



APPENDIX 3

Aberdeenshire Alcohol and Drug Partnership Agreement

2023

Add logos from all partners.

Contents

1. Introduction	4
2. Agreement of Partners	5
3. What is the Aberdeenshire ADP?	6
3.1. What are the Values and Principles of the ADP?	6
4. What does the ADP do?	7
5. Strategic Planning	8
6. Working Arrangements with other Partnerships	9
6.1. Community Justice Partnership	9
6.2. Children's Services Planning Partnership – GIRFEC Strategic Group	9
6.3. Aberdeenshire Integration Joint Board	9
6.4. Community Planning Partnership Board	9
6.5. Executive Group for Public Protection	10
6.6. Adult and Children Protection Committees	10
7. Financial Arrangements	11
7.1. Accountancy Support	11
7.2. Financial Information	11
7.3. Procurement Authority/Approval	12
7.4. Financial Monitoring and Governance	12
7.5. Financial honorariums	13
8. Quality Improvement	14
8.1. Performance Monitoring – Board Level	14
8.2. Accountability – External Partners	14
9. Governance and oversight	15
9.1. How does the ADP Operate?	15
9.2. Membership	15
9.3. ADP Roles and Commitments	16
9.4. Role of ADP	16
9.5. Partner Commitments	16
10. Information Sharing	18
11. Freedom of Information	19
12. Complaints	20
13. ADP Support Team	21
14. Strategic Groups	22

14.1. Drug and Alcohol Review Group	22
14.2. Community Forums	22
14.3. Community Groups	22
14.4. Communities	23
14.5. Wider Community Groups and Organisations	23
15. Appendix 1: Statutory requirements regards planning and reporting	24
15.1. Licensing Boards	24

1. Introduction

Aberdeenshire and Scotland more generally experience significantly higher levels of harm due to alcohol and other drugs and health inequalities than other parts of the UK and Europe. Preventing and addressing health and societal harm from alcohol and other drugs is a public health priority for Aberdeenshire's citizens, statutory and third sector agencies and the Scottish Government.

Aberdeenshire Alcohol and Drug Partnership (ADP) exists to draw stakeholders together to ensure a collective strategic response to problematic substance use and protecting the rights of the most vulnerable in Aberdeenshire, so that health inequalities are reduced, and life expectancy is improved. ADPs across Scotland aim to ensure a joined-up whole-system approach to alcohol and other drugs expressly integrated and owned within the operational activities of each public service organisation and community.

This Partnership Agreement has been drafted to make explicit the governance of Aberdeenshire ADP so that all partners involved are clear about the accountability arrangements and their responsibilities when working together in the identification, pursuit, and achievement of agreed, shared outcomes. It covers the mechanics of the ADP's organisation and working relationships and is quite distinct from what partners collectively aim to achieve which is described within Aberdeenshire's Alcohol and Other Drug Strategy and national strategies such as Scotland's Alcohol and Drug Strategy, Rights Respect Recovery, and the Alcohol Framework 2018.

Scottish Government and COSLA expect ADPs to lead local implementation of national alcohol and drug policy. These expectations are laid out in the overarching national Partnership Delivery Framework¹ supplemented with periodic instructions from Ministers. This partnership agreement takes account of such expectations and supersedes all previous Partnership Agreements.

This agreement sets out the Aberdeenshire ADP's approach to: -

- Strategic Planning
- Financial Arrangements
- Quality Improvement
- Governance and Oversight

¹ National Partnership Delivery Framework to Reduce the Use of and Harm from Alcohol and Other Drugs, Scottish Government and CoSLA, July 2019

2. Agreement of Partners

The partners have agreed to work together as set out in this the Partnership Agreement, which has been signed off through their internal governance processes, where relevant or appropriate and were agreed by the ADP Committee on X [anticipated 15 Sept 2023].

This agreement will apply from the commencement date of 1 Oct 2023 and shall continue on a year-to-year basis until such time that a review is requested by the sitting ADP chair, a partner or changes introduced by the Scottish Government.

This agreement shall not be regarded for any purposes as giving rise to contractual rights or liabilities but is founded on the understanding that success is dependent on continued goodwill and co-operation of Partners.

3. What is the Aberdeenshire ADP?

The ADP is a partnership of stakeholders working together to provide a collective strategic response to problematic substance use and protect the rights of the most vulnerable in Aberdeenshire.

3.1. What are the Values and Principles of the ADP?

- Treating all people with dignity, compassion, and respect, including working in a way that is anti-stigma and trauma informed.
 - Recognise and respond to the complexity of real life and the multiple needs and strengths everyone has.
 - Protect and fulfil people's human rights.
 - Recognise the importance of preventing harm and negative risk.
 - Collaboration across the system is key to developing and delivering joined-up approaches and services that reduce risk and harm and address health and other inequalities. People do not live 'single-issue lives' and single-issue services are not appropriate.
 - Promote a culture of learning, listening and reflection.
 - Use a broad evidence-base to inform our decision making including external best practice alongside internal data and qualitative insights.
 - All partners, irrespective of their size or nature will be treated equally and afforded equal opportunity of influence.
 - The ADP will account for its collective performance and efficient use of available resources.
 - Partners will account to the ADP for their contribution, implementation of agreed actions and use of ADP resources.
-

4. What does the ADP do?

The goal of the ADP is to ensure fewer people and families suffer from alcohol and other drugs so that health inequalities are reduced, and life expectancy is improved.

The ADP will work towards this goal by: -

- Ensuring a collective strategic response to problematic substance use in Aberdeenshire.
 - Promoting the human rights of rights holders affected by alcohol or other drugs.
 - Promote an anti-stigma approach to tackling problematic alcohol and substance use.
 - Enabling the active involvement of community members with a lived or living experience of alcohol or other drugs and representatives of the third sector in the work of the ADP with equal status with all other partners.
 - Conducting needs assessments to gain understanding of the local alcohol and other drug system, the difference it is making to local communities and any gaps revealed so the ADP is data and local intelligence led.
 - Publishing an evidence-based strategy to achieve collectively agreed measurable priority outcomes drawn from national strategy.
 - Clarifying partners' responsibilities in contributing to the achievement of agreed outcomes.
 - Allocating resources where necessary to ensure the delivery of priority actions designed to achieve agreed outcomes.
 - Ensuring clear governance arrangements are in place for shared, timely and effective decision making and financial allocation, accountable to local communities.
 - Ensuring a quality improvement approach to service planning and delivery which is accountable to local communities.
 - Maintaining a shared understanding of resources invested in preventing harm and reducing inequalities from alcohol and other drugs across the local system.
 - Ensuring clear monitoring and evaluation arrangements are in place and reports published for local communities, local governance structures and Scottish Government to show progress in delivering the strategy and effective use of funds.
 - Account to Scottish Government for ADP resources used to support strategy implementation and the outcomes achieved.
-

5. Strategic Planning

The Alcohol and Drug strategy sets out clearly the priorities for preventing harm from drugs and alcohol in Aberdeenshire.

The ADP will publish an evidence-based strategy to achieve the collectively agreed measurable priority outcomes drawn from national strategy as approved by the ADP Committee. The ADP will use the outcomes and priority actions set by the Scottish Government, as well as the associated monitoring and evaluation plans, to support the development of our local strategy. The Aberdeenshire ADP will collate and analyse data, including, but not restricted to, from partners, to ensure that we are data and local intelligence led. The strategy will set out the agreed outcomes and will be supplemented by a delivery plan, identifying priorities and action plans. The strategy will capture not only the elements that partners will deliver on their own but will enable partners to work together collaboratively in a co-ordinated way ensuring added value.

The Alcohol and Drug Strategy Delivery Plan brings together actions that individual partners, local partnerships and the ADP collectively are working to deliver. The Delivery Plan will be clear where responsibility lies for delivery of the action and partners commit to providing regular performance updates to the ADP in line with this agreement.

In addition to working together as a partnership to develop the Strategy and Delivery Plan, partners commit to working together to deliver the plan and to monitor progress towards delivery through performance monitoring and appropriate challenge as well as working together in a solution focussed way.

The relevant statutory requirements for the local strategic plans and reporting arrangements are set out in Appendix 1.

The outcomes achieved will result from actions that sit within the plans and strategies of the partner organisations which make up the ADP membership along with other local partnerships as detailed below. Further detail on the outcomes associated with the strategic priorities, responsibility for delivery and how performance will be measured is contained within the strategy.

6. Working Arrangements with other Partnerships

Through the development and delivery of the local strategy the ADP should identify where there are shared outcomes and priorities with other local strategic partnerships and should develop shared arrangements to support delivery and negate duplication.

6.1. Community Justice Partnership

- The Chair of the Community Justice Partnership is a member of the ADP. This link is important in identifying shared outcomes and priorities.
- The Project Manager for Community Justice is a member of the Strategic Outcomes Performance and Reporting Group to ensure representation and a link to the work of the Community Justice Partnership.
- Actions related to alcohol and drugs which are included in the Community Justice Outcomes Improvement Plan (CJOIP) and reported on the national framework will be extracted from the Community Justice Partnership Annual Report and formally shared annually with the ADP. Quarterly updates on relevant actions within the CJOIP will also be made available as deemed appropriate by the Community Justice Partnership.

6.2. Children's Services Planning Partnership – GIRFEC Strategic Group

- A member of the GIRFEC Strategic Group is a member of the ADP which facilitates identifying shared outcomes and priorities.
- Should any of the ADP Sub-Groups require expert views or their work specifically relate to children and young people, a member of the GIRFEC group will join for those discussions and provide input as appropriate.
- These measures will ensure no duplication in the development of shared outcomes and priorities, ensuring they are incorporated in the Alcohol and Drug Strategy, ADP Delivery Plan and Children's Services Plan.

6.3. Aberdeenshire Integration Joint Board

- Provide support to the work of the ADP and its governance and accountability arrangements and align Strategic Plans.
- Receive and consider a report twice per year on ADP delivery against agreed strategic priorities.
- Consider the use of directions to formalise those agreed elements of Alcohol and Drug Strategy and ADP Delivery Plan Actions relating to NHS Grampian and Aberdeenshire Council.

6.4. Community Planning Partnership Board

- Community planning requires local public sector bodies to work together with community bodies, to improve outcomes on themes they determine are local priorities for collective action. Where reducing the use of and harms from alcohol and other drugs feature in these priorities, local Community Planning partners, defined by those members of the Community Planning Partnership, should consider how co-operation with Alcohol and Drug Partnerships can support delivery.
 - Incorporate relevant parts of the Alcohol and Drug Strategy and Delivery Plan into the Local Outcomes Improvement Plan
 - Incorporate relevant parts of the Alcohol and Drug Strategy and Delivery Plan into Locality Plans
-

- Receive information from the ADP and provide support where necessary to address barriers to progress.

6.5. Executive Group for Public Protection

- Receive information from the ADP and provide support where necessary to address barriers to progress.

6.6. Adult and Children Protection Committees

- The Independent Chair of both Adult and Child Protection Committees is a member of the ADP which facilitates joint strategic working.
-

7. Financial Arrangements

The financial arrangements of the ADP are set out in this section. The aim is to work towards a shared understanding of the total investment of resources in the prevention of harm and reducing inequalities from alcohol and other drugs across the local system. This will allow the ADP to make effective decisions to invest in the delivery of outcomes and ensure appropriate scrutiny and ability to report to local governance structures and the Scottish Government.

7.1. Accountancy Support

Accountancy Support is provided by NHS Grampian and Aberdeenshire Council as part of their partnership contribution towards the ADP. NHS Grampian will disseminate Scottish Government funding for the delivery of alcohol and drug outcomes to each IJB in an agreed and transparent way.

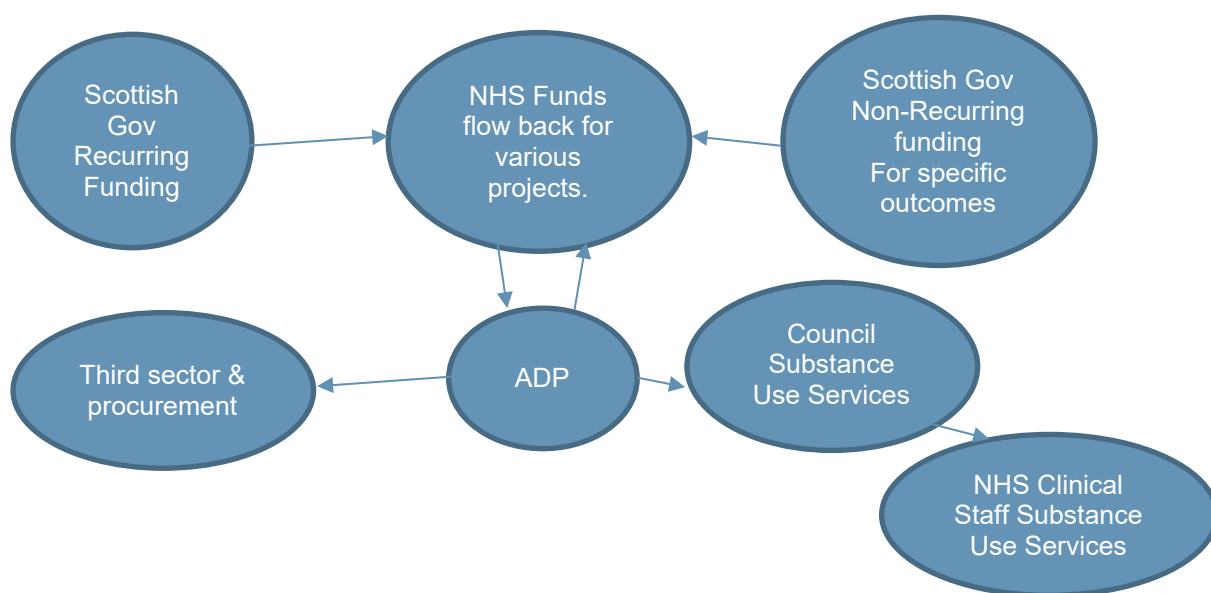
7.2. Financial Information

In addition to investment which individual partners may make in alcohol and other drug activities, the ADP oversees funds made available by Scottish Government for investment in alcohol and other drug interventions. These funds are routed to the ADP via NHS Grampian and Aberdeenshire Integration Joint Board. The allocation is to be used in full to implement the ADP’s strategy to achieve agreed alcohol and other drug misuse outcomes and in accordance with any funding conditions.

Sources of direct funding to the ADP include direct funding of a base budget through NHS Grampian alongside specific allocations or grant funding from the Scottish Government.

The ADP will set out an annual budget based on known funding and allocations and align the funding to its strategic priorities and operational activities. Funding directed through the ADP will be reported to the ADP Committee quarterly.

Partners may also contribute in terms of funding, resources and experience and their contributions will be captured as part of an ADP annual report.



7.3. Procurement Authority/Approval

The ADP is not a separate legal entity, and so the ADP cannot enter into any contract or agreement with a third party in its own name. The partners agree that any contracts will be procured by Aberdeenshire Council on behalf of the ADP except for the procurement of services on behalf of individual partners who will each follow their own procurement process.

Aberdeenshire Council's Financial Regulations have been adopted in relation to all procurement. Procurement services are provided by the Council's Commercial and Procurement Service. Practically this means that authorised officers can authorise procurement spend of up to £50,000, following the financial regulations, and any procurement over that level must follow the Council's procurement governance process with appropriate authority from the IJB which is appropriate as the ADP budget for the procurement would be allocated through the HSCP. The Commercial and Procurement Service will also provide support to the ADP for grant funding and the Council's financial regulations will be followed in this regard.

7.4. Financial Monitoring and Governance

Financial arrangements are in line with the financial regulations for the lead authority for contracts or spend, e.g., NHS Grampian or Aberdeenshire Council. Both organisations have arrangements in place for authorised signatories at appropriate levels from the other organisation to allow integration.

Each partner has resource related to their single service work around the alcohol and drugs agenda – each has a responsibility to provide information, where it is possible to segregate it, to the ADP Support Team and finance colleagues, quarterly who will collate the collective spend into a single document for oversight and monitoring of the total resource by the ADP.

The most up to date financial information will be reported quarterly to the ADP Committee for monitoring. Regular budget monitoring and funding reconciliation will take place.

It is recognised that some partners will be unable to accurately attribute direct spend in relation to drugs and alcohol. Police Scotland will provide updates providing context to their work and ensuring alignment with strategy. Should funding be given to Police Scotland, they would implement appropriate governance arrangements to monitor the spend.

The ADP aims to work within its financial means and to ensure all funding is used appropriately. Where an award letter directs that, if required, funding be carried forward in an earmarked reserve then it will be carried forward to the next financial year. However if no such direction is given, it will be at the discretion of the Health and Social Care Partnership's Chief Finance and Business Officer considering the overall financial position of the partnership.

Deadlines will be set at the start of each financial year considering the reporting cycles of partners.

The Resources and Governance Subgroup recommends and oversees the use of ADP funds as well as evaluating effectiveness of use. The subgroup also seeks to understand the totality of investment in alcohol and other drugs to ensure the best use of ADP delegated funds. The Subgroup will make recommendations, following consultation with both the Strategic Outcomes, Performance and Reporting subgroup and the Lived and Living Experience Subgroup, on spend for decision by the ADP Committee.

The Strategic Outcomes, Performance and Reporting subgroup seeks to understand how resources used contribute to the achievement of ADP outcomes and to recommend priorities for moving forward.

The IJB Chief Finance Officer oversees ADP effectiveness of governance of delegated ADP funds.

7.5. Financial honorariums

To support the ADPs aspiration to recognise and value the voluntary contribution of community activists involved in the work of the ADP, an honorarium is paid to the following office bearers on a quarterly basis:

- ADP Vice Chair
- LLE Subgroup Chair
- North Forum Representative
- Central Forum Representative
- South Forum Representative

Members of the public who voluntarily give up their time to attend meetings on behalf of the ADP shall be entitled to reimbursement of reasonable expenses according to the rules set out in NHS Grampian's current Patient and Public Involvement Expenses Payment Policy.

Expenses incurred by employees of partner agencies attending meetings of the ADP or on behalf of the ADP will be reimbursed by the partner agency in accordance with their internal policies.

8. Quality Improvement

8.1. Performance Monitoring – Board Level

The ADP will receive regular performance monitoring reports on a quarterly basis. An annual report will also be collated and reported to the ADP in the first instance. The ADP will appropriately scrutinise the performance reports and ensure partners are held to account. In addition to the ADP scrutiny, arrangements are in place to share information with other local partnerships. The subgroups of the ADP all have a role in monitoring performance and outcomes as narrated in the Terms of Reference.

In addition to the report submitted to the Scottish Government, each partner and subgroup will contribute to an annual report of activity showing the financial position as well as progress towards outcomes. This will include a summary of all partners contributions to the work of the ADP including financial, non-financial, resources and in-kind benefits.

8.2. Accountability – External Partners

The national Partnership Delivery Framework requires that NHS and Local Authorities should ensure local partnership arrangements enable them to meet their respective governance and accountability arrangements between the Scottish Government and local partners. Section 6 of this partnership agreement highlights the relationships with external partnerships and how the ADP will work with them strategically.

The ADP Committee exists within a complex public sector governance structure and will provide report twice yearly to the Integration Joint Board on delivery of agreed strategic priorities. The ADP will provide information to the Executive Group for Public Protection and the Community Planning Board on progress in relation to agreed strategic priorities and the ADP's annual report will also be shared widely.

On behalf of the Partnership, the ADP Lead Officer following consultation with the Executive Group, supported by the ADP Support Team, will report directly to the Scottish Government on key measures as advised on an annual basis by the Scottish Government reporting template. This Annual Report will be published online on the HSCP website and circulated to all partners.

Partners contributing to the delivery action plans will provide regular updates to the ADP for consideration and monitoring.

9. Governance and oversight

9.1. How does the ADP Operate?

Key to delivery of the ADP's goal and functions is a collective multi-stakeholder approach with clear responsibilities embedded within the roles of each partner.

To enable effective coordination, the ADP is led by:

- An ADP Chair nominated from duty holder organisations.
- An ADP Vice Chair nominated from the recovery community (representing rights holders).
- An ADP Lead Officer employed to provide expert strategic support to the partnership.

The functions of the ADP are delivered in the following structure:

- ADP Committee
- ADP Executive Group
- Lived and Living Experience Subgroup ("LLE")
- Strategic Outcomes, Performance and Reporting Subgroup ("SOPR")
- Resources and Governance Subgroup ("R&G")

The role of the ADP Committee is to:

- Set the system wide strategic direction for alcohol and drugs for Aberdeenshire.
- Ensure key stakeholders are involved, including people with lived and living experience.
- Coordinate effective responses to strategic risk.

The ADP Committee will meet in accordance with the agreed Terms of Reference.

9.2. Membership

The ADP Committee bring together stakeholders from the following organisations or groups to lead and co-ordinate all the alcohol and drug services and supports available across Aberdeenshire. These partners sit on the ADP Committee alongside the Chair, Vice-Chair and ADP Lead Officer, and are the decision makers for the ADP.

Duty Holders

- Aberdeenshire Council
- Police Scotland
- NHS Grampian Board
- Aberdeenshire Health and Social Care Partnership on behalf of the Integration Joint Board
- Scottish Fire and Rescue Service
- Scottish Ambulance Service
- Scottish Prison Service
- Department for Work and Pensions – Job Centre Plus
- The third sector
- Independent Chair of Aberdeenshire Adult and Children's Protection Committees

Rights Holders

- Community members as representatives from the North, Central and South Forums and Lived and Living Experience Committee

These agencies are represented on and contribute to a range of strategic groups that have a specific remit around drugs and alcohol and the community members are represented by nominees by the three community forums and the Lived and Lived Experience subgroup chair.

Membership will be reviewed regularly by the Chair to reflect changes in local arrangements and in accordance with the Terms of Reference.

9.3. ADP Roles and Commitments

All partners commit to work together in accordance with this partnership agreement. For the avoidance of doubt, the following responsibilities are articulated to ensure mutual understanding and not to imply any executive oversight of partner organisations. These responsibilities will be to the degree proportionate to the Partner's contribution, compatible with their wider duties and responsibilities.

9.4. Role of ADP

The Aberdeenshire ADP will work in partnership to: -

- Provide strategic leadership for partner agencies within Aberdeenshire who play a part in reducing the use of and harm from alcohol and other drugs.
- Agree, and then comply with, the Terms of Reference for the Aberdeenshire ADP.
- Provide direction and guidance to sub-groups.
- Ensure that partnership arrangements enable the appropriate involvement of local organisations with a potential contribution to make to the achievement of agreed local outcomes.
- Ensure that the ADP engages with stakeholders including people with lived and living experience, carers, family groups and wider organisations with an interest in alcohol and drug related issues.
- Lead on the design and implementation of the local alcohol and drugs strategy and delivery plan which will be based on a collective agreement of evidence-based needs.
- Direct the use of resources to best meet local needs in line with local strategy and plans.
- Ensure robust performance monitoring arrangements and reporting for the delivery of key outcomes to be achieved by the ADP.
- Ensure that the operation of the ADP is appropriately aligned with Aberdeenshire HSCP governance and community planning arrangements through the joint identification of shared outcomes across partners agencies.
- Understand that the ADP may not take a final decision on any matter which is the statutory responsibility of any member organisation and may not take any final decision on the allocation of funds which are the sole responsibility of any member organisation, unless given the authority by that member organisation to do so. The ADP may however make recommendations on such matters.

9.5. Partner Commitments

All Partners: -

- To provide financial data, where possible, in an agreed format, to an agreed schedule. This may include in kind contributions as well as partners own spend relating to alcohol and other drug activity to enable an overview of investment to be maintained.
- Share with partners the totality of resources, where possible, their organisation can direct to the pursuit of alcohol and drugs outcomes.
- Account for the use of ADP resources or potential slippage of planned expenditure including the achievement of agreed outcomes.
- To provide performance data to an agreed schedule.
- Demonstrate commitment and contribute to the collective purpose of the ADP and achievement of its outcomes at a level proportionate to their means.
- Ensure that sufficiently senior members of staff with the authority to take strategic and financial decisions on behalf of their organisation participate in the operation of the ADP or its sub-committees and identify and fully brief deputies to attend in case of their absence.
- To ensure member representatives on the ADP are responsible for informing their organisation and all associated groups of the work of and engagement with the ADP.
- Members and nominated representatives will be responsible for taking issues between the ADP and their organisations/communities for information, comment, or action as appropriate.
- All partners agree to abide by the terms of the Code of Conduct as set out in the Terms of Reference and by demonstrating behaviours consistent with the values and principles set out in this agreement.
- Ensure actions agreed at ADP committees are progressed and reported on in accordance with agreed timelines.
- Formally incorporate relevant parts of the Alcohol and Drug Strategy and appropriate parts of the ADP Delivery Plan into the plans and strategies of the host organisation.
- Ensure delivery plan items overseen by each partner are progressed, maintained up-to-date and reported on in accordance with agreed timelines.
- Offer constructive challenge where necessary as part of mutual partnership performance monitoring.
- Provide periodic updates of relevance to other ADP partners for information at ADP Committee meetings.
- Share issues between the ADP and their organisations/communities for information, comment, or action as appropriate.

9.6. Information Sharing

In agreeing to this Partnership Agreement, partners also agree to share relevant information within the scope of achieving the outcomes set out in the strategy with the ADP and its Partners in keeping with best practice under the General Data Protection Regulations common law obligations of confidentiality.

Standard child and adult protection processes would always be utilised, and referrals made as quickly as possible/urgently should any form of harm linked to vulnerable children, families or adults who come to the notice of the ADP or its members.

9.7. Freedom of Information

ADP Committee meetings are open to the public and media to attend. Subject to data protection and security requirements, all agendas, papers, evidence, and minutes will be published on the ADP website, including the details of people attending ADP meetings.

Freedom of Information requests received by the ADP will be redirected to the most relevant statutory partner to respond to.

9.8. Complaints

The ADP has no role in regulating the business of partners or duty holders. Complaints relating to a particular partner, or their services should follow the internal complaints process of that partner. Complaints of this nature directed to the ADP will be forwarded to the appropriate partner for their attention.

Complaints relating to ADP commissioning or decommissioning activity will follow the complaints process of Aberdeenshire Council, as commissioning partner for the ADP.

Complaints about the conduct or decisions of any ADP group or committee should be directed to the ADP Chair in writing for a determination. A response will be provided within 28 days of receipt of the complaint.

In keeping with the collective 'whole system' and 'quality improvement' ethos to deliver sustainable change and the ADP's oversight role and accountability to local communities, there is a joint collegiate responsibility for the quality of the system.

This means that where a complaint is unresolved, or the underlying factors relate to more than one agency, these may be brought to the attention of the ADP for the purpose of collective partnership learning and improvement and triangulation with the wider community so that they feel heard and can be involved in improvement efforts.

10. ADP Support Team

The ADP and its committees are supported by an ADP Support Team providing a strategic support function to assist the ADP meet its responsibilities. This includes:

- Strategy development
- Action plan development
- Finance investment and commissioning plans
- System wide leadership
- Maintaining relationships with national government.

The ADP support team exists to support the system wide partnership to deliver the strategic priorities and associated delivery plans.

Other support team specific activities may be developed to support the effective function of the ADP including for example, capacity to support service improvement, community engagement, data analysis, briefings on Scottish Government developments, drug and alcohol trends, co-ordination of Experiential Learning as well as Intelligence and needs analysis and prevention/early intervention.

The Support Team will also coordinate and collate performance reports and local intelligence from partners into reports as well as ensure the timely production and dissemination of sub-group and ADP minutes including publication where appropriate.

11. Strategic Groups

These are the range of groups which contribute towards delivery of the alcohol and drug strategic priorities for Aberdeenshire.

11.1. Drug and Alcohol Review Group

Monitors trends and findings of mortality reviews to offer opportunities for prevention, harm reduction and service delivery improvements.

11.2. Community Forums

There are 3 Community Forums (North, Central and South) led and organised by the community themselves where people with lived and living experience, community representatives and front-line workers from within the area can share insights, explore issues of concern, and identify unmet needs.

Forums enable communities to have a voice and the confidence to do things for themselves:

- To prevent and reduce harms from alcohol and other drugs.
- To work together to overcome stigma and apathy in realising aspirations.
- To promote recovery and help develop recovery-supportive communities.

Forums provide a platform that ensures that the collective voice of lived and living experience of individuals, families and communities is effectively heard, that they are empowered to influence policy and practice and that the Partnership continues to place the interests of affected individuals at the centre of its thinking.

They are independent of but closely partnered with the ADP. They receive funding from the ADP, and they are accountable to the Resources and Governance Committee for any monies they receive from the Partnership. Each forum has a seat on the ADP Strategic Committee and Lived and Living Experience Committee. Forum representatives are encouraged to inform, influence, and hold to account the ADP.

Organisation and conduct of the forums are described in their Terms of Reference.

11.3. Community Groups

Within Aberdeenshire there is a move to a more locality focused asset-based approach which considers, at a local level, the needs of the community and matches that with local resources, building capacity and identifying opportunities for development. In each locality there are a variety of community organisations and groups which provide support, contributing towards the priorities in the Alcohol and Drug Strategy². This community-based provision should support and complement statutory provision.

² <https://www.ouraberdeenshire.org.uk/our-priorities/local-outcomes-improvement-plan/>

11.4. Communities

There are mechanisms in place across Aberdeenshire to provide opportunities for the wider community to engage. This includes but is not restricted to:

- Patient participation groups
- Youth Participation Networks
- Stakeholder members on boards and committees
- Specific engagement activity around particular topics

Service providers and a wide range of local organisations community groups play an important role in supporting people in local communities.

12. Appendix 1: Statutory requirements regards planning and reporting

The table below summaries the statutory requirements in relation to local partnership strategic plans:

Strategic planning documents	Responsible body	Legislative framework
Health and Social Care Strategic Plan	Integration Authority	Public Bodies (Joint Working) (Scotland) Act 2014
Health and Social Care Annual Performance Report	Integration Authority	Public Bodies (Joint Working) (Scotland) Act 2014
Children's Services Plan	Local Authority and Health Board with Community Planning Partners	Children and Young People (Scotland) Act 2014
Community Justice Outcomes Improvement Plan	Community Justice Partners ³	The Community Justice (Scotland) Act 2016
Locality Plan	Community Planning Partners ⁴	Community Empowerment (Scotland) Act 2015 ⁵
Local Outcomes Improvement Plan	Community Planning Partners	Community Empowerment (Scotland) Act 2015 ⁶
Police Scotland Local Policing Plans	Divisional Commanders	Police and Fire Reform (Scotland) Act 2012

12.1. Licensing Boards

Licensing Boards are made up of locally elected councillors and are distinct from local authorities, they have responsibilities in relation to the local administration of alcohol (and gambling) and are obliged to publish a licensing policy statement and annual report under the Licensing (Scotland) Act 2005 and Gambling Act 2005, as amended.

³ Community Justice (Scotland) Act 2016

⁴ Community Empowerment (Scotland) Act 2015

⁵ Note: Duties apply to locally identified priorities. Only applies to alcohol or drugs where the CPP agrees that these or related issues are one of the priorities for the locality.

⁶ Note: Duties apply to locally identified priorities. Only applies to alcohol or drugs where the CPP agrees that these or related issues are one of the priorities for its area.