



**REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD –
22JUNE 2022**

REPORT ON: REDUCING HARM ASSOCIATED WITH DRUG USE

REPORT BY: CHIEF OFFICER

REPORT NO: DIJB41-2022

1.0 PURPOSE OF REPORT

Following the publication of the update report from the Dundee Drug Commission in March 2022, to update the Integration Joint Board on priority areas for improvement and progress to develop a replacement strategic framework and delivery plan for drug and alcohol recovery.

2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB):

- 2.1 Note the key areas of progress achieved over the last two years in reducing harm associated with drug use (section 4.1.2 to 4.1.4)
- 2.2 Note the findings contained within the Dundee Drug Commission Update report and Statement of Intent from Dundee Partnership leaders (section 4.2 and appendices 1 and 2).
- 2.3 Note the immediate priority areas for improvement identified by the Alcohol and Drugs Partnership (sections 4.2.4 to 4.2.6).
- 2.4 Note that the Dundee Partnership will consider on 22 June 2022 the proposals for the co-production and publication of a replacement strategic framework and delivery plan for drug and alcohol recovery (section 4.3).
- 2.5 Note that the Dundee Partnership will consider on 22 June 2022 a range of ongoing improvement activity and future commitments that, following further consultation and refinement, will be incorporated into the replacement strategic framework and delivery plan for drug and alcohol recovery (section 4.3 and appendix 3).
- 2.6 Instruct the Chief Officer to submit the replacement strategic framework and delivery plan to the Integration Joint Board following approval by the Dundee Partnership.

3.0 FINANCIAL IMPLICATIONS

- 3.1 The revised Strategic Framework and Delivery Plan for Drug and Alcohol Recovery will include details of the overall funding available to the ADP and Dundee Health and Social Care Partnership to deliver the ambitions of the plan. This funding consists of core budgets to deliver statutory services and ADP commissioning funding consisting of Scottish Government specific funding streams, CORRA funding and non-recurring funding from Dundee City Council. It is anticipated that approximately £2.7m will be spent through the ADP commissioning programme in 2022/23 compared with around £1.8m in 2021/22.

4.0 MAIN TEXT

4.1 Background

- 4.1.1 The original report of the Dundee Drugs Commission (the Commission) was published in August 2019 and included 16 recommendations for reducing drug deaths and responding to the impact of drug use in the city (report available at: <https://www.dundee.gov.uk/sites/default/files/publications/part1reportfinal.pdf>). In response, an action plan was developed on behalf of the Dundee Partnership which has been implemented and monitored by the Alcohol and Drugs Partnership (ADP). In February 2021, the Dundee Partnership invited the Commission to conduct a two-year review of progress against the recommendations made in their original report. The Commission was also asked to consider the impact of COVID-19, present new findings, including additional recommendations where required.
- 4.1.2 As part of the Dundee ADP's commitment to continuous improvement and to support the work the Commission they led a self-assessment review which presented evidence on the areas where progress had been achieved since the original Commission report and the remaining gaps (Article IV of the minute of meeting of this Committee of 23 August, 2021 Report 214-2021 refers). The self-assessment process included speaking with people affected by drug use, family members / carers, service providers and the workforce about the impact of drug related deaths, changes to pathways of care and support, personalisation of service provision and the development of a culture of collaborative working.
- 4.1.3 The self-assessment included recognition of considerable progress that has been made in key areas to reduce harm associated with drug use, including drug deaths, over the last two years. This has included:
- development and evaluation of a multi-agency, rapid response to non-fatal overdose (recently recognised as a sector leading approach in the COSAL Excellence Awards 2022);
 - enhanced capacity to delivery assertive outreach services through collaboration with third sector services, Dundee Drug and Alcohol Recovery Service (DDARS) and the SafeZone Bus;
 - establishing the Navigator Programme based in Ninewells Accident and Emergency to work alongside medical and nursing teams to offer support to people who have multiple and complex needs, including drug and alcohol use;
 - strengthening the approach to reviewing drug related deaths and non-fatal overdoses to include early trends monitoring, and commencing comprehensive clinical toxicology testing within NHS Tayside;
 - extending the availability and reach of naloxone across statutory services (including the Police carrying naloxone kits), third sector partners and non-drug treatment services. A peer naloxone training and supply project has also been established through collaboration between the Scottish Drugs Forum and Hillcrest Futures;
 - increased staffing within the DDARS service, including Non-Medical Prescribing nurses (3 of whom have been placed within the Children and Families Service) and 5 Band-5 nurses;
 - progressing the implementation of MAT standards, with key developments in relation to the agreement of a detailed project plan for a Shared Care Model in Dundee, implementation of harm reduction interventions as part of the treatment process, an expansion in the role of Community Pharmacies in treatment and care through implantation of an enhanced contract, development of a multi-agency residential

rehabilitation pathway with additional funding to support implementation led by a third sector service, and the development and testing of models for independent advocacy;

- agreeing of a clear Tayside wide pathway for the transition of substance use supports for people leaving prison and returning to the community and securing additional resource within third sector services to support implementation over a two-year period;
- enhancing our focus on prevention through the development of an Alcohol and Drug Prevention Framework that will be launched in the summer, alongside participation in the Planet Youth pilot;
- strengthening support for vulnerable families and vulnerable women, including additional investment in Children and Families Service supports to kinship carers, progressing a range of activities to support mainstreaming of gender sensitive services and supports and securing funding over a five-year period to establish a women's hub;
- establishing a peer support programme for Dundee, extending the number of SMART Recovery Groups operation in the city and partnering with national organisations to develop and test approaches to ensure meaningful involvement of people with lived / living experience in our strategic and service improvement activities; and,
- establishing a multi-agency Commissioning Sub-group of the Alcohol and Drugs Partnership, chaired by the Dundee Health and Social Care Partnership Chief Finance Officer, to further strengthen financial governance and develop an investment and commissioning plan.

4.1.4 Overall, the ADP assessed that reasonable progress had been made in implementation of 12 of the Commission's 16 original recommendations, with partial progress having been made in the remaining four. Specific areas identified for further improvement included responding to pressures and capacity issues within treatment services, accelerating progress with whole-system changed (including shared-care model with Primary Care and integrated approach with mental health), improving treatment options (including residential services), progressing a Lead Professional model, eliminating stigma, enhancing the focus on prevention and the need for improved communication with the workforce and other stakeholders.

4.1.5 Since the publication of the original Commission report in 2019 Scotland has seen a further 5% increase in drug-related deaths (1,339 deaths recorded in 2020). However, in Dundee drug-related deaths reduced from 72 in 2019 to 57 in 2020. Figures for 2021 will be published in August 2022.

4.2 Dundee Drug Commission Update Report and Initial Response

4.2.1 The Commission update report was published by the Dundee Partnership on 22 March 2022 (full report available at: https://www.dundeecity.gov.uk/sites/default/files/publications/ddc_review_-_part_1_-_the_report_-_final.pdf). The report states that the 16 recommendations from the original report are still valid and adds a further 12 recommendations for the Dundee Partnership to consider. Overall, the Commission concludes that, even when considering the significant impact of the COVID-19 pandemic, the extensive and genuine improvement efforts in Dundee to address drug deaths have not gone far enough, deep enough or fast enough. Their report states that people who access services and their families reported seeing transient changes rather than sustained improvement to the range and quality of services and supports available.

4.2.2 Despite this overall conclusion, the Commission report does welcome a range of significant developments and recognises that detailed plans have been developed to respond to many of the gaps that they identify within their recommendations. Some of the areas of progress highlighted within the report are: strengthened membership and governance arrangements within the ADP; progress made in relation to rapid responses to non-fatal overdoses, the extension of assertive outreach work and broadening of treatment options offered by the

Dundee Drug and Alcohol Recovery Service (DDARS); the implementation of gendered-approaches to service delivery; significantly improved engagement with child protection processes; and, the leadership role undertaken by the third sector, particularly in relation to inclusion of people with lived experience and tackling stigma. The Commission also express confidence that the Dundee Partnership has the full commitment and enthusiasm to progress much further over the coming years.

4.2.3 A full list of the Commission's new recommendations is provided in appendix 1. Some recommendations relate to strategic improvements required within the ADP and Dundee Partnership, whilst others have a more operational focus on supports and services provided by the Health and Social Care Partnership and third sector. The Commission report recommends that these 12 further recommendations are implemented over a 5-year period. Specific areas of focus within the recommendations include: enhanced communications of changes, improvements and challenges; enhanced approaches to monitoring needs, trends and performance; co-production of a Recovery-Orientated System of Care; a partnership wide approach to tackling stigma; the closure of Constitution House and movement of services into multi-agency, community settings; strengthening relationships with the third sector; and, implementation of a joint commissioning approach and re-balancing of budgets to support prevention, independent advocacy and outreach activities. Many of these areas align with the findings of the ADP's own self-assessment (see section 4.1.2).

4.2.4 Following the publication of the Commission report, leaders from across the Dundee Partnership published a statement of intent on 9 June 2022 (attached as appendix 2). The statement reasserts their commitment to providing a comprehensive, accessible, trauma-informed and compassionate response by harnessing the collective knowledge, skills and resources available across all community planning partners. Whilst noting that the Dundee Partnership's full response to the Commission report will be detailed in a revised strategic plan for the ADP (see section 4.3) the statement includes priority areas for action that will be accelerated wherever possible over the next 3 months:

- Reducing significant harm and Delivering the right care in the right place at the time – including planning the establishment of co-located, multi-disciplinary and community-based teams, accelerating implementation of the Medication Assisted Treatment Standards (particularly in relation to access to services and a 'no wrong door' approach), strengthening outreach work and independent advocacy, focusing on gendered-approaches and support for carers / family members (including children);
- City year of hope, kindness and compassion – co-producing a whole city response to vulnerable citizens impacted by trauma and adversities, including active contribution from citizens, communities, civic leaders, public bodies and the third and private sector and focusing on reducing stigma;
- Focus on prevention – expanding the focus on prevention work beyond the ADP to more effectively tackle the root causes of drug use, including a focus on poverty and deprivation and on trauma-informed leadership and practice; and,
- Empowerment of lived experience – through a commitment to co-production of the revised strategic plan, delivery plan and subsequent improvement activities.

4.2.5 In addition to these priority areas, leaders have also committed to inviting independent members to join local partnership arrangements to provide advice, support, leadership and challenge as improvement work progresses. This will further enhance the independent support and scrutiny already present within local multi and single agency arrangements, such as work with the scrutiny inspections that include within their scope elements of drug and alcohol service provision and clinical, care and professional governance arrangements for operational services. National independent support and scrutiny has been enhanced with the launch of the Medication Assisted Treatment Standards in May 2021. Performance against the standards is

scrutinised by the MAT Standard Implementation Team (MIST team) an independent group of experts. Compliance with each standard is RAG rated for benchmarking against other ADP's performance and will be published and available to the public for further external scrutiny. The MIST team also share learning and good practice between ADP localities and support ADP's to implement the standard, and representatives from Dundee have had a number of meetings with the expert group. Specific approaches to enhancing independent contributions to local partnership arrangements will be identified as part of the development of the revised strategic plan.

- 4.2.6 There has also been ongoing communication with both the Minister for Drug Policy and civil servants from the Scottish Government regarding the Commission recommendations, priority areas for improvement and the intention to publish a revised strategic plan. The Scottish Government has indicated their willingness to provide additional support to Dundee via national resources where there is an identified need for this. For example, through collaboration with the Scottish Government and as part of the resource offered to all partnerships across Scotland, a MAT Implementation Co-ordinator is to be identified for secondment to Dundee to accelerate local implementation.

4.3 Strategic Framework and Delivery Plan for Drug and Alcohol Recovery

- 4.3.1 The ADP, working with the Health and Social Care Partnership, has begun the process of preparing a replacement strategic framework for drug and alcohol recovery. This will replace the ADP's previous strategic plan (2018-2021) and the Action Plan for Change developed in response to the original report from the Commission. The framework is being developed not only to respond to recommendations made by the Commission over their two reports, but to provide a single, prioritised framework that addresses national policy priorities and local needs. Importantly, the revised framework will extend to cover alcohol related harm, as well as drugs. It will set out partner's ambitions, priorities and strategic programmes of work for the next 5-year period (reflecting the period of change acknowledged as being required by the Commission). The revised strategic framework will be supported by an annual delivery plan, overseen and scrutinised by the ADP. Both the framework and delivery plan will be available for public and wider stakeholder consultation by the end of the summer, with final versions being submitted to the Dundee Partnership for approval by the end of November 2022. An update on progress will be provided to the Dundee Partnership by the end of August 2022.
- 4.3.2 At the point of submission to the Dundee Partnership the framework and delivery plan will be supported by a full Integrated Impact Assessment (covering both statutory equality and fairness duties) and risk assessment. It is recognised that these are critical aspects of the development of the framework and plan; whilst it can be expected that they should have an overall positive impact on some of the most vulnerable citizens of Dundee the detail of any differential impacts across people with protected characteristics and who experience socioeconomic disadvantage require to be more fully understood and any corresponding mitigating actions identified. Integrated Impacts Assessments are best developed as part of the strategy process, drawing on the expertise and experiences of all stakeholders (including people with lived / living experience) and this will be prioritised as part of the work to take place before the end of August. Similarly, work will be carried out with stakeholders to assess any risks to full implementation, particularly of the delivery plan, with mitigating actions also being identified where required.
- 4.3.3 The framework and delivery plan will incorporate a range of ongoing programmes of work, alongside new commitments that have emerged from consideration of the Commission's review report. Current commitments, which will be subject to further consultation and refinement during the strategy development process, are set out in full in appendix 3. Some key commitments include:
- Full implementation of the MAT standards in-line with national requirements and timescales.
 - Enhancing 24/7 crisis care responses and integrated responses to drug and alcohol and mental health needs.

- Implementation of a Shared Care Programme with Primary Care and the third sector.
- Full implementation of the residential rehabilitation pathway.
- Enhancing the role of Community Pharmacies in delivering treatment and support to people who use drugs and alcohol.
- A continued focus on rapid response to non-fatal overdose and to learning from these incidents to inform prevention activity.
- Further developing approaches to provision of harm reduction activities in collaboration with people with lived / living experience.
- A range of actions to maintain and further strengthen supports to parents / carers and to children and young people, particularly those at risk of harm and to adolescents.
- A range of actions to enhance services and supports for vulnerable women.
- Activities to improve the use and reporting of data to inform service planning, improvement and evidence-based decision-making.
- Developing more opportunities for people with lived / living experience to meaningfully contribute to strategic planning and improvement.
- The progression of plans to improve public and workforce communication.

4.3.4 The revised strategic framework and delivery plan are being developed to sit within a wider community planning context that recognises poverty and deprivation and the range of trauma and adversities present across the population that contribute to high levels of drug and alcohol related harm (see appendix 4 for further rationale supporting an integrated protecting people approach). Whilst the ADP will have an important role in leading the development of the strategy and overseeing implementation, a broader range of Dundee Partnership strategic and governance groups will be expected to take an active role in addressing drug and alcohol issues particularly in relation to prevention activities.

4.3.5 This approach to developing the framework and plan is critical in decluttering the landscape, focusing resources effectively to support an increased pace of change, and enhancing transparency and accountability (by having a simple, clear and transparent plan against which progress can be measured). It will help to minimise the reporting burden on operational services (and supporting infrastructure) and enable the maximum capacity possible to be directed to driving forward programmes of change and improvement. It also reflects the learning gained from our experience of developing, implementing and monitoring the Action Plan for Change that was agreed following the original Commission report.

4.3.6 The process will be accelerated by making best use of existing information, including: materials from the last ADP strategic plan that remain relevant; existing needs assessment information; reports and briefings describing the strategic context (both locally and nationally) for drug and alcohol recovery work; and, materials from the recent ADP self-assessment and Commission reports. However, time will be required to ensure that the framework and delivery plan are co-produced with relevant stakeholders, including people with lived experience and workforce. This is crucial to ensure shared ownership and clarity of expectation from the outset. Time will also be required to develop elements of the framework and plan that focus on alcohol related harm.

4.3.7 It is intended that the revised framework and delivery plan will be supported by an ADP commissioning plan and a workforce plan for drug and alcohol services. The ADP has recently established a Commissioning Sub-Group chaired by the IJB's Chief Finance Officer who will lead the development of the commissioning plan once the strategic framework and delivery

plan have been agreed by the Dundee Partnership. This will articulate how resources available to the ADP and wider community planning partners will be invested over the next 5 years to support the achievement of the strategic vision, priorities and outcomes within the framework and the programmes of improvement work contained within the delivery plan. The workforce plan will be trauma-informed and will focus on both workforce development and wellbeing, reflect emerging evidence on workforce challenges and wellbeing across the drug and alcohol sector, as well as the consequences and learning from the pandemic period. Both of these supporting plans will be progressed following approval of the main framework and delivery plan. It is currently intended that they will be submitted to the ADP by the end of November 2022.

4.3.8 The implementation of the strategic framework and delivery plan will be supported by a range of funding streams that partners have received been and allocated. This includes:

- Core statutory services funding;
- National targeted investments direct from Scottish Government;
- National investments via CORRA; and,
- Non-recurring financial contribution from Dundee City Council.

5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues. The replacement strategic framework and delivery plan will be subject to an integrated impact assessment prior to approval by the Dundee Partnership.

6.0 RISK ASSESSMENT

6.1 This report has not been subject to a risk assessment as it does not require any policy or financial decisions at this time.

7.0 CONSULTATIONS

7.1 Members of the Dundee Partnership, members of the Chief Officers (Public Protection) Strategic Group, members of the Alcohol and Drug Partnership, Dundee City Council Leadership Team, the Chief Finance Officer, Heads of Service, Health and Community Care and the Clerk have been consulted in the preparation of this report.

8.0 DIRECTIONS

8.1 The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	X
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

9.0 BACKGROUND PAPERS

9.1 Medication Assisted Treatment (MAT) standards: Access, choice, support (Scottish Government, May 2021) - <https://www.gov.scot/binaries/content/documents/govscot/publications/independent-report/2021/05/medication-assisted-treatment-mat-standards-scotland-access-choice->

support/documents/medication-assisted-treatment-mat-standards-scotland-access-choice-support/medication-assisted-treatment-mat-standards-scotland-access-choice-support/govscot%3Adocument/medication-assisted-treatment-mat-standards-scotland-access-choice-support.pdf

Vicky Irons
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DATE: 8 June 2022

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Appendix 1

Dundee Drug Commission Update Report – Recommendations

Recommendation 1: The Dundee Partnership needs to update and expand its 'Action Plan for Change'. This must include an acknowledgement that all the recommendations and associated findings from the Commission's first report are still valid and need to be accounted for and encompassed within the updated plan. The response to all recommendations and findings (including those from both Commission reports), should be subject to some form of independent scrutiny to assess more accurately the progress that has been made. This would result in a more realistic assessment of the rate of progress and how much remains to be implemented further.

Recommendation 2: In light of the Commission's Review finding that the scale of the drug deaths emergency challenge in Dundee has been (unintentionally) underestimated, the Dundee Partnership needs to refocus its efforts and upscale its response in order to speed up the pace of change. The starting point for this is to seek expert help to design a plan for leadership (at all levels of leadership across the Dundee drug treatment sector) that identifies learning and mitigation strategies from the Covid-19 pandemic which could be applied to tackle the drug death emergency in Dundee (and Scotland).

Recommendation 3: The DADP should commit to the co-production and co-design of a Recovery Oriented System of Care (ROSC) for Dundee. The DADP and its partners should assess the extent to which the key elements of Recovery-Oriented Systems of Care and Services' are in place and jointly work to address any identified deficiencies. This work should include addressing any lack of shared understanding of Recovery Oriented Systems of Care or where current approaches and activities will diminish the chances of a ROSC being comprehensively delivered.

Recommendation 4: The Dundee Partnership is once again challenged and recommended to co-design (with all partners) and instigate a 'year of kindness and compassion' and must ensure that this is communicated widely, with a commitment to it being visible and experienced (felt) across the whole City. Additionally, all core and funded services should be tasked by the DADP with developing a plan for combating stigma and discrimination based on the core values of kindness, compassion, and hope. Each plan should be co-produced and co-designed in an equal partnership with those who use each service. Evidence of 'how' the plan is produced in such a partnership should be included in the submission to the DADP. Each plan should have an in-built mechanism for review – which should focus on 'lessons learned' and 'progress made'. Service providers should share their plans with each other to encourage joint learning and encourage working together. The need for organisational development support should be assessed and offered in order to enable all services to engage with this recommendation in a genuine and meaningful manner.

Recommendation 5: Joint commissioning of the whole substance use budget is required to ensure that a balanced portfolio of services and support is provided across the city. This will be the 'game changer' if funding is to be redistributed over the long-term to a better and improved balance between investment in prevention, treatment, and recovery provisions. The Dundee Partnership needs to demonstrate, vocalise and make visible its commitment to achieving the joint commissioning of the whole substance use budget, focusing on why this change is needed and the things that it can change and commit to – rather than focusing on the challenges that would stop this change happening. The first step to achieving a better balance to the portfolio of services in Dundee, which at the same time will provide improved outcomes and protection for individuals accessing services, should be to independently assess the need and scale of advocacy and assertive outreach provision for the City. The DADP should then subsequently enter into negotiations with all DADP partners to agree a plan for redistributing core resources to ensure that these provisions receive ongoing funding, and no longer have to compete for funding from short-term funding pots.

Recommendation 6: The Dundee Partnership needs to prioritise as a matter of urgency a plan for conducting a strategic independent Health Needs Assessment for the population of Dundee who have drug problems, that we recommended as a priority in our first report. It should be a global piece of work, synthesising the portfolio of items that are already in place with the changing picture, the wider context of people experiencing multiple deprivation and co-occurring illness especially where needs are distinct for Dundee and actions are possible locally. Without this it is impossible to reliably

evidence the actual service need across Dundee, which then compromises the ability of the DADP to ensure the correct balance of provisions are prioritised and funded.

Recommendation 7: The ADP needs to revise and update its Strategic Plan to take account of the full findings of the Commission's review. The ADP is advised to title the new Strategic Plan 'Responding to Drug Use with Kindness, Compassion and Hope' to ensure that the correct focus is applied to the strategy development. It should also include a strong workforce plan aimed at supporting the substance use workforce to respond effectively to the Commission's recommendations (as well as the continued impact of the Covid-19 pandemic).

Recommendation 8: The DADP should commit to repeating the Deeper Dive of Drug Related Death data (commissioned from Public Health Scotland) to track the changes in trends over time and should partner with an independent organisation (such as a university with appropriate capabilities) to interrogate the Deeper Dive data. This interrogation of the data should also incorporate learning from the 6-weekly meeting of the Tayside Drug Death Review Group, which completes a detailed, multi-agency review of Dundee Drug Deaths data (including relevant risk vulnerabilities). The DADP should also explore the provision (and resourcing) of Public Health drug checking within Dundee with external partners with appropriate capabilities to enable agile and rapid planning around drug use, and develop, harm reduction strategies and capabilities.

Recommendation 9: The DADP needs to develop an advanced communications strategy to ensure that transparency and visibility of its work and decision-making (including financial decision-making and planning) is significantly improved. This includes investment in keeping an updated website which hosts key documents (for example: DADP minutes and agendas; Strategy documents; Action Plans; and details of commissioning decisions and financial expenditure).

Recommendation 10: The Partnership needs to commit to closing Constitution House in the shortest possible timeframe (and definitely within the next 12 months). DDARS staff need to be transitioned out of Constitution House with arrangements agreed with Third Sector partners, community pharmacies and primary care to host nursing and social work staff in multi-agency teams. Careful consideration needs to be given to the oversight and assurance that will be required to facilitate a smooth transition, taking into account the impact on both those individuals using the service and the DDARS staff team. This transition will only be successful if the long-standing relationship difficulties experienced by Third Sector services with DDARS are reset, with trust and respect being demonstrated by all parties. We recommend that independent specialist facilitation support is provided to enable all services to improve communication and working relationships.

Recommendation 11: The Dundee Partnership needs to further develop and strengthen its relationship with the third sector. This needs careful attention to create the culture where the Third Sector feel safe to speak up and contribute to the equal and reciprocal partnership that we believe would make a seismic change in the culture across Dundee drug services. The test of progress in this regard will be the extent to which Statutory services are able to move away from only 'involving' the Third Sector in its plans towards a service culture where both Statutory and Third Sector services work hand-in-hand with those with lived experience and family members to co-produce and co-design future services.

Recommendation 12: The Dundee Partnership needs to fully support the implementation of the new community pharmacy contract and SLA. The level of professional support that will be required to effectively implement and provide ongoing support and monitoring for the proposed new community pharmacy contract will need to be kept under regular review and additional resources allocated as necessary. Consideration should be given to the engagement of Pharmacist Independent Prescribers (PIPs) as part of a multi-disciplinary DDARS prescribing workforce. A communications strategy needs to be developed with all pharmacies to highlight their responsibilities for patients with OST supervised and instalment prescriptions and the associated risks that planned or unplanned emergency closures can cause. All individual contingency plans should include alternative dispensing /prescribing arrangements for OST patients.

Appendix 2

Statement of Intent



9th JUNE 2022

STATEMENT OF INTENT TO ADDRESS HARM CAUSED BY DRUGS

Leaders from across the Dundee Partnership are issuing a renewed Statement of Intent following the publication of the Dundee Drug Commission's update report:

Addressing the harm caused to people who use drugs, their families and communities is a top priority for Dundee. We are committed to delivering the services and support that people need at every stage of their recovery from problems related to drug use.

As city leaders, we have reflected deeply on the Dundee Drugs Commission's findings. We accept that there is much more to be done to achieve a response that is comprehensive, accessible, trauma-informed and compassionate. The Alcohol and Drug Partnership will have an important role in leading this further improvement work, but as leaders we will ensure that all of our agencies play their part and we will review the leadership and membership of our local partnership arrangements to provide independent advice and support as we continue our improvement journey.

Our workforce has shown tremendous resilience throughout the COVID-19 pandemic. The knowledge, skills and experience of our collective workforce, both in the public and third sector, is one of the greatest assets we have in driving forward further changes in the way that we deliver services in the future. We are committed to fully engaging our people in the next phase of our improvement work and to supporting their health and wellbeing.

Our full response to the most recent findings of the Dundee Drug Commission will be detailed in a revised strategic plan for the Dundee Alcohol and Drug Partnership. This will be published by the end of the summer, setting out a five-year plan for whole system transformation and improvement. The plan will also be informed by priorities set nationally by the Scottish Government.

While we continue to work with people with lived experience, the wider public and our partners to develop our next strategic plan, we have identified some immediate priorities for action. Our work in these priority areas will start now – given the need to continue to make improvements at pace, we will not wait until our plan is published:

Reduce Significant Harm and Deliver the Right Care in the Right Place at the Right Time

- We accept that Constitution House should not be the main site for delivery of the Dundee Drug and Alcohol Recovery Service. Informed by the expertise of our workforce and stakeholders, we will bring forward proposals that support services to be delivered in the future by co-located, multi-disciplinary teams working from accessible, community-based locations. A timescale for moving service delivery to this model will be confirmed in the revised strategic plan.

- Accelerating our work to fully implement a recovery-orientated system of care, implementing the national Medication Assisted Treatment Standards and ensuring there is 'no wrong door' for people who use drugs and need our help and support. This will build on recent progress in implementing a shared care approach with primary care services, strengthening our approach to residential rehabilitation, assertive outreach provision, and immediate support for people identified as having experienced a non-fatal overdose. Enhancing the role of independent advocacy, gendered approaches to providing treatment and support, and support for carers and family members (including those who have tragically been bereaved) will be areas of particular focus in the short-term.
- Strengthening our relationship with third sector partners. As part of this, we are committed to continuing to listen to the third sector about their concerns and challenges and work collaboratively with them to jointly agree improvements. We will also support the third sector by advocating for change at a national level where their concerns cannot be resolved locally.

City Year of Hope, Kindness and Compassion

- Delivered by the whole city and supporting a compassionate response to the needs of citizens impacted by mental health issues, isolation, alcohol and drug use and other adversities as we emerge from the pandemic. We will be inviting Dundee citizens and communities to actively contribute and participate alongside civic leaders, public bodies, the third sector, and private sector.

Focus on Prevention

- We will take forward prevention approach that addresses the underlying causes of drug and alcohol use and is delivered through a collective effort across the whole Dundee Partnership. This will include a continued focus on the development and implementation of trauma-informed practice and leadership.

Empowerment of Lived Experience

- Our revised strategic plan will respond to the needs of local people and to what they have told us, through the work of the Drug Commission and our own self-assessment about their needs and priorities. We are committed ensuring that particular attention and respect is given to the contributions of people with lived and living experience of drug and alcohol use.

These are only our initial commitments; the revised strategic plan for drug and alcohol recovery will set out in more detail how we will deliver and finance these and other aspects of the Commission's recommendations and national policy in much greater detail. As leaders we commit to identifying additional resources as part of the development of the revised strategic plan to ensure that it can be implemented fully and at pace.

We will continue to work closely across the Scottish Government, Dundee City Council, NHS Tayside Board and the Integration Joint Board to demonstrate and publicly report on our progress over the next five years.

We believe that our collective effort can and will deliver transformative change for some of the most vulnerable citizens of Dundee, enabling them to recover and to thrive.

Signatories

Grant Archibald, NHS Tayside

Greg Colgan, Dundee City Council

Vicky Irons, Dundee Health and Social Care Partnership

Phil Davison, Police Scotland

Christina Cooper, DVVA

Appendix 3

Alcohol and Drug Partnership Commitments

Dundee Drug Commission Recommendations (summarised – see appendix 1 for full wording)	Key National and Local Policy Drivers / Alignment	ADP Commitments (*subject to refinement through consultation)	Lead Partner Agency (*subject to refinement through consultation)	Target Timescale (*subject to refinement through consultation)
<p>Reduce significant harms linked to drug and alcohol use by delivering the right care in the right place at the right time</p> <p>Draft outcome measures for consultation and refinement:</p> <ul style="list-style-type: none"> • Reduction in the number of alcohol and drug related deaths in the city. • Reduction in the number of Non-Fatal Overdoses in the city. • Reduction in the number of children and young people significantly affected by parental¹, or their own drug and/or alcohol use. • Reduction in the incidence of violence related to drug and/or alcohol use. • Reduction in suicides where drug and/or alcohol use was a contributory factor. • Ensure evidence-based harm reduction is offered across the city (key indicators include: Blood Borne Virus diagnoses, increased injecting equipment provision, increased number of people fully vaccinated, reduction in hospital admissions for community acquired wound infections). • Those with lived experience of drug and/or alcohol use report receiving seamless person-centred care and support that meets their essential health and social care needs for as long as necessary. • Health, social care² and community justice services³ meet prescribed standards of care and delivery targets in a co-ordinated way, and in a manner that people can easily understand and navigate. • People affected by drug and/or alcohol use describe receiving holistic care that: addresses their physical and mental health needs; includes access to preventative programmes; provides support to manage chronic diseases; and addresses a range of wider social and wellbeing needs (including, for example, housing, education, training and employment, parenting support). • Stigma of, and discrimination against, people affected by drug and/or alcohol use is eliminated. • Increasing proportions of people who have used drugs and/or alcohol describe themselves as in Recovery. • Those with lived experience feel they are able to constructively contribute to the design, delivery and future development of care and support services. 				
2022 Report	National Mission	Work with the Scottish Government MIST Team to deliver MAT Standards.	Dundee Health and Social Care	31 March 2023

¹ Encompassing parents and kinship carers

² Including Children and Families

³ Including HMP Perth

<ul style="list-style-type: none"> Recommendation 3 – co-production and co-design of Recovery Orientated System of Care. <p>2019 Report</p> <ul style="list-style-type: none"> Recommendation 5 – establish meaningful involvement of people with lived experience, their families and advocates. Recommendation 7 – choice of accessing full menu of services (including community and / or residential) support should be available. Recommendation 8 – Services offered by DDARS should be delivered through whole system model of care. Recommendation 9 – Reframe all substance use services to prioritise access, retention, quality of care and safety. Recommendation 10 – involvement of primary care and shared care models. Recommendation 13 – Full integration of substance use and 	<ul style="list-style-type: none"> MAT Standards - all Emergency life-saving interventions Residential Rehabilitation Evidence-led harm reduction Empowering people to see support Supporting people with multiple and complex needs Bringing voices of lived experience into decision-making and services provision Addressing stigma Growing and empowering community groups Supporting children and families Treatment access standard <p>Programme for Government</p> <ul style="list-style-type: none"> Non-fatal overdose response Assertive outreach Whole family approaches 		Partnership / Third Sector	
		Develop an operational and workforce plan setting out the steps necessary to ensure all treatment services sustainably meet waiting times and MAT Standards.	Dundee Health and Social Care Partnership	31 August 2022
		Implement test of change that will focus on embedding systematic pathways to same-day prescribing starting August 2022 and continuing to March 2023.	Dundee Health and Social Care Partnership	31 March 2023
		Detailed proposals developed in partnership with the workforce and stakeholders to support services currently delivered from Constitution House to be delivered in the future by co-located, multi-disciplinary teams working from accessible, community-based locations.	Dundee Health and Social Care Partnership	Project plan developed by 31 October 2022
		Develop a detailed project plan for the remaining duration of the Working Better Together and Pathfinder Projects.	Working Better Together Steering Group HIS	31 October 2022
		Deliver an enhanced 24/7 crisis care response, including the delivery of Distress Brief Interventions and appropriate follow-on support.	Dundee Health and Social Care Partnership	31 March 2023
		Implementation of the Shared Care Programme with Primary Care, including:	Dundee Health and Social Care Partnership / Third Sector Management Group	31 March 2024
		<ul style="list-style-type: none"> Agreement and roll out of holistic SLA with Primary Care. Development of third sector keyworker model. 		31 December 2022

mental health services and support.	Rights, Respect and Recovery – developing a recovery orientated system of care	Full implementation of the residential rehabilitation pathway, with an increase in number of people accessing residential rehabilitation and further development of the pre and post rehabilitation support.	Dundee Health and Social Care Partnership	31 March 2023
	National Trauma Framework	Appoint a Tayside NFOD co-ordinator to sustain and develop the NFOD pathway.	NHS Tayside Public Health	31 October 2022
	Living Life Well			
	Dundee Mental Health and Wellbeing Strategy	Work with third sector partners to identify longer-term funding solutions to sustain assertive outreach provision, including further options for accessing external funding.	ADP Commissioning Group	31 March 2023
		Continue to explore options for sustaining and expanding the role of independent advocacy.	Dundee Health and Social Care Partnership / Third Sector	31 March 2023
		Support the new provision for bereaved carers and families funded by the CORRA foundation.	Positive Steps / Alcohol and Drugs Partnership	6 monthly update reports to ADP
		Support and monitor the development of the new Kinship-carers' team within Dundee City Council, Children and Families Service.	Children and Families Service	6 monthly update reports to ADP
		Provide targeted support to families from co-located Social Work and Substance Use Nurses.	Dundee Health and Social Care Partnership / Children and Families Service	6 monthly update reports to ADP
	Provide targeted Pause support to women who use drugs and alcohol and are at risk of pregnancy and associated Social Work intervention.	Dundee Health and Social Care Partnership / Children and Families Service	6 monthly update reports to ADP	

		Develop and implement a shared definition / approach to recovery to inform Recovery Orientated System of Care development.	Resilient Communities Group	30 November 2022
		Develop collaborative programme of work between HMP Perth, the Community Justice Services and DHSCP to strengthen recovery processes for those returning to communities from prison.	Children and Families Service / Dundee Health and Social Care Partnership	Monthly update reports to ADP
		Develop improved pathways of care to support people who use drugs and alcohol to access acute health care and care for management of chronic diseases (for example, diabetes and chronic lung disease).	NHS Tayside Public Health	31 December 2023
		Develop a collaborative programme of work between statutory services, third sector services and people with lived/living experience to deliver effective, evidenced-based harm reduction (encompassing injecting equipment provision, Blood Borne Virus prevention, overdose prevention and wound care in community, hospital and justice settings).	NHS Tayside Public Health	31 March 2023 (some elements will be delivered earlier in-line with MAT standard 4)
2022 Report <ul style="list-style-type: none"> Recommendation 5 – joint commissioning of the whole substance use budget to ensure a 	Scottish Government Partnership Delivery Framework National Mission	Develop adult social care procurement guidance to support collaborative commissioning and improve transparency of funding allocations.	Dundee Health and Social Care Partnership	31 December 2022

<p>balanced portfolio of services and supports. Independently assess the need and scale of advocacy and assertive outreach and progress redistribution of core resources to support provision.</p> <p>See recommendation 1 for commitments relating to assertive outreach and advocacy.</p> <p>2019 Report</p> <ul style="list-style-type: none"> Recommendation 6 – level the ‘playing field’ to ensure all partners, statutory and third sector, are held equally accountable 	<ul style="list-style-type: none"> MAT Standards 3, 4, 8 Emergency life-saving interventions Evidence-led harm reduction Supporting people with multiple and complex needs <p>Programme for Government</p> <ul style="list-style-type: none"> Assertive outreach 	Introduce adult social care procurement framework to enhance transparency of funding allocations.	Dundee Health and Social Care Partnership	31 December 2022
		Develop ADP commissioning and investment plan.	ADP Commissioning Group	30 November 2022
		Work with NHS Tayside Blood-Borne Virus Managed Care Network to progress joint commissioning around treatment and care with harm reduction services.	ADP Commissioning Group	31 December 2022
		Review Children and Families Service commissioning of services to parents / carers and children and young people affected by drug and alcohol use.	Children and Families Service	31 December 2022
<p>2022 Report</p> <ul style="list-style-type: none"> Recommendation 8 – commit to repeating the Deeper Dive of Drug Related Death data to track changes in trends over time and partner with an independent organisation to interrogate this, including data from the Drug Death Review Group. Explore the provision 	<p>National Mission</p> <ul style="list-style-type: none"> Evidence-led harm reduction Supporting people with complex needs Improving services Learning and improving data / intelligence 	Provide proposal to the ADP on the development of an intelligence-led approach to prioritisation and commissioning, including an ongoing programme of focused needs assessment, enhanced analysis of NFOD data and drug trends intelligence, and improving data availability from DAISy implementation.	NHS Tayside Public Health	30 September 2022
		Review interfaces between Drug Death Review Group and other process focused on learning from deaths / serious harm.	Chief Officers Group	31 March 2023

<p>(and resourcing) of Public Health drug checking within Dundee with external partners.</p> <p>2019 Report</p> <ul style="list-style-type: none"> Recommendation 6 – learn from things that have gone wrong – attention to continuous improvement to benefit others who are vulnerable. 	<p>Develop the Gendered Services Group dataset to improve understanding of complexities faced by women and influencing on future service developments.</p>	<p>Gendered Services Group</p>	<p>31 October 2023</p>
	<p>As part of the overall approach to improve intelligence-based decision-making process, NHS Tayside Public Health will continue to lead production of the comprehensive Tayside drug deaths annual report, adding to and improving this as data quality allows and responding to any requests from ADPs for additional analysis.</p>	<p>NHS Tayside Public Health</p>	<p>Annually</p>
	<p>Improve quality and reporting of data across all MAT standards as part of the national programme for delivery of MAT standards.</p>	<p>NHS Tayside Public Health</p>	<p>31 March 2023</p>
	<p>Ensure that the ADP receives information about the findings of all quality assurance activities with relevance in relation to drug and alcohol issues (for example, quality assurance conducted by the other Protecting People Committees or that reflect the quality of support provided to vulnerable people).</p>	<p>Protecting People Strategic Support Team / All ADP members</p>	<p>31 October 2022</p>
	<p>Continue to participate in the national pilot to develop drug checking service in Dundee, including preparing for an application for relevant licenses from the Home Office.</p>	<p>NHS Tayside Public Health / Hillcrest Futures / Police Scotland / University of Dundee</p>	<p>To be agreed dependent on national timescales.</p>

<p>2022 Report</p> <ul style="list-style-type: none"> Recommendation 10 – the Partnership needs to commit to closing Constitution House in the shortest possible timeframe. DDARS staff need to be transitioned through arrangements with the third sector, community pharmacies and primary care. 	<p>National Mission</p> <ul style="list-style-type: none"> MAT Standards 1, 2, 3, 4, 5, 6, 8, 9, 10 Emergency life-saving interventions Evidence-led harm reduction Supporting people with complex needs Addressing stigma Supporting children and families Treatment access standard <p>Programme for Government</p> <ul style="list-style-type: none"> Non-fatal overdose response Assertive outreach Whole family approaches <p>Rights, Respect and Recovery – developing a recovery orientated system of care</p> <p>National Trauma Framework</p> <p>Living Life Well</p> <p>Dundee Mental Health and Wellbeing Strategy</p>	<p>Develop proposal with workforce and other stakeholders to transition services currently delivered from Constitution House to supports delivery from alternative sites as part of co-located, multi-disciplinary teams working from accessible, community-based locations.</p> <p>Explore options for delivery of community-based, multi-disciplinary services as part of establishment of Dundee Women’s Hub and the Bella Centre.</p>	<p>Dundee Health and Social Care Partnership</p> <p>Gendered Services Group</p>	<p>Project plan developed by 31 October 2022</p> <p>31 October 2023</p>
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<p>2022 Report</p> <ul style="list-style-type: none"> Recommendation 12 – fully support the implementation of the new community pharmacy contract and SLA. Consideration should be given to the engagement of Pharmacist Independent Prescribers as part of the multi-disciplinary DDARs prescribing workforce. A communications strategy should be developed for pharmacies regarding risks of closures (planned and unplanned) and contingency planning arrangements strengthened. <p>2019 Report</p> <ul style="list-style-type: none"> Recommendation 11 – review and refresh the community pharmacy model for OST. 	<p>National Mission</p> <ul style="list-style-type: none"> MAT standards 1 to 5 Treatment access standard 	<p>Continue to closely monitor the implementation of the new enhanced Community Pharmacy Contract and Service Level Agreement (SLA) through the Tayside Community Pharmacy Lead. Regular update reports will continue being available to the Dundee ADP.</p>	<p>Dundee Health and Social Care Partnership / NHS Tayside</p>	<p>6 monthly update report to ADP</p>
	<p>Programme for Government</p> <ul style="list-style-type: none"> Non-fatal overdose response Evidence-led harm reduction Supporting people with complex needs 	<p>As the role in delivering care to those affected by drug and alcohol use by Community Pharmacies expands, there will be a review of the SLA with the possibility of additional resources required.</p>	<p>NHS Tayside</p>	<p>30 November 2023</p>
	<p>Rights, Respect and Recovery – developing a recovery orientated system of care</p>	<p>Include the enhanced role of Community Pharmacies within the ADP commissioning and investment Plan.</p>	<p>ADP Commissioning Group</p>	<p>30 November 2022</p>
		<p>Deliver training to all Community Pharmacies to support delivery of high-quality, evidence-based harm reduction.</p>	<p>NHS Tayside Public Health</p>	<p>31 July 2023</p>
	<p>Consider options for enhancing the delivery of OST via NHS Tayside Specialist Pharmacists.</p>	<p>NHS Tayside / Dundee Health and Social Care Partnership</p>	<p>To be agreed.</p>	
<p>2019 Report</p> <ul style="list-style-type: none"> Recommendation 15 – ensure the needs of women who experience problems with drugs are assessed and addressed via adoption of gender- 	<p>National Mission</p> <ul style="list-style-type: none"> MAT standard 10 Supporting people with complex needs Addressing stigma Supporting children and families 	<p>Progress with the gendered services training to all staff within statutory and third sector organisations, including commitment to train DDARS staff teams by end of July 2022.</p>	<p>Gendered Services Group</p>	<p>31 March 2023</p>

mainstreaming and gender-sensitive approaches to service planning.	Rights, Respect and Recovery – developing a recovery orientated system of care	Open Dundee Women’s Hub.	Gendered Services Group	30 April 2023
	National Trauma Framework	Launch Dundee Trauma Implementation Plan and supporting managers briefings.	Trauma Steering Group	31 August 2022
	Equally Safe Dundee Violence Against Women strategy and delivery plan	Work with all organisations, including third sector partners to support the implementation of plans for gendered approaches to their work.	Gendered Services Group	31 October 2023
Promote cultures of kindness, compassion and hope, tackle stigma and discrimination and embed trauma-informed approaches				
Draft outcome measures for consultation and refinement:				
<ul style="list-style-type: none"> • All statutory and commissioned services have in place systems to gather quantitative and qualitative evidence in respect of service user experience⁴ and can evidence how this is taken into account in service delivery, planning and improvement. • People with lived experience report being treated with dignity and respect by service providers. • People with lived experience report reductions in their experience of stigma and disadvantage in services. • All statutory and commissioned services can evidence the capacity, policies and practice arrangements to deliver person centred care and support. • Services can evidence that trauma informed practice is embedded within person centred care and support systems. • All statutory and commissioned services can evidence appropriate staff training and support to deliver person centred and trauma informed care and support. • The workforce across all statutory and commissioned services report feeling valued and that organisational arrangements allow them to adequately fulfil their role. • All statutory and commissioned services can evidence the capacity, policies and practice arrangements to deliver a trauma-informed approach to staff wellbeing and to valuing lived experience within the workforce. 				
2022 Report <ul style="list-style-type: none"> • Recommendation 4- design and instigate a ‘year of kindness and compassion’. All core funded services to develop a plan for 	National Mission <ul style="list-style-type: none"> • MAT standards - all • Empowering people to see support • Bringing voices of lived experience 	Plan and implement a City year of kindness, compassion and hope as a collaboration between people with lived experience, communities, statutory/third/private sector organisations and faith groups.	Protecting People Strategic Support Team / Resilient Communities Group / Trauma Steering group / Dundee Partnership	Starting August 2022

⁴ This is an expectation of MAT Standards

<p>combatting stigma and discrimination, with in-built mechanism for review.</p> <p>2019 Report</p> <ul style="list-style-type: none"> • Recommendation 2 – challenge and eliminate stigma and ensure everyone is treated in a professional and respectful manner. • Recommendation 3 – language matters. 	<p>into decision-making and services provision</p> <ul style="list-style-type: none"> • Addressing stigma • Growing and empowering community groups 			
		<p>Pilot of 'Responding to Poverty and Health Inequalities Training' including poverty sensitive practice, substance use, stigma and supporting recovery.</p>	<p>Community Health Team</p>	<p>31 December 2022</p>
		<p>Evaluate Language Matters Campaign and propose future approach</p>	<p>Public Health / Community Health Team</p>	<p>31 March 2023</p>
		<p>Continue to implement activity to confront and address stigma, including implementation and evaluation plans that follow an evidence-based approach and align to the ADP's adoption of the Anti-Stigma Commitment.</p>	<p>Community Health Team / Resilient Communities Group / Protecting People Strategic Support Team</p>	<p>6 monthly update report to ADP</p>

Reduce the enduring impact of drug and alcohol use through an increased focus on prevention

Draft outcome measures for consultation and refinement:

- Reduction in the prevalence rate of problematic drug and alcohol⁵ use in the city.
- Reduction in A&E attendances where the alcohol or drug use are a contributing factor.
- Reduction in the number of children and young people on the child protection register where the impact of drug or alcohol use is a contributory factor to registration, with children and families supported at lower /early levels of intervention.
- Families where drug and/or alcohol use is identified as being a significant risk factor report feeling appropriately supported.
- Reduction in the incidence of violence related to drug and/or alcohol use.
- Reduction in suicides where drug and/or alcohol use was a contributory factor.

⁵ Using data from Scottish Public Health Observatory and the Scottish Health Survey etc.

<p>2019 Report</p> <ul style="list-style-type: none"> Recommendation 14 – address the root causes of drug problems. Recommendation 16 – attend to the intergenerational nature of substance use problems and place safety and wellbeing of children at the heart of all planning, alongside proactive support for parents. Explore the creation of family support workers in the third sector. <p>See recommendation 8 re: ongoing cross-partnership working on gendered services.</p>	<p>National Mission</p> <ul style="list-style-type: none"> Linking with policies on poverty, deprivation, trauma and ACES Addressing stigma Supporting children and families 	Continued activity to implement Dundee's Trauma Implementation Plan.	Trauma Steering Group	Annual update report to be provided to the ADP
	<p>Programme for Government</p> <ul style="list-style-type: none"> Whole families approach 	Progress implementation of the Trauma-Informed Practice Service Specific Toolkit for substance use services.	Dundee Health and Social Care Partnership	6 monthly reports to ADP
	<p>Rights, Respect and Recovery</p> <ul style="list-style-type: none"> Prevention and Early Intervention Getting it right for children, young people and families 	Ensure that parents / carers affected by drug and alcohol use receive timely support that enables them to sustain nurturing parenting and that ensures children are supported and protected from harm. This includes a commitment to develop a family support hub.	Children and Families Service	6 monthly reports to ADP
	<p>Families Affected by Drug and Alcohol use in Scotland: A Framework for Holistic Whole Family Approaches and Family Inclusive Practice</p>	Further improve joint working with adult treatment services.	Children and Families Service / Dundee Health and Social Care Partnership	31 March 2023
	<p>The Promise</p>	Partnership with WRASAC to enhance capacity for delivery of trauma-informed training during 2022/23.	Trauma Steering Group	31 March 2023
	<p>National Trauma Framework</p>	Completion and publication of ADP Prevention Framework (including the development of a website).	Prevention Group	31 October 2022

	Child Protection Committee delivery plan	Develop a three-tier approach to tackling commercial sexual exploitation.	Gendered Services Group	31 October 2023
	Violence Against Women strategy and delivery plan			
	Dundee Trauma Implementation Plan	Implement the Planet Youth (also known as Youth in Iceland) model to support children and young people across all Dundee secondary schools.	Children and Families Service	30 June 2025
	Our Promise to Dundee's Children and Young People			
	Fairness and Poverty responses	Complete benchmarking and self-assessment against the Prevention Framework by end of March 2023.	All relevant organisations	31 March 2023
	Findings for public protection case reviews.			
		Develop model for local implementation of contextual safeguarding approach.	Vulnerable Adolescent Partnership	6 monthly updates to ADP
		Progress the implementation of recommendations from review of services for vulnerable and at-risk adolescents.	Children and Families Service	6 monthly updates to ADP
	Complete benchmarking against framework for holistic family support and family inclusive practice.	Children and Families Service / Dundee Health and Social Care Partnership	To be agreed.	
	Consider how Dundee allocation of Whole Family Wellbeing Fund (from Scottish Government) can be utilised to enhance responses to families impacted by drug and alcohol use.	Children and Families Service / Dundee Health and Social Care Partnership / Third Sector	Following Scottish Government confirmation of Dundee allocation	
Empower people with lived experience to participate in and influence decision-making, commissioning, planning and improvement				

Draft outcome measures for consultation and refinement:

- Those with lived experience report that at both an individual and a collective level their views are listened to and respected and their insights are given weight in decisions about their care and treatment.
- Clearly identifiable mechanisms are in place across all tiers of care and treatment services to consistently gather feedback on service user experience and to review this regularly.
- All major service developments can evidence how those with lived experience will be engaged from the outset in the design and decision-making process and are appropriately involved in the delivery of change
- An increasing proportion of the workforce, paid or unpaid, brings expertise through lived experience.
- Workforce plans describe and implement a pathway for developing and supporting cohorts of people with lived experience into relevant positions.

<p>2019 Report</p> <ul style="list-style-type: none"> • Recommendation 5 – establish meaningful involvement of people with lived experience, their families and advocates. 	<p>National Mission</p> <ul style="list-style-type: none"> • MAT Standards - all • Empowering people to see support • Bringing voices of lived experience into decision-making and services provision • Addressing stigma • Growing and empowering community groups • Learning and improving data / intelligence 	<p>In partnership with DVVA continue to expand Peer Recovery Network / mutual aid.</p>	<p>DVVA</p>	<p>31 March 2023</p>
		<p>Work with MIST and the Scottish Recovery Consortium to develop approaches that gather and learn from experiential information through engagement, involvement and decision-making when implementing the MAT standards.</p>	<p>Dundee Health and Social Care Partnership</p>	<p>31 March 2023</p>
		<p>Develop and implement approaches that evidence all transformation and improvement programmes have been meaningfully informed by people with lived experience, including contributions to planning and decision-making.</p>	<p>DVVA</p>	<p>31 March 2023</p>

National Trauma Framework	Progress partnership with the Improvement Service and Resilience Learning Partnership to develop our meaningful and safe local approach to the direct involvement of people with lived experience in strategic planning and service development.	Protecting People Strategic Support Team	31 March 2023
	Continued implementation of Gendered Services Project, currently funded to October 2023.	Gendered Service Project	31 October 2023
	Establishment of opportunities for workforce with lived experience to influence service design and delivery and wider organisational culture.	Trauma Steering Group	31 March 2023
	Implementation of Child Protection Committee Children and Young People's Charter and engagement group action plan.	Child Protection Committee	31 March 2023

Ensure appropriate and effective governance arrangements and strengthen communications with stakeholders

Draft outcome measures for consultation and refinement:

- There are robust strategic and operational plans across the span of the ADP, other relevant Community Planning fora and within individual partners that articulate actions to be taken, anticipated outcomes and how progress will be monitored.
- Lines of accountability are clear, and partners fulfil agreed responsibilities.
- Large scale change programmes can evidence sound project management arrangements and delivery to anticipated timescales.
- Adequate arrangements are in place to identify and mitigate significant risks.
- There is clarity about resource requirements and commissioning arrangements can evidence the impact and effectiveness of investments.
- There is an improved understanding of the roles and priorities of the ADP within a wider protecting people approach and partners and stakeholder support for those.
- Key stakeholders, particularly those with lived experience and the multi-agency workforce, are confident that their views are listened to, respected and understood and that there is a dialogue that is contributing to positive change.
- There is public confidence that the ADP and partners have sufficiently prioritised tackling the harms associated with drugs and alcohol and are making progress on reducing those.

<p>2022 Report</p> <ul style="list-style-type: none"> Recommendation 1 – expand Action Plan for Change and enhance independent scrutiny. Recommendation 7 – the ADP needs to revise and update its strategic plan to take account of the findings of the Commission. It should also include a strong workforce plan. 	<p>Scottish Government Partnership Delivery Framework</p> <p>National Mission</p> <ul style="list-style-type: none"> Bringing voices of lived experience into decision-making and services provision Developing a skilled workforce <p>MAT Standard Implementation Team (MIST) benchmarking</p> <p>NHS Scotland Workforce Planning Guidance</p>	<p>Develop replacement 5-year strategic framework and delivery plan.</p>	<p>Alcohol and Drugs Partnership</p>	<p>30 November 2022 (draft for public and stakeholder consultation by end of summer)</p>
		<p>Develop partnership workforce plan for drug and alcohol workforce.</p>	<p>Dundee Health and Social Care Partnership / Third Sector</p>	<p>30 November 2022</p>
		<p>All transformation and improvement programmes to be support by a robust Project Initiation Document, including setting out supporting resources, governance and reporting arrangements.</p>	<p>Alcohol and Drugs Partnership</p>	<p>Ongoing monitoring by ADP</p>
		<p>ADP to review governance structure and develop approach that directly supports implementation of strategic framework and delivery plan.</p>	<p>Alcohol and Drugs Partnership</p>	<p>31 October 2022</p>
		<p>Develop a local plan to implement the learning and recommendations from the Dundee Staff Burnout research and report delivered by SDF.</p>	<p>Alcohol and Drugs Partnership / Substance Use Services Group / Learning and Organisational Development Teams</p>	<p>30 November 2022 (as part of development of workforce plan)</p>
<p>2022 Report</p> <ul style="list-style-type: none"> Recommendation 2 – accelerate pace of 	<p>Scottish Government Partnership Delivery Framework</p>	<p>Enhance independent leadership, support and challenge within local partnership arrangements.</p>	<p>Chief Officers Group in collaboration with ADP</p>	<p>Following organisational development session</p>

<p>change and engage expert help to design a plan for leadership.</p> <p>2019 Report</p> <ul style="list-style-type: none"> Recommendation 1 – Achieve the required standard of leadership. 	<p>National Mission</p> <ul style="list-style-type: none"> Developing a skilled workforce <p>NHS Scotland Workforce Planning Guidance</p>	<p>Review of third sector representation within ADP and related sub-groups to promote meaningful contribution and influence.</p>	<p>Alcohol and Drugs Partnership</p>	<p>31 August 2022</p>
		<p>Provide focused, facilitated organisational development session to the ADP to strengthen collaborative working and leadership.</p>	<p>Alcohol and Drugs Partnership</p>	<p>31 August 2022</p>
		<p>Implement recommendations from COG short-life working group on workforce recognition.</p>	<p>COG Short-Life Working Group</p>	<p>31 October 2022</p>

<p>2022 Report</p> <ul style="list-style-type: none"> Recommendation 6 – conduct a strategic Health Needs Assessment for the population of Dundee who have drug problems. <p>2019 Report</p> <ul style="list-style-type: none"> Recommendation 12 – commission a comprehensive, independent Health Needs Assessment for people who experience problems with drugs. 	<p>National Mission</p> <ul style="list-style-type: none"> Linking with policies on poverty, deprivation, trauma and ACES Supporting people with complex needs Improving services Learning and improving data / intelligence 	<p>Tayside Needs Assessment Steering Group to develop and support delivery of a programme of work in consultation with the ADP. This will begin with a needs assessment for users of Benzodiazepines.</p>	<p>Tayside Needs Assessment Steering Group</p>	<p>6 monthly updates to ADP (Benzodiazepines needs assessment by 31 October 2022)</p>
<p>2022 Report</p> <ul style="list-style-type: none"> Recommendation 9 – develop an advanced communications strategy to ensure transparency and visibility of work and decision-making is significantly improved. Invest in keeping an updated website. 	<p>National Mission</p> <ul style="list-style-type: none"> Empowering people to seek support Bringing voices of lived experience into decision-making and services provision Addressing stigma Developing a skilled workforce 	<p>Finalise Protecting People Workforce Communications Plan.</p>	<p>COG Short-Life Working Group</p>	<p>31 October 2022</p>
		<p>Completion and publication of ADP Prevention Framework (including the development of a website).</p>	<p>Prevention Group</p>	<p>31 October 2022</p>
		<p>Establish Alcohol and Drug Partnership section of the Protecting People in Dundee website.</p>	<p>Protecting People Strategic Support Team</p>	<p>31 October 2022</p>

		Plan and undertake a programme of listening / engagement session with frontline staff across the multi-agency workforce in collaboration with staff side representatives.	Dundee Health and Social Care Partnership / NHS Tayside / DVVA	31 December 2022
<p>2022 Report</p> <ul style="list-style-type: none"> Recommendation 11 – The Dundee Partnership needs to further develop and strengthen its relationship with the third sector. <p>2019 Report</p> <ul style="list-style-type: none"> Recommendation 6 – level the ‘playing field’ to ensure all partners, statutory and third sector, are held equally accountable. 	<p>National Mission</p> <ul style="list-style-type: none"> Improving services Growing and empowering community groups 	Series of open forum discussion with third sector beginning in July 2022 with aim to agree further commitments for incorporation into the strategic framework and delivery plan. To cover areas including communication, quality assurance, collaborative commissioning and service planning.	Protecting People Strategic Support Team / DVVA	31 August 2022

Appendix 4

Integrated Protecting People Approach



