

Moray Alcohol and Drug Partnership

RECORD OF MEETING

TASK GROUP NAME:	MADP Partnership	
CHAIR PERSON:	Pamela Gowans – Chief Officer , Health & Social Care Moray	
DATE OF MEETING:	26 February 2019	
LOCATION:	Meeting Room 1, Dunbarney F	House, Dr Gray's Hospital, Elgin
APOLOGIES:	Heather Arni Jane Mackie Tara Shivaji Marie McKelvie Julie MacKay Kenny McGeough Joyce Johnston Iain MacDonald Anne Grant Beverley Hart Karen Thomson Richard Anderson	National Support Manager - SACRO Head of Community Care - MC Consultant in Public Health - NHSG Arrows Service Manager NHSG Insp, Licensing – Police Scotland Service Manager - MC Children's Wellbeing Manager – MC Assistant Service Manager – Aberlour Youth Point Moray Aberlour Youth Point Moray Unit Operational Manager, Dr Gray's - NHSG Head of Housing - MC
ATTENDING:	Paul Johnson George Flett David Munro Mandy Morrison Elidh Brown Mike Whelan Elaine Logue Fiona Raeburn Tracie Wills Bruce Woodward	MADP Lead Officer Service Manager – Aberlour Youth Point Moray Housing Manager – MC Operational Manager - Quarriers Health & Welling Co-ordinator – Tsi Moray Community Justice – Co-ordinator Police Scotland Specialist Pharmacist in Substance Misuse - NHSG Commissioning Officer – MC Senior Performance Officer - MC
MINUTES:	Louise McKenzie	MADP Administrator

AGENDA ITEM/TOPIC	ACTION POINT	ACTION BY
1. Welcome &	Pam introduced herself and welcomed everyone to the meeting.	
Apologies		
	Apologies were noted.	
2. Previous	The minutes of the previous meeting were agreed.	
Minutes & Matters Arising	Matters Arising	
Alising	Watters Arising	
	Connect More Event – 25 March	
	Paul informed the Connect More event is going ahead on 25 March and	
	encouraged colleagues to promote and attend this event. There will be	
	approximately 28 market stalls at the event.	
	Alcohol Brief Interventions	
	Paul has arranged to meet with Laura Sutherland to start planning how Moray	
	can take the strategy forward in a meaningful way.	
	2018/19 Budget Underspend	
	Paul advised there is an approximate underspend this financial year of £46K.	
	He stated he is linking in with Tracie Wills and Caroline Cameron to get a clear	
	figure.	
	Elidh informed that the funding proposals from Moray Foodbank and Street	
	Pastors submitted last month will not be going ahead.	
	There is still opportunities for non-recurrent spend and flexibility. Paul asked	
	the group if they have any thoughts or ideas on how to spend the money to	
	contact him.	
3. Q3 Reports	MADP Q3 Service User Report	
	Paul explained the quarterly report is based on all indicators we currently	
	work on and links directly with MADP Delivery Plan.	
	Highlights/Key Points	
	Waiting Times – People in Moray don't have to wait more than 3	
	weeks for a service.	
	Naloxone – With more staff it is hoped we will be see an increase in	
	Naloxone kits being handed out including re-supplies.	
	 Demand for Service – as is the historical pattern there was a reduction in demand in Q3. 	
	Age Range – Similar pattern in Q3 with the exception of the 31-40 age	
	groups, although age variation over the year is not huge.	
	Referrals —	
	Self-referrals to service continue to be the most common method of access into continue C. R's are really good at	
	method of access into services. G.P's are really good at encouraging patients to self-refer, the benefit being the	
	patient will be seen quicker.	
	Children & Families referrals to services are low. Benzodiazepines –	
	S.march & Farmines referrals to services are low. Benzoaldzepines	

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	 2018 saw a 64% increase from 2017 in the number of service users informing of illicit benzodiazepine use. Reviews – Data shows that where a person has a low score for substance use then they have a similarly low score for their Mental Health. This supports other sources of evidence in Mental Wellbeing, e.g; Drug Related Death Reviews and A & E Emergency Admissions report. Paul and Bruce will link up to discuss refining the report and making it clearer.	
	Arrows Q3 Report Paul informed members that he has quarterly review meetings with Marie and Mandy from Arrows. Arrows continue to meet the needs of the contract and there are no issues.	
	Mandy gave an overview of the Arrows Q3 report. She informed that she will be reviewing the format of the current report to incorporate the Children and Families Services within the main report. The Children and Families Service receives funding from CORRA which is match funded by MADP. Arrows have applied for continuation funding.	
	Areas of Interest	
	 Criminal Justice – Prison refers to service users who are transferred from one prison to another. The main Criminal Justice referrals are down but this is due to people being told to self-refer in order to receive a quicker service. Field Workers – The Field Workers have completed some training and shadowed Arrows and MIDAS staff. They are now working with Service Users and it's already making a difference. Their role is to get people more stable with other aspects of their life. Dry Blood Spot Testing – DBST – has seen an increased uptake from Q3 2017/18. Arrows continue to do a lot of promotion on the ground and have a strong relationship with Moray Foodbank. Arrows now have an active Facebook page. Café Recovery Manager – Recruitment is currently underway. Once someone has been appointed they will look at: How other recovery cafes work/operate How we build and co-production with Service Users How we will deliver 	
	Pam asked if Arrows use digital solutions such as 'Attend Anywhere' which is essentially a Skype platform. This could be a good solution and a different option for people. It is currently used in the Western Isles and Caithness.	

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	Pam said she will ask George McLean, Business Manager, Moray Council to touch base with Mandy to arrange testing.	
	Fiona stated she would like to see a little bit more on harm reduction in the report and how we can develop the Needle Exchange.	
4. A&E Emergency	Bruce Woodward was commissioned to update the Drug and Alcohol	
Admissions Report	Emergency Admissions to Dr Gray's report.	
	The most significant piece of information Bruce highlighted was the multiple presentations to A & E. He stated it is clear that these presentations are not just linked to drug and/or alcohol use. There is a higher prevalence of mental health issues with people presenting to A & E on multiple occasions (particularly females) due to substance use. He recommends further investigation into this link. Evidence of links between trauma and drug and/or alcohol use are solid. Paul has had a positive discussion with Karen Thompson, Unit Operation Manager for Unscheduled and Delegated Services in Dr Gray's Hospital who recognises there is an opportunity to do a piece of work.	
	Following a short discussion the group agreed to a workshop being arranged to look at opportunities to do things differently. It was also suggested that a piece of work be undertaken to find out what we know about the people presenting at A & E, look at what interventions could be offered and how we can help them as people will present differently. A good starting point would be to contact Pam Cremin and Joyce Johnston for getting data to drill down. Bruce is happy to receive information that might help and stated that sharing of information should not be a problem provided confidential data is not published.	
	Mandy and Pam emphasised that we can start looking at what changes we can make now. Pam said there is a real need to up the ante in Team Moray not silos to help people meet their potential.	
5. Drug Related Deaths Review Report	 Paul produced a briefing for the group in relation to Drug Related Deaths as he is concerned that in Moray we have seen an increase from 7 deaths in 2017 to 16 in 2018. The briefing highlights: Drug related death reviews were carried out in only 50% of cases. It should be possible to find out what happened to those not reviewed and learn from them. Benzodiazepines are referenced in all cases. Trauma is referenced in 6 cases. Mothers are more chaotic and are a higher risk when subject to childcare procedures. Increase in people reporting benzodiazepine use but there is still a lot of undeclared use. 	

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	Following a detailed and comprehensive discussion including joining up with mental health services, naloxone accessibility and availability, look to see if there are drug related death trends and drilling down further with regards to the drug related death reviews the following actions were agreed: • Look at and agree a broader strategy as part of the Community Planning Partnership. • Review the wider group, not just those in the statutory sector. • Have a look at what's out there first and bring back to the meeting.	
6. Alcohol, Drug	As there is a cross over with Drug and Alcohol and Mental Health services	
Use & Mental	Pam suggested having a workshop in May to focus on these areas.	
Health – Initial	Tam caggested harmy a memority in may to recess on these areas.	
Discussion	Pam has been in contact with Peter Rice who will be delighted to come and sit alongside us in Moray. Peter is a Consultant Psychiatrist	
7. Open Space	Pam stated she feels meeting monthly is a bit much and would like to meet	
Discussion	bi-monthly initially with a view to meeting quarterly.	
	Pam says she is happy if anyone else would like to Chair the meetings. She will be looking for a Vice Chair at the next meeting to give a group a bit of diversity and a challenge.	
	Pam asked that members think about what it is they would like to see and what we need to focus on for the next meeting. She also asked members to flag up whether there was anyone else that should be around the table.	
8. AOCB	No AOCB.	
9. Date of Next	The next MADP Partnership meeting is scheduled for Wednesday 1 May	
Meeting	2019, Meeting Room 3, Dunbarney House, Dr Gray's Hospital at 10am.	

<u>Actions</u>

- Arrange a Workshop in May 2019 focusing on Alcohol/Drug Use and Mental Health.
- Pam will ask George McLean to touch base with Arrows to test digital solutions 'Attend Anywhere'