

**ARGYLL AND BUTE SUBSTANCE MISUSE STRATEGY GROUP
(ABSMSG)**

as from 22nd June 2007

ARGYLL & BUTE ADAT

CORPORATE ACTION PLAN 2007- 8

CONTENTS

Section A: Alcohol and Drug Action Team details and support funding

Section B: Performance Contract

Section C: Allocation of resources and provision of services

Section D: Support and Treatment Tables

Section E: ABSMSG Progress

Section F: Drug and Alcohol Direct Spend By Partner Organisations

Section G: ABSMSG certification of Corporate Action Plan

SECTION A:

ABSMSG details and support funding

(See paragraphs 5 and 6 of the Scottish Executive guidance notes)

A. ABSMSG details and support funding

A.1 ABSMSG details

A.1.1 ABSMSG Members (please complete the table below)

Name	Designation	Organisation	Member of Workgroup/Subgroup
Iain Macnab	Chair ABSMSG	Helensburgh Addiction Rehabilitation Team	Chair of Helensburgh & Lomond Locality Group Member of Training Strategy Subgroup
Cath Cakebread	Service Officer Substance Misuse	Argyll & Bute Council	Chair of Training Strategy Subgroup Member of Hidden Harm/GOPR Subgroup Member of Licensing Subgroup Chair of Joint Future Substance Misuse Group Chair CAP working group Member of Argyll & Clyde ADAT Implementation Group until October 06
Byron Latimer	Community Sergeant	Strathclyde Police	Member of Licensing Subgroup Chair CAP working group
Josephine Bown	Head of Integrated Services	Argyll & Bute CHP	Member of Joint Future Substance Misuse Group
David Bell	Consultant Public Health Medicine (Addictions)	NHS Highland	Chair of Oban Locality Group Member of Joint Future Substance Misuse Group
Jane Macfie	Voluntary Sector Representative	Encompass (Interim Manager)	
Gordon MacKinven			Chair of Cowal Locality Group
Donnie MacMillan	Elected Member	Argyll & Bute Council	Member of Mid Argyll Locality Group
Caroline Murray		KADAS/p2w	Chair of Kintyre Locality Group
Michael Roberts			Chair of Mid Argyll Locality Group
Douglas Whyte	Service Officer – Homelessness	Argyll & Bute Council	
Post vacant	p2w Co-ordinator	DWP/Jobcentreplus	
Craig McNally	SHPO	NHS Highland	Member of Training Strategy Subgroup Member of Licensing Subgroup Member CAP working group
David Greenwell	Lead Nurse Addictions	NHS Highland	Member of Training Strategy Subgroup Member of Joint Future Substance Misuse Group Member of Argyll & Clyde ADAT Implementation Group until October 06 Member CAP working group

Name	Designation	Organisation	Member of Workgroup/Subgroup
Isabel Thomas			Chair of Islay & Jura Locality Group
Rose MacVicar	Team Secretary/Administrator	NHS Highland	Secretariat ABSMSG Minute taker for Licensing Subgroup, Locality Groups and Joint Future Substance Misuse Group Admin CAP working group

A.1.2 Please list ABSMSG subgroups and working groups for 2006-7 in the space below:

Training Strategy Subgroup
Hidden Harm/GOPR Subgroup
Licensing Subgroup
Joint Future Substance Misuse Group
CAP Working Group
7 Substance Misuse Locality Groups

A.1.3 Please list the ABSMSG's partners for 2006-7 in the space below:

Drug Treatment and Testing Orders Steering Group
Argyll & Bute Area Child Protection Committee
Children with Additional Social Needs
CHP Child Protection Group
Children with Social Needs
Health & Wellbeing (subgroup of Community Planning Partnership) & Public Health Networks
Encompass Steering Group
Choose Life
p2w Consortium
Community Safety Group
Best Way Forward
Health Improvement Group

A.2 ABSMSG support funding

A.2.1 Total Support Allocation: details not available due to dissolution of Argyll & Clyde Health Board in March 06 and associated Argyll & Clyde ADAT in October 06. Total of £115,000 requested for support funding for 2007/2008.

2006-7 allocation (£): _____

Carry forward (£): _____

Total (£): _____

A.2.2 Breakdown of Support Allocation Spend

Category of Spend	Scottish Executive Funding Expenditure (£)	Funding from other sources (£)	Total (£)
Salaries			
Staff costs			
Forum/meetings			
Seminars/conferences/events			
Training			
Miscellaneous spending			
Total			

A.2.3 Other Ring-fenced funding

Funding stream	Allocation	Amount spent (£)
Communications Funding (alcohol and drugs)		

SECTION B:

Allocation of resources and provision of services

(See paragraph 9 of the Scottish Executive guidance notes)

B. Allocation of resources and provision of services

B.1 Please list the ABSMSG's key priorities for 2006-07:

Recruitment of Part time Consultant Psychiatrist (Addictions)
 Increase capacity of Community Alcohol and Drug Action Teams by recruitment of E Grade Nurse for MAKI and Senior Addiction Worker for Helensburgh & Lochside area
 Development of Training Strategy
 Securing funding for STRADA Trainer to assist in the implementation of the new training strategy
 Primary Care staff training in terms of alcohol misuse
 Development of Argyll & Bute Alcohol & Drug Action Team
 Proposal for Integrated Health & Social Work Services Structure
 Audit of specialist single shared assessments

B.2 Please list the local strategies considered when allocating resources for 2006-07:

ABSMSG Drug & Alcohol Strategic Plan 2006 – 09
 Substance Misuse Training Strategy 2007 – 2010
 Joint Health Improvement Plan

B.3 Please list any needs analysis carried out which influenced the allocation of resources in 2006-07 and a summary of the key findings:

Needs Analysis	Key findings (please provide no more than 25 words of description for each key finding)
Mid Argyll Council on Alcohol & Drugs Research Study	Need for training and education in alcohol and drug related issues for range of individuals of working with young people in Mid Argyll area.
STRADA Training Needs Analysis Commissioned by Argyll & Clyde ADAT	Need to establish a training group and strategy.
Alcohol screening tool evaluation	AUDIT appears to be the favoured tool, with FAST also evaluating well

B.4 Please list any other factors which influenced the allocation of resources in 2006-7 (optional):

Dissolution of Argyll & Clyde on 31st March 2006 and subsequent dissolution of the Argyll & Clyde ADAT in October 2006.

Review of ABSMSG Alcohol & Drug Strategic Plan identified a lack of emphasis on Primary Care. Resulted in resources being allocated for an evaluation of assessment tools in a range of primary care settings. Evaluation found that AUDIT was the most favoured tool followed by FAST. Resources were then allocated for training of Primary Care staff in assessment and brief interventions for alcohol and the development of a locally enhanced scheme for GP practices.

Pilot scheme utilising breathalysers at under 18s social events successful leading to allocation of resources to purchase further nine breathalysers this year and possible further seven in year 07/08.

B.5 Please list any needs analysis research planned for 2007-8:

Report from Homelessness Nurse pilot will give information regarding links between homelessness, substance misuse issues and wider physical and mental health needs.

SECTION C:

Support and Treatment Tables

(See paragraphs 10-12 of the Scottish Executive guidance notes)

RESIDENTIAL SERVICES IN ACTION TEAM AREA:

SERVICE	REMIT	NUMBER OF BEDS	TOTAL ADMISSIONS			ADMISSIONS FROM ACTION TEAM AREA			DETAIL ANY TARGETED GROUPS
			Apr 2006 to Dec 2006	Jan- Mar 2007 Projected if actual not available	Projected Apr 07–Mar 08	Apr 2006 to Dec 2007	Jan- Mar 2007 Projected If actual not available	Projected Apr 07–Mar 08	
Red Tower	Drugs & Alcohol, Detox, Rehab & Respite	23	118	31	160	2	1	10	Homeless, Alcohol, blood borne viruses
Ronachan House	Drugs and Alcohol rehabilitation	17					13		

DEDICATED SERVICES USED OUTWITH ACTION TEAM AREA:

SERVICE	REMIT	LOCATION	NUMBER OF CLIENTS REFERRED			NUMBER OF CLIENTS ADMITTED			TOTAL ANNUAL SPEND
			Apr-Dec 2006	Jan-Mar 2007	Projected Apr 07 - Mar 08	Apr-Dec 2006	Projected Jan-Mar 07	Projected Apr 07 – Mar 08	

SHARED CARE: (Drugs Only)

Number of GP Practices signed up to local shared care scheme	
Number of pharmacists signed up to local shared care scheme	
Number of dispensings of methadone mixture	
Number of supervised dispensings of methadone mixture	

NEEDLE EXCHANGE: (Drugs Only)

SERVICE TYPE	NUMBER OF FACILITIES	NUMBER OF NEEDLES / SYRINGES DISTRIBUTED	NUMBER OF NEEDLES / SYRINGES RETURNED
Specialist	1	885	817
Outreach	1	130	219
Community Pharmacies	2	3950	310*

* no information on needles returned from 1 Community Pharmacy

SECTION D:

ABSMSG Progress

(See paragraphs 13-24 of the Scottish Executive guidance notes)

D.1 ABSMSG Progress – Culture Change and Communities

National Priority: Reduce binge drinking

Target: Reduce the incidence of adults exceeding weekly sensible drinking levels from:

- 33% to 31% for men between 1995 and 2005, and to 29% by 2010
- 13% to 12% for women between 1995 and 2005, and to 11% by 2010

D.1.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority and target
2. performance over the last 5 years (in statistical terms)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
Alcohol related deaths Argyll & Bute Council area	GROS	24 (M16 F8)	28 (M18 F10)	20 (M17 F3)	24 (M13 F11)	

D.1.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. 'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
Mid Argyll Public Health Network - Alcohol awareness raising workshop to target adults around reducing alcohol intake. Measurement - number of workshops undertaken			partially	One workshop at Health Fayre	
Plans to develop leaflet on safe drinking limits, information on where to access support will be included. (Mid Argyll Public Health Network). Measurement – number of leaflets developed and disseminated. To be completed by March 2007.	yes			Decided to use Scottish Executive (sensible drinking + what's in a drink) leaflets rather than write own. Distributed 3,000 leaflets and posters via retail outlets (including licensed premises in week prior to Christmas + outlets exhibited posters), Leaflets put in to shopping bags in supermarkets. Evaluation indicated increased alcohol awareness among 36% of people who received the leaflet.	

D.1.2 Key achievements in 2006-7 continued

Briefly summarise the key achievements in 2006-7 (continued)

<p>Implement training in screening and brief interventions (as per SIGN guideline 74) for primary care staff in Argyll and Bute 16 staff will be targeted for training. To be implemented by march 2007</p>	<p>yes</p>			<p>43 primary care staff attended in Mid Argyll. Interest in assessment and brief interventions raised. Event repeated in Oban, Lorne and Isles, PLT (Practice Learning Time). SIGN 74 guidelines promoted and disseminated at both events. Followed by 3 one day 'Adopting a brief intervention approach to hazardous and harmful drinking' courses aimed at Health Care staff, including GPs. Before introduction of locally enhanced scheme for GPs. Trained 100 staff and now have 17 GP practices in the locally enhanced scheme.</p>
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D.1.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
Distributed Healthier Scotland 'Don't push it' campaign leaflets and posters to local substance misuse forums to use in their partner agencies	One off	Posters displayed in wide range of partner agencies across Argyll and Bute including schools, community centres, drug agencies, social work offices and health clinics etc
Alcohol information including 300 unit calculators, AFS leaflets (100 of each leaflet) distributed at range of training events and seminars and given to youth workers, Women's Aid, healthy living initiatives, Strathclyde Police, specialist addiction staff and in patient psychiatric services	April 06 - March 07	Hard to accurately measure impact however information widely distributed via wide range of partners.
Police Drug and Alcohol Liaison Officer has run number of workshops e.g. teachers, older people	April 06 - March 07	10 workshops
Produced leaflet to inform public how to make an objection to alcohol licences and included info about alcohol support services.	April 06 - March 07	Widely distributed to public

D.1.4 Planned Action 2007-8

Briefly outline the key actions that you intend to take during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Secure place on licensing forum for ADAT officer once in post.	A & B ADAT	April 08
Include awareness of safe limits with festival attendees, organisers and traders at CONNECT music festival in August 07 Presence of stall Number of leaflets distributed Number of safer use messages displayed Possible survey of sample audience to determine knowledge re safe limits at beginning and repeat at end of festival.	Mid Argyll PHN alcohol sub group.	August 07

D.2 ABSMSG Progress – Culture Change and Communities

National Priority: Reduce drug and alcohol related crime and reassure communities that effective action is being taken.

D.2.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
Drunk & Incapable	Strathclyde Police	260	343	229	193	122
Other miscellaneous Licensing Charges	Strathclyde Police					69
Drinking in designated places	Strathclyde Police	104	230	115	160	217
Driving over the legal limit	Strathclyde Police	293	270	282	263	163

D.2 ABSMSG Progress – Culture Change and Communities

National Priority: Reduce drug and alcohol related crime and reassure communities that effective action is being taken.

D.2.1 Performance (Continued)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
In charge of while over the legal limit	Strathclyde Police					22
Fail to provide samples	Strathclyde Police					43
Driving/in charge of vehicle whilst unfit through drink or drugs	Strathclyde Police					22
Be concerned in the manufacture/cultivation of drugs	Strathclyde Police					6
Be concerned in the supply of	Strathclyde Police					69
In possession of	Strathclyde Police					573
Experience of neighbourhood problems: People drinking or using drugs % is very or fairly common	Strathclyde Police		15%			

D.2.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. 'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
Promotion of disclosure strategy for council tenants to be developed. Local strategy in place by March 2007			partially	Disclosure strategy includes drug use and dealing. Increased dialogue and working between partner agencies has been evident	

D.2.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
Local community in one area identified concerns re drug dealing and worked with Strathclyde Police to address these.	During April 06-March 07	Sub-judiciary so unable at this time to give report. However intelligence was gained by police and partnerships with community strengthened

D.2.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Reduce incidence of underage drinking and thus associated crime by purchasing breathalyser equipment (including container sampler) and ensuring use at under 18s social events	Strathclyde Police	7 kits purchased by June 07 and further 6 by December 07
Crimebraker Initiative to stop and search vehicles entering Argyll and Bute to detect illegal drugs.	Strathclyde Police	April 07- March 08

D.3 ABSMSG Progress – Prevention, Education and Young People

National Priority: Reduce hazardous or at risk drinking by children and young people because of the particular health and social risks.

Target: Reduce frequency and level of drinking from 20% of 12 – 15 year olds to 18% between 1995 and 2006, and to 16% by 2010.

D.3.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national target
2. performance over the last 5 years (in statistics)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
Drank in the last week 13 years old 15 year old	SALSUS (Argyll and Bute)	26% 51%				20% 31%
Ever had an alcoholic drink 13 years old 15 years old	SALSUS (Argyll and Bute)	75% 90%				63% 86%
Usually drink at least once a week 13 years old 15 years old	SALSUS (Argyll and Bute)	18% 39%				12% 23%

D.3.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. 'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
Peer Support Project Pilot to be implemented, lead CHP. Measured by number of young people trained in generic peer support skills and basic alcohol and drug information. Within CHP Resources. Timescale by March 2007		No			Project being reviewed and rewritten due to concerns identified in pilot re lack of support for peers. Will focus on life skills.
Deliver training to youth workers in Mid Argyll. Measured by number of training sessions delivered. Funding made available via successful bid to ADAT alcohol under-spend funds. To be completed by March 2007	Yes			27 people attended training session on "working with alcohol and young people". Course positively evaluated	

D.3.2 Key achievements in 2006-7 (Continued)

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
Produce protocol for schools on role of partner agencies in delivery of drug and alcohol education. Protocol to be developed and implemented by March 2007. Within existing resources.				No information available at time of submission	
Continue to develop integrated awareness events in schools and foster better links between Education & Strathclyde Police. Report at end of year regarding number and range of integrated events taking place. Within existing resources. To be completed by March 2007.			partially	Did not develop formally. However events took place in primary and secondary schools	
Develop links within Young Scot website to local information on projects, advice and services. Measured by access/hits on website. Within current resources. By March 2007				No information available at time of submission	

D.3.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
Safekids events available to all primary six children in Argyll and Bute	Annual event	Evaluated positively by 90% of pupils
Big World (Clydebank event) accessed by Helensburgh schools - aimed at secondary school children (S5+S6) to raise awareness on substance misuse issues	Annual event	
FUSIONS newsletter in Oban had feature on alcohol misuse info for parents and young people – geared towards Christmastime.	Dec 06	Newsletter delivered to range of groups for dispersal to parents.

D.3.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Safekids events available to all primary six children in Argyll and Bute.	Strathclyde Police and Education	April 07 - March 08 + on going annual event
Big World event in Dunoon aimed at all secondary school children (S5+S6) in Argyll and Bute - to raise awareness on substance misuse issues.	Strathclyde Police and Education	Autumn 07 + on going annual event if funding available
Implement Youth Alcohol Strategy.	Strathclyde Police	March 07- April 2010
Reduce incidence of underage drinking and thus associated crime by purchasing breathalyser equipment (including container sampler) and ensuring use at under 18s	Strathclyde police	7 kits purchased by June 07 and further 6 by December 07

social events.		
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D.4 ABSMSG Progress – Prevention, Education and Young People

National Priority: Reduce the proportion of young people reporting use of illegal drugs.

Target: Reduce proportion of under 25's reporting use of illegal drugs in the last month and previous year substantially, and heroin use by 25% by 2006.

D.4.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national target
2. performance over the last 5 years (in statistics)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
Used drugs in past month 13 years old 15 years old	SALSUS (Argyll and Bute)	9% 32%				5% 15%
Ever used drugs 13 years old 15 years old	SALSUS (Argyll and Bute)	15% 41%				11% 28%
Take drugs at least once a week 13yrs 15yrs	SALSUS (Argyll and Bute)	2% 10%				2% 4%
Presenting to services Under 15 years 15-19 years 20-24 years	ISD Drug Misuse Statistics	0	1 22 4	3 9 31	0 16 33	N/a

D.4.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. 'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
Provide accurate information to young people through dissemination of materials/resources (e.g. leaflets and posters) and increase young people's access to information through websites e.g. Young Scot, Health etc. Hits on website counted, audit trail kept on circulated resources. Within current resources. By March 2007	Yes			Drug leaflets distributed to range of agencies including Youth Workers, Women's Aid, healthy living initiatives, specialist addiction and in patient psychiatric services	

D.4.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity

D.4.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales

D.5 ABSMSG Progress – Prevention, Education and Young People

National Priority: Reduce harm to children affected by substance misusing parents/carers through improved multi-agency support to parents and children.

D.5.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
Children on child protection register at March 31 st 2007	ABC					
1. Total Number of children						34
2. Number where parental drug misuse was an issue						4 (12%)
3. Number where parental alcohol misuse was an issue						4 (12%)
4. No where both parental alcohol + drug misuse is an issue						8 (24%)
5. Total number where any of above is an issue						16(47%)

D.5.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. 'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
Deliver tiered training on child protection to statutory and non-statutory staff. Measured by number of staff attending training. Within current resources. To be completed by March 2007.	yes			Tiered training delivered across Argyll and Bute always incorporates alcohol and drug scenarios. Numbers will be reported in child protection committee annual report.	
Publication and distribution of ADAT GOPR booklet to all relevant staff. Measured by number disseminated. Funded via alcohol underspend. To be completed by September 2007.	yes			Over 450 Booklets distributed e.g. all health visitors in Mid Argyll, all participants on GOPR training, primary care staff attending PLT events, child protection committee, all specialist agencies, police	

D.5.2 Key achievements in 2006-7 Continued

Briefly summarise the key achievements in 2006-7				
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)		Impact at local level	Reason(s) why objective not achieved
Implement audit of SSA assessment and incorporate whether GOPR questions are being completed. Measured by % of sample completing GOPR questions. Within current resources. To be completed by March 2007	yes			Audit of specialist addiction staff demonstrated high compliance of completion of GOPR questions in SSA.
Recruit specialist addiction Social Worker for Helensburgh. Measured by number of individuals receiving support from worker. Funded via alcohol action plan funding. Timescale dependent on recruitment. Post out to advertisement.			partially	Despite advertising twice were unable to attract qualified social worker. Qualification requirement was therefore reviewed and post regraded to senior addiction worker. Post filled November 06.

D.5.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
Training on GOPR protocols delivered to multi agency groups in Helensburgh, Dunoon and Oban. Training delivered by Children 1 st . Child Protection Co-ordinator and Specialist substance misuse staff	April 06–March 07 Will continue in 07/08	207 staff attended training
3 one day 'Working with children's who's parents are substance misusers'- Child care and early years staff.	Summer – Autumn 06 1 more course in 07/08	60 staff trained
Meeting the needs of children with parents in the criminal justice system' one day course. This was a joint venture with West Dunbartonshire Council	one off	29 staff attended from West Dun + ABC.
All Councils on Alcohol and Rehabs given copy of pack, “A guide and training pack for the voluntary sector” on the requirements of the Protection of children Act 2003 covering such issues as recruitment, managing and sharing information, child protection statements and procedures etc.	one off	Allowed agencies to assess their current polices
1 day training course provided for Foster Carers by Addiction Social Worker and Nurse.	one off	23 Foster carers attended training

D.5.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Training on GOPR protocols will be delivered to multi agency groups in Mid Argyll and Kintyre	Child Protection Committee	Autumn 07
Seek funding to recruit two more social workers to work in Community Addiction Teams.	Argyll and Bute Council	March 08

D.6 ABSMSG Progress – Provision of Support and Treatment Services

National Priority: Reduce waiting times for drug treatment and rehabilitation services

D.6.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	Data Source	1 October – 31 December 2005	1 January – 31 March 2006	1 April – 30 June 2006	1 July – 30 September 2006	1 October – 31 December 2006
Referral to assessment <= 21 days Number %	(NHS GGC National Waiting Times Framework)	45 84.9%	65 84.4%	78 96.3%	59 89.4%	68 94.4%
Treatment decision to structured preparatory intervention <= 14 days Number %	(NHS GGC National Waiting Times Framework)	1 14.3%	8 50.0%	16 64.0%	9 52.9%	6 46.2%
Treatment decision to substitute prescribing <= 14 days Number %	(NHS GGC National Waiting Times Framework)	- -	8 80.0%	6 75.0%	6 100.0%	8 100.0%

D.6.1 Performance (continued)

Indicator(s)	Data Source	1 October – 31 December 2005	1 January – 31 March 2006	1 April – 30 June 2006	1 July – 30 September 2006	1 October – 31 December 2006
Treatment decision to community rehabilitation <= 14 days Number %	(NHS GGC National Waiting Times Framework)	31 88.6%	39 90.7%	37 84.1%	38 92.7%	34 85.0%
Treatment decision to residential detox <= 14 days Number %	(NHS GGC National Waiting Times Framework)	- -	1 50.0%	1 100.0%	2 100.0%	2 100.0%

D.6.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. 'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/partially		
No planned actions recorded				No waiting times at any of the Substance Misuse Services	

D.6.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity

D.6.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Recruit ADAT officer and information officer with task of developing waiting times initiative database for Argyll and Bute	To be decided by Argyll and Bute ADAT	March 08

D.7 ABSMSG Progress – Provision of Support and Treatment Services

National Priority: Increase the number of drug and alcohol misusers in contact with treatment and care services.

Target: Increase the number of drug misusers in treatment and care services by 10% by 2008.

D.7.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national target
2. performance over the last 5 years (in statistics)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
New patients/clients reported	ISD	155	161	184	168	

D.7.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. 'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
Employ Consultant Psychiatrist to develop substitute prescribing service across Argyll and Bute. To increase numbers of clients accessing services. Funded via alcohol action plan funding. Dependent on applications received. By March 07.			√		Dissolution of Argyll & Clyde health Board caused major disruption to the time line for this project
Health and Community Services addiction staff managers will support the development of DTTOs in Argyll and Bute. Measured by number of DTTOs imposed by each court. Within existing resources. By March 2007			√	DTTOs available across Argyll & Bute although some areas still unable to offer substitute prescribing due to GPs unwillingness to do so and failure to recruit specialist Consultant Psychiatrist (see above) 5 assessments 1 DTTO in Oban	

D.7.2 Key achievements in 2006-7 (continued)

Briefly summarise the key achievements in 2006-7

SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
New nursing homelessness posts will link housing and homelessness services to addiction services. This will lead to an increase in referrals from homelessness nurses to addiction services. Within current resources. By March 07	√			26 referrals made from nurses to addiction services	
Train substance misuse staff in completion of SMR 25 forms to support form going live from 1 st April 2006. Number of staff and agencies attending training provided by ISD. An increase in number of SMR 25 forms being completed. By March	√			3 training sessions offered and attended by statutory and non-statutory staff	
Ensure new ADAT service directory widely dispersed to addiction and generic agencies. Measured by number of directories dispersed + increase in number of referrals to addiction services. By September 2007. Funded via ADAT	√			Circulated to all surgeries and hospitals, social work offices statutory and non-statutory services. Circulated to locality forum members for distribution/use.	

D.7.2 Key achievements in 2006-7 (continued)

Briefly summarise the key achievements in 2006-7

SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)		Impact at local level	Reason(s) why objective not achieved
Seek to ensure that alcohol in-patient detoxification is available equally in community hospitals across Argyll and Bute by March 2007		√	Included in draft strategy by CHP for development of role of community hospitals.	
Seek to ensure in-patient detox is available in the Gryffe Unit for those patients who require specialist detox. Dependent on appointment of consultant post for Lommond and Argyll and future agreement between Highland health board and Greater Glasgow and Clyde.		√	Consultant Psychiatrist (Addictions) post not appointed	

D.7.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
Development of specialist addiction (statutory and non-statutory) services group in Oban area. Group produced information leaflet detailing all addiction services available in the area emphasising that they work in an integrated manner.	March 07	Leaflet produced March 07 to be circulated widely to potential referrers. Group continues to meet to examine and develop integrated working.
Mid Argyll PLT chose alcohol awareness as their topic. Covered screening and brief interventions pharmacology, what is an alcohol problem, local and national stats and developing protocols for home and in patient detox.	14 th June 07	43 primary care staff attended in Mid Argyll. Interest in assessment and brief interventions raised. Event repeated for Oban, Lorne and Isles. PLT. (Practice Learning Time).
Provided 3 one day and 1 two day ' Adopting a brief intervention approach to hazardous and harmful drinking ' courses aimed at Health Care staff, including GPs. Before introduction of locally enhanced scheme for GPs.	April 06- March 07	100 primary care staff trained 17 GP practices in LES.

D.7.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Implement new guidelines for alcohol home detox	Joint Future Substance Misuse Group	March 08
Support primary care staff in screening and brief interventions. CPNs will respond to requests of info/support/consultation.	Joint Future Substance Misuse Group	April 07- March 08
Deliver a two hour session to Pharmacists on the issue of 'Adopting a brief intervention approach to hazardous and harmful drinking'	Lead Pharmacist	March 08

D.8 ABSMSG Progress – Provision of Support and Treatment Services

National Priority: Increase the number of drug misusers successfully completing treatment.

D.8.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	Oct 2005-March 06	April 2006-December 2006
Number of referrals to agencies	(NHS GGC National Waiting Times Framework)			128	69	220
Number of planned discharges	(NHS GGC National Waiting Times Framework)				32	49
Number of people engaged with treatment for > 12 weeks	(NHS GGC National Waiting Times Framework)					
Discharge –					-	5
Disciplinary					25	72
Unplanned					18	23
Planned						
Total					43	100

D.8.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. 'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
Audit of SSA will be undertaken by March 07. Sample of SSA will be audited, assessment of appropriate completion and sharing of information. Within current resources. By March 07	√			Audit revealed that SSA was completed thoroughly, with up-to-date care plans, by Health & Social Work staff	

D.8.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
Cowal Community Rehab project developed local pilot scheme in partnership with local dental practice. Involved actively encouraging via prompting and text messaging clients to attend appointments.	Ongoing	Positive evaluation by clients. Written evaluation available. Vulnerable fearful clients undertook and completed dental treatment.
Crossreach staff in residential rehabilitation unit have all completed training in REBT and all have training plans linked to their posts.	Yearly + on going	Consistent approach to clients, staff eligible for registration in 09,

D.8.3 Please provide detail of any other achievements/initiatives (not detailed above) (continued)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
Specialist addiction staff undertook a 3 day advanced course on motivational interviewing with tapes of their work submitted to trainer between training days.	Jan- March 07. (1 day per month)	13 addiction staff from statutory and non statutory sector trained. Course positively evaluation by course participants.

D.8.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Implementation of training strategy to enhance staff skills.	Training sub group	August 07– March 08
Oban Integrated services group to distribute leaflet prompting their services. Aim to increase numbers being referred and increase referrers' understanding of services and they integrate.	Oban Integrated services group	June 07

D.9 ABSMSG Progress – Provision of Support and Treatment Services

National Priority: Increase the number of people recovering from drug and alcohol problems entering training, education and employment.

D.9.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
Number of clients accessing p2w provision	p2w stats		40	44	26	92
Number of clients in p2w provision gaining employment (for 13 weeks+)	p2w stats			6 (3)	13 (2)	15 (8)
Number of clients in p2w provision entering furthered/training	p2w stats			6	3	27

D.9.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. 'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
If possible apply for extension to p2w contract beyond March 07. Will be able to continue the service for this client group building on previous year's achievements. Project will be measured by number of clients seen within three community rehabs/counselling agencies. (Targets have been set previously for p2w Contact). Dependent on DWP policy re continuing p2w beyond March 07. Funding Secured to March 07.	√			Contract extended to March 2008	
An ADAT Employability Consultation event was held in February to develop employability action plan. This is currently in progress. Action plan by August 2006. Implementation ongoing. Feedback in CAP by March 2007		√			Dissolution of Argyll & Clyde ADAT with no support staff allocated to Argyll & Bute area

D.9.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity

D.9.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Future of p2w will be decided by Jobcentre Plus.		

D.10 ABSMSG Progress – Provision of Support and Treatment Services

National Priority: Reduce the number of drug related deaths.

Target: Reverse the upward trend in drug-related deaths and reduce the total number, by at least 25% by 2006.

D.10.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
Drug related deaths	ISD	5	3	4	3	

D.10.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. 'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
Improve access to Naloxone treatment through provision of training. Measured by number of people trained to administer Naloxone. Within current resources. By March 2007.			√	Training of addiction CPNs completed.	Loss of specialist pharmacist post funded by Argyll and Clyde ADAT. delayed any further action
Ensure any drug related death is examined for preventable factors. A meeting will be convened to consider each drug death. Through ADAT Drug Death Action Group. Within existing resources. On going.	√			All deaths were reviewed by ADAT sub group until ADAT ceased	
Extend overdose campaign through out year. Measurement number of materials dispersed + number of staff trained +number of deaths recorded. Within current resources. By March 2007.	√			Materials distributed throughout Argyll & Bute through local forums and local training events throughout the year.	

D.10.2 Key achievements in 2006-7 Continued

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
Audit number of substance misuse agencies who have at least one member of staff who has undergone ASIST training. Measured by number of staff trained as baseline. Work towards every addiction agency having one member of staff ASIST trained. Within current resources. By March 2007	√			All non-statutory agencies have more than one member of staff who have attended Choose Life training.	

D.10.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity

D.10.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Argyll and Bute ADAT to identify members to form a group to review all drug related deaths	Argyll and Bute ADAT	March 08.

D.11 ABSMSG Progress – Protection, Controls and Availability

National Priority: Reduce the proportion of under 25's offered illegal drugs and under 18s offered alcohol.

Targets:

- Reduce the proportion of under 25's who are offered illegal drugs significantly, and heroin by 25%, by 2006.
- Continuous improvement in the weight of Category A drug seized.
- Continuous improvement in the detection of offences for supply or intent to supply Category A drugs.

D.11.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
See SALSUS figures in section D4						

D.11.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. 'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
Continue to work with substance abuse groups and young people to highlight the dangers of substance abuse. Number of experiential learning events and number of presentations attended.	√		Ongoing	Safekids events available to all primary six children in Argyll and Bute Big World (Clydebank event) accessed by Helensburgh schools - aimed at secondary school children (S5+S6) to raise awareness on substance misuse issues	
Disclosure strategy regarding council tenants to be developed. Number of disclosure made in terms of drug dealers. By March 07			partially	Disclosure strategy includes drug use and dealing. Increased dialogue and working between partner agencies has been evident	
Act on intelligence, stop and search those suspected to be in possession of drugs, obtain search warrants in respect of dealer's premises. Interdict suspected dealers and seize their assets. Number of stop/searches, number of warrants obtained, number of intelligence led operations, number of drug cases reported to PF	√		Ongoing	Local community in one area identified concerns re drug dealing and worked with Strathclyde Police to address these. Sub-judiciary so unable at this time to give report. However intelligence was gained by police and partnerships with community strengthened	

D.11.2 Key achievements in 2006-7 (continued)

Briefly summarise the key achievements in 2006-7

SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing/ partially		
Increase formal communication between Licensing Working Group, Licensing Sub Group and Public Health Network. No of meetings attended and minutes exchanged. By March 07			√	Service Officer attended Licensing Working group until group was disbanded. Licensing subgroup in abeyance until ADAT Officer in post. Lead Nurse attends Health & Wellbeing Theme group which steers the work of the Public Health Networks	
Licensing subgroup will work to ensure corporacy across both Licensing Boards in relation to standards and decisions. Corporacy achieved. By March 07			√	Licensing sub group consisted of members of both Argyll & Bute Licensing Boards. New Licensing forum in process of being developed	
Further develop Pubwatch schemes in Argyll & Bute. Increase number of licensed premises involved in schemes. By March 07		√			No interest shown by licensed premises limited scheme continuing in Helensburgh area

D.11.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity

D.11.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
New Licensing Forum being developed.	Argyll & Bute Council	June 2007
Place on Forum to be secured for ADAT Officer (when in post)-	ABSMSG steering group	June 2007
Crimebraker Initiative to stop and search vehicles entering Argyll and Bute to detect illegal drugs.	Strathclyde Police	

SECTION E:

Drug and Alcohol Direct Spend By Partner Organisations

(See paragraphs 25-29 of the Scottish Executive guidance notes)

E.1 Drug Specific Spend

Tier 1-4	Category of Spend	Scottish Executive Allocation: Drugs 2006-7 (£)	Allocation from Partner Organisation 2006-7 (£)	Partner Organisation e.g. NHS Board/Local Authority etc.	Breakdown of actual spend in 2006-7 (£)	Underspend/ overspend to 31 March 2007 (£)	Projected Spend 2007-8 (£)
2-3	Community services	503,775		NHS Highland	262,205	*241,570	288,700
2-3	Supporting People- support at home		42,134	ABC (Supporting People)	42,134		43,307
	Total:	503,775	42,134		304,339	241,570	322,007

Service Tiers:

- 1 Services for the whole community
- 2 Local services that identify and respond to people with substance misuse problems
- 3 Services for people with more complex needs
- 4 Services for people with highly specialised needs

Note: most posts are expected to work across addictions

* used to fund alcohol +combined alcohol and drug work- see NHS overspend on two following pages.

ABC =Argyll & Bute Council

E.2 Alcohol Specific Spend

Tier 1-4	Category of Spend	Scottish Executive Allocation: Alcohol 2006-7 (£)	Allocation from Partner Organisation 2006-7 (£)	Partner Organisation e.g. NHS Board/Local Authority etc.	Breakdown of actual spend in 2006-7 (£)	Underspend/ overspend to 31 March 2007 (£)	Projected Spend 2007-8 (£)
2-3		207,065	192,189	NHS Highland	486,755	(87,498)	423,000
1	Local enhanced scheme alcohol assessment and brief interventions	0	£8180	Argyll and Bute CHP	£8180		Figs not available at this time
2-3	Supporting People- support at home	0	148,655	ABC	148,655		197,605
	Total:	207,065	349,024		643,590	(87,498)	620,605

Service Tiers:

- 1 Services for the whole community
- 2 Local services that identify and respond to people with substance misuse problems
- 3 Services for people with more complex needs
- 4 Services for people with highly specialised needs

Note: posts are expected to work across addictions

ABC = Argyll and Bute Council

E.3 Combined Drug and Alcohol Specific Spend

(Only for spend which cannot be readily or meaningfully split for either drugs or alcohol and has not been accounted for elsewhere in plan)

Tier 1-4	Category of Spend	Scottish Executive Allocation 2006-7 (£)	Allocation from Partner Organisation 2006-7 (£)	Partner Organisation e.g. NHS Board/Local Authority etc.	Breakdown of actual spend in 2006-7 (£)	Underspend/ overspend to 31 March 2007 (£)	Projected Spend 2007-8 (£)
1-3	Community services			NHS Highland	**166,219	(166,219)	160,000
2	Community rehabilitation	47,219	179,878	ABC	216,791	***10,306	224,482
3	Residential supplementation		55,777	ABC	44,282	11,495	57,171
2	Children and Families (Fusions)		89,986	ABC	90,799		101,589
3	GOPR training		£15,586	A&C ADAT underspend monies	7236	8,350	8,350
	Management		44300	ABC	44300		45,408
	Total:	47,219	385,527		569,627	(136,068)	597,000

Service Tiers:

- 1 Services for the whole community-
- 2 Local services that identify and respond to people with substance misuse problems
- 3 Services for people with more complex needs
- 4 Services for people with highly specialised needs

Notes

** includes health promotion, public health medicine & management costs

*** carried forward for staff salaries in 07/08

A & C ADAT = Argyll & Clyde Alcohol and Drug Action Team

SECTION F:

ABSMSG certification of Corporate Action Plan

(See paragraph 30 of the Scottish Executive guidance notes)

This is to certify that the ABSMSG Chair and partners agree the contents of this Corporate Action Plan.

Sign below:

A & B ADAT Chair

NHS Chief Executive

Director of Community Services
