

**MIDLOTHIAN & EAST LoTHIAN  
DRUGS & ALCOHOL PARTNERSHIP**

# MELDAP Delivery Plan

**2012-2015**



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## FOREWORD BY MELDAP CHAIR

Since its formation as a new cross council alcohol and drug partnership in 2008 MELDAP has established a clear identity through its work with a range of partners and stakeholders. The introduction of its three year drugs and alcohol strategy in 2010 set out an ambitious programme of improvements for the partnership to ensure that all services were well placed to deliver the key recommendations in the two national documents; The Road to Recovery (2008) and Changing Scotland's Relationship with Alcohol: A Framework for Action (2009).

MELDAP's Strategy contained six priorities which covered three interrelated themes. These were:

- Prevention and protection
- Treatment and recovery
- Service delivery and quality assurance

Through these linked themes MELDAP is committed to delivering the following high level outcomes:

- We will enable more people living in East Lothian and Midlothian to adopt a more responsible approach to alcohol
- We will reduce the harm to children and young people affected by parental substance misuse
- We will reduce the harm related to young people's drug and alcohol use
- We will protect communities from the harmful effects of alcohol and drug
- We will enable people with drug and alcohol problems to recover from them and live healthy crime free lives
- We will develop services for young people, adults and families that are equitable, readily accessible and designed around client needs.

MELDAP recognises the significant challenges ahead and while East Lothian and Midlothian do not suffer from the same levels of alcohol and drug misuse found elsewhere in Scotland there are still many challenges including many adults in affluent communities who are drinking at hazardous levels, health inequalities continue with the most deprived communities experiencing the greatest level of harm, drug related deaths continue to rise and the substance misuse affects the lives of a number of children, young people, families and communities. These challenges are set against a background of increased expectations, of reducing financial resources, reduced opportunities for employment and changing patterns of substance misuse which are complex and dynamic.

\_\_\_\_\_ Midlothian Council (Vice Chair)

\_\_\_\_\_ East Lothian Council

\_\_\_\_\_ NHS Lothian

\_\_\_\_\_ Lothian and Borders Police

\_\_\_\_\_ Third and Voluntary Sector

## 1 MELDAP STRUCTURE

1.1 The MELDAP Strategic Group contains high level representation from East Lothian Council, Midlothian Council, NHS Lothian, Lothian and Borders Police, Criminal Justice Authority and the third sector. The Acting Chair of the partnership is, Eibhlin McHugh, Head of Service, Adult Health and Social Care, Midlothian Council. Key partners were involved in the development and approval of the three year Delivery Plan. The draft plan was circulated to all members of the subgroups for comment who also contributed to the development of relevant data measures.

The MELDAP structure is shown in Figure 1.

**Figure1**



1.2 The Commissioning and Performance groups were introduced in 2011. The Commissioning Group was designed to ensure a planned systematic approach to commissioning services, which was seen by all partners as an equitable, transparent process where those who provided services were not involved directly in the commissioning process.

1.3 The Performance Group was designed to ensure services were held to account for the quality of the services they provided. Service performance information was shared with the group, for example, service performance against the HEAT A11 target, feedback from service visits was shared and all services were required to give a formal presentation to the group on their performance against the agreed service outcomes.

## **2. OUR VISION**

2.1 Our vision is of a healthier, happier and safer East Lothian and Midlothian free from the harm caused by alcohol and drugs misuse where integrated, coordinated and high quality services are based around the needs of individuals, families and communities.

## **3. OUR AIMS**

3.1 MELDAP's primary aim is to co-ordinate the design and delivery of alcohol and drug services across East Lothian and Midlothian and to ensure that these services are needs led, recovery focused, based on evidence of what makes a difference and are delivered in an effective, efficient way. A key component in the achievement of this aim will be that services are designed around the needs of service users and their families who play an integral part in their design and evaluation. MELDAP also aims to:

- reduce the harm to individuals and promote recovery from substance misuse
- protect children and young people from the affects of parental substance misuse
- develop early interventions to prevent the harmful use of alcohol and drugs
- develop high quality, cost effective integrated services.

## **4. WHAT WE KNOW**

4.1 In 2009-2010 a Full Needs Assessment was commissioned by MELDAP. The recommendations made in the report were:

- There is a need to ensure that a full range of evidence based interventions is available to meet the identified needs of alcohol and drug dependent people in each area. This range of interventions would include psychological and psychosocial interventions such as structured counselling, cognitive behavioural therapy and social skills training.
- Senior managers should take the lead in addressing the recommendations and good practice guidance contained in *Closing the gaps* and support the development of multi-agency protocols and pathways for people with mental health and substance misuse problems.
- Evidence from the gap analysis, as well as the existence of waiting lists suggests that there is an under-resource in terms of alcohol and drug treatment provision. Evidence based on the national prevalence study points to a need for more services for men however no such distinction should be made on any additional resource put in place.
- A multi-agency waiting times strategy should be developed and implemented. This should ensure that current resources are being utilised to maximum effect. Guidance on the development of a waiting times strategy is available at: <http://www.drugmisuse.isdscotland.org/eiu/intcare/Cha3.pdf>
- Further exploration as to the level of joint working between substance misuse services and employment, training and further education services should take place. This should result in

clear pathways being developed for drug and alcohol users to access the range of services available.

- The planning and development of services to meet these needs should be built around the ambitions of service users and their families within a recovery model. Developing services in this way will provide benefits to people who use the service but will also help develop mutual aid and peer support networks, thereby enhancing the ability for people to move on from services.

4.2 The Needs Assessment also provided a Prevalence Service Utilisation Ratio (PSUR) for alcohol and drugs for East Lothian and Midlothian. The PSUR can be thought of as the ratio of need to access. The PSUR provides a numeric estimate of the local or national gap between need for and access to treatment. This can also be expressed in terms of specifics, such as age, gender or ethnic groups.

4.3 Previous studies have shown that at any given time, the number of people who need treatment greatly exceeds the number who actually access treatment. In North America, for alcohol services, a “low” level of access is considered to be 10% (1:10) or one in ten people in need accessing treatment per annum. Fifteen percent is considered to be a “medium” level of access, and 20% (1:5) a “high” level of access (Rush, 1990). The expectation, based on the NTA guidance in England and the SACDM report in Scotland, is that the access to drug services should be 50% (1:2).

4.4 Based on data collected as part of the 2010 Needs Assessment, Table 1 shows the PSUR for alcohol and drugs for East Lothian and Midlothian.

**Table 1**

PSUR East Lothian		PSUR Midlothian	
Alcohol	Drugs	Alcohol	Drugs
2.7%	20%	5.1%	47.6%

4.5 These figures indicate that in terms of alcohol both figures are lower, the East Lothian figure significantly so, than both the NHS Lothian rate (8.1%) and the Scottish rate (8.2%) and well below the 10% ‘low’ level of access used in North America. MELDAP has stated in its strategy that PSUR rates had to be improved with the level for alcohol being at least as good as the national figure.

4.6 The expectation, based on the NTA guidance in England and the SACDM report in Scotland, is that the access to drug services should be 50%. In this regard there is no significant gap between the prevalence of problem drug use in Midlothian and the capacity of available services. The East Lothian figure would indicate that there is a significant gap between the prevalence of problem drug use in East Lothian and the capacity of available services.

4.7 In 2010 MELDAP published its three year drugs and alcohol strategy in which it described how it would address alcohol and drug related problems in East Lothian and Midlothian. Central to the success in delivering the strategy’s six priorities was the concept of effective partnerships in order to deliver a range of outcomes with Priority 6 focusing on the need to ensure that MELDAP developed services for young people, adults and families that were equitable, readily accessible and designed around their needs.

4.8 In 2011 MELDAP commissioned a *Small Area Estimates for Health Related Behaviours* undertaken by Ipsos MORI to provide details of levels of smoking, alcohol and drug use among adults and young people. The report's findings were

#### 4.9 **Adult Alcohol Use**

Two measures of alcohol consumption among adults, as recorded in the Scottish Health Survey, were modelled at *\*datazone* level: hazardous consumption – over the recommended limits but less than 35 units for women and 50 units for men – and harmful consumption – women drinking over 35 units a week and men drinking over 50 units. (*\*a datazone comprises on average of 625 households*)

- The analysis of hazardous drinking in East Lothian showed significantly higher than average prevalence in 18 datazones and of these areas – as diverse as Musselburgh, Prestonpans, Tranent, Longniddry, Haddington, Gullane, East Linton, Dunbar and North Berwick – 16 are among the 20% least deprived areas of Scotland, indicating a link between excessive consumption and relative affluence.
- In Midlothian, 11 datazones around the Dalkeith, Lasswade, Roslin and Penicuik areas were identified as areas of high rates of hazardous alcohol consumption and as in East Lothian these tended to be areas of relative affluence.
- In both areas, datazones with significantly higher estimates of harmful alcohol consumption tended to be areas of deprivation.

#### 4.10 **Alcohol use among pupils**

- The modelling of alcohol consumption among pupils identified a weak negative correlation between the areas with an estimated high prevalence of excessive adult consumption and areas with a high prevalence of regular alcohol consumption among pupils. In East Lothian and Midlothian there was limited overlap in terms of areas with high levels alcohol consumption among pupils and adults, although this might simply reflect how families were geographically distributed.

#### 4.11 **Adult Drug Use**

- Drugs use by adults was derived from Scottish Crime Survey estimates. Nationally, 8% of adults reported using any drugs in the previous 12 months. The survey estimates of drug use in East Lothian and Midlothian were both lower than the national average – 5% and 1.5% of adults respectively. However, the SCS was not designed to provide sub-national estimates and modelling suggests that using national patterns of drug-use, prevalence in both areas would be about 6%. No datazones in Midlothian were identified as likely to have levels of drug use significantly higher than average (more than 1 standard deviation above the mean) but a number of areas showed prevalence levels of between 7% and 11% of adults. In East Lothian there were four datazones, all located around Musselburgh, where the estimated prevalence was significantly higher than average. In each of the main population centres - Dunbar, North Berwick, Haddington, Tranent and Prestonpans – there were one or two datazones with above average estimated prevalence.

#### 4.12 Drug use among pupils

- Estimated drug use among pupils in East Lothian shows that 11 of the 13 datazones with significantly higher than average drug use prevalence – 15% or more – are located in a relatively small area around Musselburgh, Prestonpans and Tranent.
- In Midlothian, the areas with significantly higher than average drug use prevalence among pupils were broadly consistent with the areas around Dalkeith, Newtongrange, Gorebridge, Loanhead, Bonnyrigg and Penicuik where above average adult prevalence was estimated.

4.13 The 2010 Scottish Adolescent Lifestyle Substance Use Survey (SALSUS) authority profiles published in 2011 show:

##### **Midlothian alcohol**

Compared with 2006, there has been a notable decrease in the proportion of 13 year olds who had ever had an alcoholic drink (from 71% in 2006 to 49% in 2010) and a smaller, but still statistically significant, decrease in the proportion of 15 year olds who had ever had an alcoholic drink (from 89% in 2006 to 82% in 2010).

There has also been a decrease in the proportion of 13 year olds who felt it was 'ok to 'try drinking to see what it's like' (from 71% in 2006 to 58% in 2010).

##### **National comparison**

The proportion of pupils in Midlothian who have ever had an alcoholic is higher than the national average (49% of 13 year olds in Midlothian compared with 44% nationally and 82% of 15 year olds in Midlothian compared with 77% nationally).

##### **Availability of Alcohol**

61% of 13 year olds who had ever had an alcoholic drink and 45% of 15 year olds who had ever had an alcoholic drink reported that they 'never buy alcohol' .

Among 13 year olds who had ever had an alcoholic drink, the most common sources pupils reported purchasing alcohol from were friends (18%) and relatives (9%).

Among 15 year olds who had ever had an alcoholic drink, the most common sources pupils reported purchasing alcohol from were friends (26%), shops (15%) and relatives (14%).

##### **Changes over time**

Since 2006, there has been a decrease in the proportion of 13 year olds reporting that they buy alcohol from a shop (from 14% in 2006 to 4% in 2010). There has also been a decrease in the proportion of 15 year olds who reported that they buy alcohol from an off-licence (from 16% in 2006 to 6% in 2010).

##### **East Lothian alcohol**

Compared with 2006, there has been a notable decrease in the proportion of 13 year olds who had ever had an alcoholic drink (from 63% of 13 year olds in 2006 to 39% in 2010) but no statistically significant change among 15 year olds.

There has also been a decrease in the proportion of 13 year olds who felt it was 'ok' to 'try drinking to see what it's like (from 61% of 13 year olds in 2006 to 46% in 2010).

### **National comparison**

The proportion of 13 year olds in East Lothian who had ever had an alcoholic drink is similar to the national average (there is no statistically significant difference). The proportion of 15 year olds in East Lothian who had ever had an alcoholic drink is higher than the national average (83% in East Lothian compared with 77% nationally)

### **Availability of Alcohol**

Among 13 year olds who had ever had an alcoholic drink, the most common sources pupils reported purchasing alcohol from was friends (16%). Among 15 year olds who had ever had an alcoholic drink, the most common sources pupils reported purchasing alcohol from were friends (27%), shops (18%) and relatives (17%).

### **Changes over time**

Compared with 2006, there has been a decrease in the proportion of 13 year olds who buy alcohol from a shop (15% of 13 year olds in 2006 compared with 6% in 2010). There was also a decrease in the proportion of 15 year olds who have bought alcohol from an off-licence (from 13% in 2006 to 7% in 2010) and in a pub or bar (from 6% in 2006 to 2% in 2010).

### **Midlothian drugs**

#### **Changes over time**

Compared with 2006, there has been a decrease in the proportion of both ages who have ever used or taken drugs: from 26% in 2006 to 15% in 2010 among 15 year olds, and from 12% to 7% among 13 year olds.

#### **National comparison**

The proportion of 15 year olds in Midlothian who have ever used or taken drugs is lower than the national average (15% of 15 year olds in Midlothian compared with 21% nationally). However, the proportion of 13 year olds in Midlothian who have ever used or taken drugs is similar to the national average.

#### **Availability of Drugs**

36% of 15 year olds and 45% of 13 year olds did not know how easy or difficult it would be to get illegal drugs.

7% of 15 year olds and 20% of 13 year olds reported that it would be impossible for them to get illegal drugs.

10% of 15 year olds and 4% of 13 year olds reported that it would be very easy to get illegal drugs.

#### **Changes over time**

Compared with 2006, there has been an increase in the proportion of 13 year olds who say they would find it impossible to get illegal drugs (from 8% in 2006 to 20% in 2010). There has

also been a decrease in the proportion of pupils reporting that it would be 'very or 'fairly easy to get illegal drugs (from 35% of 13 year olds in 2006 to 14% in 2010 and from 44% of 15 year olds in 2006 to 35% in 2010).

### **East Lothian drugs**

#### **Changes over time**

Since 2006, there have been no statistically significant changes in the proportion of pupils who have ever used or taken drugs

#### **National comparison**

The proportion of pupils in East Lothian (4% 13 year olds, 22% 15 year olds) who have ever used or taken drugs is similar to the national average.

#### **Availability of Drugs**

31% of 15 year olds and 56% of 13 year olds did not know how easy or difficult it would be to get illegal drugs.

9% of 15 year olds and 16% of 13 year olds reported that it would be impossible for them to get illegal drugs.

14% of 15 year olds and 2% of 13 year olds reported that it would be very easy to get illegal drugs.

#### **Changes over time**

Compared with 2006, there has been an increase in the proportion of 15 year olds who say they would find it impossible to get illegal drugs (from 4% in 2006 to 9% in 2010). There has also been a decrease in the proportion of 13 year olds reporting that it would be 'very' or 'fairly' easy to get illegal drugs (from 18% in 2006 to 11% in 2010).

## **5. PLANNING TO MEET NEEDS**

5.1 The purpose of the 2012-15 Delivery Plan is to:

- articulate MELDAP's priorities for the next three years building on its original Drugs and Alcohol Strategy 2010-13
- describe to others how we intend to respond to a range of alcohol and drug issues in East Lothian and Midlothian, in order to reduce harm and promote recovery
- describe how we will engage with people whose lives are affected by alcohol or drugs including children affected by parental substance misuse
- demonstrate how we will work with others to offer well designed, high quality services to achieve our vision
- demonstrate how we will deliver services in an open, transparent and cost effective manner.

5.2 MELDAP launched its three year Drugs and Alcohol Strategy in 2010. The strategy and linked Implementation Plan identified 6 priorities. Table 2 shows how the strategy's priorities linked to the recently published National Outcomes for ADPs and the East Lothian Council's and the Midlothian's Council's Single Outcome Agreements (SOA).

5.3 The 2012-15 Delivery Plan builds on the 6 priorities of the 2010 strategy. Table 2 shows how the Delivery Plan's priorities are linked to the National Outcomes for ADPs and the East Lothian and the Midlothian Single Outcome Agreement (SOA).

5.4 MELDAP is represented on and reports to the Adult Social Care Theme Groups. It is also represented on Community Safety Partnerships and GIRFEC groups which are key groups within the respective councils' Community Planning structures.

**Table 2**

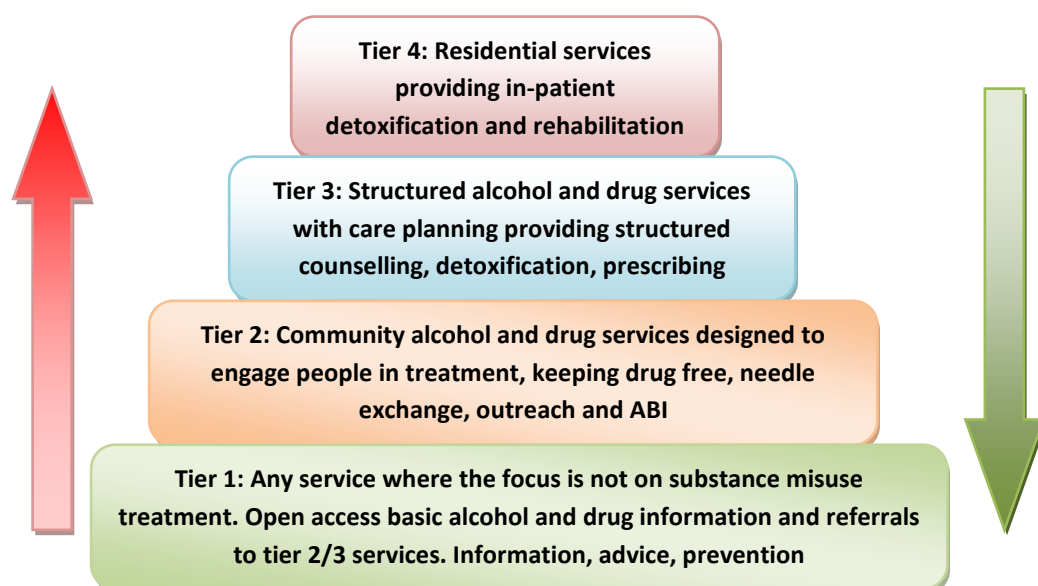
National Outcomes for ADPs	MELDAP Delivery Plan Priorities	Single Outcomes Agreements
1. HEALTH: People are healthier and experience fewer risks as a result of alcohol and drug use	<p>Priority 1: We will enable more people living in East Lothian and Midlothian to adopt a more responsible approach to alcohol</p> <p>Priority 2: We will enable people with substance problems to recover from them and live healthy crime free lives</p>	<p><b>East Lothian:</b> We live healthier, more active independent lives.</p> <p><b>Midlothian:</b> We live longer, healthier lives</p>
2. PREVALENCE: Fewer adults are drinking and using drugs at levels or patterns that are damaging to themselves and others	<p>Priority 1: We will enable more people living in East Lothian and Midlothian to adopt a more responsible approach to alcohol</p> <p>Priority 4: We will reduce the harm related to young people's substance misuse</p>	<b>Midlothian:</b> Fewer people are affected by alcohol and drug misuse
3. RECOVERY: Individuals are improving their health and well-being and life chances by recovering from problematic drug use	Priority 2: We will enable people with substance problems to recover from them and live healthy crime free lives	
4. FAMILIES: Children and family members misusing alcohol and drugs are safe, well-supported and have improved life-chances	Priority 3: We will reduce the harm to children and young people affected by parental substance misuse	<p><b>East Lothian:</b> The life chances for children, young people and families at risk or with a disability are improved</p> <p><b>Midlothian:</b> We have improved the life chances for children, young people and families at risk.</p>
5. COMMUNITY SAFETY: Communities and individuals are	Priority 5: We will protect communities from the harmful	<b>East Lothian:</b> Fewer people experience

safe from alcohol and drug related offending and anti-social behaviour	effects of substance misuse	anti-social behaviour  <b>Midlothian:</b> We live our lives safe from crime, disorder & danger
<b>6. LOCAL ENVIRONMENT: People live in positive, health promoting local environments where alcohol and drugs are less readily available</b>	Priority 5: We will protect communities from the harmful effects of substance misuse	<b>East Lothian:</b> Fewer people experiences antisocial behaviour
<b>7. SERVICES: Alcohol and drugs prevention, treatment and support services are high quality, continually improving, efficient evidence based and responsive ensuring people move through treatment into sustained recovery</b>	Priority 6: We will develop services for young people, adults and families which are equitable, readily accessible and designed around their needs.	<b>Midlothian:</b> Ensure the delivery of national policy designed to address drug and alcohol misuse including children and families affected.

5.5 To deliver the Strategy's six priorities MELDAP and its partners will require to provide a range of services to meet the diverse needs of adults, young people, families and children affected by their own or someone else's substance misuse. It requires to promote and commission a wide range of possible interventions; from information, campaigns, counselling and advice to recovery focused services including the capacity to use residential services for clients in crisis; plus the need to adopt a whole population approach to alcohol use as well as targeting specific areas and groups due to emerging information from services.

5.6 The Scottish Ministerial Advisory Committee on Alcohol Problems in its report, Quality Alcohol Treatment and Support (2011) made the following recommendation. *'Local services should be based on a 'stepped care' approach within the tiered model set out in the Alcohol Problems Support and Treatment Service Framework (2002).* These definitions are from "Models of care for the treatment of adult drug users: Update 2006" by the National Treatment Agency. Figure 2 illustrates the tiered approach MELDAP will adopt to commissioning services over the duration of the plan.

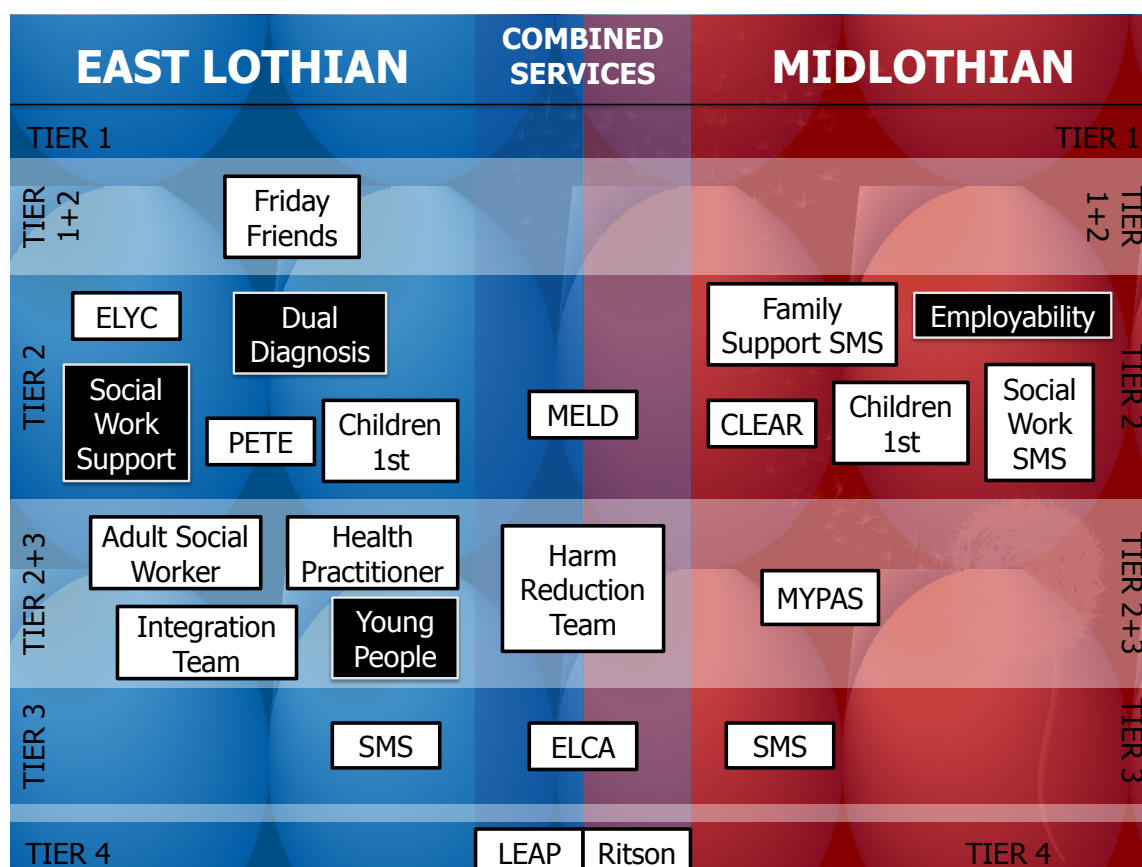
Figure 2



## 6. MELDAP SERVICES

6.1 MELDAP currently has a number of providers of Tier 1, 2 and 3 services across East Lothian and Midlothian through its main partners; NHS Lothian, East Lothian and Midlothian Councils and the third sector. Because of the historic development of these services under the auspices of the two previous Drugs and Alcohol Action Teams not all the services listed are offered across both council areas. Figure 3 shows the current provision of services, with the areas in black indicating gaps in services, for example, employability services in Midlothian and dual diagnosis and specialist young people's services in East Lothian.

Figure3.



6.2 The **Lothian and Edinburgh Abstinence Programme** (LEAP) based in Edinburgh provides a Tier 4 service for up to 10 East Lothian and 10 Midlothian clients annually. At present this is the only residential rehabilitation service offered although East Lothian and Midlothian residents have access to the inpatient assessment and detoxification ward of 12 beds, the Ritson Ward located within the Royal Edinburgh Hospital.

6.3 **Edinburgh and Lothian Council on Alcohol** (ELCA), **Midlothian and East Lothian Drugs** (MELD) and the **East Lothian and the Midlothian Substance Misuse Services** provide primarily but not exclusively Tier 3 interventions. Services provided would include:

- Advice and support

- Detailed Assessments
- Individualised Care Plans
- Counselling in addictions
- Substitute prescribing
- Needle exchange
- Specialist GP and psychologist support.

ELCA also provides a service to prisoners on remand in HMP Edinburgh and Addiewell Prison. This service extends to community based support at a number of locations across East Lothian and Midlothian once the prisoners are liberated.

6.4 ***The Pathways to Education, Training and Employment*** project (PETE) is a Tier2 service and works with people aged 16-65 with a recent history of substance misuse to provide a range of activities and training opportunities which include sports, career building and counselling.

6.5 ***Midlothian Young People's Advice Service*** (MYPAS) offers a variety of Tier1/2 services for young people aged 12-25 and through the *Connect* service provides support and interventions which includes alcohol/drug support, individual counselling, group work, art therapy and linked sexual health information such as contraception/emergency contraception and pregnancy testing. The connected service also undertakes street work at a number of locations across Midlothian

6.6 The ***Community Lived Experience and Recovery*** (CLEAR) Project provides a Tier 1/2 service for adults with co-occurring alcohol and mental health problems. Using a peer support approach the project provides information, education training and support to adults in Midlothian.

6.7 Tier 1 services aimed at protecting children and supporting families are provided through MELDAP funded posts which include:

- Two Substance Misuse Support Officers located within the East Lothian Early Intervention Team provide support to school aged pupils who are misusing alcohol and/or drugs as well as training for school staff and support community events.
- Specialist Health Nurse providing direct support to individual young people who are looked after or accommodated including information, advice, signposting to relevant services and support in the transition to adult services.
- The Children 1<sup>st</sup> Family Support Service co-located within the Substance Misuses Service works directly with vulnerable families affected by parental substance misuse. Family Group Conferencing and a Young Carers Project in Midlothian are also provided by Children 1<sup>st</sup>
- East Lothian Young Carers Project provides support and respite to young people and children affected by parental substance misuse.

- Friday Friends, in East Lothian provides support, information and advice to adults with a substance misuse problem and/or mental health issue.
- MELDAP provides, through its website, a wide range of alcohol and drug information for both the public and professionals, details about a wide range of East Lothian and Midlothian services contributing to protecting adults, families and children from their own or someone else's substance misuse.

6.8 Currently MELDAP part funds with other Lothian ADPs a SMART Recovery Co-ordinator with the remit of establishing a number of mutual aid/self-help support groups across East Lothian and Midlothian.

6.9 The decision-making on substance misuse funding from Scottish Government is made complex in Lothian because there are three Alcohol and Drug Partnerships within the Health Board area and NHS Lothian is accountable for the allocation. A process was formally agreed in December 2011. This process draws on the local experience of partnership working between ADP partners and requires a combination of transparent partnership decision-making at a pan-Lothian and local ADP level.

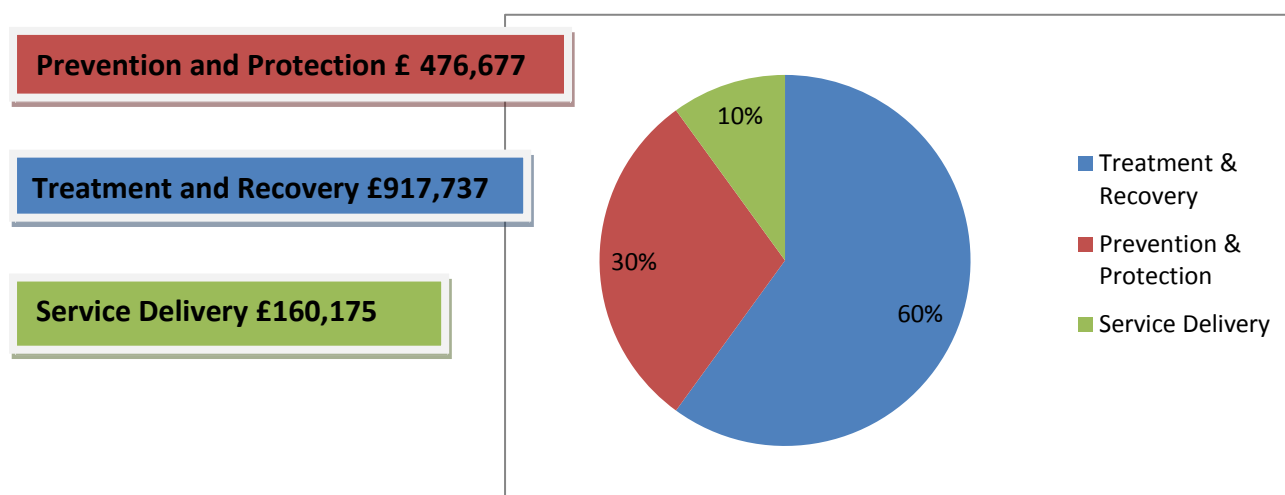
6.10 NHSL remains accountable for the expenditure but funding to support the delivery of priority outcomes is determined collectively by ADPs. There is transparent and effective engagement with partners on investment decisions, in line with the national delivery framework for ADPs. Strategic decision making sits within Alcohol and Drug Partnerships

6.11 A strategic finance group (composed of NHSL representatives and ADP Chairs) agrees the overall approach to allocation of funding and confirms the overall finance envelope that each ADP need to work within. The primary role of the group is to agree the resources available for current and future financial years to enable ADPs and the Delivery Group to plan effectively.

6.12 Decision-Making on Alcohol/Drug funding for services is made in partnership through the ADP Commissioning Group and is aligned with local need and with ADP strategies. Decisions on the Support Funding should be developed through the pan Lothian Delivery Group and is signed-off by ADP Chairs. Some spending continues to be allocated directly through NHSL, but ADP members are working to transfer responsibility for decision-making on these 'top-sliced' allocations to individual ADP commissioning groups.

6.13 Figure 4 shows the planned distribution of MELDAP funds for 2012-13 under three broad areas and each as a percentage of total spend. It is recognised that for 2012 onwards there will be a need to review planned service expenditure in order to deliver the key priorities in the Delivery Plan including the development of an Integrated Recovery Pathway.

**Figure 4 - MELDAP Expenditure 2012**



6.14 Table 3 shows the income and planned expenditure for 2012-13 on a service by service basis.

**Table3**

**Income**

Source	Alcohol	Drugs	MELDAP team
Scottish Government (via NHS Lothian)	£548,778.00	£548,778.00	£1,097,556.00
East Lothian Council	£88,405.50	£88,405.50	£176,811.00
Midlothian Council	£109,314.00	£109,314.00	£218,628.00
City of Edinburgh Council		£10,000.00	£10,000.00
Criminal Justice Authority		£10,200.00	£10,200.00

**Expenditure**

<i>Treatment and Recovery</i>			
Tier	Service	Funding	Cost
4	Lothian and Edinburgh Abstinence Programme	MELDAP	*£50,000.00
4	Ritson Clinic based at Royal Edinburgh Hospital	MELDAP NHS Lothian	*£? £?
3	Substance Misuse Service (Drugs), Midlothian	MELDAP NHS Lothian	£96,978.00 £?

<b>3</b>	Substance Misuse Service (Alcohol), Midlothian	MELDAP NHS Lothian	£98,869.00 £?
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<b>3</b>	Substance Misuse Service (Drugs), East Lothian: assessment, prescribing, detox, counselling	MELDAP NHS Lothian	£124,629.75 £?
<b>3</b>	Substance Misuse Service (Alcohol), East Lothian	MELDAP NHS Lothian	£198,159.15 £?
<b>3</b>	Midlothian and East Lothian Drugs (MELD)	MELDAP NHS Lothian	£120,777.22 £?
<b>3</b>	ELCA	MELDAP	£33,765.98
<b>3</b>	Social Work Substance Misuse Team (Midlothian)	MELDAP	£136,345.00
<b>3</b>	Social Worker (East Lothian)	MELDAP	£40,140.00
<b>3</b>	SMART Recovery support for self-help/mutual aid groups	MELDAP	*£10,000.00
<b>3</b>	PETE (East Lothian)	East Lothian Council/MELDAP	£62,640.83
<b>3</b>	VOCAL: Midlothian	MELDAP	£5,432.50
<b>3</b>	Harm Reduction Team	MELDAP NHS Lothian	*£? £?

\*MELDAP's contribution to Lothian wide services.

<b><i>Prevention and Protection</i></b>			
<b>Tier</b>	<b>Service</b>	<b>MELDAP Funding</b>	<b>Cost</b>
<b>2</b>	MYPAS (Midlothian)	Midlothian Council/MELDAP	£156,039.85
<b>2</b>	Children 1 <sup>st</sup> (Midlothian)	Midlothian Council/MELDAP	£122,498.81
<b>2</b>	Children 1 <sup>st</sup> (East Lothian)	East Lothian Council/MELDAP	£16,476.64
<b>2</b>	East Lothian Young Carers Project	East Lothian Council/MELDAP	£54,111.70
<b>2</b>	Specialist Health Practitioner (East Lothian)	MELDAP	£16,854.08
<b>2</b>	Friday Friends(East Lothian)	MELDAP	£9,771.17
<b>2</b>	CLEAR (Midlothian)	MELDAP	£21,931.00
<b>2</b>	Integration Team Substance Misuse Support (East Lothian)	MELDAP	£73,593.98

<b>1</b>	MELDAP: Training, campaigns, publications & information	MELDAP	£5,400.00
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<b>Service Delivery</b>			
<b>Tier</b>	<b>Service</b>	<b>Funding</b>	<b>Cost</b>
<b>1</b>	MELDAP Team, commissioning, strategy, quality assurance	Scottish Government	£152,653.12
<b>2</b>	Service User Involvement, service design and evaluation	MELDAP	£7,522.00

6.11 Further work is needed with NHS Lothian to build a more accurate picture of non-ADP service provision with regard to identifying and quantifying the total alcohol and drug spend including preventive approaches such as ABIs as well as treatment services provided by GPs and the Harm Reduction Team.

## **7. KEY PRIORITIES FOR 2012-2015**

7.1 The key priorities noted previously (seeTable2) in the original MELDAP three year strategy are still relevant. They can be grouped under four broad strands of activity and service development for the purpose of the 2012-2015 Delivery Plan. The four strands are:

1. Preventing future harm caused by the misuse of alcohol and drugs

2. Reducing harm and promoting recovery

3. Protecting and safeguarding children, young people and communities

4. Commissioning and assuring high quality, cost effective and outcomes focused services

7.2 While the four strands are identified separately there are many clear links among them. For example, more parents and carers in treatment and recovery services will improve the life chances of children previously affected by their parent's substance misuse, which in turn will contribute to breaking the cycle of dependency found in many families. Reducing episodes of binge drinking for all ages will reduce the risk of immediate harm and the disruption caused to communities as a result of the associated anti-social behaviour.

7.3 Because of the interconnectedness of these strands services themselves have to be able to make connections, form partnerships and alliances in order to offer a more holistic level of care and support for individuals and families engaging with them.

### *Preventing future harm caused by the misuse of alcohol and drugs*

***There are critical points where a carefully timed intervention could generate a positive outcome by reducing the likelihood that a young person will drink frequently and drink to excess. These interventions require co-ordination at a national, local and frontline level involving families, schools and support services.*** (Young people, alcohol and influences, Joseph Rowntree Foundation 2011)

8. Preventing problematic substance misuse is one of the key functions of the partnership. This is done through a range of interventions from school based alcohol and drug programmes, family support programmes and social norm campaigns to the commissioning of specific services designed to support young people whose substance use behaviour is placing them at risk. This will require:

- the development of evidence based alcohol and drug programme for schools, education centres including use in informal settings, trialling the use of the In:tuition resource
- support for parents and carers to ensure they have relevant substance misuse information and advice
- develop family based prevention programmes
- workplace and community alcohol and drugs campaigns, using social marketing and social norm campaigns to ensure specific targeted approaches to certain population groups
- to continue to commission specific services for young people misusing alcohol and drugs
- an increase in the level of support for the most vulnerable groups of young people such as looked after and accommodated young people and their transition into adult services
- to develop further the scope for engaging with young people through street work activities, particularly in East Lothian
- develop creative approaches to working with young people and getting their active involvement in service design
- to support the use of ABIs in community settings.

### *Reducing harm and promoting recovery*

***The strength of the recovery principle is that it can bring about a shift in thinking - a change in attitude both by service providers and by the individual with the drug problem. There is no right or wrong way to recover. Recovery is about helping an individual achieve their full potential - with the ultimate goal being what is important to the individual, rather than the means by which it is achieved.*** (Road to Recovery, Scottish Government 2008)

9. MELDAP recognises that for most individuals with drug and alcohol dependencies, problems are often multi-layered and complex. They relate to the range of skills or capabilities a person might

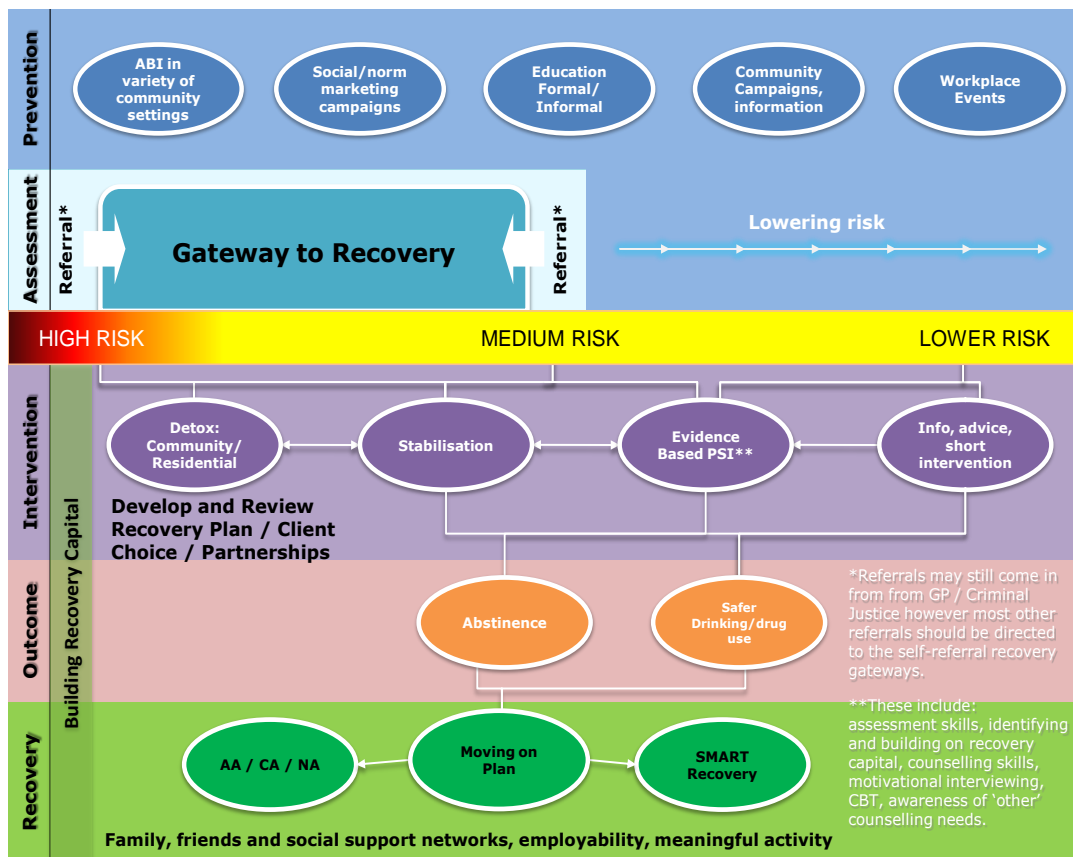
possess, their access to and relationships with different networks within their social sphere, and the availability and access to resources and opportunities within their community and surrounding environment.

9.1 Research has shown that recognising a person's possession of, or access to, such skills, resources and assets can be indicative of a person's capacity to overcome problematic drug use. These variables can be thought of as a person's recovery capital, that is, the breadth and depth of internal and external resources that can be drawn upon to initiate and sustain recovery from substance misuse problems. Evidence indicates that people who have access to recovery capital are better able to address problem drug use than those who do not. Recovery capital can be described as having these components:

- ***Social capital:*** support received and commitment to others "resulting from relationships"
- ***Physical capital:*** money and safe place to live
- ***Human capital:*** "skills, mental and physical health, and a job;"
- ***Cultural capital:*** "values, beliefs and attitudes held by the individual.

Figure 4 illustrates MELDAP's view of an integrated recovery pathway based on the idea of a 'scale of risk' which includes the need for prevention, early intervention, treatment, recovery and ongoing support. Central to this model is the notion of recovery and building recovery capital at an individual, service and community level.

**Figure 4**



9.2 Adopting this model will require that a variety of services are available and accessible to meet the changing needs of people in recovery. They need to be designed to provide an integrated recovery pathway that aims to combine and co-ordinate all available resources to meet the assessed needs of people entering treatment and on the road to recovery.

9.3 This will require treatment, care and support to be person centred, inclusive and holistic in order to address a range of needs. A co-ordinated, integrated recovery pathway will provide a range of interventions which will include;

- triage and comprehensive assessment
- structured psychosocial interventions
- referral to appropriate counselling services
- community or home detoxification or referral for in-patient detoxification
- clinical prescribing
- needle exchange, BBV testing and vaccination
- family support, including the needs of children
- support into education, training, volunteering and employment
- support with accommodation and benefits.

9.4 The design of such an integrated pathway requires MELDAP to embark of significant review of services with the possibility of disinvestment in all or some services in order to create the financial resources required to create the new integrated recovery pathway and direct savings made to develop more community based recovery services, including self-help networks and early intervention type services.

*Protecting and safeguarding children, young people and communities*

***Improving outcomes for children affected by their parents' substance misuse (CAPSM), is a priority for the Scottish Government. This is because these children can often be at risk of sustained neglect and other forms of abuse.*** (Scottish Government 2012)

10. Children of substance misusing parents are at greater risk of having their needs neglected as the parent's dependency on the substance may become the greatest influence on the family. Children living in such homes are therefore more likely to experience some form of neglect, abuse, have to cope with a chaotic or volatile home life and be subject to or witness violence particularly where the substance misused is alcohol. In many such families children are left with the belief that the alcohol or drugs are more important than they are.

10.1 Evidence from many studies indicates:

- the child's physical needs and emotional are not acknowledged or are ignored
- the child receives inappropriate levels of supervision for their age
- no clear boundaries are set and there is a lack of routines for the child
- health appointments are not kept and advice is not sought for any health problems the child may experience
- the child's education will be disrupted or there will be poor levels of attendance and educational attainment
- lack of family roles with children assuming a parental role.

10.2 Early identification of problematic parental substance misuse and provision of appropriate early interventions is key to minimising the risk of harm to children. To this end MELDAP will:

- commission an assessment of need to establish an accurate picture of the number and needs of young people affected by parental substance misuse
- identify gaps in knowledge and share effective practice in early identification of problematic use, assessment and intervention
- develop or reconfigure services and interventions based on the outcomes of the CAPSM needs assessment to ensure an early intervention approach is adopted
- continue to fund services which support families affected by substance misuse, protect children at risk and provide respite for carers of substance misusing adults

- enhance the role of harm reduction services in initiating discussion and reflection with parents about their drug use and its impact on family life
- support service activities which develop protective factors and promote resilience.

10.3 Resident surveys indicate that the MELDAP area is a good and safe place to live with 99% of people surveyed saying that East Lothian is a good or very good place to live (up from 97% in 2009) In both council areas alcohol and drugs are not included in people's top three priorities. In 2011 3% noted that, *Rowdy behaviour, e.g. drunkenness, hooliganism or loutish behaviour* was fairly of very common down from 14% in 2009.

10.4 Information from Lothian and Borders Police Public Perception Survey (2010 and 2011) indicated that for the MELDAP area, in 2011 20% said, 'people using or dealing drugs' was a big problem' up from 16% in 2010. The percentage of respondents noting that, 'people being drunk or rowdy in public places' had remained the same over the two surveys at 17%. The most interesting outcome from these surveys was when asked, 'Which of the following priorities do you feel Lothian and Borders Police should concentrate on?' the number one priority (73% in 2011) and (71% in 2010) was Drug dealing or use.

*Commissioning and assuring high quality, cost effective recovery focused services*

***Drug and alcohol problems are major problems in Scotland but resources to address them are not always used effectively.*** (Drug and alcohol services in Scotland, Audit Scotland 2009)




11. In order to deliver the outcomes in the Delivery Plan, balance budgets, ensure an appropriate balance across the Tier 1-4 services, and increase the proportion of spend on early intervention activity MELDAP needs to ensure that it has high quality, high performing, and people centred services. MELDAP will therefore:

- undertake a redesign of existing service provision to delivery an integrated recovery pathway as indicated previously in Table 4
- will ensure that there is the correct balance of service provision across each of the four tiers
- will give priority to ensuring children and young people are safe from the harmful effects of substance misuse
- will set HEAT access target in excess of the national standard
- will continue the planned programme of quality assurance visits and develop further the use of service presentations to the Performance Group on delivering outcomes and service performance






- will ensure that all services have an agreed Service level Agreement containing outcomes, service outputs, performance targets and costs
- will ensure all services have an agreed Service User Involvement policy
- will have established a meaningful level of service user involvement within the MELDAP group structure
- will conduct a Best Value Review with a quarter of its services
- will support a third sector service achieve the PQASSO Quality Mark and roll out the benefits of obtaining this quality mark.

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## TABLES OF OUTCOMES AND INDICATORS








\*Status notes, where appropriate comparison with Scotland figure:  worse than  same as  better than


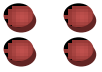

From local surveys and data:  negative change  positive change

<b>Theme: Preventing future harm caused by the misuse of alcohol and drugs</b>					
<b>Core Outcome1. Health:</b>					
People are healthier and experience fewer risks as a result of alcohol and drug use					
<b>MELDAP Outcome</b>	<b>Indicator</b>	<b>Data Source</b>	<b>Performance</b>	<b>*Status</b>	<b>Comments</b>
Reduced acceptability of hazardous drinking and drunkenness	Reduced incidents of alcohol related anti-social behaviour	Lothian and Borders Police (*E-Division)	Anti social behaviour incidents <b>2010</b> <b>2011</b> 916      1087		(*E-Division covers all of East Lothian and Midlothian) The figures for alcohol related anti social behaviour were slightly difficult to obtain as the reference code when the incident was created may not match how the incident is finalised.
	15 year olds reporting being drunk	SALSUS (2006 and 2010)	(% of 15 year olds being drunk between 4-10 times) <b>2006</b> <b>2010</b> <b>Scotland</b> <b>14%</b> <b>16%</b> East Lothian      12%      16% Midlothian      16%      19%	 	Compared with the 2006 survey there has been a 3% increase in Midlothian a 4% increase in East Lothian, double the national increase, in the percentage of 15 year olds who reported being drunk between 4-10 times.
Fewer people are drinking above recommended weekly guidelines	Increased number of individuals drinking within guideline levels	SHeS (2008)	(% of adults exceeding weekly limits) <b>Scotland 25%</b> Lothian 30%		From the Ipsos Mori data there were 18 concentrations of hazardous alcohol consumption in East Lothian.
		SHeS (2010)	(% of adults who are 'problem drinkers') <b>Scotland 9%</b> Lothian 11% Mean weekly alcohol consumption among adults aged 16 and over declined from		In Midlothian 11 concentrations of hazardous drinking has been identified. In both authorities areas with significant rates hazardous drinking are areas of 'relative affluence.' Levels of harmful consumption are

			14.1 units in 2003 to 11.6 units in 2010. Among men, mean units per week fell from 19.8 units in 2003 to 16.0 units in 2010, while among women mean weekly consumption fell from 9.0 to 7.6 units.		more likely to be in areas of deprivation across both council areas.
Increased knowledge and changed attitudes to alcohol and drinking	Number of ABI undertaken  <				

	<p>Rate of alcohol related admissions for 2008/09 (3 year rolling average)</p> <p>Rate of alcohol related deaths (any mention)</p>	<p>ISD (2011)</p> <p>Alcohol Statistics Scotland (2011)</p>	<p><b>Scotland 1.5</b> East Lothian 1.5 (n=586) Midlothian 1.4 (n=507)</p> <p><i>(Standardised death rate/100,000 population)</i></p> <table><tr><td></td><td><i>Males</i></td><td><i>Females</i></td></tr><tr><td><b>Scotland</b></td><td><b>52.4</b></td><td><b>20.5</b></td></tr><tr><td>East Lothian</td><td>33.1</td><td>15.3</td></tr><tr><td>Midlothian</td><td>31.5</td><td>12.7</td></tr></table>		<i>Males</i>	<i>Females</i>	<b>Scotland</b>	<b>52.4</b>	<b>20.5</b>	East Lothian	33.1	15.3	Midlothian	31.5	12.7	<div></div> <div></div>	
	<i>Males</i>	<i>Females</i>															
<b>Scotland</b>	<b>52.4</b>	<b>20.5</b>															
East Lothian	33.1	15.3															
Midlothian	31.5	12.7															
Reduced drug related morbidity and death	<p>Decrease in number of drug related deaths</p> <p>Increase in number of Take Home Naloxone kits issued</p>	<p>GROS (1996-2010)</p> <p>Harm Reduction Team</p>	<p><i>(Average deaths /1000 population)</i></p> <p><b>Scotland 0.10</b> East Lothian 0.06 Midlothian 0.07</p> <p><i>(Annual averages)</i></p> <table><tr><td></td><td><b>1996-2000</b></td><td><b>2006-2010</b></td></tr><tr><td>East Lothian</td><td>2</td><td>5</td></tr><tr><td>Midlothian</td><td>3</td><td>6</td></tr></table> <p>Baseline figure of 67 kits issued in the year 2010-11.</p>		<b>1996-2000</b>	<b>2006-2010</b>	East Lothian	2	5	Midlothian	3	6	<div></div> <div></div>	<p>While the average/1000 population is lower than the Scotland figure the actual numbers while small have continued to rise. Toxicology reports show polydrug use with alcohol frequently reported.</p> <p>Increase year on year the number of Naloxone Kits issued and the number of overdose prevention training sessions offered. Target of at least 100 kits issued during year ending 2014.</p>			
	<b>1996-2000</b>	<b>2006-2010</b>															
East Lothian	2	5															
Midlothian	3	6															

Theme: Preventing future harm caused by the misuse of alcohol and drugs						
Core Outcome 2.Prevalence: Fewer adults and children are drinking or using drugs at levels and patterns that are damaging to themselves and others						
MELDAP Outcome	Indicator	Data source	Performance			Status
Reduced prevalence of drug and alcohol use	Proportion of 15 year old pupils who used illicit drugs in the last month.	SALSUS (2006 and 2010)	Scotland	2006 13%	2010 11%	 
			East Lothian	12%	12%	
			Midlothian	9%	7%	
	Proportion of 15 year olds drinking once a week or more.	SALSUS ( 2006 and 2010)	Scotland	2006 26%	2010 20%	 
			East Lothian	28%	21%	
			Midlothian	30%	17%	
	Estimated number and prevalence rate of problem drug use amongst 15-64 year olds by ADP	ISD (2011)	Scotland	2006 1.6%	2009-10 1.7%	
			MELDAP	1.4%	1.2%	
	Estimated prevalence of injecting drug use amongst 15-64 year olds	ISD (2012)	Scotland	2006 8%	2010 6%	 
			MELDAP	7%	4%	
						Compared to 2006 the East Lothian has remained the same while the Midlothian figure has decreased by 2%.
						Compared to 2006 there has been a significant change in 15 year olds weekly drinking with a 7% decrease in East Lothian and a 13% decrease Midlothian. This compares to a national decline of 6%.
						While the national prevalence rate has shown a small increase there has been a fall in the MELDAP figure. The estimated number would be 1400 for the MELDAP area
						There has been a 3% reduction in the MELDAP figure between 2006 and 2010 compared to a 2% reduction nationally.

Increased knowledge of local patterns of alcohol and drug use	Improved local prevalence data on alcohol and drug use  The proportions of individuals drinking above daily and/or weekly recommended limits	Ipsos MORI commissioned survey  Scottish Health Surveys (2003 and 2010)	Ipsos MORI report provided to MELDAP in 2011.  <b>Scotland</b>  <b>2003</b> <b>28%</b>  <b>2010</b> <b>22%</b>		Targeted action to specific groups through social norm campaigns and social marketing approaches primarily affluent communities drinking at hazardous levels.
Increase in the age of first alcohol and drug experimentation	Proportion of 15 year olds who have never had an alcoholic drink  Proportion of 15 year olds who have never tried drugs	SALSUS (2006 and 2010)  SALSUS (2010)	<b>2006</b> <b>Scotland</b> <b>16%</b> East Lothian 13% Midlothian 11%  <b>2010</b> <b>Scotland</b> <b>23%</b> East Lothian 17% Midlothian 18%  <b>2006</b> <b>Scotland</b> <b>74%</b> East Lothian 77% Midlothian 74%  <b>2010</b> <b>Scotland</b> <b>79%</b> East Lothian 78% Midlothian 85%	  	<p>Across the MELDAP area there has been an increase in the number of 15 year olds who have never had an alcoholic drink. However both figures are still lower than the national figure. Pilot use in a number of primary and secondary schools of the <b>In:tuition</b> life skills programme.</p> <p>There has been a significant increase in 15 year olds in Midlothian who have <b>never</b> used drugs up 15% from the 2006 survey.</p> <p>Pilot in a number of primary and secondary schools family based alcohol and drugs programme.</p>

Theme: Reducing harm and promoting recovery							
Core Outcome 3. Recovery: Individuals are improving their health, well being and life chances by recovering from problematic drug and alcohol use.							
MELDAP Outcome	Indicator	Data Source	Performance			Status	Comments
Improved physical, and mental well-being	Reduction in the number of clients injecting in the last month	ISD (2011)	Scotland	2009-10 27%	2010-11 24%	<div><div></div><div></div><div></div><div></div></div>	While there has been a 5% reduction in Midlothian reflecting the trend nationally (-3%) there has been a 3% increase in East Lothian.  <b>System to gather information will be established during 2012.</b>
	Positive changes to client’s well being noted in care plans	SMS, MELD, ELCA, PETE	East Lothian	23%	26%		
	Percentage of clients reducing/abstaining level of drug/alcohol use	ISD	Midlothian	25%	20%		
Increase in the number accessing and engaging with alcohol and drug treatment services	Reduction in the number of DNA  The number of clients sustaining planned programme of support (12 weeks)	SMS, MELD, ELCA, PETE  SMR 25b	MELDAP	2010/11 84	2011/12 139	<div><div></div></div>	Services report the introduction of the Recovery Gateways in January 2012 has significantly reduced the level of DNA services experience.  There has been a 40% increase in the number of clients still engaged with services at 12 week review
Increase the range of community based mutual aid	Number of groups established and sustained.	MELDAP	Target is a minimum of 6 SMART recovery groups established by 2015			<div><div></div></div>	In 2011 there were no SMART recovery groups established in the MELDAP area. Three groups have been established by April 2012.

and support groups					
Reducing the harm caused to young people misusing alcohol and drugs	<p>Increase in the number of young people accessing specialist services</p> <p>Increase in the number of young people engaged through street work services</p>	<p>MYPAS</p> <p>MYPAS</p> <p>MYPAS, East Lothian Council</p>	<p>In 2011 thirty five young people were provided with specialist 1:1 counselling for alcohol and drug misuse.</p> <p>In 2011 ninety three young people engaged in group work designed to reduce the harm associated with alcohol and drug use.</p> <p>In 2011 there were 170 weekly contacts with young people through street work services.</p>		<p>By 2015 increase capacity of 1:1 service by 20%,</p> <p>By 2015 increase the number of young people engaged in group work activity by 20%.</p> <p>Increase the weekly number of contacts by 10% by 2015.</p>



**Theme: Protecting and safeguarding children and young people**




*Core Outcome 4. Families:*

Children and family members of people misusing alcohol and drugs are safe, well supported and have improved life chances





MELDAP Outcome	Indicator	Data Source	Performance		Comments																		
The parenting capacity of substance users is improved	The number of high risk families supported by services	East Lothian, Midlothian Councils, Children 1st	support for families at risk (2010-2011) 164 families/children supported		A range of MELDAP funded services provide support to children and families affected by parental substance misuse.																		
Fewer women using drugs during pregnancy	Rate of maternities recording drug use	ISD (2011)	<div>(3 year aggregates. Rate per 1000 maternities)</div> <table><tr><td></td><td>2005/06</td><td>2007/08</td><td>2008/09</td></tr><tr><td></td><td>2007/08</td><td>2008/09</td><td>2009/10</td></tr><tr><td>Scotland</td><td>9.5</td><td>9.9</td><td>11.9</td></tr><tr><td>MELDAP</td><td>11.9</td><td>11.6</td><td>22.3</td></tr></table>		2005/06	2007/08	2008/09		2007/08	2008/09	2009/10	Scotland	9.5	9.9	11.9	MELDAP	11.9	11.6	22.3	<div><div></div></div>	<div>Care should be taken when comparing numbers over time as there has been an improvement in drug misuse recording over the last 5 years.</div> <div>Within the partnership the Midlothian rate has been historically significantly higher.</div>		
	2005/06	2007/08	2008/09																				
	2007/08	2008/09	2009/10																				
Scotland	9.5	9.9	11.9																				
MELDAP	11.9	11.6	22.3																				
Improved identification of children at risk	<div>Number of dependent children</div> <div>Number of referrals to Substance Misuse Screening Groups</div>	<div>ISD (2011)</div> <div>Midlothian Council, East Lothian Council</div>	<div>(Percentage of individuals with dependent children.)</div> <table><tr><td></td><td>2009/10</td><td>2010/11</td></tr><tr><td>Scotland</td><td>38%</td><td>41%</td></tr><tr><td>East Lothian</td><td>41%</td><td>50%</td></tr><tr><td>Midlothian</td><td>47%</td><td>51%</td></tr></table> <div>Number of referrals to Midlothian Substance Misuse Screening Group</div> <table><tr><td></td><td>2010</td><td>2011</td></tr><tr><td></td><td>66</td><td>107</td></tr></table>		2009/10	2010/11	Scotland	38%	41%	East Lothian	41%	50%	Midlothian	47%	51%		2010	2011		66	107	<div><div><div></div><div></div></div></div> <div><div></div></div>	<div>East Lothian has shown a 9% increase in the number of clients with dependent children. The figures for both councils are well above the national figure of 41%.</div> <div>There has been a 62% increase in the referrals to the Midlothian screening group</div>
	2009/10	2010/11																					
Scotland	38%	41%																					
East Lothian	41%	50%																					
Midlothian	47%	51%																					
	2010	2011																					
	66	107																					

Improved access to services for young carers	Improved level of support for young carers	ELYC Project, Children 1 <sup>st</sup>	<i>(Number of young carers supported)</i> <div> <div>2010</div> <div>2011</div> </div> <div> MELDAP3737 </div>		
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Theme: Protecting and safeguarding children, young people and communities							
Core Outcome 5. Community Safety: Communities and individuals are safe from alcohol and drug related offending and anti-social behaviour							
MELDAP Outcome	Indicator	Data Source	Performance			Status	Comments
Reduced problem alcohol and drug use	Percentage of new clients at specialist drug treatment services who report funding their drug use through crime	ISD (2011)	Scotland	2009-10 29%	2010-11 23%	 	There has been a 31% reduction in the number of drink/drug driving offences.  

	Reduced incidents of violence against women where alcohol/drugs are noted as a significant factor.	Borders Police E-Division	<div> <div> <b>2010</b> Alcohol 1010 Drugs 61 </div> <div> <b>2011</b> 945 55 </div> </div>		There has been a 6% decrease (alcohol) and 10% decrease (drugs)
Improved sense of safer communities.	<p>Percentage of offenders given a DTTO who reoffend within one year.</p> <p>ASBO offences by Police area.</p> <p>Proportion of victims of a crime who report that the offender was under the influence of alcohol or drugs</p>	<p>SG Recorded Crime data</p> <p>Scottish Crime and Justice Survey (2008-2011)</p>	<div> <div> <b>CJA</b> <b>Scotland</b> East Lothian </div> <div> <b>2007-08</b> 192.3 - </div> <div> <b>2008/09</b> 163.3 166.7 </div> </div> <div> <div> <b>Scotland</b> L&amp;B Police </div> <div> <b>2009-10</b> 43% 19% </div> <div> <b>2010-11</b> 37% 21% </div> </div> <div> <div> <b>Scotland</b> Alcohol Drugs </div> <div> <b>2008-09</b> 58% 26% </div> <div> <b>2009-10</b> 62% 26% </div> <div> <b>2010-11</b> 63% 34% </div> </div>	  	<p>The Midlothian data is part of the Edinburgh data and therefore difficult to present separately</p> <p>Offenders substance use being noted as a factor in violent crime has between 2008-11 shown a 5% increase for alcohol and a 8% increase for drugs.</p>

Theme: Protecting and safeguarding children, young people and communities								
Core Outcome 6. Local Environment: People live in positive, health promoting local environments where alcohol and drugs are less readily available								
MELDAP Outcome	Indicator	Data Source	Performance			Status	Comments	
Reduced availability of drugs	Percentage of 15 year olds who have been offered drugs.	SALSUS (2006 and 2010)	Scotland	2006 53%	2010 42%	<div><div></div><div></div><div></div><div></div></div>	There has, in line with the national trend, been a significant reduction, particularly in Midlothian of 15 year olds being offered drugs.	
			East Lothian	48%	44%	<div><div></div><div></div><div></div><div></div></div>		
			Midlothian	54%	37%	<div><div></div><div></div><div></div><div></div></div>		
	Percentage of people perceiving drug misuse of drug dealing to be common or very common in their neighbourhood.	Scottish Household Survey (2009-2010)	Scotland	12%		<div><div></div><div></div><div></div><div></div></div>	Compared to the 2010 Perception Survey there has been a 2% increase in East Lothian and a 5% increase in Midlothian.	
		East Lothian 8% Midlothian 15%			<div><div></div><div></div><div></div><div></div></div>			
		Lothian and Borders Police Public Perception Surveys (2010-2011)	(People using or dealing drugs- A big problem)			<div><div></div><div></div><div></div><div></div></div>		
			MELDAP	2010 16%	2011 20%	<div><div></div><div></div><div></div><div></div></div>		
	Percentage of people saying they have personal experience of drug misuse dealing	Scottish Household Survey (2009-2010)	Scotland	5%		<div><div></div><div></div><div></div><div></div></div>		
			East Lothian 4% Midlothian 5%			<div><div></div><div></div><div></div><div></div></div>		
Better controlled supply of alcohol	Number of test purchase schemes	Lothian and Borders Police	(Number of test purchases carried out in E-Division)					

	carried out and proportion which fail.		<p><b>2010</b>      <b>2011</b></p> <p>Number      21      67</p> <p>Fails      4      3</p>		While there has been a significant increase in the number of test purchases carried out in 2011 compared to 2012 the number of fails has reduced.
	Percentage of people noting 'alcohol abuse' as a negative aspect of their neighbourhood.	Scottish Household Survey	<p><b>2007-08</b>      <b>2009-10</b></p> <p><b>Scotland</b>      <b>4%</b>      <b>4%</b></p> <p>MELDAP      4.7%      6.2%</p>		While the national figure has remained the same there has been a 1.5% increase in the MELDAP area.
	The number of new applications for premise or occasional licences, and proportion refused on the grounds of over provision	East Lothian and Midlothian Licensing Boards	<p>Occasional Licences issued in:</p> <p><b>2010-11</b>      <b>2011-12</b></p> <p>East Lothian      458      535</p> <p>Midlothian      166      125</p>	 	<p>In the last two years through to 31 March 2012 no licenses have been refused on the grounds of over provision.</p> <p>While the Midlothian figure for Occasional Licenses issued for 2011-12 has decreased by 25% compared to 2010-11 there has been a 17% increase in the East Lothian figure over the same period.</p>

Theme: Commissioning and assuring high quality cost effective, outcomes focused services							
Core Outcome 7. Services: Alcohol and drugs prevention, treatment and support services are high quality, continually improving, efficient , evidence based and responsive, ensuring people move through treatment into sustained recovery							
MELDAP Outcome	Indicator	Data Source	Performance			Status	Comments
The full range of needs of drug and alcohol users is addressed.	% of clients waiting for more than three weeks RTT (HEAT A11 target)	ISD	Scotland MELDAP	June 2011 17.2% 70.1%	Dec' 2011 15.1% 52.3%	<div><div></div><div></div></div>	Service performance for up to March 2012 was 67.87% against the Trajectory target of 54%, evidence of continuing improved service performance.  MELDAP target is that all services achieve 95% 3 week RTT level of performance by 2015 Service performance monitored with clear actions for improvement noted.
	Development of Integrated Recovery Pathway	MELDAP	Scoping exercise undertaken with key partners by end of may 2012 to determine extend of service redesign.				Development work on Integrated Recovery Pathway begun. Savings from service redesign will be directed towards early intervention services and activity as well as new services to reflect changing patterns of substance misuse.
	Increase the capacity of alcohol services	MELDAP	The Prevalence Service Utilisation Ratios (PSUR) rates for alcohol services are well below the Lothian and national rates. Scotland 8.2% East Lothian 2.7%   Midlothian 5.1%			<div><div></div><div></div></div>	The capacity of the main MELDAP commissioned alcohol service has been increased by 50%
Service quality is	Service performance	MELDAP quality	At April 2012 50% of services were rated as Good of better against the National Quality				100% of services rated Very Good or better by April 2015

improving	against National Quality Standards for Substance Misuse Services	assurance visits, national Quality standards	Standards for Substance Misuse Service.		Continue with planned programme of quarterly MELDAP quality assurance visits to all services. All services using and reporting on evaluation against National Quality Standards for Substance Misuse Services. Sustain and develop service presentations to Performance Group Provide annual report to Strategic Group on service quality and performance. Work with at least one third service to pilot PQASSO Quality Mark (Level 1) by 2015.
Service users views and comments are valued and used to improve services	Services conduct an annual survey of service users views  Services users are involved in the development of an agreed care plan.	MELDAP Quality Assurance visits  MELDAP Quality Assurance visits	Approximately 10% currently do this in a systematic way.  All services involve service users in the development of an agreed care plan.		80% of services have completed structured service user reviews. Develop MELDAP SUI policy, service user forum including stronger links to Strategic Group. By 2013 service user strategy developed and implemented. Systems in place for SUI at strategic level. Provide training for services on SUI.  The level of participation in the development of an agreed care plan is variable according to comments from service users. Survey service users re level of participation in care planning.
People are provided with information to help them make informed choices.	People have accurate, relevant information about all local alcohol and drug services	MELDAP	MELDAP website established in August 2011		Develop MELDAP website to reflect changing patterns of drug use and type of service provision. Develop stronger recovery focus to website content including the introduction of recovery podcasts.

					<p>Involve service users in website updates. Review and update Recovery Gateway materials and service leaflets</p>
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