

ALCOHOL AND DRUG PARTNERSHIP ANNUAL REPORTING TO THE SCOTTISH GOVERNMENT 2021/22:

- I. Delivery progress
- II. Financial framework

This form is designed to capture your **progress during the financial year 2021/22** against the of the Rights, Respect and Recovery strategy including the Drug Deaths Task Force emergency response paper and the Alcohol Framework 2018. This will not reflect the totality of your work but will cover those areas which you do not already report progress against through other processes, such as the MAT Standards.

We recognise that each ADP is on a journey of improvement and it is likely that further progress has been made since 2021/22. Please note that we have opted for a tick box approach for this annual review but want to emphasise that the options provided are for ease of completion and it is not expected that every ADP will have all options in place. We have also included open text questions where you can share details of progress in more detail. Please ensure all sections are fully completed. **You should include any additional information in each section that you feel relevant to any services affected by COVID-19.**

The data provided in this form will allow us to provide updates and assurance to Scottish Ministers around ADP delivery. We do not intend to publish the completed forms on our website but encourage ADPs to publish their own submissions as a part of their annual reports, in line with good governance and transparency. All data will be shared with PHS to inform drugs policy monitoring and evaluation, and excerpts and/or summary data from the submission may be used in published reports. It should also be noted that the data provided will be available on request under freedom of information regulations.

In submitting this completed Annual Reporting you are confirming that this partnership response has been signed off by your ADP, the ADP Chair and Integrated Authority Chief Officer.

The Scottish Government copy should be sent by **Friday 5 August 2022** to:
alcoholanddrugsupport@gov.scot

NAME OF ADP: Midlothian and East Lothian Drugs and Alcohol Partnership (MELDAP)

Key contact:

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I. DELIVERY PROGRESS REPORT

1. Education and Prevention

1.1 In what format was information provided to the general public on local treatment and support services available within the ADP?

Please select those that apply (please note that this question is in reference to the ADP and not individual services)

Leaflets/ take home information	<input checked="" type="checkbox"/>
Posters	<input checked="" type="checkbox"/>
Website/ social media	<input checked="" type="checkbox"/>
Apps/webchats	<input type="checkbox"/>
Events/workshops	<input checked="" type="checkbox"/>

MELDAP has funded a Recovery Festival in Dunbar in 2021/22. The event had been planned as an on-line [as a result of Covid restrictions] in 2021/22 however, it was agreed to deliver this in September 2022 as a public physical/face to face event

Accessible formats (e.g. in different languages) ☐

Please provide details...

Other ☐

1.2 Please provide details of any specific education or prevention campaigns or activities carried out during 2021/22 (E.g. Count 14 / specific communication with people who alcohol / drugs and/or at risk).

Campaign theme	International	National	Local
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General Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Overdose Awareness	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Seasonal Campaigns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Mental Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Communities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Criminal Justice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Youth	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Anti-social behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Reducing Stigma	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Sexual Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Other	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Please specify...Children Affected by Parental Substance Use (CAPSU) training for Foster and Kinship Carers. Online training to support Positive Approaches to Risk (alcohol and drugs) document developed in partnership with MYPAS and Midlothian Council as part of GIRFEMC working Group.

Click or tap here to enter text.

1.3 Please provide details on education and prevention measures/ services/ projects provided during the year 2021/22, specifically around drugs and alcohol (select all that apply).

Teaching materials ☐

Youth Worker materials/training ☒

Promotion of naloxone ☒

Peer-led interventions ☒

Stigma reduction ☒

Counselling services ☒

Information services ☒

Wellbeing services ☒

Youth activities (e.g. sports, art) ☐

Other ☒ Please see 1.2 above with regards to Positive Attitudes to Risk document.

1.4 Please provide details of where these measures / services / projects were delivered.

Formal setting such as schools ☒

Youth Groups	<input type="checkbox"/>	
Community Learning and Development	<input type="checkbox"/>	
Via Community/third Sector partners or services	<input checked="" type="checkbox"/>	
Online or by telephone	<input checked="" type="checkbox"/>	
Other support	<input checked="" type="checkbox"/>	Please provide details...Community based 1:1

1.5 Was the ADP represented at the alcohol Licensing Forum?

Yes ☒

No ☐

1.6 What proportion of license applications does Public Health review and advise the Board on?

All ☒

Most ☐

Some ☐

None ☐

1.7 If you would like to add any additional details in response to the questions in this section on Education and Prevention, please provide them below (max 600 words). Midlothian Council in partnership with Midlothian Young People's Advice Service (MYPAS) has developed a Positive Approaches to Risk document for all relevant services. This document covers areas such as substance use, sexual health, gambling and mental health. The document has been supported by a series of online training events. East Lothian Council has also adopted the document. The same service (MYPAS) has developed specific support in terms of LGBT+ young people's use of substances, alcohol in particular. As the service provides a range of related services; mental health, sexual health it is able to provide holistic support in areas of young people's behaviours such as alcohol use/sexual health, cannabis use/mental health.

2. Treatment and Recovery

2.1 What treatment or screening options were in place to address alcohol harms? (select all that apply)

Fibro scanning	<input type="checkbox"/>
Alcohol related cognitive screening (e.g. for ARBD)	<input checked="" type="checkbox"/>
Community alcohol detox	<input checked="" type="checkbox"/>
Inpatient alcohol detox	<input checked="" type="checkbox"/>
Alcohol hospital liaison	<input checked="" type="checkbox"/>
Access to alcohol medication (Antabuse, Acamprase etc.)	<input checked="" type="checkbox"/>
Arrangements for the delivery of alcohol brief interventions in all priority settings	<input checked="" type="checkbox"/>
Arrangements of the delivery of ABIs in non-priority settings	<input type="checkbox"/>
Psychosocial counselling	<input checked="" type="checkbox"/>
Other	<input checked="" type="checkbox"/> MELD as well as providing psycho- social interventions offers a range of complimentary therapies including auricular acupuncture.

2.2 Please indicate which of the following approaches services used to involve lived experience / family members (select all that apply).

For people with lived experience:

Feedback / complaints process
 Questionnaires / surveys
 Focus groups / panels
 Lived experience group / forum
 Board Representation within services
 Board Representation at ADP
 Other

☒
☒
☒
☒
☐
☒
☒

A third sector partner conducted a piece of local research through interviewing 20 people about their drug use. The group involved in the research identified were people at high risk because of their long-term use, poly-drug use and being socially isolated. The research was provided as evidence to the MAT Implementation Support Team [MIST] as part of the assessment of the MELDAP areas preparations for the full delivery of the Medication Assisted Treatment Standards. MELDAP, through Third Sector partners, employs a number of peer workers. Because of their unique role, peer workers provide 'informal' feedback from their work with people to managers on a range of service related issues. An annual Service User Survey is carried out by MLSUS in Dalkeith. There is also a survey carried out with a focus on access and use of services within the No11 collective service provision. MELDAP commissioned two advocacy services run by CAPS and Access to Industry. Through QI meetings themes are identified, for example, complaints about quality of treatment received.

For family members:

Feedback/ complaints process
 Questionnaires/ surveys
 Focus groups / panels
 Lived experience group/ forum
 Board Representation within services
 Board Representation at ADP
 Other

☒
☒
☐
☐
☐
☐
☒

MELDAP's programme of QI meetings with Circle, Children 1st and Midlothian Family Support Group, ensure family related issues and concerns are highlighted. Services such as CAPS (Advocacy Service) collect in a planned and systematic way through structured interviews, the views of people who have used their service including reporting on the main reasons people sought an advocate.

2.3 How do you respond to feedback received from people with lived experience, including that of family members? (max 300 words)

Feedback from previous consultation and stakeholder events has been used to shape service provision. COVID has meant that few face-to-face events have taken place over the last 12 months. The local action research mentioned earlier was used to develop the idea of low threshold cafes, which are in the process of being set up in locations across East Lothian and Midlothian.

The MELDAP Commissioning and Performance Group has two peer workers as members. These are people with lived experience. There is a commitment to include people with lived and living experience on the MELDAP Strategic Group. This process was delayed because of COVID restrictions and the introduction of the Lived and Living Experience panels, which will play an increasingly important role. MELD through its team of peer workers has been involved in formative discussions about the development of L&LE Panels.

2.4 Please can you set out the areas of delivery where you had effective arrangements in place to involve people with lived experience?

Planning, I.E. prioritisation and funding decisions
 Implementation, I.E. commissioning process, service design
 Scrutiny, I.E. Monitoring and Evaluation of services
 Other

☐
☒
☐
☐

Please provide details...

Please give details of any challenges (max 300 words)

2.5 Did services offer specific volunteering and employment opportunities for people with lived/ living experience in the delivery of alcohol and drug services?

a) Yes ☒
No ☐

b) If yes, please select all that apply:

Peer support / mentoring ☒
Community / Recovery cafes ☒
Naloxone distribution ☒
Psychosocial counselling ☐
Job Skills support ☒
Other ☐ Please provide details...

2.6 Which of these settings offered the following to the public during 2021/22? (select all that apply)

Setting:	Supply Naloxone	Hep C Testing	IEP Provision	Wound care
Drug services Council	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug Services NHS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Drug services 3rd Sector	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Homelessness services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer-led initiatives	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community pharmacies	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GPs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A&E Departments	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Women's support services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family support services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Justice services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobile / outreach services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other ... (please detail)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2.7 What protocols are in place to support people with co-occurring drug use and mental health difficulties to receive mental health care? (max 300 words)

Click or tap here to enter text.

Is mental health support routinely available for people who use drugs or alcohol but do not have a dual diagnosis (e.g. mood disorders)?

Yes ☒
No ☐

Please provide details (max 300 words)

Number 11 (Recovery Hub) is an integrated building housing mental health, SUS, Justice and Third Sector services. There are shared care pathways between each service, and lead agency standard operational procedure. No 11 has a no wrong door approach, partners work collaboratively and in partnership, provide joint shared care when required for each individual who access the services within No 11.

Number 11 has a standard operating pathway for dual diagnosis. Mental health support is routinely available as all registered nursing staff are trained mental health nurses. They also engage with other mental health specialist staff if a person requires shared care. The treatment, care and support provided includes Third Sector and peer support for psychosocial intervention, and lived experience support.

2.8 Please describe your local arrangements with mental health services to enable support for people with co-occurring drug use and mental health (max 300 words)

MELDAP provides funding for Health in Mind Community Mental Health & Wellbeing Team. The service can support people with multiple difficulties/diagnoses at the same time or in taking early recovery steps. The service takes a holistic approach to support people with the focus not on a diagnosis but on phenomena/difficulties experienced by people. The support provided includes one to one support, peer one to one and group support, peer volunteer matches, community wellbeing, arts & crafts groups, psychoeducational groups, art psychotherapy and befriending - all these activities/supports are accessible to people with substance use and mental health difficulties. This support includes peer one to one and group support for BAME people experiencing mental health and substance use difficulties, overcoming language and cultural barriers. Health in Mind also provides opportunities for people who experience mental health and substance use difficulties by providing support to gain access to unpaid and paid employment. People are supported to access other services when appropriate. This is delivered by working in partnership and collaboration with other statutory and Third Sector services to provide a network of support for people to address their both substance use and mental health issues. SMART Recovery groups and healthy lifestyle self-management groups are also provided.

2.9 Did the ADP undertake any activities to support the development, growth or expansion of a recovery community in your area?

Yes ☒
No ☐

2.10 Please provide a short description of the recovery communities in your area during the year 2021/22 and how they have been supported (max 300 words)

MELDAP has developed a ROSC over a number of years and the system continues to evolve. The services provided include two recovery cafes, the Recovery College, peer workers and a variety of support groups including SMART groups linked to the recovery groups, online support and mutual aid groups such as AA and NA. The Lothian and Edinburgh Abstinence Programme (LEAP) provides ongoing support to those completing the 12 week programme as well as to family members. Over the last 12 months MELDAP has introduced the Innovation Fund aimed at encouraging grass root groups and communities to develop new ideas to deal with substance use and promote recovery. For example, through the MELDAP Innovation Fund the Ridge project based in Dunbar commenced work on the development of a Recovery Festival, the initial festival being delayed because of COVID 19, though plans are now in place for a September 2022 Recovery Festival. If successful, it is hoped that this model of Recovery Festival will be replicated in communities across the MELDAP area.

2.11 What proportion of services have adopted a trauma-informed approach during 2021/22?

All services ☐

- The majority of services ☒
- Some services ☐
- No services ☐

Please provide a summary of progress (max 300 words)

Planning commenced to undertake a trauma informed 'walk through' of MELDAP's two recovery hubs and a trauma informed training programme linked to the MAT standards has been developed. No 11 is also a trauma informed building and Midlothian was the pilot site for Trauma informed training

2.12 Which groups or structures were in place to inform surveillance and monitoring of alcohol and drug harms or deaths? (mark all that apply)

- Alcohol harms group ☐
- Alcohol death audits (work being supported by AFS) ☐
- Drug death review group ☒
- Drug trend monitoring group / Early Warning System ☐
- Other ☐ Please provide details...

2.13 Please provide a summary of arrangements which were in place to carry out reviews on alcohol related deaths and how lessons learned are built into practice. If none, please detail why (max 300 words)

Alcohol related deaths of people who were in receipt of specialist service are reviewed by a significant adverse event meeting where a local case review is completed. If there is any learning identified, it is shared and implemented into practice

As a consequence of the COVID19 pandemic, suitably qualified staff could not be identified either through Public Health/NHS Lothian or through universities to undertake a wider review of deaths in Lothian. This pan Lothian work will continue into 2022/23.

2.14 Please provide a summary of arrangements which are in place to carry out reviews on drug related deaths, how lessons learned are built into practice, and if there is any oversight of these reviews from Chief Officers for Public Protection. (max 300 words)

In 2021/22, Drug Related Deaths (DRD) were reviewed in Midlothian and East Lothian. Previously the Lothian Substance Misuse Directorate which instigated an internal review process based on a "peer scrutiny" model, reviewed the deaths of people who were involved with an NHS service. Following the localisation of this process for governance purposes, DRDs cases are reviewed by a local HSCP SAE meeting for case review. Any lessons identified are shared and implemented into practice. Currently, there is a re-development of the process that previously reviewed those deaths of people not in service. Learning and trends are reported to the MELDAP Strategic Group and to the Drugs Harm Oversight Group at an NHS Lothian level. This work also informs developments and service changes at a Lothian as well as a Midlothian and East Lothian level.

2.15 If you would like to add any additional details in response to the questions in this section on Treatment and Recovery, please provide them below (max 300 words).

The nature of the template does not fully support reporting of the wide range of activities undertaken by the partnership aimed at reducing harm, supporting people most at risk and support to families and promoting recovery.

For example, MELDAP continued to provide digital support to those most in need through the provision of mobile phones, tablets and digital top-ups, an approach that continues to evolve to include engaging people who have experienced a Non Fata Overdose (NFO). The work of teams in providing assertive outreach to the most vulnerable including homeless and hostel accommodation and primary care with a specific emphasis on young people. The role of support provided to families for example, the role of adult carers and family members in supporting treatment and recovery goals is not fully captured.

3. Getting it Right for Children, Young People and Families

3.1 Did you have specific treatment and support services for children and young people (under the age of 25) with alcohol and/or drugs problems?

- a) Yes ☒
No ☐

b) If yes, please select all that apply below:

Setting:	0-5	6-12	12-16	16+
Community pharmacies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diversionary Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Third Sector services	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Family support services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
ORT	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recovery Communities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Justice services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobile / outreach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please provide details...				

3.2 Did you have specific treatment and support services for children and young people (under the age of 25) affected by alcohol and/or drug problems of a parent / carer or other adult?

- a) Yes ☒
No ☐

b) If yes, please select all that apply below:

Setting:	0-5	6-12	12-16	16+
Support/discussion groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diversionary Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
School outreach	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Carer support	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Family support services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mental health services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Information services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mobile / outreach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please provide details...				

3.3 Does the ADP feed into/ contribute toward the integrated children's service plan?

- Yes ☒
No ☐

Please provide details on how priorities are reflected in children's service planning e.g. collaborating with the children's partnership or the child protection committee? (max 300 words)

MELDAP contributed to Children's Services planning and activities linked to both council's respective GIRFEC/CSP boards. A series of core risk messages around alcohol and drug use were developed by Midlothian as part of a broader GIRFEC agenda to address risk-taking behaviours. MELDAP is represented on the East Lothian and Midlothian Public Protection Quality Group (EMPPQ) and reports on a number of performance measures on a quarterly basis. MELDAP also provided thematic reports to management groups in both Health and Social Care Partnerships as well to both Integrated Joint boards.

3.4 How did services for children and young people, with alcohol and/or drugs problems, change in the 2021/22 financial year?

- Improved ☒
- Stayed the same ☐
- Scaled back ☐
- No longer in place ☐

3.5 How did services for children and young people, affected by alcohol and/or drug problems of a parent / carer or other adult, change in the 2021/22 financial year?

- Improved ☒
- Stayed the same ☐
- Scaled back ☐
- No longer in place ☐

3.6 Did the ADP have specific support services for adult family members?

- a) Yes ☒
- No ☐

b) If yes, please select all that apply below:

- Signposting ☒
- One to One support ☒
- Support groups ☒
- Counselling ☐
- Commissioned services ☒
- Naloxone Training ☒
- Other ☐ Please provide details...

3.7 How did services for adult family members change in the 2021/22 financial year?

- Improved ☐
- Stayed the same ☒
- Scaled back ☐
- No longer in place ☐

3.8 The Whole Family Approach/Family Inclusive Framework sets out our expectations for ADPs in relation to family support. Have you carried out a recent audit of your existing family provision?

a) If yes, please answer the following:

Last year SG provided an additional £3.5m to support the implementation of the framework. Please provide a breakdown and a narrative of how this was used in your area.

MELDAP currently funds two services, Circle and Children 1st both of which use family inclusive approaches. This funding was used to appoint additional staff, including peer workers to increase service capacity and reduce waiting times for support.

Please detail any additional information on your progress in implementing the framework in 2020/21 (max 300 words) Circle have received £50k for one full time Family Outreach Worker from this fund. This post is funded for one year. This post holder worked with 15 whole families intensively over the course of the year with a caseload of around ten families at any one time. Outcomes include reduction or stability in relation to parental substance use; support into recovery services and to access routine appointments; reduced risk of harm from parental substance use; improved safety and parental emotional availability and efficacy via Parents under Pressure programme and wider parenting work. Advocacy for family members to have their views heard informally and within service systems. Ecological work around living conditions, housing, access to benefits, rights and entitlements. This is always strengths based and solution focused. Children's views are also expressed (by creating safety) and with support focusing on their development and potential. Circle worked alongside many partners across the whole of East Lothian on an outreach basis. Children 1st provided a similar whole family based service in Midlothian and two family project workers were added to the core service. Children 1st successes were measured against an agreed outcomes framework. Like Circle, it was the strength of relationships Children 1st had made with whole families for outcomes that have transformed lives. i.e. Families will have improved financial stability.

Outcomes achieved included:

Improved communication between family members: 87% success

Families report better conflict resolution, Families listen to each other more

Families understand each other better

Families are more connected to local community: 63% success

Attendance at local events i.e. weekend activity sessions, cooking on a budget group

Greater connection with partner agencies

Numbers of families attending support sessions

Numbers of parents / families engaging with support from partner agencies

Parents will be providing a safer, more stable environment for their children: 100% success (child will be safer). 68% (parents more able to recognise the impact)

Parents will be more able to recognise the impact substance use has / had on their family

Children will feel safer

Children will be more able to express their feelings and have a voice within their family: 87% success

Children will have a better understanding of parental substance use

Children will feel less anxious

Children will feel happier.

b) If no, when do you plan to do this?

Click or tap here to enter text.

3.9 Did the ADP area provide any of the following adult services to support family-inclusive practice? (select all that apply)

Services:	Family member in treatment	Family member not in treatment
Advice	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mutual aid	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mentoring	<input type="checkbox"/>	<input type="checkbox"/>
Social Activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Personal Development	<input type="checkbox"/>	<input type="checkbox"/>
Advocacy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Support for victims of gender based violence	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>
Please provide details...		

4. A Public Health Approach to Justice

4.1 If you have a prison in your area, were satisfactory arrangements in place, and executed properly, to ensure ALL prisoners who are identified as at risk were provided with naloxone on liberation?

- Yes ☐
- No ☐
- No prison in ADP area ☒

Please provide details on how effective the arrangements were in making this happen (max 300 words)
Click or tap here to enter text.

4.2 Has the ADP worked with community justice partners in the following ways? *(select all that apply)*

- Information sharing ☒
- Providing advice/ guidance ☒
- Coordinating activities ☐
- Joint funding of activities ☐
- Access is available to non-fatal overdose pathways upon release ☒
- Other ☐ Please provide details

4.3 Has the ADP contributed toward community justice strategic plans (e.g. diversion from justice) in the following ways? *(select all that apply)*

- Information sharing ☒
- Providing advice/ guidance ☒
- Coordinating activities ☐
- Joint funding of activities ☐
- Other ☐ Please provide details

4.4 What pathways, protocols and arrangements were in place for individuals with alcohol and drug treatment needs at the following points in the criminal justice pathway? Please also include any support for families.

a) Upon arrest (please select all that apply)

Please provide details on what was in place and how well this was executed.....

- Diversion From Prosecution ☒
- Exercise and fitness activities ☒
- Peer workers ☒
- Community workers ☒

Other

☐ Please provide details...

b) Upon release from prison (please select all that apply)

Please provide details on what was in place and how well this was executed.....

Diversion From Prosecution ☐

Exercise and fitness activities ☒

Peer workers ☒

Community workers ☐

Naloxone ☒

Other ☒

Exercise and

fitness activities –Where this is identified as a need services in East Lothian have provided gym and swimming passes to service users. However, data on the legal position of the recipient (whether it is community disposal or following a period of custody) is not collected. Although, East Lothian Justice do not employ peer workers directly they do refer and signpost to appropriate services including Heavy Sounds and Aid & Abet, as well as colleagues providing direct SUS peer support/services. Community workers – East Lothian Justice Social Work employ Social Work Assistants who deliver Voluntary Throughcare. Naloxone is also provided by workers within JSW service) Other:•JSW provide VTC to anyone released from custody and not subject to Statutory Licence/Order for 12 months after release (more details below)• TRANSITION – pre-release multi-agency meetings are provided to focus on service user needs including SUS, housing, ETE, Health .

...

4.5 If you would like to add any additional details in response to the questions in this section on Public Health Approach to Justice, please provide them below (max 300 words).

East Lothian Justice Social Work Service provide support, referral, advocacy, guidance and direction to service users where substance use (drugs or alcohol) is related to their offending behaviour. They are person-centred and always seek community-based disposals for those affected by substance use as we recognise this as a health and wellbeing issue often rooted in trauma and adverse childhood experiences. They undertake a whole person assessment and try to match provision to individual need.

Although they complete risk assessments they also focus on outcomes using the Justice Outcomes Star to support the service user to identify their goals and motivation for change. The service recognises that there is not a single solution to substance use issues and aims to work with partners to look at alternatives – assessments take cognisance of educational programmes, substitute prescribing, residential support, counselling, drop-in provisions etc. so the individual can then engage on their own terms to increase likelihood of a positive outcome.

TRANSITION supports pre-release planning and aims to make sure services have and/or, can be accessed in advance of release. We also work closely with housing colleagues to reinforce and implement SHORE where possible; engaging at point of sentence to prevent or reduce the likelihood of homelessness.

Social Work Assistants support service users to engage in wellbeing activities, including drop-in sessions, counselling and addressing isolation where substance use is clearly indicated. The intervention is user driven and we work on motivation and empowerment. The voluntary nature of this provision also supports 'stickability' where the SWA will continue to seek engagement on a regular basis – this increases the chances of the worker being available when the individual starts to become change ready.

Midlothian Justice Service works in collaboration with Third Sector partners to ensure that they are able to meet the needs of those who reside in Midlothian at the earliest possible point in their journey through the Justice system. For those identified as having risk and needs related to

alcohol and/or drug treatment, interventions are provided by Change Grow Live (CGL) as part of Fresh Start and EMORS. They work together to meet and engage with individuals who have been arrested and detained at St Leonard's Police Station Edinburgh, three times per week. This service is also available for those detained at Dalkeith Police Station but access to the cells has not been consistent. When EMORS/Fresh Start staff are not physically present at the cells; referrals are made by the custody nursing team and by police. For the year 2021 - 2022 this involved:

No. of people seen at St Leonard's by EMORS or Fresh Start: 771 (all areas), number assessed (Edinburgh, Midlothian and East Lothian)

- 63 community referrals (includes arrest referral), 97 supported
- 6 structured deferred sentence referrals, 6 supported (includes those referred prior to the start of the year)
- 11 throughcare referrals, 14 supported (includes those referred prior to the start of the year)
- 1 HDC referral, 4 supported (includes those referred prior to the start of the year)
- 2 ROLO referrals, 3 supported (includes those referred prior to the start of the year)
- Release from custody;

The Number 11 Allocation Service provides a holistic service to all those leaving custody using pro-active in reach work with individuals, prior to release, to provide co-ordinated, person centred and solution focused support to maximise a successful transition back into the community. Those referred through the Number 11 Allocation Service also includes individuals whose cases have been dealt with by the Alcohol Problem Solving Court and those subject to Community Payback Orders and who have an identified alcohol or drug treatment related need. Over the course of 2021 - 2022 Fresh Start and EMORS provided the following data:

- 8 community (includes 6 arrest referral) referrals, 14 people supported (includes those referred prior to the start of the year).
- 161 phone calls attended, 32 face to face appointments attended
- 8 throughcare referrals (includes 2 referred via arrest referral), 16 people supported (includes those referred prior to the start of the year)
- 144 phone calls, 40 face to face

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Midlothian

II. FINANCIAL FRAMEWORK 2021/22 (Should be completed by Chief Financial Officer)

A) Total Income from all sources

Funding Source (If a breakdown is not possible please show as a total)	£
Scottish Government funding via NHS Board baseline allocation to Integration Authority	909,677
2021/22 Programme for Government Funding and National Mission Funding	217,396
Additional funding from Integration Authority	
Funding from Local Authority	60,870
Funding from NHS Board	242,913
Total funding from other sources not detailed above	74,893
Carry forwards	231,370
Other	
Total	1,559,482

B) Total Expenditure from all sources

	£
Prevention including educational inputs, licensing objectives, Alcohol Brief Interventions)	23,455
Community based treatment and recovery services for adults	785,021
Inpatient detox services	6,809
Residential rehabilitation (including placements, pathways and referrals)	111,338
Recovery community initiatives	138,618
Advocacy services	0*
Services for families affected by alcohol and drug use (whole family Approach Framework)	0*
Alcohol and drug services specifically for children and young people	308,047
Drug and Alcohol treatment and support in Primary Care	28,563
Residential Rehab	0*
Whole family Approach framework	0*
Outreach	0*
Other	
Total	1,401,851

Please note "0*" figures above. It is not clear what the Scottish Government wants us to report on. For example, you note different funding sources from expenditure sources. Consequently, we have reported on core spends. Midlothian Health & Social Care Partnership/MELDAP are content to report further on other specific new funding if required.

Additional Finance Comments –The spend programme is cast over a 3-year period, to ensure financial sustainability, however due to the level of carry forward the HSCP will accelerate investments in 2022/23. The carry forward will be used to:

- 1] Providing a 3% uplift to all local services for 3 years.
- 2] Implement recommendations from the Midlothian and East Lothian Health Needs Assessment.
- 3] Expand women specific responses to reduce barriers to access and ensure services are women and friendly focused.
- 4] Provide funding for "Low threshold" cafés in community locations in Midlothian
- 5] Carry out an Alcohol Death review.
- 6] Fund MLSUS Admin increase from 0.8 WTE to 1 WTE.
- 7] Fund MLSUS 1.8 WTE Band 6 Nurses.

It should be noted that the impacts of Covid 19 and recruitment challenges have effected spending plans in 2021/22.

In addition, please note the "0*" figures above. The spend for these areas fall under the new allocations that were received and as such are not reported in the document. The funding and spend only relates to the core ADP funding.