

1. FINANCIAL FRAMEWORK

FINANCIAL FRAMEWORK	Thank you for providing clear and detailed information throughout this section in your Annual Report, this is welcomed by Ministers. (Amendment provided Dec 2016).
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2. MINISTERIAL PRIORITIES

PRIORITY	FEEDBACK
1. Compliance with the Drug and Alcohol Treatment Waiting Times LDP Standard, including, increasing the level of fully identifiable records submitted to the Drug and Alcohol Treatment Waiting Times Database (DATWTD)	Good evidence of monitoring and remedial processes being put in place to manage delivery of LDP standard; headline statistical information on current performance would assist with assessment of whether proposed actions are likely to successfully deliver improvement required.
2. Compliance with the LDP Standard for delivering Alcohol Brief Interventions (ABIs)	Your annual report clearly demonstrates how you achieved hugely successful ABI delivery in your ADP and sets out your plans to ensure sustained delivery. It is encouraging to note your plans for Increasing delivery to harder to reach groups and deprived communities by 2018. This is welcomed by Ministers.
3. Increasing Data Compliance SDMD: SMR25 A and B.	Robust improvement targets for data collection set with monitoring mechanisms in place and improvements planned.
4. Preparing Local Systems to Comply with the	Good evidence of robust target setting for service compliance

new Drug & Alcohol Information System (DAISy)	with DAISy post-implementation.
5. Increasing the reach and coverage of the national naloxone programme for people at risk of opiate overdose, including those on release from prison.	Clear evidence displayed of commitment to naloxone provision, and good to see Highland remain committed to sustaining levels of kit distribution. Scottish Government would be interested to learn of the findings of the intranasal pilot evaluation.
6. Tackling drug related deaths (DRD)/risks in your local ADP.	Clearly demonstrated. <u>Additional Information 5:</u> Clearly demonstrated.
7. Implementing improvement methodology including implementation of the <i>Quality Principles: Standard Expectations of Care and Support in Drug and Alcohol Services</i> .	Strong evidence of training and development activity in respect of quality principles and RO, along with effective monitoring of implementation.
8. Responding to the recommendations outlined in the independent expert group on opioid replacement therapies.	<u>This includes the feedback for additional information 8.</u> The report contains a useful summary of how the ADP is addressing these recommendations. The formation of a specific ORT group is a useful step and one which would be hoped would see progress in this area, such as the engagement with GP's and other primary care providers. It will also be interesting to hear about the progress of the possible development of an ORT recovery group, these are proving to be very popular and successful in other areas.
9. Ensuring a proactive and planned approach to responding to the needs of prisoners affected by problem drug and alcohol use and their associated through care arrangements, including women	Healthy targets set for prisoners engaging with treatment services, focus on referral pathways and partnership working with SPS.
10. Improving identification of, and preventative activities focused on, new psychoactive substances (NPS).	A useful summary provided.

<p>11. On-going Implementation of a Whole Population Approach for alcohol recognising harder to reach groups, supporting a focus on communities where deprivation is greatest.</p>	<p>Thank you for sharing the work you have undertaken on a whole population approach over the previous year. We encourage you to continue with this good work.</p> <p>Alcohol Focus Scotland is happy to offer any support or advice if needed. Please contact Linda Bowie at AFS directly if you would like to discuss. Linda.Bowie@alcohol-focus-scotland.org.uk</p>
<p>12. ADP Engagement in improvements to reduce alcohol related deaths.</p>	<p>This is the first year ADPs have been asked to specifically report on activities to reduce alcohol-related deaths. Your excellent work on a whole population approach puts your ADP in a good position to better understand alcohol related deaths in your area.</p> <p>Thank you for sharing your plans on how your ADP is going to progress this work. We look forward to learning more through future annual reports.</p> <p>Alcohol Focus Scotland have been supporting ADPs in taking this forward. Please contact Linda Bowie at AFS directly if you would like to discuss. Linda.Bowie@alcohol-focus-scotland.org.uk</p>

3. ADDITIONAL INFORMATION

	<p>FEEDBACK</p>
<p>1. Please <u>bullet point</u> any local research that you have commissioned e.g. hidden populations, alcohol related deaths. (the actual</p>	<p>Thank you for detailing your ADPs research, this is welcomed. Would you find it helpful if we shared a summary of the research detailed in all ADP Annual Reports across ADPs? If you would find this helpful and be willing for your</p>

<p><i>research is not required)</i></p>	<p>research to be shared, we would be grateful if you can email Susan Edmondson at Susan.Edmondson@gov.scot by 14 January.</p>
<p>2. What is the formal arrangement within your ADP for reporting on your Annual Reports/ Delivery Plans/shared documents, through your local accountability route.</p>	<p>Your governance/accountability routes are well defined, and it's particularly welcomed to see your ADP reporting to both the CPP and IJB.</p>
<p>3. A person centered recovery focus has been incorporated into our approach to strategic commissioning.</p> <p>Please advise if your ROSC is 'in place'; 'in development' or in place and enhancing further.<i>(No additional information is required)</i></p>	<p>Thank you for sharing your ROSC is in development.</p>
<p>4. Is there an ADP Workforce Development Strategy in Place, if <u>no</u>, are there plans to develop?</p>	<p>Progress made in relation to workforce development activity with partnership and collaboration with SDF. Connection with all National Commissioned Organisations.</p>
<p>5. A. Please indicate if your ADP has participated in the Drug Death Prevention work of the Scottish Drugs Forum (SDF), as requested by Ministers in their letter to ADP Chairs on 6 August 2014.</p> <p>B. Please provide details of local Drug Death</p>	<p>Please see your feedback above under Ministerial Priority 6</p>

<p>Prevention strategies in place or planned.</p> <p>C. Please include details of any local Drug-Related Death groups in place, in addition to the information provided within the Ministerial priorities section.</p>	
<p>6. Describe the progress your ADP has made in taking forward the recommendations from the Independent Expert Review of Opioid Replacement Therapies in Scotland. Please include any information around the following:</p> <ul style="list-style-type: none"> • update on progress in implementing your key aim statement – have you achieved it/when do you plan to do so? • How many people were in receipt of opiate replacement therapies in your area between 1 April 2014 & 31 March 2015. • Information on length of time on ORT and dose • Information about any related staff training in ORT provision or recovery orientated systems of care. • Detail of any ORT focussed groups operating in the area. • GP engagement – how drug and alcohol treatment is being delivered 	<p>Please see your feedback above under Ministerial Priority 8.</p>

in primary care settings.