



**EADP Commissioning Collaborative
0930 – 1230 on Tuesday 1 December 2015
Quaker Meeting House, 7 Victoria Terrace, Edinburgh**

PRESENT:

Bev Hubber (Lifeline)	Carmen McShane (TPS)
Seb Fischer (VOCAL)	Lorraine Davidson (VOCAL)
Emma Crawshaw (Crew)	Alastair McNaughton (NHS Lothian)
Tricia Burns (NHS Lothian)	Danny Campbell (NEDAC)
Adele Hill (Access to Industry)	Jill Brookes (Simpson House)
Colin Beck (CEC)	Katie Bryce (CEC)
Pauline McKinnon (CEC)	Phil Heaton (SUNE)
Maria Arnold (EVOC)	Nick Smith (EADP)
David Williams (EADP)	Jeanette Shiells (Minutes)

1. Apologies

Apologies were noted as below:

Meichelle Walker (ELCA)	Shirley Green (VOCAL)
Dr Peter Littlewood (NHS Lothian)	Jim Sherval (NHS Lothian)
Eddy Conroy (NHS Lothian)	Val Lawrie (CEC)

Nick Smith noted that Caroline Johnston was unable to attend but hoped to chair future meetings. He offered the chair to other members of the Collaborative and it was agreed that Colin Beck would chair the meeting.

2. Minutes of the last meeting and matters arising

The minutes were agreed.

2(a) DWP Update

David Williams reported that the task group planned to have three meetings over the course of the next two months. The group consists of various people from treatment services, the DWP, NHS and Recovery Essentials. The first meeting was very positive and had alleviated some anxieties. A list of actions was agreed including staff consultation, information sharing and local links with the DWP. David would continue to keep the Collaborative updated with developments.

2(b) *Alliance for People with Lived Experience*

Nick reported that it was planned to hold an event in January to bring together the recovery groups that are emerging across the city to celebrate what is happening so far and create a sense of unity. This would strengthen these groups so that they start to become an alliance. There would also be an opportunity to discuss service user representation at our key meetings.

2(c) *Stepped care approach to psychosocial interventions*

Nick noted that Peter Littlewood is working on a paper which will set out the stepped care model described in his presentation at the previous meeting and how to take this work forward.

2(d) *Carers*

Nick referred to the discussion around carers at a previous meeting when a list of commitments had been made. He asked members of the Collaborative to email him updates to capture the work that is being done. These would be highlighted at the next meeting. There would also be a new slot on the agenda of Collaborative meetings to look at supporting carers.

ACTION: All

3. **Update from the Core Group**

3(a) *Tendering Process*

Nick gave an update on the tendering process. The Finance and Resources Committee of the Council agreed that the Counselling Contract be awarded to ELCA as lead of a consortium with Simpson House and Crew. There is a 10 day standstill period after which discussions will start about set up and actions to begin contract on 1 April 2016.

The committee was unable to make a decision on the Hubs Contract and this has been deferred to a meeting on 14 December. If the contract is agreed there will again be a 10 day standstill period.

Nick acknowledged that this was a difficult time for a number of agencies. The proposed contract is awarded to Turning Point in the North East and to Lifeline in the other three areas.

Danny Campbell questioned why the next Hubs Alliance had been cancelled as it was an opportunity for the public sector to talk about their objectives and share ideas. After discussion it was agreed to reinstate the meeting.

3(b) *Financial Position*

Nick gave an update on the financial position which was discussed by the Core Group. Nick noted that there is a revenue budget of £174k which remains

unallocated. The reasons for this are set out in a separate paper. A summary of investment proposals are also set out in this paper.

The total disinvestment in the public sector within the Hubs Alliance is £456k. Where possible the Core Group has invested in transitional arrangements in a way that makes the minimal impact on the first half of the financial year. This investment enables the public sector to main staffing models at a time of change.

Nick highlighted that confirmation was still awaited from NHS Lothian on their understanding of the Scottish Government funding letter but there should be more clarity after a meeting on 14 December.

3(c) *Peer Workers*

David noted that there are three part-time peer workers currently employed within the Social Work Team. Through alliance work it was agreed that peer working is the responsibility of the 3rd sector and they should no longer be based within the Social Work Team. It was agreed to keep these posts with Social Work until 1 September 2016 when there would be an opportunity to decide if these posts are needed within the system of care.

4. **Employability Services**

David referred to the work around employability services for people with complex needs. He noted that funding comes from various sources including criminal justice, homelessness services, and Capital City Partnership. A group of strategic commissioners has been doing some preparatory work to bring this work together and develop a service spec. There will be a consultation period between January and March 2016 for staff, managers and service users to inform service design. This would involve members of the Collaborative and would be followed by a competitive tendering process. A new service should be in place by April 2017.

5. **Residential Alliance – Vision Statement and Next Steps**

David gave a short presentation setting out the two strands of work of the Residential Alliance. The guiding principles are to extend the number of people who get access to residential treatment. The one year plan is to integrate the allocation and assessment process with 3RT starting with a pilot in one area first and to improve the pathway to and from residential detox at the Ritson Clinic.

The five year vision is to look at what residential services can do in the community and to make the day programme at LEAP available for more people.

6. **Vulnerable Adults Training**

Emma Crawshaw asked members of the Collaborative if there was any appetite for vulnerable adults training around case studies and if they would be willing to share some anonymised case studies that Crew could use in their training. There was general support for this request.

7. **Outcomes Star and Daisy**

David circulated a paper which compares two outcome tools and recommends that one of them is used as the main outcome tool for all specialist drug and alcohol services in the Lothian. He noted that the new Drug & Alcohol Information System (DAISy) is expected to be operational next year and for this system to work effectively information will have to be shared between services. David's paper compares the Drug and Alcohol Outcomes Star with the Recovery Outcomes Tool for Alcohol and Drugs Recovery Measurement which has been designed by the Scottish Government but its use is not compulsory.

David reported that after discussions at Lothian level the strong feeling was towards using the Outcomes Star rather than the Scottish Government tool. He will organise a pilot of this tool in one area of the city.

ACTION: David Williams

8. **AOCB**

There was no other business.