



DRUG AND ALCOHOL STRATEGY 2008/09

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Introduction

This strategy sets the direction for the development, delivery and review of services in Angus for those who experience problems arising from substance misuse. This includes alcohol, illicit drugs, prescribed medication and solvents. It also includes children and young people who have problems arising from their own or others substance misuse including that of their parents.

There are national drug and alcohol strategies aimed at addressing the issues relating to substance misuse problems at the level of both individual and communities. These strategies are not involved solely in issues of service provision but also in prevention, education, enforcement and control.

This document was developed within the context of existing planning processes taking account of both local and national objectives. It was reviewed in March 2008 in the context of revised planning structures and a changing national picture

In taking account of national policies the strategy encompasses individuals and communities affected by substance misuse and extends to cover changing cultures relating to the use of drugs and alcohol. This involves education, prevention and enforcement and community engagement.

Because of the manifold issues arising from the use and misuse of drugs and alcohol there is no single service that addresses the comprehensive range of needs. A number of agencies and organisations are involved from those providing medical and social interventions through criminal justice measures to education, prevention, protection and controls and diversionary activities.

The Police have a role in reducing the supply of drugs and influencing local markets. Together with the local authority they are involved in addressing the availability of alcohol and enforcing regulations. The Licensing Board together with local retailers also ensure the responsible supply of alcohol. A Local Licensing Forum has been established to consider the work of the Licensing Board in relation to the five objectives in the Licensing (Scotland) Act 2005.

This strategy aims to outline a coherent approach to addressing issues associated with substance misuse in Angus. It will

- provide information to help inform choices for individuals;
- address the social and environmental factors which lead to substance misuse;
- aim to contribute to the process of minimising the harm to those misusing substances; and
- detail interventions available to the local population.

This will include social work and social care; psychological, pharmacological and in-patient treatments; and training and education.

National and Local Policy Objectives

National Context

Addressing the consequences of drug problems has been a priority of UK and Scottish Governments for some time. There has been recent recognition of both the scale and impact of alcohol misuse across the whole of society with the result that the profile of alcohol misuse has been raised significantly.

The development of national strategic plans for both drugs and alcohol has provided a framework for action in Scotland. *Tackling Drugs in Scotland: Action in Partnership* (1999) set out the high level objectives and national targets for addressing drugs issues. *The Plan for Action on Alcohol Problems* (2002 – updated 2006) similarly sets out action points for addressing alcohol problems. The Scottish Government has indicated that a new Drugs Strategy for Scotland and a revised Plan for Action on Alcohol Problems will be published in the course of 2008. A stocktake of Drug and Alcohol Action Teams was undertaken in 2005-06 and the findings published in July 2007. The Scottish Government has requested a joint sub-group of the ministerial advisory groups on drugs and alcohol to bring forward plans during 2008 for the development of DAAT's in order to improve the delivery arrangements for national priorities.

As a result this strategy is being reviewed with the intention that a new strategy be developed from 2009/10 to take account of these important developments. Significant consultation has been undertaken in preparation for the new strategy. A number of recent reports have been taken into account in the preparation of the strategy – these include *Essential Care: a report on the approach required to maximise opportunity for recovery from problem substance use in Scotland* (SACDM 2008) and *Reducing harm and promoting recovery: a report on methadone treatment for substance misuse in Scotland* (SACDM 2007). This strategy will place emphasis on the concept of recovery for those affected by substance misuse problems and the need for working across professional and agency boundaries.

The Scottish Government has requested that DAAT's submit a strategy and action plan for 2008/09. The future form of reporting will be decided in the light of the stocktake recommendations and the requirements of national strategies. However, issues of governance, delivery and demonstrating the impact of activity will be central to new reporting mechanisms.

The Scottish Government has agreed a concordat by which local authorities will enter into a single outcome agreement to deliver the government's key strategic objectives of a Scotland that is healthier and fairer, smarter, safer, stronger and greener. From April 2008 local authorities will be required to agree outcomes, outcomes measures and actions aligned to the government's national outcomes and national indicators. There are 15 national outcomes and 45 indicators.

Of the national indicators and targets there are three that directly relate to the work of the DAAT. These are

- reduce the rate of alcohol related hospital admission by 2011 (National Indicator 18)
- reduce the overall reconviction rates by 2 percentage points by 2011 (National Indicator 23)
- decrease the estimated number of problem drug users in Scotland by 2011 (National Indicator 29)

The performance targets for NHS Scotland are set within categories of Health Improvement, Efficiency, Access and Treatment, known as HEAT Targets.

Health Improvement Target H4 refers specifically to alcohol misuse

- Achieve agreed number of screenings using the setting-appropriate screening tool and appropriate alcohol brief intervention, in line with SIGN 74 guidelines by 2010/11.

A number of the other HEAT targets are relevant to substance misuse

- reduce suicide rate between 2002 and 2013 by 20%
- reduce the annual rate of increase of defined daily dose per capita of anti-depressants to zero by 2009/10
- reduce the number of psychiatric readmissions by 10% by the end of December 2009
- by 2008-09, we will reduce the proportion of older people (aged 65+) who are admitted as an emergency inpatient 2 or more times in a single year by 20% compared with 2004/05 and reduce, by 10%, emergency inpatient bed days for people aged 65 and over by 2008.
- NHS Boards to deliver agreed improved efficiencies for first outpatient attendance 'did not attend', non-routine inpatient average length of stay, review to new outpatient attendance ratio and day case rate by March 2011.

Achieving a number of the national outcomes would be significantly supported by addressing the problems associated with problematic substance misuse and would in turn support people to address these problems. More and better employment opportunities, children having the best start in life, longer and healthier lives, tackling inequalities, strong resilient communities, and high quality and responsive public services will all contribute to reducing the harm caused by substance misuse.

Better Health, Better Care (2007) sets out the policy and direction for health services in Scotland. The broad principles of Better Health, Better Care are that there should be a movement towards a mutual NHS; that people should be helped to sustain and improve their health and that there should be better, local and faster access to health care.

Local Context

The Drug and Alcohol Action Team is the lead strategic body for drug and alcohol issues. It is clearly located within the community planning structures in Angus and functions as part of the community planning partnership. This allows for increasing joint planning and for addressing issues across the planning structures.

The Health Advisory Forum is a Professional Advisory Committee of NHS Tayside and brings together those in NHS Tayside who are responsible for alcohol and drugs issues. It has a responsibility for ensuring that the performance measures relating to substance misuse are addressed within health services and provides a forum for communicating the joint 'health' views to the DAAT's in Tayside.

Tayside Community Justice Authority in its three year Area Plan has identified substance misuse as an area for improvement. Work will be undertaken across the CJA Partners to address substance misuse problems as they affect people in the criminal justice system. The CJA will promote a seminar in 2008 to identify ways forward in addressing issues in this area. Tayside Criminal Justice partnership has established a substance misuse strategy group which will examine specialist substance misuse services within the criminal justice service.

Angus Community Health Partnership will support the establishment of services for people with substance misuse problems alongside making alcohol and drugs a public health issue. Tayside-wide health services for substance misuse are 'hosted' by Angus Community Health Partnership

Within Angus drugs and alcohol issues are addressed within local plans and strategies. These include:

- Angus Community Plan
- Strategic Plan for Community Care and Health Services in Angus
- NHS Tayside Health Plan
- Joint Health Improvement Plan
- Child Health Strategy
- Integrated Children's Services Plan
- Angus Local Housing Strategy
- Angus Homelessness Strategy
- Angus Health & Homelessness Action Plan
- Supporting People Strategic Plan
- Tayside Community Justice Authority Area Plan
- Education Service Plan
- Focus on Alcohol Angus Project Initiation Document Stage Two (PIDS2)

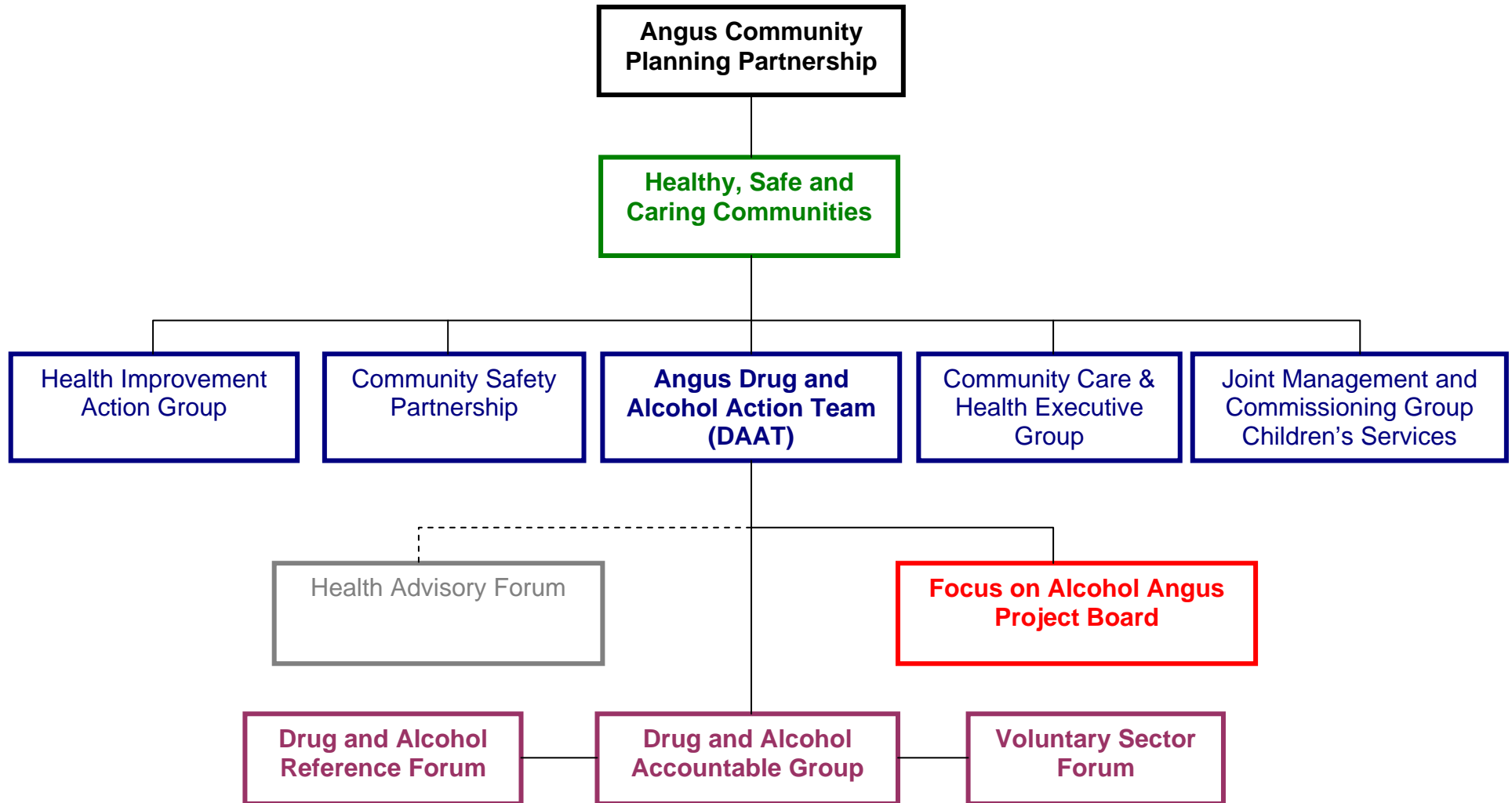
The Angus Drug and Alcohol Accountable Group brings together representatives from services and organisations with an interest in drugs and

alcohol. This group is accountable to the Drug and Alcohol Action Team both for carrying out the actions required by the DAAT and for bringing relevant issues to the attention of DAAT.

Besides the planning group there is a Drug and Alcohol Reference Forum. This is a series of open meetings at which issues can be raised and directed via task groups to the Accountable Group and at which consultation can be carried out.

Voluntary sector organisations are represented on the DAAT and a review of the most appropriate ways of involving voluntary organisations in the work of the DAAT will be carried out in 2008.

Planning Structure



Needs Assessment

Drugs

Estimating the National and Local Prevalence of Problem Drug Misuse in Scotland reported that there were 303 known problem drug users in Angus in 2003, which converted to a prevalence rate of 1.99%. This is based on an estimate of 1038 problem drug users. The rate had increased from 1.20% in the previous study of 2000. The study suggests that the number of women problem drug users in Angus is marginally above national prevalence rates and that there is a higher prevalence of injecting drug users compared to neighbouring authorities. The majority of males with problem drug use are in the age group 25-34 but there is a concerning prevalence in the 15-24 age group.

In Angus, there were 170 new clients reported to the Scottish Drugs Misuse Database in 2006/07, a standardised rate of 206 per 100,000 population. Over two thirds (114) of these clients were males.

Alcohol

The Scottish Health Survey 2003 reported the following figures for adults, aged 16-64, in Scotland:

- 29% of men reported drinking more than 21 units per week in 2003, compared to 34% in 1998 and 33% in 1995
- Among women the proportion drinking more than 14 units per week increased from 13% in 1995 to 15% in 1998 and 17% in 2003.

In Tayside in 2003, the Scottish Health Survey 2003 reported that 25% of men and 13% of women had drunk more than the recommended weekly limit.

In 2006/07, there were 383 alcohol related acute hospital discharges for Angus residents, a decrease of 15% from 2005/06, but similar to the number of discharges reported in 2002/03 and 2003/04. Scotland, as a whole, experienced an annual increase in the number of alcohol related discharges between 2002/03 and 2006/07 and rose from 37,505 to 41,651. The acute hospital data should be seen in the context of overall admission patterns. In Angus these are below the Scottish average. The NHS Tayside report shows that acute hospital rates run below the Scottish average, with the psychiatric admission rate being among the highest in Scotland. The majority of these admissions are to the specialist unit at Sunnyside Royal Hospital.

The number of male and female discharges in Angus decreased between 2005/06 and 2006/07 by 13% and 20% respectively.

In Angus the proportion of alcohol-related admissions in older people is higher than elsewhere in Scotland.

In January 2008, Tayside Police reported a prevalence of migrant workers drunk driving rates emerging.

In the year to March 2008 as part of Operation Dry Up Tayside Police confiscated 1242 litres of alcohol from young people in public places. The police issued 179 letters to parents and guardians of young people found in possession of alcohol or under the influence. From July 2007 – March 2008 there were 1,954 arrests made in Angus, of those arrests 1,081 (55%) were alcohol related. Information about these arrests is displayed in the public areas of police stations in Angus.

From April to December 2007 there were 1,095 alcohol related presentations to the Minor Injury and Illness Units across Angus out of a 29,771 total presentations.

Young People

Drug Misuse Statistics Scotland 2007 reported there were 65 new individual patients/clients aged under 25 years in 2006/07. Of these, 4 were under the age of 15 years, 18 were aged 15-19 and 43 were aged 20-24 years.

The Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) 2006 asked all pupils when they had last had an alcoholic drink. In Angus, 30% of 15 year olds and 11% of 13 year olds had drunk alcohol in the last week, a significant difference to the figures reported in the 2002 survey of 47% and 27% respectively.

Among all pupils, the frequency of drinking increased with age: 6% of 13 year old pupils reported that they usually drink at least once a week, compared to 21% of 15 year old pupils.

In 2006/07, there were 51 alcohol related acute hospital discharges of people aged 24 and under resident in Angus with over two thirds (36) of these being male discharges.

Health Improvement

Health Improvement in Angus is committed to improving the quality of people's lives by changing drinking and drug culture in Angus. One of the aims of Focus on Alcohol Angus is promoting responsible drinking behaviour and discouraging drinking to excess, which has impacts in terms of health services, social work, police, emergency services and wider economic and human costs.

Drug and alcohol misuse not only affects the health and wellbeing of the individuals themselves but also has a major impact on family relationships, communities and society as a whole. Improving health in Angus also means addressing some of the underlying broader issues such a poverty that may lead to harmful behaviours and prevent health improvement.

Changing behaviour requires support and means

- giving people the information they need
- influencing the attitudes of individuals and organisations
- giving people access to help when they do want to change their behaviour
- ensuring prevention support and treatment are available to match the scale of the problem.

A key priority in health improvement is to reduce binge drinking because of the harmful social and individual consequences and to reduce harmful drinking by children and young people because of the particular health and social risks. Angus has one of the highest rates of early teenage pregnancies nationally and 64% of first sexual experiences are reported to happen under the influence of alcohol.

The links between suicide and substance misuse are strong and alcohol is implicated in many attempted and completed suicides. This is an area that requires further work in order to reduce the risks associated with substance misuse and deliberate self-harm and suicide. Drug and alcohol services have been included in the staff grouping for the HEAT Target for suicide prevention. As a result of this, suicide prevention training is a key priority for substance misuse staff in the NHS. Choose Life in Angus produced a self-directed training pack that can be used in a facilitated training session.

Alcohol consumption at a level that is likely to be harmful to health is increasing also amongst older people. The greatest increase in acute hospital admission rates is seen in those over 45 including the over 65s. In these age ranges, one in four adult men and 13% of women admit to drinking above the recommended weekly safe levels. As a consequence of a number of factors home drinking has increased this may also be allied to smoking at home. There is evidence that this is more pronounced in areas of deprivation. The Smoke Free Homes Initiative linked to Safe Angus will address this by involving adults and young people in a comprehensive programme to tackle the problem. In addition, where groups of smokers are now often found, i.e. outside public buildings, they will be approached by health staff offering assistance to quit and other health issues including alcohol, may arise and will be supported appropriately.

Carers

Those who care for and offer support to people with alcohol and drug problems face particular challenges. Whilst sharing characteristics with those who care for people with other needs there are particular issues that offer a challenge to families and carers and to those who would provide services for them. These include the stigma associated with drug and alcohol problems. Often families and others do not identify themselves as 'carers' and may exclude themselves from existing services or feel that they do not wish to share their difficulties with others. The role is often one of supporting a person with problems who may be resistant to help. This can make the role of 'caring' very difficult.

Providing support to families and carers is challenging in that it must address the needs of the carer primarily and not those of the person with drug or alcohol problems.

Research has shown that the following are required to achieve good practice in relation to meeting the needs of carers and families

- clear aims and objectives
- assessing carers and families needs independently
- involvement of carers and families in designing and delivering services
- providing accessible information
- monitoring and evaluation.

A specialist Alcohol Support Worker has been appointed to target those caring for those who have significant alcohol problems. Tayside Council on Alcohol supports this post in partnership with Angus Carers Centre.

The University of Dundee is undertaking further research on the support needs of carers of those with drug problems. It is fully anticipated that this will inform future activity.

Angus Carers Strategy will provide a framework to assist the development of services for carers and this will integrate with the strategy for drugs and alcohol.

Focus on Alcohol Angus

Angus Community Planning Partnership has agreed that addressing alcohol is one of its key priorities for action over the next four years. Through the Drug and Alcohol Action Team this work is being taken forward by the Focus on Alcohol Angus Project. The Project, established in October 2006, is now in its second stage delivering 58 projects and activities. The first stage of the project saw the completion of 53 actions and activities.

A key objective of the project is to encourage and support community members and local partners to identify relevant, meaningful action to tackle alcohol problems. A dedicated Project Manager supports the work and ensures delivery of action (until October 2008).

Some of the projects and activities planned for Stage Two are

- Operation Dry Up - alcohol seizures from young people
- Best Bar None scheme - best practice initiative for pubs and clubs in Angus
- Developing an 'Events Guide' for outdoor and indoor events that have alcohol being sold or used
- Influence policy on alcohol
- Age Restricted Sales Initiative - promote responsible sale of alcohol locally
- Introduce pub watch schemes across Angus

- Develop practice in local Minor Injury Incident Units to further help and support young people into local alcohol services
- Develop an 'Alcohol Information and Services Guide' for the County
- Focus on Alcohol Angus website www.focusonalcohol.org
- Healthy, Happy Communities Projects in Brechin and Kirriemuir - projects working with the local communities.

There has been significant national interest in the Project since it was established. Both the Scottish Government and NHS Health Scotland are supporting financially the work of Craigforth Consultancy & Research to undertake an evaluation of the Project to measure the effectiveness of how it has been developed and delivered. This is being done to consider whether or not the model of the Project can be developed elsewhere in Scotland. Craigforth are also developing the FoAA Stage Two Project Initiation Document into an integrated outcome based plan.

Consultation and Involvement

The DAAT as the lead strategic body for drug and alcohol issues has a responsibility to consult with interested parties on both specific issues or responses and in general in relation to drug and alcohol issues. This is done through the Drug and Alcohol Accountable Group. Practitioners and planners from the partner organisations are represented on this group, which both carries out tasks on behalf of the DAAT and brings issues to the DAAT. The Accountable Group also has a lead role in relation to organising the Drug and Alcohol Reference Forum. The reference forums are open to anyone with an interest in drugs or alcohol. It offers an opportunity for consultation along with 'open space' for people to air issues that they wish discussed. There is also a Voluntary Sector Forum which brings together voluntary and not for profit organisations with an interest in drug and alcohol issues. This forum is represented at the DAAT and a channel of communication is maintained through these representatives. The Accountable Group is working with the voluntary sector representatives to review the most effective and appropriate ways of involving and supporting voluntary sector organisations with an interest in alcohol and drug issues.

Service user involvement is a challenge in most areas and this has been evidenced in the initial audit of services in relation the National Quality Standards for Substance Misuse Services. There has been limited formal involvement of service users to date with the exception of personal contact with individuals or the participation of representatives in specific events. The DAAT has begun to address service user involvement but it also remains for individual services to consider how best to involve service users and how best to reflect the outcomes to the DAAT and its partners. The Accountable Group and Reference Forums are part of a collaborative approach to ensuring effective user/carer involvement. This was the theme of a Reference Forum held in 2008. The development of further activity in relation to service user involvement will be informed by two small-scale baseline surveys undertaken into service users views in 2006 and 2008, along with the outcomes of the reference forum. In 2008 the DAAT is funding a study of service user

involvement through the Eclips Moving On service using a peer review approach.

Community engagement is important when considering the issues that are presented by drug and alcohol problems in communities. The DAAT has been involved in engaging with communities through existing community planning structures. The DAAT partners are represented on the Local Licensing Forum established under the Licensing (Scotland) Act 2005. Community engagement has been central to the work of Focus on Alcohol Angus, which has used an innovative approach within a project management model to involve a broad range of communities in identifying and addressing alcohol problems. Communities are also engaged through the communication activity of the DAAT and its partners. A group has been established to co-ordinate alcohol communications activity across the three Tayside DAAT's - The Tayside Alcohol Awareness Co-ordinating Group.

The DAAT with its partners will also continue to develop the scope and range of its communications activities. Participating in existing or planned activities by the partner agencies will also afford a further platform for community engagement along with the developing community engagement strategy of the Community Planning Partnership.

Model of Service Provision

There are a number of models of service provision that have been adopted in the field of substance misuse. The Effective Interventions Unit document *Integrated Care for Drugs Users: Principles and Practice* along with its associated documentation set out the broad model for the care of those with drugs problems. The emphasis throughout is on integrated care rather than integrated services. This is concerned with meeting the needs of the person rather than the administrative needs of organisations.

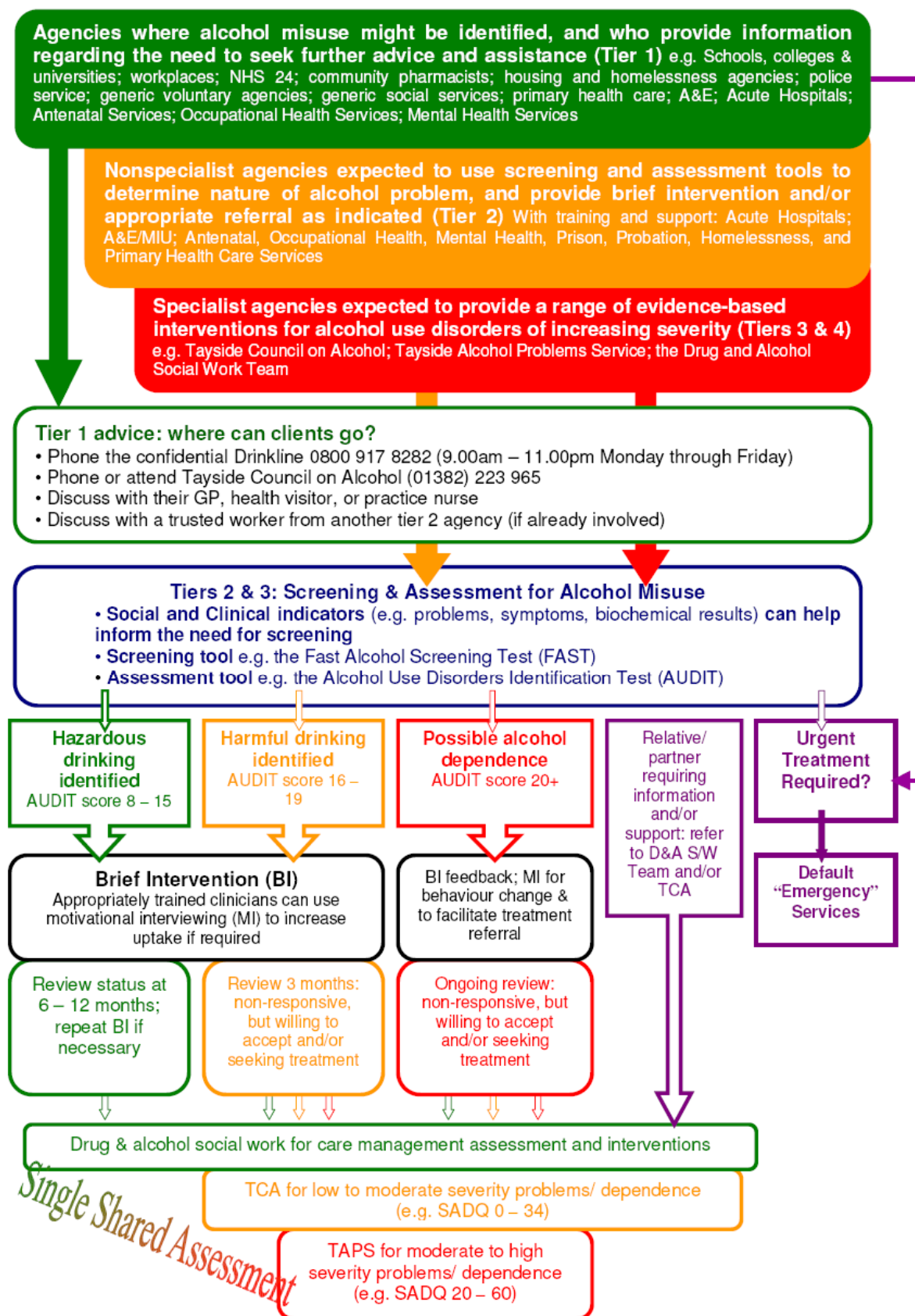
This approach was further developed in the report 'Essential Care' produced by SACDM in 2008.

The National Treatment Agency in England developed a Tiered Approach to services. This sets services within four levels from Tier One to Tier Four. These 'tiers' relate to the populations served and the complexity of needs moving from a broad population with minimal needs (Tier One) to small populations with very complex needs (Tier Four). This model has been adopted by the Scottish Government for example in categorising the current and future spend on drug and alcohol services.

The Tayside Process of Care Group developed a care pathway for alcohol problems. This outlines entry and exit points to services and maps the individual journey through services.

This care pathway is found at diagram 1.

Diagram 1: Care Pathway for Alcohol Problems



The Scottish Intercollegiate Guidelines Network *The Management of Harmful Drinking and Alcohol Dependence in Primary Care* was published in 2003. This guidance is evidence based and outlines the best validated approaches to providing services in primary care to people with alcohol problems. This guidance sets out appropriate approaches in primary care. In developing models of service provision they will be supported primarily by these documents alongside best practice guidance.

The Health Technology Board for Scotland (now NHS QIS) produced an Effectiveness Assessment on the Prevention of Relapse in Alcohol Dependence. This identified the most effective psychosocial and pharmacological strategies.

The UK Health Departments published the latest version of Drug Misuse and Dependence – Guidelines on Clinical Management in July 2007.

'Essential Care', published by the Scottish Advisory Committee on Drug Misuse in March 2008, reviewed the philosophy of drug misuse treatment in Scotland and advised on future directions.

The Scottish Government published a framework of quality standards for substance misuse services. An initial audit of selected services in Tayside was undertaken to identify how easily services could evidence their work towards achieving the standards. Following from this the framework was been used as a component part of the Self Evaluation of substance misuse services in Social Work and Health in Angus to inform the continuing development and delivery of our services.

Hidden Harm (2003), Getting Our Priorities Right (2003) and subsequent reports brought to the fore in a focused and critical manner the risk to vulnerable children whose parents or carers misuse substances. Together with the audit and review of child protection in Scotland this has given added impetus to the need to safeguard the well-being of children and to prioritise services in ways that ensure the welfare of children is promoted and that parents are given every opportunity to achieve safe standards of parenting.

In addition the development of multi agency protocols Working with Children and Families Affected by Substance Misuse (2004) and Angus Inter-agency Guidelines for Child Protection (2005) ensure that a consistent priority is given to delivering services to children and families affected by substance misuse.

Increasing attention is being given to the older people's alcohol use. Recent reports include Older People and Alcohol: A Report on Research in Ayrshire & Arran (Third Sector First 2004); Alcohol and Ageing (NHS Health Scotland 2006). An assessment of need and current services will be undertaken in Angus and this will assist local services to reconfigure resources and services to focus more accurately on the needs of older people.

Strategic Priorities

The Drug and Alcohol Strategy will work towards achieving the Angus Community Planning Vision through its strategic aims and actions.

Strategic Aim

The partners will work to reduce the harmful effects of substance misuse and promote positive change for the people of Angus, its economy and environment.

Strategic Objectives

- to reduce the harm to children, young people and families affected by alcohol and drug problems
- to reduce the harm related to substance misuse through addressing individual behaviours and social, environmental and physical environments
- to promote accessible, appropriate and quality services to meet the needs of all those affected by drug and alcohol problems
- to reduce alcohol and drug related crime and disorder
- to continuously improve the functioning of the partnership leading to better strategic decision making and improved use of resources
- to address alcohol problems working with the community planning partners via the Focus on Alcohol Angus Project.

Strategic Actions

Angus DAAT will work in partnership to

- Review the content of Working with Children and Families Affected by Parental Substance Misuse Protocol and its application in practice
- Develop a “Demonstration Project” to explore better ways of identifying and supporting children and families affected by parental substance misuse
- Review extent of kinship care
- Disseminate information and participate in communication activities including involvement of public health/health improvement
- Promote multi-agency events to involve members of the licensed trade to raise awareness and standards
- Continued delivery of Substance Misuse Education Programmes within the context of finalised Curriculum for Excellence Outcomes
- Develop an outcomes framework for services supporting people with alcohol and drug problems
- Improve service user and community engagement to address alcohol and drug problems
- Implement National Quality Standards Guidance on Service User Involvement
- Develop a range of care and treatment interventions to meet the needs of the population

- Achieve an agreed number of screenings using the setting appropriate screening tool and appropriate alcohol brief interventions in line with SIGN 74 guidelines
- In line with intelligence led policing model undertake a range of initiatives in partnership to reduce availability of drugs and alcohol
- Review the Drug and Alcohol Strategy for Angus
- Identify current resources based on needs assessment and commissioning intentions
- Deliver Focus on Alcohol Angus Project Initiation Document Stage 2 Plans (PIDS2).

These strategic issues are articulated in the Local Improvement Targets in Appendix 1

Emerging issues

Alongside the strategic actions identified by the DAAT there are a number of emerging issues. Many of these issues will be addressed jointly with other planning groups recognising the “cross-cutting” nature of drug and alcohol problems.

The issues currently identified include

Further Development of Partnership Working

Work will continue on the development of a Managed Care Network for substance misuse and the Tayside DAAT’s will be consulted on this ongoing work. Substantial work has been undertaken on the review and redesign of Blood Borne Virus services across Tayside and this work will continue. It will be important that the DAAT’s are involved particularly in the planning and implementation of the second stage of the National Action Plan for Hepatitis C.

The three DAAT’s (Angus, Dundee, and Perth and Kinross) have been looking at improving joint working across Tayside. The aim is to provide improved strategic co-ordination across the DAAT’s whilst recognising that there are local structures and issues that require to be addressed locally. Under a joint grouping of the DAAT Chairs a framework will be developed to make better use of the knowledge and skills of the support staff of the DAAT’s for the benefit of all three DAAT’s. The DAAT Chairs group will also consider consolidating strategic links to Tayside Community Justice Authority and the Procurator Fiscal service in Tayside and other Tayside wide groupings.

Drugs Issues

As part of its development activity the DAAT identified a need to review drugs issues in Angus. Considerable work has been undertaken as part of the Focus on Alcohol Angus. However there is a need to review the work being undertaken in relation to drugs problems. The publication of the national drugs strategy for Scotland will set the direction of this work. However the DAAT

together with the public health directorate of NHS Tayside will look at designing and undertaking some needs assessment activity to understand better the circumstances of problem drug users in Angus. Across Tayside work is being undertaken to examine whether information gathering and data analysis on drug related deaths could be done jointly across the three DAAT's. This may elicit more comprehensive information that would inform the DAAT's' work in addressing this important issue

Tayside Community Justice Authority

In its Area Plan for 2008/2011 Tayside Community Justice Authority (CJA) identified substance misuse as its "area for improvement" during the life of the plan. This is in recognition of the relationship between substance misuse and offending. It also recognises the significant work being undertaken across the partners in relation to substance misuse issues that impact on criminal justice. The CJA will promote a seminar on substance misuse in 2008/09 and continue to promote the development of joint working.

Mental Health Issues

The Accountable Group for Mental Health has recognised the specific concerns related to people with both mental health and substance misuse problems. These were identified in "Mind the Gaps" and "A Fuller Life". "Closing the Gaps" (Scottish Government 2007) sets out ways of delivering better outcomes for all those affected by mental health and substance misuse problems. Work will be undertaken in 2008 to identify ways of translating the recommendations of this report locally to improve outcomes for this population

Older People

Work will be undertaken in collaboration with the Accountable Group for Older People to identify and progress action in relation to alcohol problems in older people. Work has begun on identifying need and the capacity of services and actions will be identified jointly the two accountable groups to better meet the needs of older people

Domestic Abuse Substance Misuse

The Tayside DAAT's have been represented on the management group of the Tayside Domestic Abuse and Substance Misuse project. The Scottish Government as part of the Multiple and Complex Needs initiative funded this project. This initiative set out to examine how service users with multiple or complex needs move into, through and out of services. The [project is funded until the end of 2008. After this time the DAAT's and the domestic abuse partnerships across Tayside will have some responsibility for the continuation of the work undertaken. A seminar is planned for summer 2008 which will put the work of the project in a national and local context and publish the findings of the research element of the project. It will also outline the work streams undertaken by the project and launch good practice guidance for dealing with issues of domestic abuse and substance misuse.

Children Affected by Parental Substance Misuse

Angus DAAT has consistently prioritised the issue of children affected by parental substance misuse. As an element of this work, a pioneering study was undertaken between May – July 2006 in Angus to quantify the number of children and young people affected by parental substance misuse who were known to a range of services.

The study targeted specialist drug and alcohol services within the statutory and voluntary sectors and included social work children's services, child protection, criminal justice services, the police custody suite and primary and secondary education. In total 698 children were identified, which constitutes 3.24% of the total population of those aged under 16 years in Angus. Whilst it is acknowledged that this figure still underestimates the number of children and young people who live in households where there is significant substance misuse, this is more definitive data than was previously available.

The findings of this study resulted in the need to establish a joint sub-group of Angus Drug and Alcohol Action Team and Angus Child Protection Committee in order to explore more innovative methods of actively identifying and supporting these children.

Following further opportunities to consult with key staff it was proposed that a 'demonstration' project should be developed within an area of Angus to promote a more robust and innovative response to meeting the needs of these children. This project which will run throughout 2008/09 is the first phase of a process of developing improved inter-agency working and encouraging a more creative approach to sustaining families within their communities.

Funding Arrangements

Funding for drugs and alcohol activity comes through a large variety of sources. It is not always coherent and often comes with conditions. The DAAT often has to approve or endorse funding applications to charitable or external funders as being consistent with local plans and priorities.

The greatest part of funding for treatment is delivered from the Scottish Government via NHS Tayside. However the decisions relating to this funding requires to be made by the DAAT. Most recently the DAAT has been required to enter into Performance Contracts with the Scottish Government and NHS Tayside for the release of funding. This has meant a developing role for the DAAT in monitoring the performance of activities funded under this contract and ultimately ensuring compliance with the conditions attached. It is likely this role will be further extended as a result of the group currently reviewing delivery arrangements and outcome reporting for the DAAT's.

The voluntary and not for profit sector provides services for people with or affected by drug and alcohol problems. This is funded through a complex mix of grant aid, commissioned or purchased services or funding arrangements through funding bodies. The funding is delivered by a variety of contractual arrangements and may include specific conditions such as 'matched funding' or private sector support.

The DAAT approved a commissioning framework for ensuring transparency of decision-making and that decisions are made in relation to identified need and approved priorities.

The development of a single outcomes agreement (SOA) between Angus Council and the Scottish Government has meant that a large number of previously ring-fenced funds are now included in the governments financial settlement with the council. This means that in due course the decision on the use of such funds lies with the council in relation to how it will meet its targets under the SOA.

Once they have been decided the new delivery arrangements will have an effect on the way in which DAAT's account for the spend on alcohol and drugs. It is clear that there will be increased emphasis on demonstrating the impacts and outcomes of such spending.

In November 2007 the Scottish Government announced significant increase in spending to address alcohol problems. This means that the allocation for Tayside for 2008/09 will be £1,816,885. The DAAT will work with its partners to prioritise the use of these resources that will be aimed at delivering the objectives of the revised alcohol strategy to be published during 2008.

Monitoring Arrangements

Monitoring of the Strategy will be through the local improvement targets as reported to the DAAT and the Scottish Government. The delivery of specific elements will be monitored through Service Level Agreements, performance contracts and the compliance with contractual documents as appropriate. Specialist services demonstrate performance improvement and ensure ongoing self-assessment against local and national standards. This will be reported to the DAAT through the Drug and Alcohol Accountable Group.

The Focus on Alcohol Angus Project is monitored by the FoAA Project Board utilising highlight and exception reports within a project management framework.

Progress Reporting

The progress of the strategy will be reported through the Accountable Group to the DAAT on a twice-yearly basis. For 2008 the DAAT is required to report to the Scottish Government through this strategy and the associated local improvement targets. An update on the planned activity in the Drug and Alcohol Action Plan for 2007/08 will also be submitted.

Appendix 1

Local Improvement Targets

Strategic Objective	Strategic Actions	Outcomes	Responsible Officer	Reporting Period
Reduce the harm to children, young people and families affected by alcohol and drug problems	Review content of Working with Children and Families Affected by Parental Substance Misuse Protocol and its application in practice	Improved Inter Agency working and better outcomes for children and young people	Drug and Alcohol Accountable Group Iain Turnbull	
	Development of Demonstration Project	Improved identification of children and young people Improved family relations Increased level of engagement with support programmes Increased level of family support Improved parenting Shared responsibility to support and protect children	Joint DAAT/CPC Group Hazel Robertson	
	Review extent of kinship care	Better understanding of the range and circumstances of kinship carers	Steve Urquhart Robin Duncan Social Work and Health	
To reduce the harm related to substance misuse through addressing individual behaviours and social, environmental and physical environments	Disseminate information and participate in communication activities including involvement of public health/health improvement	Increased awareness of drugs and alcohol across age groups Improvement in health outcomes Better, healthier and safer choices (ref to HI Performance framework)	Tayside Alcohol Awareness Coordinating Group Carol-Anne Carnegie	
	Promote multi-agency events to involve members of the licensed trade to raise awareness and standards	Greater involvement of licensees in alcohol related issues	Inspector McNaughton Tayside Police	Annually to Angus DAAT
	Continued delivery of Substance Misuse Education Programmes within the context of finalised Curriculum for Excellence Outcomes	Increased knowledge and understanding of alcohol and drugs by children and young people.	Ken Edwards Quality Improvement Officer (EDS)	Annually to Angus DAAT, via Education Strategic Support Officer (D Webster)

Strategic Objective	Strategic Actions	Outcomes	Responsible Officer	Reporting Period
Promote accessible, appropriate and quality services to meet the needs of all those affected by drug and alcohol problems	Develop an outcomes framework for services supporting people with alcohol and drug problems.	Outcomes model adopted Services improve and become more responsive	Iain Turnbull Angus DAAT	6 Monthly to Angus DAAT
	Improve service user and community engagement to address drug and alcohol problems	Services more responsive to individual and community need evidenced through feedback and comments. Evidence from reviews of NQS for drug and alcohol services	Drug and Alcohol Accountable Group Iain Turnbull	Annually
	Implement National Quality Standards guidance on Service User involvement	Improved service users contribution to planning and development of services by active participation in reference forum and other routes	Drug and Alcohol Accountable Group Iain Turnbull	
	Develop a range of care and treatment interventions to meet the needs of the population.	Improved range of care and treatment services. Improved access to services including groups with specific needs Improved information in relation to National Waiting Times targets Improved reporting on throughput and impact of care and treatment services	Drug and Alcohol Accountable Group Alistair Pender and Pam Gowans	
	Achieve an agreed number of screenings using the setting appropriate screening tool and appropriate alcohol brief interventions, in line with SIGN 74 guidelines	Improved early identification of problematic alcohol misuse. Improved referral to services where appropriate and reduction in problematic alcohol misuse.	Dr Andrew Russell NHS TAYSIDE Local Enhanced Service with General Practice.	Annually to Angus DAAT
To reduce alcohol and drug related crime and disorder	In line with intelligence led policing model undertake a range of initiatives in partnership to reduce availability of drugs and alcohol	Reduced availability of alcohol to young people Reduction in availability of Class A drugs	Inspector McNaughton Tayside Police	Annually to Angus DAAT

Strategic Objective	Strategic Actions	Outcomes	Responsible Officer	Reporting Period
Continuously improve the functioning of the partnership leading to better strategic decision making and better use of resources	Review the Drug and Alcohol Strategy	Strategy updated in line with local and national agenda	Drug and Alcohol Accountable Group Iain Turnbull	
	Clarify functions of the DAAT/Accountable Group/Forums.	Improved functioning of strategic structures	Drug and Alcohol Accountable Group Iain Turnbull	
	Consolidate drug and alcohol elements of significant plans and strategies	Coherent strategic overview of drug and alcohol issues Integrated strategic decision making	Drug and Alcohol Accountable Group Iain Turnbull	
	Identification of current resources based on needs assessment and commissioning intentions	Services developed in line with identified need Local services are better for local people	Iain Turnbull Angus DAAT	Annually to Angus DAAT
Address alcohol problems working with community planning partners in a co-ordinated Focus on Alcohol	Deliver Focus on Alcohol Angus Project Initiation Document Stage 2 Plans (PIDS2)	58 projects delivered to tackle alcohol misuse on individuals, family and community life	Eileen McArthur FoAA Project Board	