AGENDA ITEM No.5

Population Health Improvement Directorate Public Health Division

Directorate for Safer Communities Safer Communities Division

T: 0131-244 2278 E: <u>Amanda.Adams@scotland.gsi.gov.uk</u>

ADP Chairs ADP Co-ordinators

Copied to: NHS Directors of Finance Community Planning Partnerships (CPPs)

31 August 2015

Dear Colleague

Alcohol and Drug Partnership (ADP) Feedback from ADP Three Year Delivery Plans 2015-18

1. Thank you for sharing your three year Delivery Plans with the Scottish Government.

2. As you know this is the second time ADPs have shared their Plans. The first time was in 2012 and was shortly after the Planning and Reporting Guidance was initially published. The Plans received in 2012 gave us some helpful insight into the work of ADPs, but did not provide a national picture as Plans were not well developed in the majority of areas and we were unable to draw any real conclusions.

3. Through the Plans received in June, we have seen significant progress in ADP planning compared to those received in 2012 and we have seen significant improvements in some areas of the Plans in comparison to ADP Annual Reports (received last year), but there continues to be gaps, variance in the level of detail provided and areas where further improvements are needed. We are aware that some ADPs are delivering more than they evidence through their Plans and Reports.

4. In comparison to the ADP Reports received last year we have seen **progress/improvements** in:

- Performance Frameworks significant improvements seen: these are more robust with clearer links and connections to both national and local outcomes, indicators, strengthened with SMART (*Specific, Measurable, Ambitious, Relevant, Time Bound*) improvement goals and activities.
- Recovery Orientated Systems of Care (ROSC) 16 ADPs have a ROSC in place, 11 ADPs are enhancing further. The other 14 ADPs are developing their ROSC, with the majority achieving a good level of progress.



The Scottish Government

- For the first time we have seen strengthened ADP accountability routes to Community Planning Partnerships and, for some ADP areas, to the newly established Integrated Joint Boards, making the connections and links to local improvements and outcomes through SOAs and local Plans.
- Service User recovery outcomes being captured/planned to be captured in 12 ADPs through local systems, the SGs Recovery Outcomes Web (ROW) tool (which is currently being piloted) and Drug & Alcohol Information System (DAISy).
- **Planned Quality Improvement** through evidenced implementation of The Quality Principles and the scheduled work with the Care Inspectorate to validate local services self- assessment against the Quality Principles.
- Workforce positive progress in relation to workforce development and whilst there is continued work to be progressed, a large number of ADPs have developed in this area. It is clear that a large number of ADPs are taking cognisance of the vital role workforce development and planning has in the new landscape of Health and Social Care Integration and around the growth of Recovery Oriented System Care and Recovery Focused Principles. There is also a clear indication of the National Commissioned Organisations. Whilst a great deal of progress has been made there are still opportunities to develop quality assurance systems to assess the quality and impact of learning and development as well as the workforce planning required to align with the implementation of DAISy and the ROW tool.
- Alcohol Brief Interventions (ABIs) positive examples of areas taking responsibility for sustaining ABI delivery, setting local targets for delivery and providing more detailed accounts of delivery settings and plans for training.
- Implementing a Whole Population Approach for Alcohol (WPA) Most ADPs are reporting some form of WPA measures within their plan. The most common whole population activities relate to licensing, education activity (predominantly focused on school education or general awareness campaigns) and delivery of ABIs. We can see a number of ADPs are clearly building on the momentum they have made on these areas in the last three years. We are encouraged to see some ADPs are branching out from this core activity. Examples of broader work include: community engagement work, either linked specifically to licensing or more generally to understanding the impact of alcohol in the community; addressing alcohol's harm to others; workplace initiatives addressing alcohol use; workforce development on WPA; and planned engagement work with community planning and elected members.
- Opioid Replacement Therapies (ORT) (recommendations made by the independent expert group on opioid replacement therapies in Scotland in their 'Delivering Recovery' paper) ADPs who are prioritising these issues are doing so in an encouraging manner. We have seen improvements around: the development of mutual aid services and recovery hubs, involving those with lived experience in the development of peer support networks and also continuing support for those who are no longer in receipt of ORT; a strong focus on continued training of those in services in recovery orientated practice; and Engaging GPs and Community Pharmacists in the delivery of ORT, an aspect which was identified as essential from the ORT report.
- New Psychoactive Substances (NPS) It is encouraging to see most ADPs now form part of a Drug Trend Monitoring Group or NPS Steering Group and key partners such as Police Scotland, NHS and Trading Standards are also involved in these

groups. There is some positive work planned on education and it is encouraging to see SALSUS being used to inform this work. There is also some positive work planned on research to gather local prevalence data to better understand the scale of the NPS issue.

Scottish Government - Financial Investment

5. ADPs will be aware that Ministers wish to understand the financial position of ADPs and the value for money spend/planned investment from the Scottish Government's allocation.

6. We have been unable to draw conclusions at a national level from the Financial information shared through the Plans. This is disappointing. The Scottish Government invests substantial public funds in ADPs and non-provision of financial information is unacceptable. Only four ADPs provided clear planned financial investment for 2015-18 and seven provided investment information for 2015-16.

7. ADPs are expected to provide robust financial spend information through their Annual Reports and Plans. As outlined in the 2015-16 ADP funding letter, we are looking for Delivery Plans and Annual Reports to **set out all resources utilised** in prevention, treatment, recovery or dealing with the consequences of problem alcohol and drug use in your localities. **Annual Reports must detail how the earmarked SG allocation was spent in each area during 2014-15**.

Feedback to ADPs on Delivery Plans and Annual Reports

8. It is expected that detailed feedback on ADP Plans will be provided from your CPPs/local accountability route. The Scottish Government's feedback for individual ADPs on their 2015-18 Delivery Plan, is attached at **Annex A**.

9. We thought it would be useful for ADPs to have sight of the reviewing document being used within Scottish Government to undertake our analysis & feedback to you from the Annual Reports (expected 15 September), this is attached at **Annex B**.

National Support

10. As you will be aware, the SG ADP National Support Team is available to support your capacity building, sharing of learning and good practice amongst ADPs around priority areas including:

- improving skills to use data for evidencing progress against core outcomes;
- delivering recovery-oriented systems of care through system redesign (including the transition from prison back to community and the importance of ensuring effective pathways are in place to support through-care arrangements);
- implementing a whole population approach to addressing problem alcohol use; and
- strengthening SG engagement with the social work/care sector in relation to drug and alcohol policy objectives and drug and alcohol workforce development.

11. We strongly encourage ADPs to use the national support available to them as well as utilising local expertise. Please contact <u>Susan.Weir@scotland.gsi.gov.uk</u> in the first instance to discuss opportunities for support.

ADP Events

12. An ADP Chairs event is scheduled for 22 October. The event will focus on the role of ADP Chairs as leaders; ADP governance and accountability, finance and quality improvement.

13. An ADP Co-ordinators event is being held on 12 November. This event will likely focus on findings from the ADP Delivery Plans, Quality Improvement, DAISy (Drug & Alcohol Information System) development and implementation plans and the associated Recovery Outcomes Web (ROW) tool.

14. As you know we have been running an implementation pilot for the Recovery Outcomes Web (ROW) tool in East Renfrewshire, Glasgow, Aberdeenshire and Angus. The ROW tool enables measurement of recovery outcomes in service users, services and across ADP areas and its data will help populate the Drug & Alcohol Information System (DAISy being introduced in autumn 2016. The pilot is currently at its end stage and informal feedback has been very positive, although the formal evaluation has still to conclude. However in preparation for offering Scottish drug and alcohol services and ADPs this tool, we will be conducting a short survey to assess the number of ROW visual tools required by services and will be offering workforce development sessions for staff. Scottish Drug Forum's Workforce Development Team will be providing half day workforce development sessions between late October 2015 and the end of March 2016 in health board areas across Scotland. The national ROW tool pilot report with next steps will be available in October this year.

15. Agenda's and information on how to register for these events will be shared with ADPs as soon as possible.

16. If you require any further information on the content of this letter please contact Amanda Adams, Scottish Government Alcohol Team: Amanda.adams@scotland.gsi.gov.uk

Yours sincerely

Daniel Kleinberg Tobacco, Alcohol and Diet Team Leader

Beverley Francis Head of Drugs Policy Unit

Annex A

ADP Delivery Plan 2015 – 2018 Scottish Government Analysis & Feedback ADP East Renfrewshire Delivery Plan Does the ADP delivery Plan cover 2015-2018? Yes

Feedback for ADP: Overview

Thank you for sharing your ADP Plan with us. We felt it was very strong and aligned well with the national guidance. Your Plan was well structured and highlighted the range of good work and progress your ADP has made to date, as well as clearly setting out your planned activities for future delivery which builds on the significant work already undertaken. Service User Involvement, recommendations from hidden populations, the redesign of children's services to effectively meet the requirements through the children and young people (Scotland) Act 2014 would be useful for us to share with other ADPs as examples, with your ADPs permission.

Your Plan clearly illustrates strong leadership and the commitment of your ADP and members. Your Plan has been well thought through and clearly demonstrates your priorities, actions with an assigned lead and by when with targets and measures.

Your Performance Framework is excellent and clearly sets out the outcomes, indicators, improvemen and activities. To make it even stronger, logic models could be used to demonstrate the links between activities and the impact they are expected to have.

Thank you for giving your permission allowing us to use it as an example of good practice for other ADPs.

Part 1 Governance & Accountability Arrangements			
1. Does the ADP plan list	Detai	ls	Feedback For ADP
the names of the organisations directly engaged in preparing the plan?	Yes		It's really encouraging to see the shared vision for all members (organisations) of the ADP.

2 Deseths ADD stars	r		
2. Does the ADP plan evidence that it has been	Vee		Shared approach – shared vision
agreed by partner	Yes		
organisations? 3. Does the Plan outline			
3. Does the Plan outline local governance arrangements for developing and overseeing delivery of the plan?	Yes		Your ADP Plan highlights the clear areas of responsibility across all your partners and the shared vision and approach which is in place within East Renfrewshire.
4. Does the Plan evidence the route and frequency the ADP reports to their governance	Route:		We can see your ADP reports directly to both the Community Planning Partnership (CPP) and Health and Social Care Partnership (HSCP).
arrangement?	Freque	ency:	6 monthly
4b) How often does the ADP expect to receive feedback	4b)		Your Plan highlights that feedback to the ADP from both the CPP and HSCP is anticipated on an annual basis.
5. Does the plan evidence how the ADP intends to demonstrate their contribution to the outcomes under the Public Bodies (Joint Working) (Scotland) Act?	Yes		Your ADP Plan advises - The new East Renfrewshire Integration Joint Board will be established in August 2015. Partners across the HSCP/CPP/ADP have worked collaboratively and contributed directly to the development of the new health and social care strategic plan. Core actions in relation to alcohol and drug prevention and recovery are aligned and will be reported through the health and wellbeing outcome of the strategic plan. This is really encouraging.
6. Does the plan evidence the ADP relationship with the Integrated Joint Board (IJB) and Community Planning Partnership?	Yes		See box 5 above. In addition the ADP Plan clearly evidences the SOA outcomes that the ADP reports on.
7. Does the Plan evidence how the ADP, CPP and IJB are planning to support improving outcomes jointly?	Yes		See Box 5 above.
8. Finance: Does the Plan set out how the ADP identified the resources utilised in prevention, treatment, recovery or dealing with the consequences of problem alcohol and drug use in their locality?	Yes		Your ADP Plan has a clear financial framework for each year 2015-18. This is commendable and is encouraging to see. Thank you for providing the detail that sits within the 4 pillars of the financial framework and providing information on the investment from partners including support in kind.

Part 2 Ministerial /ADP Priorities			
and Embedding Service			
Users into processes	D	etails	Feedback For ADP
9. Does the ADP plan			Your ADP has identified strategic
identify a small number of strategic changes which the ADP intends to achieve during the 3 years of the plan in order to deliver the Alcohol Framework and the Road to Recovery?	Yes		changes/outcomes in your plan which align well with the Ministerial priorities. It's encouraging to see the planned activities linked to these. Your ADP Plan and the activities within it more than fully meet the expectations of Scottish Ministers.
10. Do the above strategic changes evidence how the will contribute to a Single Outcome Agreements and health and Social Care Integration? (these may be outcomes or outputs that prevent alcohol or drug related harm and/or improve person centred recovery services.	Yes		
11. Recovery Orientated Systems of Care (ROSC)		ace and ncing er	It is encouraging to see your ADP is enhancing your ROSC further through a rage of measures which includes, recommendations from your hidden populations needs assessment and implementation of a programme of recovery workforce development across specialist addiction services. We can see a key action for your ADP to support your ROSC is the development is a commissioning and quality improvement plan which will also include the Quality Principles.
12. Does the Plan demonstrate/advise how the ADP is/intends to capture service users recovery outcomes?	Yes		Through the Recovery Outcomes Web Tool
13. Does the Plan evidence how service users and carer are embedded within the partnership/commissioning process?	Yes		Your ADP Plan fully evidences that your ADP will continue to ensure and demonstrate that service users and their families play a central role in the partnerships commissioning process and evaluating the impact of your services, you have provided a range of evidence within your plan which includes – demonstrating how your service users play an active role in the running and planning of your services, your ADP also has a service users plan in place which is reviewed on a monthly basis.
14. Does the plan evidence how service users/families are involved in evaluating	Yes		Yes see box 13 above.

impact and supporting	
improvement of statutory	
and third sector services?	

Part 3	Priority Areas/Request for National Support
15. Opioid Replacement Therapies (ORT)	It is clear from your plan that work to fully address the recommendations made in the ORT report is continuing. Working alongside Primary Care Services such as community pharmacies and the health board's medical lead, to expand their role in areas of prevention, treatment and recovery can only be beneficial and it will be interesting to hear how this develops over the lifespan of the plan.
16. New Psychoactive Substances (NPS)	Would of expected more detail on planned NPS work up to March 2018. Would of expected to see more detail on education and awareness raising, particularly in relation to the new legislation on NPS.
17. Workforce Development	It is welcomed by Scottish Government that clear evidence, building on the yearly ADP report that workforce development will continue to be a local priority for East Renfrewshire ADP. The ADP have highlighted the need to utilise national support to develop and progress this work in addition to working in a collaborative way with local partners and stakeholders. It would have been helpful to see milestones and timelines for workforce development over the delivery plan cycle and it is hoped that will be evidenced in the ADP annual report. No indication was given in relation to ministerial priorities in line with workforce development activity, although this may be evident in the annual report. Lack of information was provided in relation to the wider ROSC workforce, therefore it is hoped that will be developed in the workforce development activity within East Renfrewshire. An update of the workforce strategy is vital to chart progress of workforce activity as well as the local structures set up to progress and monitoring developments. It has been noted that the ADP in the past, and wish to engage with the full range of national support that is available including the Drug and Alcohol Teams within SG.
18. Alcohol Brief Interventions (ABI)	Your plan includes ABI delivery as part of the 'Alcohol related Deaths' priority action, and it is positive to see that your ADP intends to improve and increase the reach of ABI delivery across primary care and wider settings. We would welcome further detail about the wider settings your ADP is focussing on, in particular any evaluation work you are planning, and it would be helpful if you could provide updates in your ADP Annual Reports.
19. ADP Request for National Support	We acknowledge the engagement your ADP has had to date with the ADP National Support Team and national commissioned organisations and would encourage you to continue to utilise these resources.

Part 4			12.	F	Performance Framework
	Deta	ils			<u>Feedback</u>
20. Does the ADP Plan evidence a performance framework?	Yes	1	No		The performance framework includes all of the key elements required, set out in a very clear and accessible manner.
21. Do you consider it to be robust? (e.g. based on	Yes	V	No		The framework is logically set out, with improvement goals clearly informed by

logic models demonstrating how planned activities link to intended outcomes) 22. Does the performance framework include all core outcomes and Indicators?	Yes	1	No		trends and benchmarking data. Actions linked to each outcome are presented at the end of each section. These could be more explicitly linked to the outcomes they are expected to impact on – possibly by using a logic model? Again, this is all very clearly set out and easy to follow.
23. Does the performance framework include any local outcomes?	Yes		No	V	
24. Does the performance framework include any local Indicators?	Yes	V	No		A few local indicators are included.
25. Are SMART Improvement Goals in place for all core indicators? (are they clear	Yes	V	No		SMART improvement goals are in place for all core indicators, and for each of the 3 reporting years, where data are available annually. Targets are clear and based on
& ambitious?)					analysis of tends and benchmarking data. If earlier progress is made than anticipated, the longer terms goals may need to be adjusted?
25b) Are SMART Improvement Goals in place for all local Indicators? (are they clear & ambitious?)	Yes	V	No		Although data are not yet available for some.
26. Are SMART Improvement Goals evidenced to 2018?	Yes	V	No		And for each year up to 2018, where data will be available.
27. Are planned activities linked to planned outcomes?	Yes	V	No		Although it would be helpful if possible to be even more explicit about how the activity is expected to influence the outcome. Logic models could help with this.
28. Does the performance framework evidence baseline data?	Yes	V	No		It is helpful that the baseline for the benchmarking ADPs and Scotland is provided too. This is then used to inform the improvement goals.
29. Benchmarking: Has baseline data been used? If yes, is the comparison against Scotland or another ADP(s) or both?	Yes, a ADPs	gain	st Sco	tland	and the SOLACE benchmarking family of

ANNEX B

ADP Annual Reports for 2014-15 are due by 15 September and should be sent to the alcohol and drug delivery mailbox: <u>Alcoholanddrugdelivery@scotland.gsi.gov.uk</u>

ADP ANNUAL REPORTS 2014-15: Scottish Government Analysis and Feedback

~
ť
a
-

										N	15 ×	×											
XXX ADP				Revi	Reviewer:								Analyst:	yst:									
		Analyse	yse				Plan				Deliver	Ver						Review	ew				
	-	2	m	4	ŝ	9	2	œ	ŋ	9		12	13	14	15	16	17	18	19	18 19 20 21 22	21	22	23
RAG Status																							
Evidence <u>F</u> ull, Partial, None																							

Feedback for ADP: Please provide a few comments on your general sense of the Annual Report and in particular the RAG status and level of evidence.

Part 2 Analyse			
	Det	ails	Feedback
1. Does the Report evidence Joint Strategic Needs Assessment being undertaken?	Yes	No	[Box 1 – advise date when last undertaken and when next planned] [If ADP has included any local research, note page and paragraph numbers]
2. Does the Report evidence Integrated Resource Framework Process ?	Yes	No	[Box 3 e.g. scoping/review?]
3. Does the Report evidence Integrated Resource Framework Outcomes?	Yes	No	[Box 4 e.g. resource transfer, service redesign, ROSC]

Part 3 Plan			
4. Does the Report	Det	ails	Feedback
evidence a shared vision and joint strategic objectives which are aligned to local partnerships?	Yes	No	[Box 5]
5. Does the ADP Report evidence the formal relationship with the local:			[Box 5/6]
 Child Protection Committee? 	Yes	No	2
 Adult Protection Committee? 	Yes	No	
6. Does the Report evidence how the ADPs planned strategic commissioning work is linked to Community Planning and local	For links to <u>CPP</u> Yes	No	[Box 6]
integrated health and social care plans, preparing to support improved outcomes, priorities and processes?	For links to <u>H</u> <u>& Sc</u>		
7. Does the Report include a copy/link to the ADP Commissioning Plan	Yes Yes	No No	[note page and paragraph number]

2	n
Z	U

or Strategy?			
8. Does the ADP Report			[Box 6b]
detail the formal accountability route for Planning and Reporting?	Yes	No	
9. Does the Report	Ro	ute:	
evidence the route and frequency the ADP reports to their governance arrangement?	Frequ	iency:	
9b) Did the ADP receive feedback on this Report from their accountability route?	Feed	back:	
10. Does the Report evidence Service Users and Carers are embedded within the partnership commissioning process?	Yes	No	[Box 7]
11. Recovery Orientated Systems of Care (ROSC)	In Plac In Develo In place enhanc further	pment e and	[Box 8 and please comment on priorities evidenced as appropriate]
11b). Does the Report evidence Recovery Outcomes for all Individuals within the ADPs alcohol and drug treatment system	Yes	No	[Box 8 - Please note the tool used if evidenced in report]
12. Does the ADP Report evidence that statutory requirements for Equality Impact Assessments have been addressed during compilation of ADP Strategy and	Yes	No	[Box 9 - please state when this was undertaken and is next planned]

Part 4 Deliver								
	De	tails	Feedback					
13. Does the Report evidence Workforce activities?	Yes No		[Box 10, please copy and paste relevant information from Report – it is likely to feature in other areas to, e.g activities linked to ROSC]					
14. Does the Report evidence the ADPs provision to demonstrate the range of Prevention, treatment/recovery & support interventions (including early interventions) commissioned by the ADP and delivered in the reporting period?	Yes	No	 [Box 11 – first time we have asked for this info – if doable can you record as the example in the guidance e.g. A programme of prevention education across primary and secondary education 4 statutory frontline treatment services 2 Recovery Services for follow on support (community based and 3rd sector) 					
15. Does the Report evidence a summary of ADP interventions delivered to support their community?	Yes	No	[Box 12 – please provide a summary]					
16. Does the Report evidence a transparent performance framework for all ADP Partner organisations who receive funding through the ADP, including statutory provision?	Yes	No	[Box 13 – [please note brief details e.g. performance outcome reporting through which group and frequency]					
16b). Does the Report evidence how all partners contribute to delivering outcomes identified in the Joint Strategic Needs Assessment?	Yes	No						
Part 5 Review								
17. Does the Report	Det	ails	Feedback For ADP					
evidence that the ADP Delivery Plan is reviewed on a regular basis, which includes the review of the provision of prevention activity, recovery, treatment and support services (ROSC)?	Yes	No	[Box 14]					
18. Does the Report evidence the ADPs progress towards	Yes	No	[Box 15 – please provide a brief summary & copy and paste information for further ORT analysis]					

outcomes focussed			
contract monitoring			
arrangements being in			
place for all			
commissioned services?			
19. Does the Report			[Box 16]
evidence a schedule for			r
service monitoring and	Yes	No	
review which includes	103		
statutory provision?			
20. Does the Report			[Box 17]
evidence how Service			
Users and their Families	V		
are playing a central role	Yes	No	
in evaluating the impact			
of statutory and 3 rd sector			
services?			
21. Does the Report			[Box 18]
evidence the robust			
Quality assurance system			
in place which governs	Yes	No	
the ADP and evidences			
the quality, effectiveness			
and efficiency of service?			
22. Does the Report			[Box 18b – please copy and paste the detail around the
evidence when how and			Quality Principles for further analysis]
the ADP Plans/has to			
undertake and	Yes	No	
assessment of local			
implementation of the			
Quality Principles?			
23. Does the Report			[Box 19 & Part 5 – please copy and paste info for further
evidence the progress			analysis]
being made by the ADP in			
taking forward the	Yes	No	
recommendations from			
the ORT report?			
24. Does the ADP Report	[Box 20	& Part 5 -	please copy and paste info for further analysis]
evidence how the ADP			
and Partners are			
delivering a Whole			
Population Approach for			
alcohol?			
25. How many service	(D. 0.1		
users are in receipt of	[Box 21 - further a		y not be doable for all ADPs, please copy and paste info for
prescriptions for problem		naiysisj	
alcohol use?			
26. How many service	[Box 22 -	– intende	d to by just for those receiving support for alcohol or both
users are receiving			= please copy and paste for further analysis]
counselling/support		-0-	
through ADP			
commissioned services?	[D. 00]	_	
27. How many service	[Box 23]		

users received treatment		
for Alcohol related Brain		
Damage (ARBD) in the		
reporting period?		

Part 6 Financial Framework			
28. Does the Report evidence Financial	Det	ails	Feedback
information as requested on the Standard Reporting Template for 2014-15?	Yes	No	[Part 3 of Standard Reporting Template – please note page and paragraph numbers for further analysis]
29. Finance: Does the Plan set out how the ADP identified the resources utilised in prevention, treatment, recovery or dealing with the consequences of problem alcohol and drug use in their locality?	Yes	No	[Part 3 of Standard Reporting Template]

Part 7 Ministerial and ADP Priorities/National Support /ADP Feedback on Standard Reporting Template			2
30. Does the Report	Det	ails	Feedback
evidence the progress made in taking forward the 5 ADP commitments made for 2014-15?	Yes	No	[Part 5 of Standard Reporting Template]
31. Does the Report evidence the ADPs 5 key commitments for 2015- 16?	Yes	No	[Part 3 of Standard Reporting Template]
32. Does the Report evidence progress made with the Ministerial Priorities?	Yes	No	
33. Does the Report evidence SMART Improvement Goals for Ministerial Priorities?	Yes	No	
34. Is there evidence of the ADP working with commissioned organisations? If so	Yes	No	

which ones?	
35. Please copy and paste any requests for support from SG ADP	
National Advisors.	
36. Please copy and paste	
specifics on NPS	
37. Please copy and paste	
any feedback from the	
ADP around the Standard	
Reporting Template	

Part 8		- Frank	Performance Framework
	<u>Details</u>		<u>Feedback</u>
38. Does the Report evidence a performance framework?	Yes	No	[Part 4 and Box 2]
39. Do you consider it to be robust? (e.g. based on logic models demonstrating how activities link to outcomes)	Yes	No	[Part 4]
40. Does the performance framework include all core outcomes and Indicators?	Yes	No	[Part 4]
41. Does the performance framework include any local outcomes?	Yes	No	[Part 4]
42. Does the performance framework include any local Indicators?	Yes	No	[Part 4]
43. Are SMART Improvement Goals in place for all core indicators?	Yes	No	[Part 4]
Are they clear & ambitious?	Yes	No	
43b) Are SMART Improvement Goals in place for all local Indicators?	Yes	No	
Are they clear & ambitious?	Yes	No	

44. Have SMART Improvement Goals been achieved as expected?	Yes	No	[Part 4] (this is likely to vary across the report, so your general sense in a sentence or 2 would be fine)
45. Are planned activities linked to planned outcomes?	Yes	No	[Part 4]
46. Does the performance framework make use of baseline data?	Yes	No	[Part 4]
47. Benchmarking: Has this been undertaken? If yes, is the comparison against Scotland or another ADP(s) or both?	[Part 4]		т

48. Performance Framework – Generic Comments where appropriate.



ADP ANNUAL REPORTS 2014-15: Scottish Government Analysis and Feedback

Part 1																							
								Ν	HS G	ireate	er Gla	sgow	/ & Cl	yde									
East Rer ADP	nfrew	vshire)																				
		Ana	lyse				Plan				Del	iver						Rev	view				
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
RAG Status	G	G	Α	Α	G	G	G	G	G	Α	G	G	G	G	G	G	G	G	G	G	G	G	G
Evidence <u>F</u> ull, <u>P</u> artial, <u>N</u> one	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F

Feedback: General Sense

Another commendable strong annual report which strongly evidences the good work undertaken by the ADP and partners. Your report was well-structured report, and provided an accurate self-assessment with strong evidence to support your own self assessment scoring.

Strong planning and partnership working is clearly evidenced throughout, with the on-going high priority of service users and family involvement. Future Annual Reports will be strengthened further when you are able to include information on service users outcomes through the Recovery Web Tool and Daisy.

Your Annual Report evidence strong governance and accountability structures at strategic level and the work underway recommendations on Improving service Quality/embedding the Quality Principles are a priority area for on-going development.

1

With your permission, we would be grateful if we could share your Annual Report as an example of good practice.

27

Part 2 - Analyse		
	Details	Feedback
1. Does the Report evidence Joint Strategic Needs Assessment being undertaken?	Yes	Your ADP clearly demonstrated a strength in its continuous needs assessment in addition to strategic assessments. [last undertaken 2011 next planned will be completed by December 2015 in line with HSCP Strategic Framework] Local research, Pages 4&5.
2. Does the Report evidence Integrated Resource Framework Process ?	Yes	 Evident that a significant amount of local Work taken and planning is underway and your ADP is clear on its role within this and undertaking the necessary activities to support development of the framework through HSCP. We acknowledge the efforts already undertaken and those currently in progress to be able to better inform and influence spend of the ADP budgets (and envelope) and beyond. It would be useful to share any learning from this work with other ADPs.
3. Does the Report evidence Integrated Resource Framework Outcomes?	Yes	We can see evidence of the good work undertaken and planned work to come, recognising the resource transfer within core budget to support service re-design and the implementation of your ROSC along with priorities identified for investment and disinvestment options. Again, any learning from this would be valuable for other ADPs.

Part 3 - Plan		
4. Does the Report evidence a shared vision	Detail	ls Feedback
and joint strategic objectives which are aligned to local partnerships?	Yes	Clearly demonstrated throughout your annual report.
 5. Does the ADP Report evidence the formal relationship with the local: Child Protection Committee? Adult Protection Committee? 	Yes Yes	Strong joint working and cross cutting connections are clearly identified and demonstrate the work being undertaken locally.
6. Does the Report evidence how the ADPs planned strategic commissioning work is linked to Community Planning and local integrated health and	For links to <u>CPP</u> Yes For	It's clear that appropriate commissioning links are in place via the SOAs, with direct cross representation at a senior level, with joint work evidenced. We note the approach to collaborative commissioning being developed across the 6 Greater Glasgow & Clyde ADPs. It is acknowledged and welcomed that the 6 ADPs often work collaboratively.

			· · · · · · · · · · · · · · · · · · ·
social care plans, preparing to support improved outcomes, priorities and processes?	links to <u>H</u> <u>& Sc</u> Yes		IJB established August 2015.
7. Does the Report include a copy/link to the ADP Commissioning Plan or Strategy?		No	
8. Does the ADP Report detail the formal accountability route for Planning and Reporting?	Yes		
9. Does the Report	Ro	ute:	Directly to CPP and HSCP Joint Integration Board.
evidence the route and frequency the ADP reports to their governance arrangement?	Frequency:		6 monthly
9b) Did the ADP receive feedback on this Report from their accountability route?	Feedback:		6 monthly
10. Does the Report evidence Service Users and Carers are embedded within the partnership commissioning process?	Yes		Commendable work and clear evidence of significant service user involvement building on previous work demonstrated through your ADPs annual reports. We think other ADPs may value any learning you have from this work.
11. Recovery Orientated Systems of Care (ROSC)	In place and enhancing further		Commendable work implementing your ROSC and further enhancements. Your ROSC priorities for 2015-16 are noted and are the logical next steps which are in-keeping with local and Ministerial priorities.
11b). Does the Report evidence Recovery Outcomes for all Individuals within the ADPs alcohol and drug treatment system		No	Your ADP kindly volunteered to Pilot test the ROW and you intend to make use of this following completion of the pilot.
12. Does the ADP Report evidence that statutory requirements for Equality Impact Assessments have been addressed during compilation of ADP Strategy and Delivery Plan?	Yes		Undertaken in 2013, with a planned update in November 2015 evidenced. Your Report also evidence's equality impact assessment on access to services was completed in 2014 with an update scheduled for 2016.

Part 4 - Deliver				
	Details	Feedback		
13. Does the Report evidence Workforce activities?	Yes	It is encouraging to see in the annual report that workforce development will continue to be a local priority for East Renfrewshire ADP and it is evident that some progress has made in regard to this. The fact that there are a number of core actions identified as ADP key milestones is a positive sign that workforce development is integral to East Renfrewshire ADP and indicates direct progress on the Delivery Plan. Having workforce development identified as a core action in the ADP Commissioning for Recovery Quality Improvement Plan 2015-2018 should also provide a more systematic and Recovery focused approach to service delivery. It was highlighted in the Delivery Plan the need to utilise national support to develop and progress this work in addition to working in a collaborative way with local partners and stakeholders. From the annual report this year there is an indication that this has also being progressed and a strategic workforce development model will be developed by ADP and SDF which will take into account Health and Social Care Integration and other key drivers. It is highlighted in the annual report that agreed timelines and stages would be agreed by December 2015 therefore it would be interesting to see progress in the next report. Information has now been provided in the annual report in relation to the wider ROSC workforce, and it is hoped this will be integrated into the strategic model. There is still no indication given to ministerial priorities in line with workforce development activity, although this may become clearer in the workforce development strategic model. It would be interesting to note the resource allocation to workforce development activity within East Renfrewshire and in terms of accountability and governance where		
 14. Does the Report evidence the ADPs provision to demonstrate the range of Prevention, treatment/recovery & support interventions (including early interventions) commissioned by the ADP and delivered in the reporting period? 15. Does the Report evidence a summary of ADP interventions delivered to support their 	Yes	will workforce developments sit within the ADP structure. Strong evidence provided. Thank you for outlining the range of your ADPs provision, your report has provided a good sense of your activities in this area, this particularly helpful for our ADP National Support Team. Your Report details a good range of interventions delivered to support your local community, this particularly helpful for our ADP National Support Team.		
community? 16. Does the Report evidence a transparent performance framework	Yes	We can see you have robust systems in place with Services report through mid-year and annual reporting to your ADP and the local Implementation and Planning Group, improvement identified and included in Plans with appropriate budget monitoring systems in		
for all ADP Partner organisations who		place.		

the ADP, including			
statutory provision?			
16b). Does the Report			Details provided in ADP Plan and evidenced throughout the Annual
evidence how all partners			Report.
contribute to delivering	Yes		
outcomes identified in the	163		
Joint Strategic Needs			
Assessment?			
Part 5			
17. Does the Report	Det	ails	Feedback
evidence that the ADP			
Delivery Plan is reviewed			
on a regular basis, which			
includes the review of the	Maa		
provision of prevention	Yes		
activity, recovery,			
treatment and support			
services (ROSC)?			
18. Does the Report			
evidence the ADPs			
progress towards			
outcomes focussed	Yes		
contract monitoring	res		
arrangements being in			
place for all			
commissioned services?			
19. Does the Report			We can see 6 monthly reporting with all services providing an
evidence a schedule for			annual progress report to the ADP.
service monitoring and	Yes		
review which includes			
statutory provision?			
20. Does the Report			Commendable work and clear evidence of significant service user
evidence how Service			involvement throughout. Your work and learning in this area may
Users and their Families			be of benefit to other ADPs.
are playing a central role	Yes		
in evaluating the impact			
of statutory and 3 rd sector			
services?			
21. Does the Report			We can see you ADP has undertaken logical activities in this and
evidence the robust			identified areas for improvement to be in-corporated in to your
Quality assurance system			improvement plan.
in place which governs	Yes		
the ADP and evidences			
the quality, effectiveness			
and efficiency of service?			
22. Does the Report			We will ensure continued focus on quality improvement
evidence when how and	Vaa		within services to support ROSC through the
the ADP Plans/has to	Yes		implementation and monitoring the Quality Principles:
undertake and			Standard Expectations of Care and Support in Drug and

receive funding through

		Alashal			
assessment of local		Alcohol Services. Group.			
implementation of the Quality Principles?		 Agree the process for auditing the implementation of the quality principles and standards across all addiction services by October 2015 			
		 Complete a review of service delivery against the quality principles to support ROSC in conjunction with staff and service users by June 2015 Review service specifications in line with the Quality Principles March 2015 			
23. Does the Report evidence the progress being made by the ADP in taking forward the recommendations from the ORT report?	Yes	Your ADP is commended on successfully meeting and completing your key aim. We would encourage you to revisit your Key aim and amend it so you have a new aim for the coming year. The information you have gathered and shared around ORT provision is also very useful and will be beneficial to both the ADP and Scottish Government going forward.			
24. Does the ADP Report evidence how the ADP and Partners are delivering a Whole Population Approach for alcohol?	• •				
 25. How many service users are in receipt of prescriptions for problem alcohol use? 26. How many service users are receiving counselling/support through ADP commissioned services? 27. How many service 	Thank you for the detailed information you provided. We appreciate the information requested was difficult to obtain in a number of ADPs. We will consider these questions along with the feedback from the ADP event in November as part of the review of ADP Planning and Reporting.				
users received treatment for Alcohol related Brain					

Damage (ARBD) in the
Damage (ANDD) in the
reporting period?
reporting period:

Part 6 - Financial Framework			
28. Does the Report evidence Financial	Det	ails	Feedback
information as requested			
on the Standard Reporting Template for	Yes		
2014-15? 29. Finance: Does the			
Plan set out how the ADP identified the resources			
utilised in prevention,	Vee		
treatment, recovery or dealing with the	Yes		
consequences of problem alcohol and drug use in			
their locality?			

Part 7 - Ministerial and ADP Priorities/National Support /ADP Feedback on Standard Reporting Template			
30. Does the Report	Det	ails	Feedback
evidence the progress made in taking forward the 5 ADP commitments made for 2014-15?	Yes		Good progress made with all ADP Commitments.
31. Does the Report evidence the ADPs 5 key commitments for 2015- 16?	Yes		
32. Does the Report evidence progress made with the Ministerial Priorities?	Yes		We can see the good work in delivering Ministerial priorities has continued and developed further as appropriate.
33. Does the Report evidence SMART Improvement Goals for Ministerial Priorities?	Yes		Where appropriate, Yes.
34. Is there evidence of the ADP working with commissioned organisations? If so	Yes		Strong evidence of connections to commissioned organisations throughout the report: AFS, STRADA, SDF, Lloyds PDI, NHS Health Scotland, SRC, SFAD.

which ones?					
35. Please copy and paste any requests for support from SG ADP National Advisors.	No specific requests noted but ADP advised they would welcome the continued specialist support and ADP delivery events targeting key areas of quality improvement.				
36. NPS	t is anticipated that the implementation of the Psychoactive Substances Bill will be April 2016. However, legislation alone will not solve the problem of NPS and ADPs should prepare for these new challenges. In particular, we would expect to see evidence of this in the 2015-16 report.				
37. Please copy and paste any feedback from the ADP around the Standard Reporting Template	Thank you for your comments on the standard reporting template, we will consider these along with feedback from the ADP event in November as part of the review of ADP Planning and Reporting.				

Part 8	Performance Framework					
	<u>Details</u>	<u>Feedback</u>				
38. Does the Report evidence a performance framework?	Yes					
39. Do you consider it to be robust? (e.g. based on logic models demonstrating how activities link to outcomes)	Yes	The performance framework is clearly set out, with commentary on performance based on trends and benchmarking, and actions against each outcome.				
40. Does the performance framework include all core outcomes and Indicators?	Yes	All core outcomes included, but some of the core indicators are missing. Note not all core indicators have local data available or published on Scot Pho. In this instance where local data was not available they were not reported in the annual report. In future all core indicators will be reported however with a note to say that no local data is available.				
41. Does the performance framework include any local outcomes?	Yes	The SOA outcomes are listed under each core outcome.				
42. Does the performance framework include any local Indicators?	Yes	A few local indicators are included.				
43. Are SMART Improvement Goals in place for all core indicators?	Yes	Targets are clear and set to 2014/15. Many have already been exceeded, which may suggest that they could have been more ambitious? Minor note: this was the final year of the previous				
Are they clear &	Yes	three year delivery plan. We have spent some				

ambitious? 43b) Are SMART Improvement Goals in			considerable time working on the new targets with the help of the Scot pho profiles, benchmarking across our SOLACE family and utilising all available time trend data.
place for all local Indicators? Are they clear &	Yes		As above.
ambitious?	Yes		
44. Have SMART Improvement Goals been achieved as expected?	Yes		The majority of the SMART goals have been met or exceeded, leading to 'green' ratings in the RAG.
45. Are planned activities linked to planned outcomes?	Yes		Activities are helpfully set out after each outcome. Logic models could be used to make the links even more explicit.
46. Does the performance framework make use of baseline data?	Yes		Good use is made of baseline data and % change provided between baseline and current levels.
47. Benchmarking: Has this been undertaken? If yes, is the comparison against Scotland or another ADP(s) or both?	Yes, against	Scotland and	the SOLACE family of ADPs.

48. Performance Framework – Generic Comments for Feedback to ADP.

A good, clearly set out Performance Framework which clearly links activities to outcomes and SMART improvement goals. It could be further enhanced by the use of logic models to demonstrate how activities are expected to impact on outcomes.