm, Isobel Mackenzie, Mairi Bremner and Mairi Campbell (Joan Matheson attended as her representative).

2. PRESENTATION BY FIONA HALL

Fiona tabled copies of 'Outer Hebrides ADP – National Core Outcome Indicator Performance 2012/13'

During Val Tallon's visit to the Outer Hebrides ADP in July she suggested that the OH ADP set goals and targets to monitor its performance in relation to the ADP National Core Outcomes set by the Scottish Government, as well as local outcomes or indicators. The OH ADP must report back to the Scottish Government within the annual report on performance in relation to the ADP National Core Outcomes. Val also suggested a 'traffic light system' may be the most effective way to highlight this. Fiona advised a green traffic light meant the OH ADP were achieving their goals and targets, a red traffic light meant they were not achieving their goals and amber meant there was no information or update available for the indicator. It was voiced that this

year only showed indicator performance for national core outcomes and indicators however next year would show indicator performance for local outcomes and indicators also by using this year's figures as a baseline as this year will be the first full year of data. The figures are made available from the Scottish Government in May yearly.

Gordon Jamieson and Emelin Collier joined the meeting.

Health (Where people are healthier and experience fewer risks as a result of alcohol and drug use)

Drug related hospital discharges had increased from 29 per 100,000 for 2008/09 – 2010/11 to 36 per 100,000 for 2009/10 – 2011/12 and the alcohol related mortality had increased from 24 per 100,000 for 2008 – 2010 to 25 per 100,000 for 2009 – 2011.

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

There were no updates available for the following indicators:

- Estimated prevalence of problem drug use (ages 15-64)
- Estimated prevalence of injecting drug user (ages 15-64)
- Percentage of 15 year old pupils who used illicit drugs in the last month
- Percentage of 15 year old pupils who used illicit drugs in the last year

Due to reports being 2 yearly figures will be comparable next year.

'The proportion of individuals drinking above twice daily ("binge drinking") recommended limits' indicator had decreased to 12.8% for 2008/11 from the 2003 baseline for 2003 of 28.8%. This figure is combined with Orkney and Shetland so does not give a clear picture of what is happening locally. The proportion of people with potential problem drinking has decreased from 14.1% in 2003 to 11.5% for 2008/11 however this figure is also combined with Orkney and Shetland due to the sample size for the Outer Hebrides being so small. It was confirmed that Outer Hebrides figures can be requested from the Scottish Government.

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

There are no outcomes available for recovery indicators currently. When the DAISy system is implemented this will be recorded.

CAPSM/Families (Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life chances)

There has been a reduction in maternities recording drug misuse from 2.9 per 1,000 in 2007/08 – 2009/10 to 2 per 1,000 in 2008/09 – 2010/11. This figure is combined data with Shetland and Orkney. The rate of maternities recording alcohol misuse has greatly increased from 134.7 per 1,000 in 2011/12 to 343.5 per 1,000 in 2012/13. This is a lot higher than the national average of 33 per 1,000 in 2012/13 and its thought this is due to mis-recording locally. Fiona advised the Scottish Government had been informed that mis-recording had been taking place in the Outer Hebrides.

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

The percentage of new patients/clients at specialist drug treatment services who report funding their drugs through crime had greatly reduced from 11.8% in 2010/11 to 3.8% in 2011/12. This percentage is also much smaller than the national average of 21.2% for 2011/12. A reduction was also seen for alcohol related offences recorded by the police in serious assaults, common

assaults and vandalism. There was no previous data recorded to compare breach of the peace figure however the figure of 5.1 per 1,000 in 2011/12 was lower than the national average on 6.3 per 1,000. There was also no previous data to compare the number of community Payback Order requirement issues with drug or alcohol treatment. The figure for 2011/12 was 23 for the Outer Hebrides. The percentage of crimes where offenders were under the influence of alcohol or drugs for 2010/11 was 28% with alcohol and 15% with drug. As these figure come from a 2 yearly survey there was no current data to compare with.

It was queried if 'community safety' information could be shared and Fiona advised she could issue information locally.

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

In 2011/12 there was only 1 on sale application and no off sale applications or applications refused.

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)

Fiona advised that although it looks like the Outer Hebrides ADP is achieving in the number of alcohol brief interventions (ABIs) being delivered in accordance with the HEAT Standard guidelines they were not. Emelin advised the group that she had been liaising with the Scottish Government on ABI delivery as the Outer Hebrides had previously been the highest achieving in Scotland. The Scottish Government suggested the Outer Hebrides seek advice from Shetland. Emelin informed members that the ABI Planning Group had reconvened in July and there was a positive feeling for moving forward. Fiona further advised the group that a meeting had taken place on 17th September and positive steps were being made to improve ABI delivery including: Medical Ward 2 at the Western Isles Hospital recording data, the introduction of the digital pen project, gaps in training being identified and addressed, GP's in Uist & Barra signing up, top-up training being conducted for anti-natal and dietetics. An action plan will be drawn up from this meeting and can be made available to the Outer Hebrides ADP. Emelin advised that more opportunities to conduct ABIs in Primary Care were being looked at and also for women under 35 years. It was noted that when the target was previously set it was then increased, due to its success. It was suggested the Outer Hebrides ADP was a victim of its own success and with a small population it may be expected that you would run out of people to conduct ABI's on.

It was noted as unfortunate that the Scottish Government do not put more importance on screenings (they only request recordings of ABI's delivered) as Benbecula Medical Practice had conducted 68 screenings. It was suggested the Outer Hebrides ADP still merit the screenings undertaken locally even if the Scottish Government do not. It was voiced that each practice receives £5 per screening and £15 per ABI and that there is £15k available from the NHS for this.

It was suggested by Gordon Jamieson that an ABI archive would be of use to prove what we are doing locally with ABIs, with the increase in alcohol related mortality in the 'health' section it was queried if there was a specific local area where ABIs were not being conducted and alcohol related mortality was high. However it was suggested that ABI's are not designed for harmful drinkers but to pull people back from the brink of harmful drinking. It was also suggested ABI delivery be broken down by practice and hospital discharge – Fiona will provide a quarterly update on this at ADP meetings in the future.

The percentage of clients waiting for more than 3 weeks between referral to specialist drug and alcohol service and start of treatment was 0% for 2012 which is a great success and the Outer Hebrides ADP received a letter from the Scottish Government giving their congratulations on this.

Areas where we are not achieving our goal/target

Improvements need to be made in the following areas during 2013/14:

- Rate of drug related hospital discharges
- Rate of alcohol-related mortality
- The proportion of individuals drinking above daily and/or weekly recommended limits
- Rate of maternities recording alcohol misuse
- Number of personal licences
- Number of new 'on sale' licence applications
- Number of screenings (using a validated tool) for alcohol use disorders delivered

Areas where we are achieving our goals/targets

Improvement has been seen in the following areas and needs to be maintained during 2013/14:

- Rate of alcohol-related hospital discharges
- The proportion of individuals drinking above twice daily ("binge drinking") recommended limits
- Proportion of people with potential problem drinking
- Rates of maternities recording drug misuse
- Percentage of new patients/clients at specialist drug treatment services who report funding their drugs through crime
- Alcohol related offences recorded by the police
- Number of premises licences in force
- Number of new 'off sale' licence applications
- Number of alcohol brief interventions delivered in accordance with the HEAT standard guidelines
- Percentage of clients waiting for more than 3 weeks between referral to a specialist drug and alcohol service and start of treatment

The OH ADP thanked Fiona for the presentation and her work on the 'OH ADP National Core Outcome Indicator Performance 2012/13' report.

ACTION: Fiona Hall – Is there a specific area where ABI's are low and alcohol related mortality is higher locally.

ACTION: Fiona Hall – Breakdown ABI's undertaken by practices as well as hospital discharges – Provide quarterly breakdowns at ADP meetings.

ACTION: Fiona Hall – Share 'Community Safety' details from OH ADP National Core Outcome Indicator Performance 2012/13

3. APPROVAL OF MINUTES FROM GROUP MEETING 9th July 2013

The notes were approved as a correct record.

4. ADP UIST & BARRA SUB GROUP MEETING 22nd AUGUST 2013

Karen advised the group she attended the Uist & Barra Subgroup Meeting in Castlebay, Isle of Barra on Thursday 22nd August 2013. She advised members those present received updates on ADP staff, funding 2013-15, training, information handling, ADP summer activities, outcomes database reporting (there were no concerns from those present), ISD Scotland and

the DAISy, Val Tallon's visit and ADP Annual Report 2012-13. Mr Hocine provided an update on the Integrated Care Pathway (ICP) – *to be discussed in Item 7* – and on the Substance Misuse Partnership for Uist & Barra (SMPUB). Key points from the SMPUB update were:

- There is a youth cafe being developed in Balivanich with a multi-agency approach. It will be situated at An Caladh on a Friday night initially.
- The An Caladh Cafe is no longer open as they struggled to get the balance right between the commercial aspect of the cafe and the use of the premises as a drop-in service.
- Colin Biddulph, Uists Substance Misuse Support Worker has been arranging conflict resolution training with emergency services to form a pull of qualified door stewards.
- The need for a supported accommodation unit locally is being explored.

ADP members were concerned that with the closure of the An Caladh Cafe that a service funded by the OH ADP had been withdrawn. The group were advised that the SMPUB funded services did not have individual aims and objectives however it was suggested this should be visible from the 6 month monitoring reporting. Karen would gain clarity on this.

Mairi MacInnes advised the drop-in service in An Caladh had reduced from 5 days to 2 days.

The SMPUB were reminded they were required to show they were working as a partnership prior to the 2nd payment of funding from the OH ADP.

Concerns raised by Dr Bird were also discussed at the Subgroup meeting – *to be discussed in Item 12*.

ACTION: Karen Peteranna – Ensure a funded service has not been withdrawn from the SMPUB.

5. ACTIONS FROM ADP MEETING 9th JULY 2013

All actions from the 9th July meeting have been completed.

6. FUNDING 2012 - 2013

Donnie Mackenzie advised the group that there was a potential under spend of £9k by the financial year end.

7. INTEGRATED CARE PATHWAY

The OH ADP Chair advised the group an email update on the progress of the Integrated Care Pathway (ICP) had been received from Mr Hocine, Substance Misuse Coordinator for Uist & Barra. He advised work on the ICP was ongoing and due to a reduction in staffing over the summer school holidays there was a delay in completion of the ICP. Mr Hocine advised the ADP there would be no additional costs due to this delay. The OH ADP Chair shared with the group that an invoice had been received from Mr Hocine for the consultation work on the ICP for 98 hours @ £12 per hour. The group agreed this was not the financial agreement which was agreed at the July ADP meeting and this sum was excessive. It was agreed at the July ADP meeting that practical advice and financial assistance of £2k (£1,200 plus £800 backfill) would be provided to the Substance Misuse Partnership for Uist & Barra. As it was thought the backfill had been undertaken by a non NHS employee there were concerns this did not comply with NHS Governance. The members wished to find out how many hours work it would take to

complete the ICP, who declares the tax on the payment to the employee for backfill and whether the 98 hours was in addition to usual working hours. It was noted that if the hours were in addition to normal working hours that this should have been arranged through the line manager. The ADP Chair advised the members he would contact Mr Hocine and gain clarification on the concerns raised.

ACTION: Gordon Macleod (ADP Chair) – Gain clarification from Mr Hocine re: members concerns.

8. STRADA TRAINING

The ADP members were updated on the training day allowance for 2014-15 from STRADA following a request from the previous ADP meeting. The group were told that George Burton, Operations Coordinator at STRADA had been contacted and he advised that there had been a shift in focus of the work and support STRADA provides ADP's as directed by the Scottish Government. As a result of this and the subsequent redirection of resources, calculations about allocated training days for each ADP were no longer appropriate. STRADA advised training days allowance would be dependent on:

- The size of the drug and alcohol workforce in the area
- The training needs of the workforce
- The type of courses required to meet these identified needs
- The capacity of any venue to appropriately accommodate the number of staff attending
- What training had been delivered previously by STRADA and other provides and when this was

The group were advised that Karen would be attending the STRADA Reference Group meeting on 25th September and it was hoped that some clarity and context would be provided at this meeting. Karen will report back to member at the next ADP meeting on the STRADA Reference Group.

The 'Funded Services Uptake on STRADA Training 2013' was tabled.

Karen provided the members with a summary of the findings from requesting training attendance sheets from STRADA. The group were informed that the 2 day 'Introduction to Motivational Interviewing' held in Stornoway in May had 14 attending out of a possible 20 and 5 out of 12 funded services attended. The same course was held in Balivanich and 13 out of a possible 20 attended with 6 out of 8 funded services attending. The 3 day 'Motivational Interviewing (Practise Based Workshop)' held in Stornoway over 2 days in June and 1 day in August was open for attendance from Outer Hebrides wide services with 9 attending and 6 out of a possible 20 funded services in attendance. The 'Introduction to Substance Misuse' ½ day course which took place in Balivanich in August had 17 in attendance with 5 out of 8 funded service attending and multiple attending from 3 funded services. It was felt disappointing that funded service did not take-up the free training offered to them from the OH ADP through STRADA however it was positive that 53 places had been filled and training had been received by these alcohol and drug workers. It was also suggested that if funded services are not attending they should submit their reason for this e.g. higher qualifications. Verification on qualifications detailed in funding application forms should be undertaken and Karen advised a database on OH ADP funded services training would be compiled to better understand the skills of the funded services and if training refreshers are required. It was agreed that the topic 'training' would be included in future 'funded service visits' to cover the training undertaken, training plans and promoting free training on offer and to be undertaken.

It was queried if there were funded services the OH ADP commissioned that required a minimum level of training and competency. Wendy advised the group that the revised Draft NATIONAL Occupational Standards are currently out for consultation and the ADP had submitted a response, this item is discussed under 12.3.

ACTION: Karen Peteranna – Are there funded services the OH ADP commissioned that required a minimum level of training and competency.

ACTION: Karen Peteranna – Include training as a topic for funded service visits.

ACTION: Karen Peteranna – Compile data base for ADP funded services – re qualifications and training undertaken

9. **MONITORING PROCESS – OUTCOMES DATABASE & MONITORING FORM**

Wendy advised the monitoring form had been amended to include service specific aims and objectives as well as the new inclusion of a traffic light system. The group agreed the monitoring form and outcomes database was fit for purpose and would be issued to funded services on 19th September and returned for the 11th October. On return the reports will then be completed by ADP support staff and issued to members for comment by end of October. If comments are received that suggest the 2nd payment of funding is not advised a meeting will be called prior to 4th December. Wendy stressed that for some funded services 2nd payment, if reliant on approval of their monitoring and evaluation could not be left to the next ADP meeting in December.

Fiona made the group aware that there were no service aims and objectives for the inner bids of the Substance Misuse Partnership for Uist & Barra which may result in the evaluations not providing much detail. It was voiced that the Partnership should evidence on equality throughout Uist and Barra in this monitoring period. If gaps are evident they should be provided with actions to focus on the weaknesses.

The group were informed the ADP wrote to the Mr Hocine to ask that they provide the Outer Hebrides ADP with a report on the current position of the Substance Misuse Partnership for Uist & Barra (SMPUB). Given that the partnership had now been operational for a year the OH ADP was keen to hear about the progress of the partnership and see evidence that the partnership had a positive impact on service delivery as stipulated to the SMPUB. The OH ADP was also keen to hear the strengths and developments regarding joint services offered by the partnership as well as dealing on staffing and the line management of these staff. As the SMPUB is the first partnership funded by the OH ADP, it was expressed to the SMPUB that the OH ADP was eager to hear about any problems that the partnership had encountered and how these were overcome. The OH ADP requested copies of any formal documentation, including the constitution and staff contracts. It was requested that the SMPUB submit a report and documentation requested prior to the 18th September ADP Meeting for presentation at the meeting.

The ADP Chair advised the group that the report and documentation was received late on the evening of the 17th September, submitted by Mr Hocine. The group were informed that the Constitution states that Mr Hocine would coordinate/chair the Partnership. The members did not remember agreeing to this and stated an automatic Chair was not acceptable and a rotating Chair would be required. As the constitution stands, if Mr Hocine was to leave his post as Substance Misuse Coordinator for Uist & Barra his successor would automatically be Chair of the SMPUB and it was felt that this was not a fair system. Wendy informed the group she advised Mr Hocine after the Uist & Barra Subgroup meeting in August that he could not line manage the employees of the SMPUB however he could mentor them. Sheena Stewart should

be line managing the SMPUB employees. Gordon Jamieson stated that Mr Hocine is a NHS Western Isles employee however he was the original point of contact for the SMPUB. It was agreed a meeting would be called by Emelin for Mustapha Hocine, his line manager Norrie MacRitchie and Mike Hutchison (Head of Mental Health & Learning Disability Services) to attend and discuss roles, responsibilities, issues arising from U&B Partnership Constitution and what work is undertaken in core NHS Western Isles time and as the Chair of the SMPUB. The ADP Chair advised the members he would circulate the SMPUB Constitution to OH ADP members and any comments on this should be issued to Emelin.

It was agreed that a Lewis and Harris ADP Member and support staff member would pair to undertake the SMPUB funded service visit.

ACTION: Karen Peteranna – Issue monitoring form and outcome database to funded services on 19th September.

ACTION: Fiona Hall/Gordon Macleod – Collate report on monitoring forms and outcomes databases, send round members for comment, calling a meeting if required.

ACTION: Fiona Hall/Gordon Macleod – Ensure evidence on equality throughout Uist & Barra is provided within SMPUB returns. If gaps are evident, provide actions to focus on weaknesses.

ACTION: Emelin Collier – Arrange meeting with Mr Hocine, Norrie MacRitchie and Mike Hutchison.

ACTION: Gordon Macleod – Circulate SMPUB to members for comment.

ACTION: Karen Peteranna – Assign Lewis & Harris ADP member and support staff member to SMPUB funded service visit.

10. ABI WAITING TIME STANDARDS, ADP & ISD COLLECTION OF DATA & REPORTING

10.1 ABI STANDARD

The previous HEAT H4 target became a HEAT Standard during 2012/13.

In previous years NHS Western Isles has performed well in the delivery of ABIs, meeting and exceeding past targets set by the Scottish Government. In 2012/13 NHS Western Isles was set a target of delivering 338 ABIs. The majority of the population was targeted when this project was introduced; given that we have a small population which is diminishing it is unlikely that we will ever achieve the high numbers that we did before. Due to previous success and the large number of ABIs delivered in the past NHS Western Isles struggled to deliver the set number of ABIs in 2012/13. A total of 252 ABIs were delivered during 2012/13, 75% of the target set by the Scottish Government.

In order to address the fall in delivery of ABI's NHS Western Isles has reinstated meetings of the planning group to look at innovative ways of reaching the target set by the Scottish government. To date 2 meetings have been held.

It was noted positive that since 2008/09 a total of 2,501 ABIs had been delivered - a delivery of 173%, which is the second highest in the whole of Scotland.

10.2 WAITING TIMES STANDARD

The Scottish Government wrote to congratulate NHS Western Isles on their achievement of the HEAT A11 Target: *'by March 2013, 90% of clients will wait no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery'*.

Performance for NHS Western Isles is as follows:	% treated within 3 weeks
March 2013	
Scotland	94.6%
NHS Western Isles	98.2%

It was agreed by member that 98.2 % was a fantastic achievement for the Western Isles and Fiona (SMIRO) was thanked for her efforts in the collation of data.

10.3 ADP AND ISD COLLECTION OF DATA AND REPORTING

Fiona voiced to members that a subgroup for the new Drug Alcohol Information System (DAISy) was created and she is on the data set group with the 1st meeting taking place on 20th September 2013. It is expected it would be refined through the consultation period what will be included in the DAISy. Fiona has offered that the Outer Hebrides ADP test the DAISy if the opportunity arose.

It was noted that there would be no obligation for services whose funding will be reduced by 100% in 2014 to record and submit data however the ADP advised that they would recommend services – and in particular the Alcohol & Drug Support Workers – continue to comply to avoid a drop in data locally. It was also voiced that ADP members should support the provision of information for Scottish Government reporting.

11. OUTER HEBRIDES ADP – ANNUAL REPORT 2012-13

The group were informed the Outer Hebrides ADP Annual Report 2012-13 had been submitted to the Scottish Government.

12. AOCB

12.1 UPDATE ON SMDO POST RE: JOB SHARE

Wendy advised members that Suzanne (SMDO) returned from maternity leave on 16th September and works 18 hour per week Monday to Wednesday covering implementation and development of strategic priorities. The post is a job share with Karen who works 12 hours per week in this role Thursday and Friday covering implementation and development of training, educational inputs and community campaigns. Karen also resumed the ADP Administrator role on 16th September working 18.5 hours Monday to Wednesday.

12.2 GP CONCERNS – ALCOHOL CONSUMPTION

The members were provided with a brief description of an email from Dr Stephen Bird to various community representatives raising his concerns for the Calabhaigh area of Lochboisdale, Isle of South Uist. Dr Bird is concerned with the excessive alcohol consumption, antisocial behaviour and significant use and misuse of local services of individuals in the area especially the effect on the families with young children in the area. Dr Bird suggested a multi-agency approach would be the most effective method to resolving issues in this area.

The ADP Chair advised the group that a multi-agency meeting had been arranged. Michael advised there had been a lack of information being provided to front line services. Through the multi-agency meeting and the coming together of information it is hoped a number of individuals/families will be pinpointed and the whole community is not the target. Michael

assured the members that the NHS and OH ADP would be involved and well informed from the outset. Michael advised he would update members once the meeting has taken place.

ACTION: Michael Stewart – Update ADP at next statutory meeting of by email if required

12.3 CONSULTATION ON DRUG AND ALCOHOL STANDARDS

Scotland has recently been involved in reviewing and updating the Drug and Alcohol National Occupational Standards which are now ready for consultation. It was voiced it was extremely important that people who deliver services and those who have experience of using services respond to the consultation so that Scottish views are truly represented within it. To this end the consultation has been forwarded around the OH ADP's wider networks in order to publicise as widely as possible. The main consultation period runs from 1st August to 30th September 2013. Responses will help frame competency in Scotland as outlined in the Workforce Development statement. Wendy advised members the Outer Hebrides ADP had submitted a response to the Scottish Government and Danos including the following key points:

- ADP's need an identified clear single comprehensive pathway for workforce development within each tier, so that service providers and ADP's know where they start and where they are aiming to go.
- ADP's need to be able to access free of charge a suite of training for this purpose provided by one organisation for the services within that tier within the ADP area, particularly for remote and rural areas.

Wendy advised that the OH ADP had submitted their response and suggested they ask services to send out the surveys rather than the OH ADP.

Michael Stewart advised that Isobel Nesbitt, the Scottish Government's Advisor on Workforce Development was visiting the Western Isles in November to meet with social work staff, community care and families. He thought there might be an opportunity to visit an ADP funded service. Action for Children was suggested however members could make suggestions when they were made aware of the meeting. Michael would issue the details on this meeting to Karen for distribution. Wendy advised Michael she would email him a paper on Child Protection which may be useful to him.

ACTION: Michael Stewart – Pass details on WFD meeting to Karen.

ACTION: Wendy Ingledeu – Pass Child Protection paper to Michael.

12.4 HOUSING SUPPORT WORKER UPDATE

The group were informed that the Housing Support Worker had recently taken up the post. It was suggested that if Shona Macleod, Hebrides Alpha Supported Accommodation was unable to attend the ADP December meeting to conduct a presentation that Donna Maclennan, Housing Support Worker would be asked.

ACTION: Karen Peteranna – Ask Housing Support Worker to conduct presentation if Shona Macleod is not available.

12.5 RISK REGISTER

Gordon Jamieson queried if the OH ADP required a risk register and it was suggested the OH ADP gauge other ADP's stand on this however the OH ADP should possibly invest in this good practice regardless to provide documented evidence of incidences. Wendy advised the group

the Freedom of Information (F.O.I.s) requests are never directly received by the OH ADP; they are requested to the NHS Western Isle and CnES.

ACTION: Karen Peteranna – Find out if other ADP's use risk registers.

12.6 ADP CHAIR

Gordon Macleod advised the group that he had been the OH ADP Chair for 4 years and although he had enjoyed the challenging times he no longer had the time due to other roles and responsibilities to fully commit to the ADP Chair role and it was now time to step aside and allow someone else to take on the role. Gordon confirmed he would still remain within the OH ADP as a member. Wendy stated that Gordon's hard work and commitment to date had been greatly appreciated by all.

It was noted that as the constitution stands Gordon Jamieson would be next in line to Chair the OH ADP. Wendy advised the group that Terms are issued to ADP's that provide guidance on Chair selection. Wendy would issue this paper to member and it was suggested the 'ADP Chair Selection' be added to the agenda for the December meeting.

ACTION: Wendy Ingledeu – Send Terms for ADP's including details on choosing a Chair to members.

13. DATE OF NEXT MEETING

The next ADP Members Group Meeting was scheduled for Wednesday 4th December 2013.