

**ABERDEEN CITY ALCOHOL AND DRUGS PARTNERSHIP**

**Meeting held Friday 10<sup>th</sup> March 2017 at 9.30am  
Committee Room 4, Town House, Aberdeen**

**Present:**

Helen Shanks, Head of Inclusion, Education & Childrens Services,  
ACC (Chair)  
Alex Stephen, Director of Finance & Business, Health & Social Care  
Partnership  
Kevin Wallace, Chief Inspector, Police Scotland  
Luan Grugeon, Chair, Alcohol, Drugs & BBV Forum  
Lauren Catto, Health Improvement for Schools, Curriculum Team,  
Education & Childrens Services, ACC  
Councillor Alan Donnelly, ACC (for part of meeting)  
Aileen Davidson, Civic Forum  
Gordon Riddel, Station Manager, SFRS  
Dermot Craig, Chair of AiR  
Sandy Kelman, Team Leader, Aberdeen City ADP  
Simon Rayner, Development Manager for Integrated Services,  
NHS Grampian  
Fraser Hoggan, Development Officer, Aberdeen City ADP

Carol Deans (Note)

**1. Welcome**

Helen Shanks welcomed everyone and thanked them for accommodating the change of date for the meeting. She said that this was her first opportunity of chairing the ADP. Lauren Catto was welcomed to her first meeting.

**Apologies:**

Councillor Marie Boulton, ACC  
Councillor David Cameron, ACC  
Joyce Duncan, Chief Executive, ACVO  
George Peden, Scottish Prison Service

Judith Proctor, Chief Officer, Health & Social Care Partnership  
Tara Shivaji, Consultant in Public Health Medicine, NHS Grampian  
Linda Smith, Public Health Lead, Health & Social Care Partnership  
Kate Stephen, Superintendent, Police Scotland  
Sally Wilkins, Lead Service Manager, Adult Services, ACC

## **2. Unapproved Minute of Meeting 18<sup>th</sup> November 2016**

The minute was accepted as an accurate record.

## **3. Matters Arising**

### **HMP & YOI Grampian**

ADP members had previously been made aware that HMP & YOI had set up a Programme Board to help make improvement in relation to healthcare service delivery.

Although George Peden had submitted his apologies for the meeting he had passed on information around three sub groups which have now been set up and which report into the Programme board. The sub groups are:

1. Substance Misuse – chaired by Tara Shivaji
2. Mental Health – chaired by Jane Fletcher
3. Primary Health Care – chaired by Philip English

The Substance Misuse sub group had held its first meeting on 31<sup>st</sup> January 2017. Initial work includes trying to improve information flow amongst statutory / third sector services, so that persons entering and leaving prison can have seamless support. Updates on this work will be given at future ADP meetings.

### **Corporate Media**

Helen Shanks said that the previous ADP meeting had suggested trying to get someone from ACC Corporate Comms to come along to the meetings. She said that she has not progressed this yet as ACC Corporate Comms is currently being restructured. Discussion took place regarding some work that Graham Lawther, Head of Communications, Health & Social Care had done over the festive period, which had involved him setting up a meeting between a local journalist and Tara Shivaji, Fraser Hoggan and Sandy Kelman to promote some stories around alcohol. Luan Grugeon suggested that it may be worthwhile getting Graham Lawther involved with the ADP sub group around 'Making recovery visible'.

#### **ACTIONS:**

- Helen Shanks to contact ACC Corporate Comms regarding involvement with the ADP
- Sandy Kelman to pass on Graham Lawther's details to Luan Grugeon for the 'Making recovery visible' sub group

## **4. ADP Governance issues**

## **ADP Deputy Chair**

Helen Shanks raised issues about appointing a Deputy Chair for the ADP and the need to ensure good ongoing continuity planning. It was explained that the previous system had involved ACC; NHS Grampian, and Police Scotland taking turns, on a rolling basis, in Chairing the ADP. It was noted that the formation of the Health & Social Care Partnership added a further statutory body which needed to be considered within this system. Luan Grugeon said that the ADP should also consider someone from the 3<sup>rd</sup> Sector, perhaps from ACVO, to be considered to chair the ADP in the future. Simon Rayner said that developments within Community Planning, and where the ADP sits within this system, also need to be borne in mind. The Deputy Chair should eventually succeed as the ADP Chair. Members agreed that each of the organisations need to consider this so that a decision could be reached at the next ADP meeting.

### **ACTION**

- **Sandy Kelman to contact senior representatives from NHS Grampian; Health & Social Care Partnership; Police Scotland; ACVO to ask them to consider if their organisation would be willing to take on the role of the ADP Deputy Chair with the request that they bring back a response to the next ADP meeting**

## **5. Presentation / Theme Discussion:**

### **Children & Young People / Education / Prevention**

Fraser Hoggan and Lauren Catto gave a joint presentation. It covered the circulated agenda papers, including: SALSUS report; Scottish Government report – ‘What works in drug education and prevention?’; ADP response to questionnaire on education and prevention activity for children and young people

The presentation focused upon universal school based prevention activity. A national driver which influences health & wellbeing in schools is the Scottish Government National Improvement Framework. It includes the priority: Improvement in children and young people’s health and wellbeing. The Scottish Government has introduced the Pupil Equity Fund, which has resulted in £1,200 being given (per child who is eligible for free schools meals) to all schools. This money can be used at the schools discretion, but they must evidence improvement through use of it.

National and local data has been collected through SALSUS. This contains results of self reported alcohol and drug use by pupils. Local SALSUS figures indicate that Alcohol and Drug use has been declining. However SALSUS was not mandatory and involvement of local Aberdeen schools has decreased in recent years. Any interpretation of local figures therefore has to bear this in mind. SALSUS is due to be replaced, but it is not known yet what its replacement will look like or what it will aim to measure.

With the introduction of the local schools substance misuse policy, incidents are now being reported. Data shows that incidents are sporadic and occur across the city. In addition, NHS Scot Pho data indicates that adults who live in the areas of deprivation are most impacted by alcohol and drugs. Children who live in these areas are therefore more at risk.

Associated Schools Group (ASG) Partnership Forums (which are multi agency partnerships) are currently being developed to replace Learning Partnerships. ASGs will help develop GIRFEC practices by promoting primary prevention and early intervention; and supporting delivery of the Local outcome improvement plan, the Integrated Children Services plan and the Community Learning Development plan.

Under the Curriculum For Excellence, all children and young people, aged 3-18 years will receive education in substance misuse appropriate for their age. A challenge for teaching staff is around keeping up to date with the resources in order that they deliver evidence based lessons.

From the evidence, it would appear that the following describes what works best:

- Prevention programmes which combine social and personal development, resistance skills and normative education techniques.
- Programmes that are of sufficient intensity and duration to influence change.
- Wider programmes that are delivered in schools, which target multiple risk behaviours, help build self-esteem and life skills.

Characteristics associated with positive prevention outcomes include:

- Using interactive methods
- Delivery through a series of structured sessions (typically 10-15) once a week, often providing booster sessions over multiple years
- Delivery by trained facilitator (including also trained peers)
- Providing opportunities to practise and learn a wide array of personal and social skills, including coping, decision making and resistance skills, particularly in relation to substance use
- Impact perceptions of risks associated with substance use, emphasizing immediate consequences
- Dispelling misconceptions regarding the normative nature and the expectations linked to substance use

Lauren Catto and Fraser Hoggan concluded the presentation by posing questions to help generate discussion:

- How do we ensure reliable baseline information e.g. SALSUS completion targets?
- How do we disseminate teaching guidance and policy for management of substance misuse incidents in school, with a view to translating evidence into good practice?
- Are there opportunities for more holistic health & wellbeing approaches required embedding substance use with other topics as appropriate?
- How do we view the emerging role of ASGs in the prevention agenda?
- How do we consider at-risk groups, e.g. Looked after children?
- How do we map wider (non school based) prevention activity?
- How can we help ensure that prevention is every partner's business?
- How do we establish robust quality processes that monitor activity and outcomes?

In response to questions about early pre-school / primary age children, Fraser Hoggan said that the best early protective factor for young children is not actually specifically about alcohol / drugs, but was around ensuring good behaviour.

Kevin Wallace said that the Police had noted a change in culture. Children and young people spend less time on the street and tend to be at home on their computers. He outlined the current policing model as being:

- One-off opportunities to go into schools to deal with a specific issue
- More formal opportunities through work of the School Liaison Officer
- Work of the school based police officers within the three identified priority areas of deprivation (Northfield; St Machar; Torry)

He said that his St Machar school based officer is currently looking at work done in Polmont under the positive life styles model. As part of this he is linking back with the Head Teacher and aims to do some focused work with those young people who do not engage. This will cover things like life skills, risk taking, etc, and not merely just alcohol and drugs.

Simon Rayner acknowledged comments about changes in lifestyle, but added that evidence shows that exposure to trauma (e.g. domestic abuse, sexual abuse, physical abuse, parental alcohol / drug use) plays a significant role in whether someone develops an addiction problem. Luan Grugeon said we can learn a lot from people that are in recovery on how they have managed to overcome their trauma and build skills to overcome their problems. She reminded members of a recent presentation given about DART and their recovery training. This type of training could be applied to those young people who are very vulnerable in order to help them build their recovery capital.

Helen Shanks said the Scottish Government is currently putting money into education in order to try to break the cycle of poverty. This clearly overlaps with issues raised in the discussion. This money aims to improve child care and help parenting.

Aileen Davidson said people in recovery often say that when something traumatic happened to them in their youth they would have benefited from having a trusted adult who they could have talked to. It was noted that St Machar are looking at a mentoring scheme.

Lauren Catto said that at the moment, it is really not known what is going on in schools and if projects are being evaluated. Part of her role will therefore be to look at what is happening in schools and get an overview.

Helen Shanks asked about data collated following on from the implementation of the new schools policy. She suggested that we need to try to collate and analyse this data to help inform the locality plans. She acknowledged however that any collection should not be an additional bureaucratic nightmare for schools. Fraser Hoggan said that a good example of this was work done last year at Bucksburn Academy after it had been identified that a group of pupils were using cannabis. Instead of just dealing with the group of pupils involved, they targeted delivery of education, which involved all S4 pupils, parents and other organisations.

It was noted that the biggest health impact came from use of tobacco which is not within the ADP remit.

The ADP members concluded the discussion by agreeing that Fraser Hoggan / Lauren Catto develop a paper which shows the key approaches that need to be implemented by education in line with the ADP strategic aims.

Helen Shanks thanked Lauren Catto and Fraser Hoggan for their presentation and said that it had been a great opportunity to discuss strategy within Education.

#### **ACTION**

- **Fraser Hoggan / Lauren Catto to develop a paper which shows the key approaches and draft plan that education services would need to implement in line with the ADP strategic aims**

## **6. Scottish Government**

### **6.1 ADP Annual report 2015/16 feedback**

ADP members noted the positive feedback received from Scottish Government. An ADP response had been sent back to the Scottish Government around their comment about ensuring engagement with the Health & Social Care Partnership. Alex Stephen said that he would like something which raised the profile of the work of the ADP reported into the IJB in due course. However he said that it would be best to wait until after the local elections so the IJB membership had time to settle.

### **6.2. Letter from Scottish Government**

ADP members noted the content of the Scottish Government letter in which it stated that the ADP allocations would be sent to NHS Boards for delegation to the Integration Authorities.

### **6.3 Scottish Government Drug and Alcohol Delivery Bulletin**

ADP members noted the content of the January 2017 bulletin. It was seen that some other ADPs often highlight pieces of work that they are involved in and that there was perhaps an opportunity in the future to highlight good work done by ADP partners.

## **7. Finance**

### **7.1 Finance update**

ADP members noted the Finance update. Alex Stephen said that the underspend on alcohol and drugs by key partners arises through issues such as underspend on residential budgets and through NHS staff vacancies. A meeting is due to take place on 30<sup>th</sup> March 2017 to discuss the budget and the impact that this could have on the commissioning of services.

## **8. ADP Progress Report**

### **8.1 Progress report 2016/17 – quarter 2**

Helen Shanks said that the data held within this report was very interesting but asked if it would be possible to have a few sentences as a summary. She also wondered if the Aberdeen Child Protection Register figures could be presented as a percentage so that comparisons could be made over the years. Alex Stephen said that he would find it

useful if the workstreams had some sort of scorecard. He spoke of outcomes and during discussion on the ARC clients, Luan Grugeon suggested that it could be useful to show some case studies. Helen Shanks that it could be useful to focus discussion in more detail data on one of the workstreams at the meetings.

#### **ACTION**

- Sandy Kelman to insert summary comments and to ensure that Child protection data is presented as a percentage

## **9. Updates**

### **9.1 Commissioning**

Simon Rayner explained that there has been a public consultation with around 120 responses, which have generally been positive. Identified themes will help inform the tender specifications.

### **9.2 Partners updates**

#### **Scottish Fire & Rescue Service**

Gordon Riddell said that the SFRS is designing a credit card sized leaflet in collaboration with RGU students, designed for various partners (Police, ambulance service, GPs), allowing them to refer clients to 'cash in your pocket' for a home fire safety visit, alcohol and drugs support, money and debt advice services, and dementia services. These all link to fire risk in the home. This idea followed on from a local fatal fire case conference. This will be launched soon.

He also said that he had been liaising with ADA to look at a more holistic risk assessment for clients, which includes fire safety.

#### **Alcohol, Drugs & BBV Forum**

Luan Grugeon said the next Forum events will be held out in the communities. The first is planned to take place in Torry on 28<sup>th</sup> March 2017. Rather than choose a topic the Forum has left it quite broad so that they can hear from local residents about what more can be done to prevent harms and support recovery from alcohol and drugs issues. She said that the Forum will learn from the event before taking it to the two other priority areas within the city.

#### **Police Scotland**

Kevin Wallace said that it is coming up for a year since the closure of the Designated Place of Safety. The new system of working appears to be working well and he would hope to bring a report to a future ADP meeting which will show that the new way of operating has been more effective.

#### **ACTION**

- Police and ADP Support Team to prepare report around new operating processes for dealing with Drunk & Incapable people in Aberdeen City

## **Aberdeen in Recovery (AiR)**

Dermot Craig highlighted ongoing work being done by AiR, including:

- Joint work with SHMU radio to train people in recovery on media so that they can: present weekly recovery hour radio programmes; create a recovery magazine; produce videos and snapshots for promoting recovery messages
- Development of AiR 'Cuppa with a purpose' drop in sessions at various locations across the city, including Seaton; Tillydrone; Torry; City Centre and eventually Mastrick / Northfield. These will be hosted by AiR activists.
- Scottish Recovery Consortium - Recovery College being held in 2017 to allow about ten local people to participate in the course to assist their recovery
- Naloxone / First Aid Training – Developing naloxone training sessions and providing first aid training
- Mad, bad or invisible stage performance – Planning to host a stage play in RGU which depicts a person's struggle with mental health and barriers in receiving appropriate intervention because of their addiction problem
- AiR Committee – progress being made on the organisation having a clear vision statement and objectives. The AGM takes place on 19<sup>th</sup> April 2017. A part time paid role has been agreed to allow progress to be made by AiR.

## **10. Drugs Matters**

### **10.1 NHS Health Alert**

As Tara Shivaji was not present Sandy Kelman just said that it was appropriate for ADP members to be aware that a Health alert was issued on 20<sup>th</sup> January 2017 in relation to a small cluster of overdoses. However the main reason for bring it to the attention of the ADP membership was to make everyone aware that the Public Health Team had introduced a more effective process for issuing alerts. This new process makes it clearer what the health risks are and what actions are expected of partners. Fraser Hoggan said the new process allowed partners to flag up any concerns that they have so that they can be properly assessed and decisions made about how they should be dealt with from a public health perspective.

### **10.2 Understanding the patterns of use, motives, and harms of New Psychoactive Substances in Scotland Naloxone Report**

#### **10.3 Drug Trend Monitoring Group**

Both these agenda items were taken together.

Sandy Kelman reminded members that in recent years the Scottish Government expected ADPs to monitor NPS in their area. As a result, the ADP had set up an NPS monitoring group. However with the introduction of legislation and the apparent decline in the use of NPS this group had renamed as the ADP Drug Trend Monitoring Group. This group aimed to have an overview of any local trends in relation to all drugs, including NPS.

Over the last year, this group had continued to see a decline in the impact that NPS was having on the local population.

ADP members were directed to the tabled Scottish Government report, which detailed NPS research carried out in areas such as: Patterns of use; Motives for use; Consequences of use; Wider social harms; Treatment; The Psychoactive Substances Act. The report contained some key learning points in which ADPs are referred to. Locally these are currently being taken forward through work in the commissioning process and through the Drugs Trend Monitoring group.

#### **10.4 Estimating the prevalence of problem drug use in Scotland – 2015/16**

ADP members noted the letter from NHS National Services which said that it has been commissioned by the Scottish Government to carry out a national study to estimate the prevalence of problem drug use in Scotland. These studies have generally been carried out every three years since 2000. Simon Rayner and Sandy Kelman will liaise with the co-ordinators to ensure that they can access any local information that they require to carry out the research.

### **11. Alcohol Matters**

#### **11.1 ADP response to Scottish Government alcohol strategy refresh**

Sandy Kelman explained that the Scottish Government had made ADPs aware that it intended to refresh the national alcohol strategy. It had requested comments from ADPs, but unfortunately had only allowed a very short time span for this to be done. As such, he said that he had produced and submitted a response on behalf of the ADP. This had been circulated as an agenda paper. ADP members noted and approved the paper.

#### **11.2 NHSG Director of Public Health Annual Report 2015/16 – Everyone's Business**

Although Tara Shivaji had submitted her apologies to the meeting, she had asked that the ADP members note that it is about the opportunity for improving the lives of children and supporting wider prevention agenda which has direct relevance to the prevention of substance misuse. She said that she would encourage ADP members to think of prevention as something that needs to be applied to all our population with a particular focus, intensity and investment in areas of disadvantage.

She said that the report could be accessed on-line at:  
<http://www.hi-netgrampian.org/people-networks/public-health-directorate/>

There are also a couple of videos to illustrate concept of prevention.

ADP members noted the comments made by Tara Shivaji.

#### **11.3 Alcohol Focus Scotland – Promoting good health from childhood**

ADP members noted the AFS report. In particular the report highlighted the nature, extent and reach of contemporary alcohol marketing across Scotland. The report made a number of recommendations, most of which are directed towards the

Scottish Government, on ways in which alcohol marketing should be tackled, in order to ensure that children have an alcohol free childhood.

## **12. Community Planning Aberdeen (CPA)**

### **12.1 CPA Update**

Sandy Kelman said that CPA approved a report for the review of the CPA infrastructure in December 2016. The report confirmed that strong leadership will continue to be provided to Community Planning Aberdeen by the CPA Board and the CPA Management Group.

It included proposals to establish five Outcome Improvement Groups,

1. Aberdeen prospers group (NEW)
2. Sustainable City group (NEW)
3. Integrated Children's Services Board
4. Digital City group (NEW)
5. Resilient, Included & supported group (NEW)

The report also said that there would also be a Community Justice Group, and a Community Engagement Group. The ADP fits within the new structure and the CPA wanted to create a direct link between the ADP and the CPA Board, via the CPA Management Group.

In addition there are three Locality Partnerships for:

1. Torry
2. Cummings Park; Heathryfold; Mastrick; Middlefield, Northfield
3. Seaton; Tillydrone; Woodside

The ADP links to these structures through:

- ADP Chair being a member of the CPA Management Group
- ADP having a seat at the Resilient, Included & supported group (Chaired by Judith Procter)
- ADP Team Leader having a seat at the CPA Lead Contacts group

At a recent CPA Lead Contacts group meeting, the three Locality Partnerships Team Leads asked if one of them could represent all three and attend future ADP meetings.

The ADP membership agreed that this should be approved.

#### **ACTION**

- Sandy Kelman to make CPA aware that the Locality Partnerships Team Leads can have a place at future ADP meetings. This was to be done through their Manager, Neil Carnegie.

## **13. Workforce Development**

### **13.1 Workforce Development Update**

Fraser Hoggan said that there was no formal update, other than to note that all areas noted in the last minute continued to be progressing. He said that he is awaiting a

report from the Scottish Drugs Forum on the multi-agency training which was carried out over the last year.

## **14. AOCB**

### **14.1 Recovery Star Awards**

Luan Grugeon pointed out that the date for the ADP meeting in November 2017 was likely to be the same date for the Recovery Star Awards, assuming that it goes ahead again. This event normally starts about 11:30am. It was therefore suggested that the ADP may wish to start their meeting earlier that day and perhaps hold the meeting at the same venue so that ADP members could attend the award ceremony.

#### **Dates of next ADP meetings in 2017:**

- **Friday 26th May**
- **Friday 25th August**
- **Friday 24th November**

Meetings in May & August will take place at the Health Village, Frederick Street, Aberdeen 09:30 Hrs to 12 noon

**Note** - Meeting in November is to begin at 9am and is to be held at same location as Recovery Star Awards. Details will be forwarded prior to meeting