

ADP ANNUAL REPORT 2017-18 FALKIRK ADP – FINAL VERSION

ADP Reporting Requirements 2017-18

1. Financial framework
2. Ministerial priorities
3. Formal arrangements for working with local partners

Appendix 1 Feedback on this reporting template.

In submitting this completed Annual Report we are confirming this has been signed off by both the ADP Chair and Integrated Authority Chief Officer.

ADP Chair – Fiona Campbell	Signed: 	Date:
Integration Authority Chief Officer – Patricia Cassidy	Signed: 	Date:

The Scottish Government copy should be sent by **26 September 2018** for the attention of Amanda Adams to:
alcoholanddrugdelivery@gov.scot

1. FINANCIAL FRAMEWORK - 2017-18

Your report should identify all sources of income that the ADP has received (via your local NHS Board and Integration Authority), alongside the monies that you have spent to deliver the priorities set out in your local plan. It would be helpful to distinguish appropriately between your own core income and other expenditure on alcohol and drug prevention, treatment and support, or recovery services which each ADP partner has provided a contribution towards. You should also highlight any underspend and proposals on future use of any such monies.

Income and Expenditure through the Programme for Government should only be recorded in ANNEX A – Programme for Government Investment Plans and Reporting Template

a) Total Income from all sources

	Problem Substance Use (Alcohol and Drugs)
Earmarked funding from Scottish Government through NHS Board Baseline *	£2,653,555
Funding from Integrated Authorities	£2,459,249
Funding from Local Authority – if appropriate (Criminal Justice)	£ 320,000
Funding from NHS (excluding funding earmarked from Scottish Government) – if appropriate	£2,479,054
Total Funding from other sources – as appropriate	
Carry forwards	
Total (A)	£7,911,858

b) Total Expenditure from sources

	Problem Substance Use (Alcohol and Drugs)
Prevention (include community focussed, early years, educational inputs/media, young people, licensing objectives, ABIs)	£ 402,821
Treatment & Support Services (include interventions focussed around treatment for alcohol and drug dependence)	£6,340,810
Recovery	£ 900,433
Dealing with consequences of problem alcohol and drug use in ADP locality	As above.
Total (B)	£7,644,064

c) 2017-18 Total Underspend from all sources: (A-B)

Income (A)	Expenditure (B)	Under/Overspend
		£267,794 under spend

d) 2017-18 End Year Balance from Scottish Government earmarked allocations (through NHS Board Baseline)

	Income £	Expenditure £	End Year Balance £
Problem Substance Use *	£2,653,555	£2,653,555	£0
Carry-forward of Scottish Government investment from previous year (s)			

Note: * The income figure for Scottish Government should match the figure given in table (a), unless there is a carry forward element of Scottish Government investment from the previous year.

2. MINISTERIAL PRIORITIES

ADP funding allocation letters 2017-18 outlined a range of Ministerial priorities. Please describe in this ADP Report your local Improvement goals and measures for delivery in the following areas during 2017-18 below.

Any figures given are for Falkirk or Forth Valley. For clarity Falkirk Council area equates to approximately 52% of the population of Forth Valley.

PRIORITY	*IMPROVEMENT GOAL 2017-18	PROGRESS UPDATE	ADDITIONAL INFORMATION
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<p>1. Preparing Local Systems to Comply with the new Drug & Alcohol Information System (DAISy).</p>	<ul style="list-style-type: none"> • Continue to implement and monitor local DAISy implementation plan. • Continue to raise awareness of the DAISy system amongst staff. • Prepare local systems for implementation date. 	<ul style="list-style-type: none"> • Throughout the reporting period, the ADP Support Team sought to maintain momentum and data input into the current SMR system. • As previously reported, we devised a local DAISy implementation plan to support services with the preparation and transition to the new database. This continues to be monitored through the Quality Improvement Framework Board (QIFB). Please see Appendix 1 for a copy of the plan. • The Forth Valley ADP Co-Ordinator attended team meetings within all services across the Statutory and Third Sector and delivered a presentation designed to raise staff awareness of the purpose of DAISy as well as the requirements of the system. This presentation has also been delivered to ADP members. • The local IJBs were also updated on the purpose and requirements of the DAISy system. • Work has been undertaken to ensure that local assessment documentation is compatible with the DAISy database. • The local outcomes dataset has also been reviewed to ensure that it is compatible with DAISy. • The ADP invested in resource to support services to clean up their data on the existing SMR systems to aid effective input into the new DAISy system. • We continued to disseminate all SDMD reports as required and have continued to work with Service managers to reinforce the importance of recording accurate data. • Super Trainers have been identified within local services and 	
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		<p>await training dates from ISD. These trainers will support local workforce development post implementation of the DAISy system.</p> <ul style="list-style-type: none"> We supported the local approach to the ROW tool in its previous format, including within the three Forth Valley Prisons, and will continue to develop the workforce as required post any revised development. We have continued to support attendance at the national DADA meetings. 					
<p>2. Tackling drug and alcohol related deaths (DRD & ARD)/risks in your local ADP area. Which includes - Increasing the reach and coverage of the national naloxone programme for people at risk of opiate overdose, including those on release from prison and continued development of a whole population approach which targets harder to reach groups and focuses on communities where deprivation is greatest.</p>	<ul style="list-style-type: none"> Increase the local penetration of Naloxone supply in line with drug prevalence rates. Continue to deliver overdose prevention training to Service Users within Forth Valley Substance Use Services. 	<p style="text-align: center;"><u>Drug Related Deaths - 2017</u></p> <ul style="list-style-type: none"> In 2017, our local drug related deaths reduced from a significant increase in 2016. The number in Falkirk last year is as follows: <table border="1" data-bbox="846 778 1774 951"> <thead> <tr> <th data-bbox="846 778 1218 880"></th> <th data-bbox="1218 778 1774 880">Total Number of Drug Related Deaths (2017)</th> </tr> </thead> <tbody> <tr> <td data-bbox="846 880 1218 951">Falkirk</td> <td data-bbox="1218 880 1774 951">14</td> </tr> </tbody> </table> <ul style="list-style-type: none"> It should be noted that as this annual report is being prepared, there is a significant increase in numbers of people dying of suspected drug related deaths in 2018. This work will review evidence of location to determine if there is a correlation to SMID areas. As in previous years, the ADP has commissioned an external research report to analyse the local situation and identify recommendations for future action. This includes looking at the circumstances around non fatal overdoses and lessons to be learned from those. 		Total Number of Drug Related Deaths (2017)	Falkirk	14	
	Total Number of Drug Related Deaths (2017)						
Falkirk	14						

		<ul style="list-style-type: none"> • In November 2017, we held a conference which specifically focussed on what more we can do at a local level to reduce and prevent drug related deaths. The conference was entitled “One is Too Many – An Investigation into Forth Valley Drug Deaths” and was attended by 69 participants. The event was supported by Local and National partners and the recommendations from the day have been incorporated into the DRD / Critical Incident work plan. <p style="text-align: center;"><u>Critical Incident Group and Case Review Group</u></p> <ul style="list-style-type: none"> • As previously reported, we have increased the frequency of meetings relating to drug related deaths. The strategic Critical Incident Group meets bi-monthly to oversee strategic developments and requirements. The group works to an agreed action plan which is monitored by the Chair and the ADP Support Team. • The Case Review Group also meets bi-monthly and provides an opportunity for a deeper review of drug related deaths. These meetings have been expanded to include a wider range of partners including Housing, Criminal Justice and the Recovery Community. <p style="text-align: center;"><u>Drug Trend Monitoring Group (DTMG)</u></p> <ul style="list-style-type: none"> • The DTMG was established in the reporting period and early indications are that this is an effective forum for sharing local intelligence and information. The group is chaired by Police Scotland and is attended by senior representatives from Partner organisations. • Forth Valley will be represented on the national DTMG hosted by Scottish Drugs Forum (SDF). 	
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Naloxone

- Our Naloxone penetration for the period Jan – Dec 2017 can be summarised as:

Falkirk	228
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- The published Naloxone data for Forth Valley includes the three local Prisons which potentially skews our data regarding Naloxone penetration within local community services. We have instructed an audit of this to better understand provision.
- Through mapping, we are also overlaying our drug related death data and non-fatal overdose data with naloxone provision. This will allow us to clearly see where supply needs to be targeted. We also continue to map needle discards where the data is available.
- We also plan to complete a local audit of Naloxone policies by December 2018.
- Falkirk Council has an agreed a Naloxone policy with key front line staff being supported to deliver this.
- We continue to be represented on and support the national Naloxone group.

Contingency Management

- We continued to operate a Contingency Management Plan which allows us to manage risk in relation to the impact of Community Pharmacy closures during holiday period.
- Linked to the above, we have further reviewed our processes in light of the adverse weather experienced at the beginning of March. Services and Pharmacies were impacted by staff being unable to get to work. A meeting was convened to discuss this and to agree any additional protocols that would be required to deal with such a situation.

Workforce Development

- We have continued to offer overdose awareness and Naloxone training for individuals, families and staff members.
- Overdose Awareness and Naloxone training was delivered to 98 individuals in the Forth Valley area over the reporting period. The sector breakdown is shown below:

Sector	Total Number of Participants
Social Care / Housing	46
Health	15
Justice	37

The breakdown of the above data is:

Local Authority	Total Number of Participants
Falkirk	62

- A number of other training courses were delivered locally which can be related to the prevention of alcohol and drug related deaths. These were delivered by both Health Promotion and Scottish Drugs Forum. Details are provided below:

NHS Forth Valley (Health Promotion) :

Course	Falkirk	Total Forth Valley
Preventing Self-Harm	42	88
Blood Borne Virus Training	28	55
Mental Health First Aid	127	420

Mental Health At Work	10	28
Stress Control (Staff)	54	59
Stress Control (Members of Public)	242	571

- Health Promotion also provides ongoing training and awareness raising in relation to Foetal Alcohol Spectrum Disorder (FASD). The national toolkit is used to promote the agreed key messages.
- Training was delivered as follows:

	Total Number of Participants
Falkirk	23

Scottish Drugs Forum Delivery:

Course	Number of Participants
Introduction to Motivational Interviewing	13
Introduction to Trauma	56
Understanding Stigma: Promoting Inclusive Attitudes and Practice	24
Drug Awareness	68
Getting Our Priorities Right	192
Listening & Responding to Children Affected by Parental Substance Use	15
CAPSM (1 day bespoke)	25
ROSC	33
NPS	28

		<div style="border: 1px solid black; width: fit-content; margin: 0 auto; padding: 2px;"> <p style="margin: 0; text-align: center;"><u>Related Activity</u></p> </div> <ul style="list-style-type: none"> • We continue to attend the National DRD Co-ordinator meeting as well as the PADS Community Group. • We continue to work in partnership with Local Authority colleagues to address any community safety issues that may arise as a result of alcohol and/or drug misuse (e.g. street drug litter and anti-social behaviour) to ensure that individuals and communities are protected. We can then dispatch the Harm Reduction Service to areas of need across Forth Valley. • The mobile Harm Reduction Team worked in partnership with the Homelessness/Housing Support Service in Falkirk and the vehicle was parked outside the local supported accommodation on a set day. The Harm Reduction Service provides information and advice. Medicine safety storage boxes are also provided as appropriate. • We continue to develop leaflets and posters to raise awareness of issues that may contribute to drug related deaths. This has included the dangers of poly drug use. These resources are widely distributed to a variety of settings and, as well as providing advice, also provide details of support services for anyone needing help. • We continue to engage with local media outlets including local newspapers and radio stations. As well as promoting local treatment services, we also aim to raise awareness of the Forth Valley Family Support Service for those who are affected by and/or bereaved by alcohol or drug related deaths. Mutual Aid and Recovery Community support are also heavily promoted. 	
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		<ul style="list-style-type: none"> • We continue to mark International Overdose Awareness Day on an annual basis and invite staff, service users and family members to join us. This event is rotated throughout the 3 Local Authority areas each year and the ADP supports the hire of a mini bus to help people travel to the other areas. In 2017, it was welcomed that more family members joined us. • We continued to work with Unpaid Work Services within Criminal Justice Social Work who manufacture the safe medication storage boxes that we provide to our OST Service Users. These can also be made available to partner agencies upon request. • We continued to provide Family Information Packs and Service User Information Packs which are utilised during Police Operations and when people are taken into custody. The aim of these is to provide information on local support services to individuals and families affected by substance use. <p style="text-align: center;"><u>Specific Activity – Alcohol Related Deaths</u></p> <ul style="list-style-type: none"> • At present we do not have a distinct Alcohol Related Death Prevention Plan but we undertake many tasks and activities which we hope will contribute to an ongoing reduction in alcohol related deaths. We intend to consider how we review alcohol related deaths when we review our Delivery Plans in light of the new national strategy. • The Falkirk in relation to alcohol related deaths within the reporting period is as follows: <table border="1" data-bbox="846 1257 1585 1396"> <thead> <tr> <th data-bbox="846 1257 1093 1324"></th> <th data-bbox="1093 1257 1339 1324">2016</th> <th data-bbox="1339 1257 1585 1324">2017</th> </tr> </thead> <tbody> <tr> <td data-bbox="846 1324 1093 1364"></td> <td data-bbox="1093 1324 1339 1364"></td> <td data-bbox="1339 1324 1585 1364"></td> </tr> <tr> <td data-bbox="846 1364 1093 1396"></td> <td data-bbox="1093 1364 1339 1396"></td> <td data-bbox="1339 1364 1585 1396"></td> </tr> </tbody> </table>		2016	2017							
	2016	2017										

		Falkirk	35	22	
<p>Pathway for Hazardous / Harmful Drinking</p>					
<ul style="list-style-type: none"> • During the reporting period, the pathway for hazardous and harmful drinking was reviewed and updated. • The guidance document relating to the Community Management of Alcohol Withdrawal was approved by all of the relevant governance groups with an associated resource pack developed and implemented. All staff involved in the community management of withdrawal were provided with a copy of the resource pack. • The Guidance document and Community Pathway was piloted with nominated GPS and feedback gained. 					
<p>Licensing</p>					
<ul style="list-style-type: none"> • We continue to actively support the Licensing agenda in Falkirk. This includes attendance at Licensing Forums. • Information was also delivered to the Licensing Board as well as having meetings with Elected Members keen to address the alcohol related issues in the locale. • We provided detailed information for the review of the local Licensing Policy. • We also worked closely with the Licensing Standards Officer to distribute resources relating to our local Whole Population Approach (WPA) campaigns – “Rethink Your Drink.” 					

		<ul style="list-style-type: none"> • We ran our Rethink Your Drink campaign over summer and the Festive Period. The resources were widely distributed across very many settings including Homeless / Housing, Libraries, Community Centres, Social Work, Police, Sports Facilities, Council Buildings and On and Off Sales. Distribution included leaflets and posters as well as Plasma Screen displays, pay slips and a Social Media Presence. <p>Alcohol Related Brain Injury Team (ARBI)</p> <ul style="list-style-type: none"> • During the reporting period, an evaluation of the ARBI team was undertaken. One of the recommendations was that a permanent team should be maintained as part of the support structure in Forth Valley. This work is a priority for the Falkirk ADP and the Falkirk Community Planning Partnership. The evaluation report highlighted the need to expand the scope of the team to include OT and Psychology for the purpose of assessment and diagnosis. • The IJB have funded the nursing component of the team and the ADP funded the costs of a social care co-ordinator. • As part of the ARBI evaluation, we undertook analysis using the CHI numbers of individuals in order to understand their journey through acute care. • An ARBI Steering Group supported the delivery of the project and provided quarterly performance management reports for the IJB. • In partnership with SDF, we delivered ARBD training to 74 participants. By doing so, we continue to raise awareness amongst the workforce targeting Substance Use Services as well as Social Work Services. <p>Social Inclusion Project</p>	
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- The Social Inclusion Project continues to operate on an outreach basis with the target group being those who are socially excluded, isolated and unable to engage effectively with traditional service provision. There is evidence of highly effective partnership working achieving very positive outcomes for this vulnerable group.

Alcohol Brief Intervention (ABI)

- Locally, we continue to exceed the Forth Valley target in relation to ABI Delivery within priority settings. The early identification of harmful drinking patterns is part of our approach to reduce alcohol related deaths.
- Throughout the reporting period, 8,610 ABIs were delivered across Forth Valley: 5957 within priority settings and 2662 in wider settings. The target was 3410.
- The figures for Falkirk are as follows:

Priority Settings

	Annual Standard	Primary Care	A&E	Antenatal
Falkirk	1705	2605	118	4

Wider Settings

	ABIs Delivered
Falkirk	1560

Social Influence Programme

- We continued to deliver the Social Influence Programme within Secondary Schools across the three Local Authority areas. The programme delivers a social norms/influence intervention and then a follow-up with pupils 6 weeks post intervention to measure impact. This programme takes a holistic approach and does not focus on a single topic but includes alcohol, cannabis and tobacco use. All outcome areas showed a positive behaviour change amongst the young people who participated.

Impact of Parental Substance Use Assessment (IPSU)

- Significant work has continued on the development of the above which will provide a specific tool that will allow practitioners to comprehensively assess the impact that alcohol and / or drug use is having on a person's parenting capacity.

Maternity Post

- The ADP provided funding for a Specialist Midwife post with the aim of improving the early identification of FASD as well as enhancing the outcomes for substance using women and their children. We are now looking to maximise the opportunities within the Best Start approach to reflect the findings. We are also currently reviewing our pathway for pregnant women which will further support this work.

Forth Valley Recovery Community (FVRC)

- Throughout 2017/18, the FVRC has continued to grow and increase the range and frequency of recovery support available across Forth Valley. The presence and support of the FVRC is an important part of the response to reach at risk individuals who may not be engaged with treatment and support services. In terms of reducing alcohol and drug related deaths, the FVRC has an essential role to play.
- During the reporting period, the membership and remit of the Recovery Steering Group was reviewed. The group is now attended by Service Managers and Strategic Leads.
- During the reporting period, the FVRC has established a weekly support meeting for people who have recently completed a residential rehabilitation programme or who have commenced the process of accessing the specialist intervention. In the twelve month period, eight people accessed this support.
- An innovative and growing event is the annual Recovery Olympics. This event is now completely organised by the Recovery Community and is attended by teams from across Scotland. The event brings together supporters of recovery as well as increasing the visibility of recovery within a local community.
- The network of Cafes available increased to five with each Café offering recreational activities, food and peer support. The attendance figures for the Cafes are shown below:

Location	Attendance	Average Weekly
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		<table border="1"> <thead> <tr> <th></th> <th></th> <th>Attendance</th> </tr> </thead> <tbody> <tr> <td>Alloa (Monday)</td> <td>775</td> <td>16</td> </tr> <tr> <td>Stenhousemuir (Wednesday)</td> <td>609</td> <td>13</td> </tr> <tr> <td>Stirling (Friday)</td> <td>837</td> <td>17</td> </tr> <tr> <td>Falkirk (Saturday)</td> <td>1233</td> <td>25</td> </tr> <tr> <td>Grangemouth (Sunday) From Feb 2018</td> <td>98</td> <td>11</td> </tr> <tr> <td>Totals</td> <td>2643</td> <td>16.5</td> </tr> </tbody> </table> <ul style="list-style-type: none"> • Full details of the activity of the FVRC are highlighted within the FVRC Annual Report 2017/18. 			Attendance	Alloa (Monday)	775	16	Stenhousemuir (Wednesday)	609	13	Stirling (Friday)	837	17	Falkirk (Saturday)	1233	25	Grangemouth (Sunday) From Feb 2018	98	11	Totals	2643	16.5	
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Totals	2643	16.5																						
3. Ensuring a proactive and planned approach to responding to the needs of prisoners affected by problem drug and alcohol use and their associated	<ul style="list-style-type: none"> • Manage Waiting Times for the Prison Healthcare setting. • Monitor SMR activity and 	<ul style="list-style-type: none"> • The Prison establishments continue to report on Waiting Times and SMR activity to the ADP. • The local Prisons are also engaged in the local preparations for DAISy implementation. • Emerging evidence indicates that Prison Counselling will need to be revised in light of the Psychological Therapies report. 																						

<p>through care arrangements, including women.</p>	<p>compliance within the Prison Healthcare settings.</p> <ul style="list-style-type: none"> • Continue to invest in Substance Use Counsellors within Forth Valley prisons. • Include Prison Healthcare in local National Quality Principles audit. 	<ul style="list-style-type: none"> • The ADP plays a key role in local Community Justice Planning structures. • The FVRC has undertaken work within Polmont and Glenochil Prisons where prisoners have been trained as Recovery Volunteers. The future plans are for both establishments to develop a Recovery Café and a wider Recovery Community. Discussions are taking place with Cornton Vale as to future Recovery Volunteer training being made available to female prisoners. • In Sept 2017, the SPS agreed to hold Recovery Walks within the three local Prison Establishments. These were supported by the FVRC and the ADP Support Team. • Within Falkirk, Housing Services have worked in partnership with FADP to develop a model of Recovery Housing, where individuals have access to 24 hour support in a supported tenancy. Wraparound person-centred support and treatment will be offered, including fostering links with the Recovery Community. This could be an option for those leaving prison or returning from a period in residential rehabilitation. The model is due to be launched in October 2018. An update will be provided in future reports. • Falkirk Criminal Justice Services continue to provide a dedicated Women’s Service in Falkirk. This has developed in response to the varied needs of the women within the Criminal Justice system. There also continues to be effective partnership work with Signpost Recovery in relation to supporting people with substance misuse problems who are in contact with the Criminal Justice system. A new pilot involving those in the Criminal Justice System to tackle health inequalities was set up towards the end of the reporting period and will be reported on in future reports. 	
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<p>4. Continued implementation of improvement activity at a local level, based on the individualised recommendations within the Care Inspectorate Report, which examined local implementation of the <i>Quality Principles</i>.</p>	<ul style="list-style-type: none"> • Embed local improvement targets as detailed within QIFB plan. 	<ul style="list-style-type: none"> • As previously noted, we devised an Improvement Plan to strengthen the areas identified by the Care Inspectorate in 2016 of requiring further development. This was completed in partnership with Service Leads. • This is now the work plan of the Quality Improvement Framework Board and progress is tracked by the Chair and the ADP Support Team. Ongoing indications are that tasks are being progressed. • We revised all of our key work plans in order to streamline work streams and incorporate all of the Improvement activity. This included the Integrated Clinical Governance Plan and the Drug Related Death Plan. • As per a recommendation from the Care Inspectorate, we reviewed the provision of local advocacy available locally and summarised the findings within a report which was shared with ADP members and Services. • Presentations have been delivered to the IJB on the Care Inspectorate Plan to ensure that members have the appropriate strategic oversight of the services that they commission. • The ADP has contributed to the strategic planning and reporting cycles of the Integration Authorities. • During the reporting period, we commenced with our second self-assessment of compliance with the National Quality Principles. This is not a mandated exercise by Scottish Government but has been a long standing priority of the Forth Valley ADPs to offer the appropriate assurances to the local partnerships on the standard of local provision. 	

		<ul style="list-style-type: none"> • The self-assessment process involved reviewing our local audit tool in line with the documentation used by the Care Inspectorate in 2016. All services within the treatment system have completed this exercise, including the Forth Valley Prisons. The next step will be a Peer Review Session with organisations then developing improvement plans for their individual services. • The ADP commissioned an external review of the Forth Valley Recovery Community. The task was to produce a report based on the best evidence for recovery which made recommendations as to the next steps for the FVRC. The final report made nine recommendations which are incorporated into an action plan which will be monitored by the Recovery Steering Group throughout 2018/19. • We are currently working to refresh our needs assessment which will support future strategic planning and also help inform the Health & Social Care Needs Assessment. 	
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* SMART (*Specific, Measurable, Ambitious, Relevant, Time Bound*) measures where appropriate.

3. FORMAL ARRANGEMENT FOR WORKING WITH LOCAL PARTNERS

<p>What is the formal arrangement within your ADP for working with local partners including Integrated Authorities to report on the delivery of local outcomes?</p>	<p><u>Local Partners</u> The chair of the ADP sits on the public protection chief officers group and is required to provide an update to that group on the following – national initiatives, local challenges, any key actions or decisions required. This group consists of the most senior officers from the following organisations: The Local Authority The IJB</p>
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	<p>NHS Health Board Police Scotland Scottish Fire and Rescue Chief Social Work Officer and Chair of the Child and Adult Protection Committees</p> <p><u>Integration Authorities</u></p> <p>The ADP also reports to the IJB regularly – updating on key issues, challenges as well as progress.</p> <p>Both these group / bodies then report to the Community Planning Executive and thereafter to the Community Planning Board on progress against outcomes.</p> <p><u>ADP</u></p> <p>The Falkirk ADP works alongside the Forth Valley ADP. This arrangement has been in place for a number of years and over the coming months will be reviewed to take account of the changed governance surrounding the ADP. It is anticipated that the FV partnership will continue as a way for the 3 local ADPs to come together with NHS colleagues to determine series that need or make sense to be delivered across the NHS Board area with local priorities and services being developed at a locality level to meet local needs.</p>
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In submitting this completed Investment Plan, we are confirming that this has been signed off by both the ADP Chair and Integrated Authority Chief Officer.
APPENDIX 1: