

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 <u>progress during the financial year 2021/22</u> against the of the <u>Rights, Respect and Recovery strategy</u> including the Drug Deaths Task Force <u>emergency response paper</u> and the <u>Alcohol Framework 2018</u>. 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

COMPLETION TIMETABLE: (will be deleted before it is sent to SG)

Data contacts for completion of the ADP annual report 2021-2022:

Fiona Brown & Mark Vance (WLDAS); Lukaz Waclawski & Claire Hughes (CGL); Michael Chitehwe & Lynn Gardner (Community Addiction Service); Fiona Delaney & Anna Dean (Prison); Alex Collop (Circle)

| Date | Version | Considered By | Outcome |
|----------|---------|---|----------------|
| 23/06/22 | 1 | Template sent to data contacts for completion | For completion |
| 14/09/22 | | ADP Executive | |
| | | Final report to Scottish Government | |



| INAME OF ADE. WEST Edition | NAME OF ADP: | West Lothian |
|----------------------------|--------------|---------------------|
|----------------------------|--------------|---------------------|

Key contact:

Name: Denise Arbeiter

Job title: Team Manager Strategy Policy Change

Contact email: wladp@westlothian.gov.uk

I. DELIVERY PROGRESS REPORT

| 1. Ed | lucation | and F | reven | tion |
|-------|----------|-------|-------|------|
| | | | | |

| 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 app individual services) | oly (please note t | hat this quest | tion is in refere | nce to the ADP and not | | | |
| Leaflets/ take home informa | tion | \boxtimes | | | | | |
| Posters | | \boxtimes | | | | | |
| Website/ social media | | \boxtimes | | | | | |
| Apps/webchats | | | | | | | |
| Events/workshops | | \boxtimes | | | | | |
| Please provide details Jol | | | ent in Blackbu | rn, Regular recovery | | | |
| cafes in Blackburn, Recover | • | | | | | | |
| Accessible formats (e.g. in | different languag | es) | | | | | |
| Please provide details Other | | | | | | | |
| Other | | Ц | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 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 | | | | |
| General Health | | | | | | | |
| Overdose Awareness | | \boxtimes | \boxtimes | | | | |
| Seasonal Campaigns | | | | | | | |
| Mental Health | | \boxtimes | \boxtimes | | | | |
| Communities | | | \boxtimes | | | | |
| Criminal Justice | | | | | | | |
| Youth | | | \boxtimes | | | | |
| Anti-social behaviour | | | | | | | |
| Reducing Stigma | | \boxtimes | \boxtimes | | | | |
| Sexual Health | | \boxtimes | \boxtimes | | | | |
| Other | | | | | | | |
| Please specify | | | | | | | |
| Click or tap here to enter t | ext. | | | | | | |



| | ucation and prevention measures/ services/ projects provided ally 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 provide details |
| | |
| 1.4 Please provide details of whe | ere these measures / services / projects were delivered. |
| Formal setting such as schools Youth Groups Community Learning and Develo | · |
| Via Community/third Sector part | ners or services 📉 |
| Online or by telephone | ∐ MOutrooch |
| Other | ⊠Outreach |
| 1.5 Was the ADP represented at th | e alcohol Licensing Forum? |
| Yes ⊠ No □ | |
| | |
| 1.6 What proportion of licens on? | se applications does Public Health review and advise the Board |
| All □ Most □ Some □ None ⊠ | |
| team is represented on the L | w individual license applications. A member of the Public Health icensing Forum which in turn makes recommendations to the evel on its operations in respect of the Licensing (Scotland) Act |

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).

A Rapid Response Team within our Assertive Outreach service has a goal of outreaching all the people at risk of drug and alcohol harm within maximum 48 hours to provide harm reduction, advice, support and onward referrals if required. Assertive Outreach has been successful in



securing funding for Early Intervention Practitioner through Scottish Improvement Fund. The Coordinator will focus on supporting people with substance use who are getting involved in criminal activities and will work closely with the Custody Suites staff, Community Policing Teams as well as Defence Lawyers and Community Justice to identify people at risk and support them (including addressing their substance use) before their criminal behaviours escalate. This is to support the alternative to custody pathways in West Lothian.

WLDAS received funding to provide a Naloxone Champion for West Lothian and during the 2021/2022 financial year 33 organisations were provided training to either administer and supply THN (195 individuals) or administer Naloxone only (292 individuals) to help educate organisations and individuals to thus, hopefully assist in reducing drug related deaths. In addition, WLDAS has been working in partnership with NHS Harm Reduction Team to assertively provide IEP/harm reduction advice/interventions to individuals within their own homes or other appropriate locations across West Lothian.

| 2. Treatment and Recovery | | | |
|--|----------------------|--------------------------|------------------------|
| 2.1 What treatment or screening options apply) | s were in place to a | ddress <u>alcohol</u> ha | arms? (select all that |
| Fibro scanning | | | |
| Alcohol related cognitive screening (e.g | a. for ARBD) | | |
| Community alcohol detox | | | |
| Inpatient alcohol detox | | | |
| Alcohol hospital liaison | | \boxtimes | |
| Access to alcohol medication (Antabus | e. Acamprase etc.) | | |
| Arrangements for the delivery of alcoho | | s | |
| in all priority settings | | | |
| Arrangements of the delivery of ABIs in | non-priority setting | gs 🛛 | |
| Psychosocial counselling | | | |
| Other | | ☐ Please prov | vide details |
| | | • | |
| 2.2 Please indicate which of the following family members (select all that apply). For people with lived experience: | | ices used to invo | ive lived experience / |
| Feedback / complaints process Questionnaires / surveys Focus groups / panels Lived experience group / forum Board Representation within services Board Representation at ADP Other | ⊠ ⊠ ⊠ ⊠ ⊠ □ □ □ ■ | e provide details. | |
| For family members: | | | |
| Feedback/ complaints process Questionnaires/ surveys Focus groups / panels Lived experience group/ forum Board Representation within services | | | |



| Board Representation at ADP Other | | | Please pro | ovide details |
|--|--|---|--|---|
| | | | | |
| 2.3 How do you respond to feedback refamily members? (max 300 words) Click or tap here to enter text. Care Opinion has been implemented actively established in Recovery Service. users after every 1-1 and group work at present in CGL services in West Lothian response are made public through Care areas. WLDAS service users are provided envelope. All feedback is shared waddressed promptly and 'good news ster Furthermore, WLDAS has a well-establicatively involved in regular client surveto enhance service delivery. All feedback appropriate changes are made from recommanager attends SUAG regularly reinforms. | ross C Feedb tendan n. All fo e Opini ed with sith sta ories' f shed S ys/reso ck rece | GL se ack ar ace. Se eedba on we n an ev iff and from e Service earch ived is | ervices. Friend evaluation of the control of the co | nds and Family SMART group is on are solicited from the service is Involvement Representatives are nded to in a timely manner and the display boards in the waiting rm to complete and return in a prent and any concerns raised are are documented and shared. Sory Group (SUAG) who are naking their own recommendations I at management level and where k received. WLDAS' General |
| WLDAS Family Support group feedback recommendations/concerns are listened with the SUAG. WLDAS' General Management of the support of the supp | c is als d to an | o disc d acte | ussed at med on appro | anagement level and again priately. This group also has links |
| | | | | |
| 2.4 Please can you set out the areas of involve people with lived experience? | deliver | y whe | ere you had | effective arrangements in place to |
| Planning, I.E. prioritisation and funding Implementation, I.E. commissioning pro Scrutiny, I.E. Monitoring and Evaluation Other | cess, | servic | e design □ ⊠ | |
| Please give details of any challenges (max Click or tap here to enter text. | (300 w | ords) | | |



| 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 a | b) If yes, please select all that apply: | | | | | |
| Peer support / mentoring | \boxtimes | | | | | |
| Community / Recovery cafes | \boxtimes | | | | | |
| Naloxone distribution | \boxtimes | | | | | |
| Psychosocial counselling | \boxtimes | | | | | |
| Job Skills support | | | | | | |
| Other | | ship including SVQ qualification | | | | |
| | | | | | | |
| | | | | | | |
| 2.6 Which of these settings offer | ad the follo | wing to the public during 2021/222 (select all that | | | | |

| 2.6 Which of these settings offered the following to the public during 2021/22? (select all that apply) | | | | | | |
|---|-------------------------|---------------|---------------|-----------------|--|--|
| Setting: Drug services Council | Supply Naloxone ⊠ | Hep C Testing | IEP Provision | Wound care □ | | |
| Drug Services NHS Drug services 3rd Sector | | | ⊠ ⊠ | | | |
| Homelessness services | | | | | | |
| Peer-led initiatives | | | | | | |
| Community pharmacies | | | | | | |
| GPs | | \boxtimes | | \boxtimes | | |
| A&E Departments | \boxtimes | | | | | |
| Women's support services | | | | | | |
| Family support services | | | | | | |
| Mental health services | | | | | | |
| Justice services | | | | | | |
| Mobile / outreach services | \boxtimes | | \boxtimes | | | |
| Other (please detail) | | | | | | |

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.

Partnership meetings with all the partners from the addiction partnership 3 times a week where all the referrals are discussed and allocated appropriately to the needs.



| | upport routinely available for people who use drugs or alcohol but do not have a g. mood disorders)? |
|--|---|
| Yes No | |
| All staff are being MAT 6 and 10. WL groups on Anxiet | trails (max 300 words) Click or tap here to enter text. trained in trauma informed and psychologically informed practice to comply with DAS has been funded to deliver a groupwork programme with psychoeducation y, Depression, Survive and Thrive, Wellbeing etc. Groupwork has already begun Lothian Psychology. Referrals can be made to statutory MH services where that |
| people with co-oc Partnership meeti the referrals are d need. MH and ad | be your local arrangements with mental health services to enable support for curring drug use and mental health (max 300 words) angs with all the partners from the addiction partnership 3 times a week where all discussed and allocated appropriately to the needs. Referrals at the point of addictions services are co-managed and referrals can be made between each as a programme of improvement to develop single care plans across both |
| | |
| 2.9 Did the ADP u recovery commun | ndertake any activities to support the development, growth or expansion of a nity in your area? |
| Yes | |
| No | |
| | |
| - | de a short description of the recovery communities in your area during the year |

2021/22 and how they have been supported (max 300 words)

Recovery Service provides a variety of recovery-oriented activities from its premises in Bathgate and in the satellite location (Blackburn). We recognise that the people who access our service are often marginalised within their communities and, as a result, become socially isolated that can often result in lapses. In 2021 we were eager to relaunch our community options as quickly as possible but realised that this had to be measured against the potential risk of COVID infection. In September 2021, we decided that the benefits and mitigations available outweighed the risk. We trialled a recovery Café style event in our Bathgate Hub. Approximately 20 service users and community members attended, enjoyed some food, take part in a recovery meeting and enjoyed a few bingo games. Following the success of this event, we were determined to provide communitybased activity on a regular basis, identifying Blackburn Partnership Centre as an ideal location due to its accessibility, the need within the local area and the facilities available. We launched on the 27th of September and welcomed 12 people to the first Blackburn Recovery Café that takes place every Monday between 12:30-15:30, allowing a mixture of fun activities, a casual social environment and will always have a recovery-focused group/meeting scheduled throughout the day. Our aim is to build a sense of identity within the West Lothian Recovery Community, making Recovery visible and attractive for those seeking to break free from addiction, so we are continually looking to take part in any recovery focused activities and have supported our service user/ community members to attend the Recovery Games held in Forth Valley and the Recovery Walk in Perth. Plans for the future include expanding the Recovery Cafes across the West Lothian locality.

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) Effective partnership links with the Psychology Department to assess trauma training have been in place. Partners attend a trauma and psychological therapy subgroup. Training is being rolled out across partners and walk throughs are being planned. | | | | |
|---|--|--|--|--|
| | | | | |
| 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) Incident reporting and learning from incident are implemented across the CGL services. There is currently no capacity to meaningfully carry out alcohol death reviews. | | | | |
| | | | | |
| 2.14 Please provide a summary of arrangements which are in place to carry out <u>reviews on drug</u> <u>related deaths</u> , 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 service deaths are reviewed robustly. Out of service deaths will be reviewed on a regular basis with all the partners present. All deaths are analysed centrally within NHS Lothian. | | | | |
| | | | | |
| | | | | |
| 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). Click or tap here to enter text. | | | | |
| | | | | |



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 \boxtimes No b) If yes, please select all that apply below: Setting: 6-12 12-16 16+ Community pharmacies **Diversionary Activities** \boxtimes \boxtimes \boxtimes \boxtimes Third Sector services \boxtimes \boxtimes \boxtimes \boxtimes Family support services Mental health services ORT **Recovery Communities** Justice services Mobile / outreach Other \boxtimes Please provide details... WLDAS have a Young Person's Worker, FTE equivalent in their Therapeutic Support Services. This service provides counselling & support to young people in West Lothian, aged 12-18, who are using drugs or alcohol at levels which are impacting on family relationships, education, offending or mental health. Support is also available to young people who are impacted by a family member's substance use. The Young Person's Worker provides a range of interventions, including: One to one, evidence based, counselling and support: A flexible client-led service: Consultation with family/caregivers: Appointments arranged in appropriate community venues; Consultation with professionals. (All adult services are open for 18-25 years). 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 \boxtimes No b) If yes, please select all that apply below: 6-12 Setting: 12-16 16+



| Support/discussion groups | | | |
|--|-------------|-------------|-------------|
| Diversionary Activities | | | |
| School outreach | | | |
| Carer support | | | |
| Family support services | \boxtimes | \boxtimes | \boxtimes |
| Mental health services | | | |
| Information services | | | |
| Mobile / outreach | | | |
| Other | | | |
| Please provide details WLDAS have a Young Person's Worker, FTE equivalent in their Therapeutic Support Services. This service provides counselling & support to young people in West Lothian, aged 12-18, who are using drugs or alcohol at levels which are impacting on family relationships, education, offending or mental health. Support is also available to young people who are impacted by a family member's substance use. The Young Person's Worker provides a range of interventions, including: One to one, evidence based, counselling and support; A flexible client-led service; Consultation with family/caregivers; Appointments arranged in appropriate community venues; Consultation with professionals. (All adult services are open for 18-25 years). | | | |
| Circle are the commissioned service to work with children and families affected by parental substance use (CAPSU) through the provision of the whole family support (WFS) service for families with children under 25 years living at home or with a rehabilitation plan. THE service is commissioned to support 30 families per year, 2 FT Family Outreach Workers (FOW), with added capacity of 15 families, 1 FT FOW, through additional funding secured through Corra Foundation's 'Partnership Drug Initiative'. The Circle team are 3 FT equivalents and 0.5 managers' post. The FOW provide parenting support to help build relationships and regain boundaries as well as empowering the families to address various challenges, maintain a positive recovery journey and reducing | | | |



problems & risks to the family unit. The FOW's also meet and support with the children on a 1:1 basis to offer a safe and confidential space for children and young people to discuss their concerns and worries related to their parent's recovery and other aspects of their lives.





| 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) Partners sit om the Children's Sttaeeghy group | | | | |
| | | | | |
| 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, <u>affected</u> 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 | | | | |



| 3.7 How did services for adult family members change in the 2021/22 financial year? | | | | | |
|--|------------------------------|--|---|--|--|
| Improved | \boxtimes | | | | |
| Stayed the same | | | | | |
| Scaled back | $\overline{\Box}$ | | | | |
| No longer in place | | | | | |
| 140 longer in place | | | | | |
| | | | | | |
| | | | s out our expectations for ADPs in our existing family provision? | | |
| a) If yes, please answ | ver the followin | g: | | | |
| | | £3.5m to support the implement of how this was used in you | nentation of the framework. Please r area. (max 300 words) | | |
| WLADP approved a PSP in West Lothian to implement the framework and prioritise the development of services to meet the needs and gaps identified. The budget is £109,727 per year. Membership of the group includes statutory partners inc ADP chief offcers, voluntary sector providers, NHS Health Promotion and and is chaired by Prof Anne Whittaker from Stirling University. | | | | | |
| Please detail any add 300 words) | ditional informa | tion on your progress in imple | ementing the framework in 2020/21 (max | | |
| WLDAS were successful in a partnership proposal with Circle and Youth Action Project to Corra Drugs Services Fund – Children & Families for £100,000/5 years to compliment and contribute towards the implementation of the framework. This includes a Specialist Link Worker (WLDAS), Youth Worker (YAP) and additional family support capacity (Circle). | | | | | |
| b) If no, when do you plan to do this? Click or tap here to enter text. | | | | | |
| | | | | | |
| 3.9 Did the ADP area practice? (select all | | of the following adult servi | ces to support family-inclusive | | |
| Services: | Family memb | er in treatment | Family member not in treatment | | |
| Advice | r dinniy incino | | | | |
| Mutual aid | | | | | |
| | | | | | |
| Mentoring | | | | | |
| Social Activities | | | | | |
| Personal Developm | ent | | | | |
| Advocacy | | | | | |
| Support for victims | of gender | _ | _ | | |
| based violence | | | \boxtimes | | |
| Other | | | | | |
| that will support family | y members to pones substance | present around their experien | rom this a working group has formed ce of stigma of being part a family g is available to members of the group if | | |



| 4. A Public Health Approach to Justice | | | | |
|--|-------------------------------|--|--|--|
| 4.1 If you have a prison in your area, were satisfactory arrangements in pensure ALL prisoners who are identified as at risk were provided with na | | | | |
| Yes □ No ⊠ No prison in ADP area □ | | | | |
| Please provide details on how effective the arrangements were in making There is a process whereby a partner offers aftercare and Naloxone to protice liberations can result in difficulties. | | | | |
| | | | | |
| 4.2 Has the ADP worked with community justice partners in the following | ways? (select all that apply) | | | |
| Information sharing | \boxtimes | | | |
| Providing advice/ guidance | \boxtimes | | | |
| Coordinating activities | \boxtimes | | | |
| Joint funding of activities | \boxtimes | | | |
| Access is available to non-fatal overdose pathways upon release | \boxtimes | | | |
| 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 □ | | | | |



| b) Upon release from prison (please sele Please provide details on what was in p | ect all that apply) lace and how well this was executed |
|---|---|
| Diversion From Prosecution | |
| Exercise and fitness activities | |
| Peer workers | |
| Community workers | |
| Naloxone | \boxtimes |
| Other | ☐ Please provide details |
| | |

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).

Support for West Lothian residents in HMP Addiewell, YPI Polmont and HMP Edinburgh through Assertive Outreach and EMORSS services. Voluntary throughcare for all the West Lothian residents. Arrest referral in Livingston Custody Suites. Funding for Early Intervention Coordinator was received, and the post has been filled to provide help and support for people who are getting involved with criminal justice and would benefit from diversionary activities.



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

Your report should identify all sources of income (excluding Programme for Government funding) that the ADP has received, alongside the funding that you have spent to deliver the priorities set out in your local plan. It would be helpful to distinguish appropriately between your own core income and contributions from other ADP Partners.

It is helpful to see the expenditure on alcohol and drug prevention, treatment & recovery support services as well as dealing with the consequences of problem alcohol and drug use in your locality. You should also highlight any underspend and proposals on future use of any such monies.

A) Total Income from all sources

| 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 | |
| 2021/22 Programme for Government Funding and National Mission Funding | |
| Additional funding from Integration Authority | |
| Funding from Local Authority | |
| Funding from NHS Board | |
| Total funding from other sources not detailed above | |
| Carry forwards | |
| Other | |
| Total | |

B) Total Expenditure from all sources

| b) Total Experiantale Horn an Sources | |
|---|---|
| | £ |
| Prevention including educational inputs, licensing objectives, Alcohol Brief Interventions) | |
| Community based treatment and recovery services for adults | |
| Inpatient detox services | |
| Residential rehabilitation (including placements, pathways and referrals) | |
| Recovery community initiatives | |
| Advocacy services | |
| Services for families affected by alcohol and drug use (whole family Approach | |
| Framework) | |
| Alcohol and drug services specifically for children and young people | |
| Drug and Alcohol treatment and support in Primary Care | |
| Residential Rehab | |
| Whole family Approach framework | |
| Outreach | |
| Other | |
| Total | _ |
| | _ |

| Additional finance comments | |
|----------------------------------|--|
| Click or tap here to enter text. | |