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Neil Finlay MSP
Health and Sport Committee
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Further to your letter of 19 April 2017 regarding Alcohol and Drug Partnership Funding (ADPs), I am replying as I have portfolio responsibility for the issues you have raised on behalf of the Committee. From your letter, I note that you asked specifically about the provision of funding for drug and alcohol treatment services across Health and Social Care Partnerships (HSCPs) in 2017/18, and more particularly about the position in NHS Lothian.

The Scottish Government budget for 2017/18 provides £53.8 million to support the delivery of drug and alcohol treatment services, this is included in baseline funding issued at the start of the financial year. Importantly however, the total financial resource invested in drug and alcohol treatment services in any given year, is significantly higher than the direct contribution provided from the Scottish Government budget, as it is supplemented by additional contributions from the NHS and other statutory partners.

More broadly, NHS territorial board budgets will increase in real terms in 2017/18, with specific funds targeted to drive forward investment in community health services, in order to more appropriately distribute the balance and burden of care. In line with our wider health service transformation objectives, from 2017/18 the funding for drug and alcohol treatment services will be routed via health boards for onward delegation to HSCPs. The partnerships provide the appropriate infrastructure through which to direct investment in community based drug and alcohol treatment services, in line with local population needs.

Supporting the delivery of agreed service levels, in relation to drug and alcohol treatment, will be a priority for HSCPs in 2017/18. My officials have been working with ADPs and HSCPs to support fruitful working relationships that enhance the quality of strategic planning, whilst continuing to harness ADP's subject expertise.

In terms of outcomes, I am pleased to note that across Scotland, the vast majority of Health Boards continue to meet the Local Delivery Plan performance standard: 90% of clients will wait no longer than 3 weeks from referral to receive appropriate drug or alcohol treatment

that supports their recovery.¹ We will seek to maintain these excellent levels of service provision in 2017/18. Furthermore, I will be writing to ADPs to set out Ministerial Priorities for service delivery in 2017/18; these will reflect both continuing and emerging priorities for drug and alcohol treatment service provision, including tackling drug-related deaths, the provision of education and prevention interventions and throughcare pathways for individuals leaving prison with substance misuse issues.

In respect of NHS Lothian in particular, the Scottish Government is currently reviewing their submitted Local Delivery Plan for 2017-18. It has been noted that the board has highlighted challenges in maintaining a balanced budget in the context of the need to deliver preventative, local and specialist treatment services and to encourage patients to engage in and maintain recovery. Officials within the Substance Misuse Unit's National Support Team are actively engaged in an on-going dialogue with partners across Lothian to address performance issues in respect of drug and alcohol treatment waiting times, specifically to tackle some acute staffing issues. There is regular engagement on this issue and we are satisfied that overall there is an effective workforce management strategy in place.

NHS Lothian's resource budget allocation for 2017/18 of £1,342.0 million, includes an uplift of some £19.6 million (1.5%), by some margin the highest uplift of any health board. Additionally, this total resource budgeted allocation includes an NRAC allocation of £19.2 million, which represents the lion's share of £50 million being distributed amongst health boards in this financial year. Our priority is to consider how we might best continue to support NHS Lothian to deliver improvements in services by investing additional resource in the sustainability of their service offering.

I hope that this provides helpful clarification for the committee on the points raised in your correspondence.



AILEEN CAMPBELL

¹ <http://www.gov.scot/About/Performance/scotPerforms/NHSScotlandperformance/DATWT-LDP>