

DIRECTION FROM THE SHETLAND ISLANDS INTEGRATION JOINT BOARD (“IJB”)

ISSUED UNDER SECTION 26(1) OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

Direction: Alcohol and other Drugs	Direction to: Shetland Islands Council (SIC) NHS Shetland (NHSS)	Overall Budget allocated by IJB for Direction: £ 796,085 SIC: £179,594 NHSS: £616,491
Reference Number: 1.13	Relevant Function(s): Substance Use Recovery Service, Health Improvement, Adult Social Work, Recovery Hub, Alcohol and Drug Development Officer and Assistant	Review Date: March 2026
IJB Report(s) Reference Number: CC-24-25		
Date Direction issued/authorised by IJB: 29 May 2025	Date Direction takes effect: 1 April 2025	Does the Direction supersede, amend or revoke an existing Direction? If yes, include reference number of existing Direction: Supersedes Direction 1.13 (IJB Report Ref. CC-53-24-F)
Purpose of Direction		
To deliver on the strategic priorities for Alcohol and Drug Partnerships (ADP), as set out by Scottish Government in the Rights, Respect and Recovery Strategy – <ul style="list-style-type: none"> • Fewer people develop problem drug or alcohol use • People access and benefit from effective, integrated, person centred support to achieve their recovery • Children and families affected by alcohol and drug use will be safe, healthy, included and supported • Vulnerable people are diverted from the justice system wherever possible and those within justice settings are fully supported • People who experience alcohol or drug related harm do not experience stigma or discrimination 		

Accountability and Governance

Alcohol and Drug Services are included within the Integration Authority scheme of delegation, alongside other adult health and social care services provided by the NHSS and SIC. The ADP will ensure that effective oversight arrangements are in place to deliver the local strategy and will provide performance and financial reports to the Integrated Authority and Scottish Government.

The Scottish Government's direct funding to support ADP projects is transferred to NHS Boards via their baseline allocations for onward delegation to Integration Authorities (IAs) specifically for ADP projects.

Ministers are clear that the full funding allocation should be expended on the provision of projects and services which deliver locally agreed outcomes in relation to reducing the use of, and harm from, alcohol and drugs. A quarterly financial report against this funding is submitted to Scottish Government.

The allocation represents the minimum amounts that should be expended on these services and it is expected that additional resources, including funding, will continue to be invested in reducing alcohol and drug harms and deaths. Further, all of these resources should be invested transparently in partnership, and be informed by the evidence base to deliver priorities within local strategic plans and be based on an appropriate and current needs assessment.

Overarching Directions to Function(s)

- Deliver the strategic priorities for Alcohol and Drug Partnership

Directions	Outcomes and key actions	Performance Monitoring and Indicators	Challenges & Opportunities – inc. Risks and Finance
Provision of, via a variety of local partners – <ul style="list-style-type: none"> • Education programmes (including peer education) within schools and other young people's settings • Education programmes for parents and carers • Education programmes for delivery in the workplace/community groups 	The overall objective is the delivery of local and national priorities to contribute to the Shetland Alcohol and Drug Partnership (ADP) vision - Every individual, family and community in Shetland should have access to:	Planning, monitoring and coordination of activities is undertaken by the local Alcohol and Drug Development Officer. Performance (measurable from existing data monitored locally through ADP, locally and nationally through Medication	Challenges: Workforce capacity System/professional acceptance of change IT and Information sharing inadequacy

<ul style="list-style-type: none"> • Supported work placements for those who experience multiple barriers to employment • Alcohol Brief Intervention (ABI) training (to support delivery as part of the Board targets) • Alcohol Screening • Supported behaviour change for low level alcohol use • Information and signposting • Engagement in to treatment • Alcohol and drug treatment programmes aligning to MAT (Medication Assisted Treatment) standards • Psychosocial interventions • Harm reduction interventions • Pre and post treatment support • Assertive outreach • Residential rehab • Community engagement • Alcohol and Drug profiling projects • Support for families, children and young people affected by another person's substance use 	<ul style="list-style-type: none"> • a full and meaningful life without alcohol or drug related harm • dignified and respectful treatment free from stigma or discrimination • encouragement and support to find their own type of recovery <p>Key Actions –</p> <ul style="list-style-type: none"> • Continued public engagement, with a view to tackling stigma • Publish wound-care pathway for people who use substances • Further expand Near Fatal Overdose pathway • Increase the reach of Naloxone • Undertake and publish needs assessment • Refresh local alcohol and other drug strategy 	<p>Assisted Treatment (MAT) standards and via ADP Annual Report)</p> <ul style="list-style-type: none"> • Waiting times targets met • Board ABI targets met • Targets of third sector commissioned services met • Delivery of the Staying Alive in Scotland good practice indicators • Delivery of Drug Death Task Force recommendations • Delivery of Medication Assisted Treatment standards • Delivery of Recovery Orientated Systems of Care • Reduction in alcohol or other drug related hospital attendances • Reduction in alcohol or other drug related hospital admissions • Reduction in harmful and problem alcohol or other drug use • Reduction in Child Protection referrals/registrations/re- 	<p>Finance & Risk:</p> <p>Services/activities negatively impacted by inadequate funding</p> <p>Experienced staff unable to continue due to non-recurrent funding. Services unable to continue due to lack of staffing. Poorer outcomes for people who access services – inconsistency and instability of services.</p> <p>Funding pressures on provision of residential rehab pathway.</p> <p>Opportunities:</p> <p>Continue to engage with regional and national partners to share learning.</p> <p>Positive sharing of data re: impacts of work to support buy in and prioritisation by organisations.</p>
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	Shetland population within national standards		
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