

Somerset Drug & Alcohol Partnership Board Terms of Reference

Purpose

Somerset Drug and Alcohol Partnership (SDAP), all of its partners and stakeholders are committed to improving the outcomes for individuals and communities affected by the misuse of alcohol and drugs in Somerset.

SDAP is a strategic group of public sector organisations who work together to implement the national drugs and alcohol strategies in Somerset. It recognises that alcohol and drug misuse affects everyone in one way or another and that for the harm caused by alcohol/drugs to be minimised, tackling misuse is "everyone's business".

SDAP is accountable to the Somerset Health and Wellbeing Board; and as such the work of SDAP contributes to realising the ambition of the wider health and wellbeing strategy for Somerset for 'people to live healthy and independent lives, supported by thriving and connected communities, with timely and easy access to high-quality and efficient public services when they need them'.

It aims to ensure that effective partnership responses are developed, commissioned and delivered to tackle drugs and alcohol issues for people resident within the county boundary of Somerset. SDAP has links to other strategic groups such as the Somerset Children's Trust, Local Safeguarding Children Board, Safer Somerset Partnership as well as links with the work on 'troubled families' and the Police and Crime Commissioner. By making these links it ensures that drugs and alcohol are part of "everyone's business".

Structure

The structure for SDAP is set out in Appendix 1. It operates as a senior board of partners meeting quarterly. Every quarter there is an open part 1 meeting and then a confidential part 2 meeting for commissioners. This part 2 functions as SDAP's commissioning group.

To drive forward the work of SDAP there is the following sub structure:

- Task And Finish Groups (as required)
- Primary Care Substance Misuse Monitoring Group
- Service User and Carer Consultation Forums
- Confidential Inquiries into Alcohol and Drug Related Deaths Panel

Membership

SDAP membership is drawn from senior representatives of the following organisations:



- Avon and Somerset Constabulary *1
- Probation *
- Sedgemoor District Council²
- Somerset Clinical Commissioning Group *
- Somerset County Council *
- Somerset Partnership NHS Foundation Trust
- Somerset Youth Offending Team
- Representative from SDAP Primary Care Substance Misuse Monitoring Group
- Representatives from Service User Consultation Forum*
- Representatives from Carer Consultation Forum
- Representatives from SDAS (CRI, Turning Point and DHI)
- Representatives from Public Health England*
- Chair of Task & Finish Groups as required

Other agencies/groups can be co-opted as necessary to both SDAP part 1 and part 2 meetings.

All conflicts of interest must be declared at the beginning of each meeting.

Accountability

SDAP is accountable through the Somerset Health and Wellbeing Board; and through the governance structures of its constituent partner organisations. It operates a pooled substance misuse budget, which is managed through a Memorandum of Agreement on the Management of the Pooled Budget which all funding partners sign up to.

Principles underpinning the partnership

The structure, functions and work of SDAP are underpinned by the following principles:

- Equalities and Diversity: SDAP values diversity, and celebrates cultural and social differences. It strives through all its functions to promote the current anti-discrimination laws. SDAPs Equal Opportunities Promise is to commission all services of equal quality which meets needs and fulfil rights. Somerset residents can expect commissioned services to treat them fairly, with respect and dignity, and to be understanding of whoever they are and whatever their background. It will work in line with all current equalities legislation.
- User and Carer Involvement: At all levels SDAP is committed to an approach that involves service users and carers, in line with the Somerset County Council policy "Involving service users and carers – our Principles and Standards"

¹ An asterisk identifies those partners involved in the confidential part 2 meetings

² Sedgemoor District Council currently represents all District Councils in Somerset. This is under review as at July 2014



(October 2012)

http://enterprise.somerset.gov.uk/ssintranet/Adults/Involving_service_users_and_carers/docs/Internet&intranet%20-%20principles%20and%20standards.doc

- Integration and joint action: SDAP recognises that drug/alcohol misuse is a cross cutting theme which links to:
 - o other themes such as domestic violence, safeguarding children and adults, community safety, troubled families etc.
 - other commissioning strategies such as Pathway for Socially Excluded –
 Accommodation and Support Services for Vulnerable People, Pathway to
 Independence Accommodation and Support Services for Vulnerable Young
 People aged 16 24 years, Somerset Reducing Re-offending Strategy etc.
 - other agency specific work areas such as police, probation, children's social care, school nursing, mental health services etc.

It is therefore committed to work in a way that integrates and aligns the alcohol and drug misuse work with these others to ensure the best outcomes for local people.

Evidence based commissioning: All interventions commissioned within the Somerset drug and alcohol services system will be evidenced based either through national reports, policies, guidance or research or local pilots which have been robustly evaluated.

Functioning

The following sets out the way in which SDAP will function as a partnership:

- Representatives of the SDAP membership will be of sufficiently senior level in their own organisations to make strategic policy and resource decisions.
- The Chair of the SDAP will be drawn from the agency membership. S/he will hold the position of the Chair, where possible, for a minimum of 2 and a maximum of 4 years.
- The Vice-Chair will be nominated, again from the agency membership, on the understanding that s/he will be the next Chair, so ensuring continuity within SDAP.
- The representatives of SDAP partner agencies are responsible for ensuring that their agency is fully informed of the SDAP strategic plans, priorities, targets and planning/reporting cycles are fully integrated into agencies own planning processes.



- SDAP Board will meet, at a minimum, on a quarterly basis and all members should strive to attend all meetings. Where a member delegates attendance, that person should be fully briefed and able to effectively substitute for the named representative.
- SDAP Board will be structured in the most efficient and effective way to achieve the strategic goals of partners. See Appendix 1.
- SDAP Board will have final approval / sign off of the terms of reference for all its subgroups.
- SDAP is the principal mechanism locally by which partner agencies will develop the resource partnerships to deliver locally agreed strategies for implementing national alcohol and drugs strategies.
- The structure, functions and work of SDAP is underpinned by the principles set out in this document.
- SDAP partners are committed to using resources collaboratively in order to obtain best value.
- Each agency representative is also responsible for ensuring that their agency's data is provided, in a useable form, for needs assessment process required of the partners.
- The SDAP staff will service the SDAP Board and its subgroups. Agendas and any associated papers will be sent out in advance of the meetings, affording members the opportunity to consider the issues beforehand. Minutes will be sent out as soon as possible after the meeting.

Role of SDAP part 2 commissioners meting

The role of the Part 2 commissioners meeting is to focus on commissioning substance misuse related services/initiatives for young people and adults in Somerset. It will do this by:

- a) Undertaking needs assessment in line with relevant Public Health England guidance and with reference to national guidance on strategy & evidence based practice.
- b) Setting priorities for the future direction of service provision.



- c) Deciding the structure and pattern of service provision in line with the broader changes in: young people's and adults services, individual partner's remits and other stakeholders e.g. Police and Crime Commissioner.
- d) Agreeing the annual pooled budget to meet the agreed priorities
- e) Monitoring the performance of the substance misuse system and individual service elements.
- f) Conducting regular contract review meetings with commissioned services.
- g) Consulting with service users (young people and adults), parents/carers/family members, providers and other stakeholders to inform commissioning decisions and quality assure the services commissioned.

Membership of part 2 is based the direct contribution to the substance misuse pooled budget or indirect commissioning of aligned substance misuse services or related services.

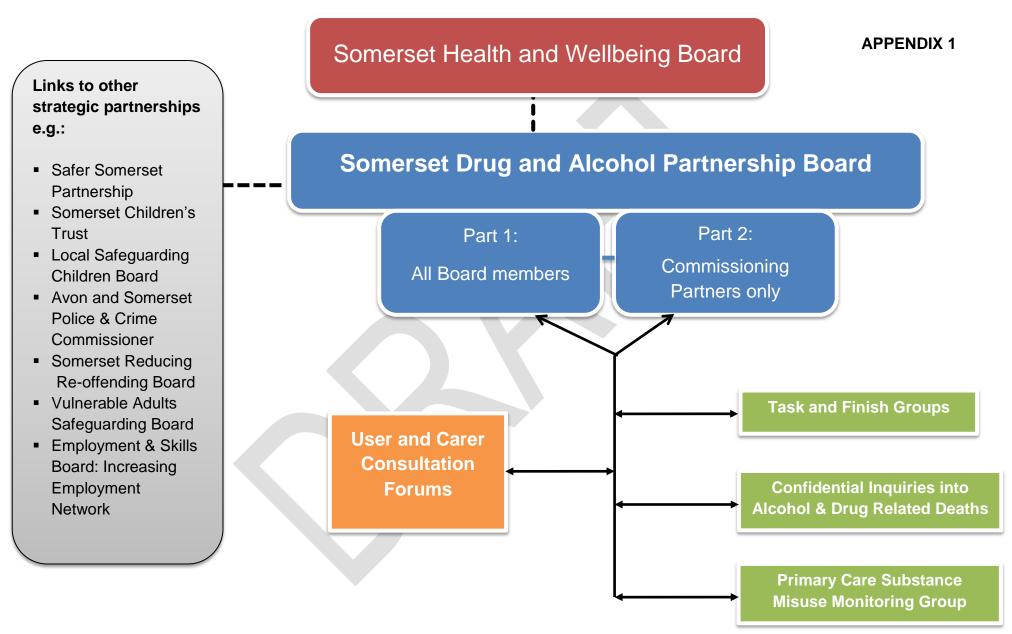
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Representation of District Councils to be discussed at Health and Wellbeing Board Exec. - date for this discussion not yet confirmed

Approved by: SDAP Board - [date to be added]

To be reviewed: Annually



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