



# ARGYLL AND BUTE ALCOHOL & DRUG PARTNERSHIP INVOLVEMENT STRATEGY – “SIDE BY SIDE”

*a phrase which can be used as a sign of encouragement about two or more different groups, who live or work next to each other.*

**2018-2021**

**Argyll and Bute ADP works in partnership to prevent, and support recovery from, the harmful use of alcohol and drugs**

**FOREWARD – CHAIR OF ARGYLL AND BUTE ALCOHOL AND DRUG PARTNERSHIP**

I have great delight in providing an introduction to the ADP’s Involvement Strategy. **People, Places and Partnerships** have been at the heart of our work throughout my time as chair and I am optimistic that this will develop further in the future. This strategy sets out a clear framework to consolidate the excellent work that is now evident across our communities and builds on this to ensure that the voice of those with lived experience are at the heart of our partnership working.

The production of the Scottish Government’s refreshed recovery strategy is well timed and influential, placing as it does a clear emphasis on engagement, partnership, and co-production and outcome focussed approaches. The emerging self-help groups and recovery cafes, in our communities, provide a strong base for Argyll and Bute ADP to deliver its aspiration of being a supportive and enabling Recovery Community. I look forward to seeing the difference we can make together.”

**John Owens**

**Argyll & Bute ADP Chair**

**FOREWARD – COORDINATOR OF ARGYLL AND BUTE ALCOHOL AND DRUG PARTNERSHIP**

Argyll & Bute Alcohol & Drug Partnership has, for some time, been committed to engaging the whole community in developing and delivering our strategy and action plan. The Argyll and Bute Alcohol & Drug Partnership Involvement Strategy provides the direction to ensure we are involving all key stakeholders at the appropriate stages in an equal partnership.

The strategy highlights the role of Service Users and Service User Groups, Carers and Families and Young People while acknowledging that there are significant populations that we have previously struggled to engage. There is a recognition that we must work harder to ensure this previously unheard voice is not lost. In addition, the strategy highlights the need to proactively connect with our Island populations and make sure that remoteness does not diminish engagement.

This Involvement Strategy sets out a clear, structured approach to meet the key objectives identified by Figure 8, in conjunction with a wide range of stakeholders, and will ensure that Argyll & Bute ADP becomes a fully inclusive and needs led partnership. With this in mind, the ADP are at present working towards establishing clear pathways to widen engagement and involvement in all key areas.

**Craig McNally**

**Argyll & Bute ADP Coordinator**

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## **INTRODUCTION – WHY INVOLVEMENT?**

People who use, or have used services, and their families know better than anyone what works – and what doesn't. Involving them brings unique insight and taps into a valuable resource that can help improve the quality of services – something that is increasingly being recognised through growing evidence. Involvement can also have a positive impact on people by boosting their skills and confidence, which can lead to other opportunities such as training and employment.

For individuals and families, involvement:

- Offers individuals and families a voice, particularly if they have felt excluded
- Helps individuals and families feel valued and respected
- Gives individuals and families ownership of services they use.
- Enhances their understanding of services and how they work
- Improves skills and abilities
- Builds confidence
- Furthers the goal of recovery through inclusion, developing life skills and enhancing self-esteem
- Is a way of bringing people together to achieve mutually desirable outcomes

For organisations, involvement:

- Helps to improve the quality of service provision
- Adds great value to service planning, development and delivery
- Breaks down barriers caused by organisational hierarchy
- Achieves effective use of resources
- Improves communication and understanding between staff/volunteers and individuals who use services and their families
- Helps staff/volunteers develop their skills
- Creates a sense of service ownership, by ensuring that services reflect the needs and wishes of those who use them
- Enables an organisation to draw upon and make effective use of people's skills and capabilities
- Improves an organisation's ability to respond to government strategies and its legal duties (e.g. Road to Recovery, National Quality Principles, Self-directed Support, the public sector 'duty to involve' local people in services)

## **WHAT WE HOPE TO ACHIEVE WITH THIS STRATEGY**

The key aim of our Involvement Strategy will be to ensure meaningful and constructive involvement for all individuals and/or groups who use (or have used) alcohol and drug services across Argyll and Bute by working together in collaboration to ensure they have an equal voice and influence.

The term ‘individuals’ is used to refer to both active service users as well as former service users. We also include families and carers in our definition and are also considering ways to include those who would benefit from engaging with local services, but as yet, are not engaged.

Our ambition is to deliver effective partnerships which put individuals’ voices, views, needs, aspirations, experiences and expert knowledge at the centre of all we do.

We aim to increase opportunities for involvement and engaging with individuals to inform and shape how we run, change and influence the development of our services. We are committed to ensuring that people, local services and the Alcohol & Drug Partnership work collaboratively, are listened and responded to and receive high quality, personalised care and support. In doing this we will:

- Co-create and promote opportunities for a fulfilling life and recovery.
- Co-create and promote innovative approaches which tackle the stigma and discrimination that surrounds alcohol and drugs use, so that people are included and valued in society.
- We will focus on what is strong within our communities building an asset based approach to community development and build on existing good practice and explore new innovative approaches to recovery.

## **OUR KEY PLEDGES AND PROMISES FOR THE NEXT THREE YEARS – AND BEYOND**

Our key pledges and promises for the next three years (and beyond!) are based on the following three principles:

- First, that co-production is key for individuals and families to own, and feel a valued part of, their personal recovery journey.
- Second, that local services take a holistic, ‘whole person’ approach that enables them to encompass the multiple dimensions of a person’s recovery; thus, increasing the likelihood of success (or sustained recovery) in the short and longer term.
- Third, recognising the importance of social networks, building support and opportunities in the recovery community and beyond for people to enhance the sustainability of their recovery.

Based on these principles, the Argyll and Bute Alcohol and Drug Partnership make the following pledges and promises:

- We will ensure that people using local services feel they are treated with empathy, dignity and respect and feel optimistic that care and support will be effective.
- We will ensure that people using local services are involved in shared decision-making and feel confident that their views are used to monitor, improve and develop services. We will improve the infrastructure that enables individuals and families to be involved.
- We will improve the opportunities available and enable individuals and families to be actively involved in both their care and shaping services.
- We will ensure that individuals and families actively participate and take responsibility in their recovery process.
- We will commit to ensuring that the training needs of individuals and families who are involved in local services are addressed.
- We will make sure we strengthen our efforts and make contact with hard to reach people resulting in a higher uptake of engagement.
- We will work with local communities to reduce stigma and increase understand ingredients and support.
- We will adapt the Carers Strategy to local need ensuring that carers are supported in their roles in support of recovery.

## NATIONAL QUALITY PRINCIPLES

This strategy has been designed to take full account of the National Quality Principles for Drug and Alcohol Services in Scotland<sup>1</sup> which are supported by a clear Recovery Philosophy. The Quality Principles were developed to ensure anyone looking to address their problem drug and/or alcohol use receives high-quality treatment and support that assists long-term, sustained recovery and keeps them safe from harm.

The eight Quality Principles are:

1. You should be able to quickly access the right drug or alcohol service that keeps you safe and supports you throughout your recovery.
2. You should be offered high-quality, evidence-informed treatment, care and support interventions which reduce harm and empower you in your recovery.
3. You should be supported by workers who have the right attitudes, values, training and supervision throughout your recovery journey.
4. You should be involved in a full, strength-based assessment that ensures the choice of recovery model and therapy is based on your needs and aspirations.
5. You should have a recovery plan that is person-centred and addresses your broader health, care and social needs, and maintains a focus on your safety throughout your recovery journey.
6. You should be involved in regular reviews of your recovery plan to ensure it continues to meet your needs and aspirations.
7. You should have the opportunity to be involved in an ongoing evaluation of the delivery of services at each stage of your recovery.
8. Services should be family inclusive as part of their practice.

The underpinning Recovery Philosophy states that everyone deserves to recover from problematic drug and/or alcohol use. It exists to support the recovery journey by ensuring people are treated with dignity and respect when they choose to access, and work in partnership with, drug and/or alcohol treatment and support services.

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<sup>1</sup> Scottish Government and COSLA (2014). *The Quality Principles: Standard Expectations of Drug and Alcohol Services*. Scottish Government: Edinburgh.

## **OUR PRINCIPLES OF INVOLVEMENT**

As stated on page 5, people who use, or have used services, and their families know better than anyone what works – and what doesn't. Involving them brings unique insight and taps into a valuable resource that can help improve the quality of services – something that is increasingly being recognised through growing evidence. Involvement can also have a positive impact on people by boosting their skills and confidence, which can lead to other opportunities such as training and employment.

Our principles of involvement are:

1. We will work in partnership with individuals and families, in a holistic and inclusive manner, with the aim of nurturing and providing hope and trust, which is important in the recovery process.
2. Individuals and families should be represented at all levels of the service including service design, planning, monitoring and recruitment.
3. Involvement should be meaningful to individuals and families and measured by the extent to which people feel that they have been involved.
4. Individuals and families have a unique contribution to make in influencing and shaping services as they are experts by their experience, in addition to any other skills, qualities, knowledge and life experience they have.
5. Local and national agencies use existing service user surveys to source information on hotspots of involvement and gaps.

## OUR APPROACH TO INVOLVEMENT

We see four clear areas of how we can increase involvement through engagement:

- Information (i.e. providing individuals and families with the information they need to make best use of services – that is, providing the right information in a way that is easily understood by all);
- Involvement (i.e. ensuring that individuals and families are fully involved as partners in their own care/support and in the services they receive – at service, locality and strategic levels);
- Evaluation (i.e. providing a role for individuals and families to help evaluate services from their expert perspectives); and
- Planning and decision-making (i.e. the ADP needs to meet the legal requirements to consult; this means involving individuals and families in all decisions which affect services).

Our Approach will be a ‘whole systems’ approach where we will think of the system as a jigsaw consisting of the following four pieces:

- Culture
- Practice
- Structure
- Review

### The whole systems approach to participation



**OUR COMMITMENT TO CHANGE AND IMPROVEMENT**

Our commitment to change and improve is demonstrated by the clear and measurable action plan below, which will be reviewed and monitored at regular intervals over the course of the strategy. The Action Plan has been developed and agreed around the following six areas of engagement activity: (1) Supporting and Nurturing Existing User Groups, (2) Building capacity and co-production, (3) Involvement across the Islands, (4) Involvement of Young People, (5) Involvement of Carers and Families, and (6) Reaching hidden/hard-to-reach populations.

<u>Area of Engagement*</u>	<u>Objective(s)</u>	<u>Key Actions</u>	<u>Tactics /Communication Channels</u>	<u>Lead responsibility</u>	<u>Timescale</u>
Supporting and Nurturing Existing User Groups and Organic Recovery Communities	<ul style="list-style-type: none"> <li>Ensuring that existing User groups and organic recovery communities are identified and supported to thrive and provide an independent service user voice</li> </ul>	<ul style="list-style-type: none"> <li>Identification of existing groups and analysis of existing support structures, governance and sustainability</li> <li>SWOT Analysis of existing groups to identify gaps in current support and future support needs</li> </ul>	<ul style="list-style-type: none"> <li>ADP, in conjunction with local and national support agencies, to use the ROSC process to map all existing user groups</li> <li>Service user group support network to be established with clear channels of communication to the ADP, statutory agencies and local and national support agencies</li> <li>Clear pathways, awareness raising and support to initially engage with user groups and organic recovery communities to be established and monitored for effectiveness</li> </ul>	<ul style="list-style-type: none"> <li>ADP Co-ordinator/Locality Chairs</li> <li>Service Managers/ADP Coordinator.</li> </ul>	TBC
Building capacity and co-production	<ul style="list-style-type: none"> <li>Increase the capacity, access to and skills of existing user groups, establish the business case for new ones and maximise their impact by working together with the ADP and statutory/third sector</li> </ul>	<ul style="list-style-type: none"> <li>Identify the support that user groups and organic recovery communities require to be able to support people.</li> <li>Increase the ability of service user groups and organic recovery communities to offer a variety of services and</li> </ul>	<ul style="list-style-type: none"> <li>Existing communication channels to be reviewed and improved where necessary</li> <li>Commissioning groups include at least one service user</li> <li>Service User representatives given a range of training including governance and information sharing protocols</li> </ul>	<ul style="list-style-type: none"> <li>ADP Chief Officer/National and Local Providers including statutory and Third Sector</li> </ul>	TBC

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	service provision	<p>support models.</p> <ul style="list-style-type: none"> <li>• Establish joint working arrangements between statutory services, third sector and service user groups and organic recovery communities and ensure these are highlighted within ROSC.</li> </ul>			
Building involvement across the Islands	To increase the accessibility and capacity of service user involvement across the islands	<ul style="list-style-type: none"> <li>• Identification of barriers to service user and organic recovery communities involvement on islands through development of ROSC</li> <li>• Identification of communication channels to increase participation on the islands including online forums and VC facilities</li> </ul>	<ul style="list-style-type: none"> <li>• Establish a network of communication between service users, organic recovery communities and providers for the islands</li> <li>• Venues and costs to be identified within island communities and discussed with locality chairs and the ADP</li> </ul>	<ul style="list-style-type: none"> <li>• Locality Chairs/ ADP Co-ordinator</li> </ul>	TBC
Building Involvement of Young People	To ensure that young people’s voices (including looked after and accommodated children; young carers; children of service families and children with disabilities) are heard in the planning, development and running of a range of services	<ul style="list-style-type: none"> <li>• Agencies who provide services to young people should work in partnership to involve young people in the planning, development and running of services.</li> <li>• A wide range of young people are consulted on what they feel about local and national service provision and how they</li> </ul>	<ul style="list-style-type: none"> <li>• Establish a working group that involves young people alongside a range of agencies</li> <li>• Working Group to establish processes of communication to ensure all relevant voices are heard, for example, events, social media and other communication channels.</li> <li>• Young people representatives given a range of training including governance and information sharing protocols</li> </ul>	<ul style="list-style-type: none"> <li>• Voluntary Sector Agencies representing and Supporting Young People</li> </ul>	TBC

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	aimed at them (including education, interventions and support).	can choose to contribute.			
Involving Carers and Families	Ensure that those living with and/or caring for those with drug and/or alcohol issues have their voices heard in the design, development and delivery of services	<ul style="list-style-type: none"> <li>• A wide range of carers and/or family members are consulted on what they feel about local and national service provision and how they can choose to contribute</li> <li>• Carers and families are given a direct role in the design and development of the services through involvement at executive level, such as committee membership, project design and planning events</li> </ul>	<ul style="list-style-type: none"> <li>• Service providers must address barriers to involvement</li> <li>• Carers and families representatives given a range of training including governance and information sharing protocols</li> </ul>	<ul style="list-style-type: none"> <li>• Local and National Providers</li> </ul>	TBC
Involving service users	Ensure that service users have their voices heard in the design, development and delivery of services	<ul style="list-style-type: none"> <li>• A wide range of service users are consulted on what they feel about local and national service provision and how they can choose to contribute</li> <li>• Service users are given a direct role in the design and development of the services through involvement at executive level, such as committee membership, project design and planning events</li> </ul>	<ul style="list-style-type: none"> <li>• Service providers must address barriers to involvement</li> <li>• Service user representatives given a range of training including governance and information sharing protocols</li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>	
Reaching	To ensure that everyone	<ul style="list-style-type: none"> <li>• Develop clear communication</li> </ul>	<ul style="list-style-type: none"> <li>• Assertive outreach be developed to include</li> </ul>	<ul style="list-style-type: none"> <li>• ADP, NHS</li> </ul>	TBC

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hidden/hard-to-reach populations	has an opportunity to have a say in how services are designed, developed and delivered, especially those who lead more chaotic and unstable lives or choose not to access services	channels to make sure that people who are isolated (by location or personal circumstances) can contribute to how services are designed, developed and delivered. <ul style="list-style-type: none"> <li>• To build processes for non-intrusive participation which allow anyone fearing stigma, experiencing isolation and/or homelessness to have their voices heard</li> </ul>	service engagement and/or service development <ul style="list-style-type: none"> <li>• The ADP proactively engages and works in partnership with A&amp;E and other crisis services, such as homelessness services and Registered Social Landlords to establish pathways of involvement for people they are in contact with.</li> </ul>	and Local Authority Service Providers	
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**IMPLEMENTING AND EMBEDDING THE INVOLVEMENT STRATEGY AND FRAMEWORK ACROSS ARGYLL AND BUTE**

In March 2018 Scottish Drugs Forum (SDF) were awarded the three year contract to support on the implementation of this involvement strategy. SDF will work closely with the ADP and key partners, including people with lived and living experience, their families and agencies who support them, to ensure that Argyll & Bute has an established and embedded process for involvement of all by 2021.

If you would like to know more about the work SDF are doing in Argyll & Bute please contact:

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[www.sdf.org.uk](http://www.sdf.org.uk)

[www.sdfworkforcedevelopment.org.uk](http://www.sdfworkforcedevelopment.org.uk)

[www.scottishdrugservices.com](http://www.scottishdrugservices.com) - Where to get help in your area