Substance Misuse Strategy Action Plan

*NB: Actions for NHS EL&C to be agreed and follow*
## Prevention and Behaviour Change

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<th>Measure / Key Performance Indicator</th>
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| **PBC1** Develop a multi-agency communications plan for adults and young people with a focus on:  
- harm reduction and safe drinking levels, targeting communities with high levels of alcohol related harm  
- drug related harm and treatment services available  
- supporting parents to address drug and alcohol misuse with their children. | March 2012 |  
- Communications plan developed and agreed by partners  
- Heightened awareness of services and referral pathways along continuum of need |
| **PBC2** Support young people to receive substance misuse education and drive delivery of whole school approach with regards to drugs / alcohol in all schools. | Ongoing |  
- Tailored support provided to schools across the borough  
- Uptake of teachers' training in delivery of substance misuse lessons  
- Information regarding treatment and access to services along continuum of need available to pupils, teachers and parents  
- School adherence to NICE guidance on school based interventions on drugs / alcohol  
- Increased referrals into young people treatment services |
| **PBC3** Understand local trends in alcohol/ drug consumption to inform target work | December 2012 |  
- Healthy Lifestyles Survey repeated to include population level patterns of alcohol consumption within 5 years time  
- Annual analysis of GP data |
| **PBC4** Substance misuse has profile in other relevant strategies including:  
- tobacco control  
- cardiovascular disease  
- sexual health  
- mental health  
- teenage pregnancy | Ongoing |  
- Substance misuse integrated in cross-cutting strategies of relevance |
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| **T1** | Review provision and configuration of drug / alcohol treatment for adults  
- redesign treatment provision  
- facilitate widespread consultation  
- conduct equalities impact assessment | Sep 2012  
- Development of new model of drug / alcohol service provision  
- Improved referral rates  
- Improved treatment outcomes |
| **T2** | Improve primary care responses to substance misuse  
- Evaluation of local enhanced service in primary care  
- Provision of ongoing training to primary care providers in SBI and community detoxification | March 2012  
- Increased no. of alcohol screens  
- Increased referrals into structured drug / alcohol treatment |
| **T3** | Improve the uptake of services by difficult to engage groups through effective interagency work  
- Outreach teams to operate across the borough to support individuals into structured treatment, particularly street drinkers  
- Hostel provision to be linked to treatment services to support individuals into structured treatment  
- Treatment agencies to be tasked with developing strategic approaches to attract treatment naïve drug users and re-engage those who have disengaged |  
- Increased numbers accessing treatment  
- Reduced re-offending rates for drug users  
- Improved outcomes from treatment |
| T4 | Embed the work of the alcohol nurse specialists in identification and delivery of brief interventions throughout the acute hospital Trust | Dec 2012 | • Alcohol champions in each hospital department  
• Hospital alcohol strategy with buy in from range of stakeholders  
• SBI protocol disseminated to each hospital department  
• All wards and departments have access to and implement guidance and policy on the appropriate and effective management of alcohol dependent patients and of management of withdrawal from alcohol among these |
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| T5 | Increase professional awareness of treatment services and pathways  
- map treatment pathways and distribute widely  
- deliver training to appropriate professionals | Aug - Dec 2012 (in preparation for and post treatment system redesign) | • Increased referral rates from a wide range of front line services |
| T6 | Ensure identification and brief advice is routinely undertaken on adult clients across a range of frontline services including:  
- hostels  
- social services  
- sexual health services  
- patients with long term conditions  
- patients in mental health services  
Plan and deliver a course of training sessions to frontline professionals and implement reporting systems to capture data | Ongoing | • Increased number of screens and brief interventions  
• Improved uptake of treatment services |
| T7 | Implement new model of service provision for young people’s intervention  
- Model and implementation plan for young people’s targeted intervention in place  
- Youth services produce alcohol/drug policy addressing training for staff and addressing alcohol/drug related incidents  
- 2 x annual training provided by Lifeline in identification, alcohol brief interventions and referrals onwards to youth service workers | Mar 2012 | • Improved awareness of alcohol problems amongst youth services  
• Improved referrals into young peoples treatment services |
| T8 | Improve offenders’ (including young offenders’) access to treatment | Mar 2013 | • Demonstrable greater enforcement of Alcohol Treatment Requirement Orders  
• YOT and Lifeline deliver targeted drug / alcohol interventions for YOT clients where alcohol is feature of offending behavior |
| T9 | Improve response to parental substance misuse | Mar 2012 | • Increased use of CAF by treatment services  
• Increased referrals between social services and treatment services  
• Earlier intervention in parental substance misuse |
|    | - Launch treatment service and social services handbooks for parental substance misuse  
- Monitor referrals between services  
- Implement CAF across treatment services  
- Embed family interventions in the treatment system  
- Deliver an annual drug awareness training programme for social services staff |
| T10 | Improve follow up response for young people presenting to A&E with substance misuse presentations | Jun 2012 | • Increased referrals into structured treatment |
|    | - Healthy Lives to investigate possible links between A&E and TIPs in schools to ensure intervention and follow up conducted with young people  
- CSS and Lifeline to provide A&E clinical staff with information regarding referral pathways/protocols and thresholds to their services |
| T11 | Appoint a therapeutic recovery champion to support and drive therapeutic recovery across the borough | Mar 2012 | • Respected and active champion in place |
| T12 | Support drug / alcohol users to access wrap around services  
- Ensure pathways to education / employment are included in the redesigned treatment system  
- Maximise links with Jobcentre Plus, Ideas Store Learning and other providers to develop support programmes for drug / alcohol users  
- Inform the hostels strategy and the procurement of hostel services to ensure the needs of drug / alcohol users are reflected with regards to accommodation needs. | Ongoing | • Advice and support given to all service users regarding access to education, employment, training, housing, finance and health including BBV, sexual health and primary care – where appropriate  
• Improved uptake of education / employment / volunteering opportunities by drug / alcohol users in treatment  
• Improved accommodation outcomes for drug / alcohol users in treatment |
|---|---|---|---|
| T13 | Embed a recovery focus into all treatment services to enable recovering drug / alcohol users to re-integrate into their communities  
- Implement the outcome star model across all treatment services  
- Develop structured pathways from treatment services to services that offer support around accommodation, financial health, education and employment | March 2012 | • Improved percentage of planned (drug free) exits from treatment.  
• Improved, measurable outcomes from treatment services |
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| ER1 Combat sales to underage drinkers including proxy sales  
  - Underage operations are supported by information/education about licensee responsibilities followed by publicity about prosecutions  
  - Provide advice and training for traders on legal obligations | Ongoing | • Minimum of 2 targeted under-age sales operations per quarter by the police and trading standards teams |
| ER2 Combat sales of counterfeit products at a retail level | March 2013 | • Information provided to traders regarding counterfeit alcohol products  
  • Conduct 4 partnership operations to uncover illicit alcohol with customs and excise, police and trading standards teams |
| ER3 Produce regular hotspot analysis of key data (crime, drugs, alcohol, youth asb etc) to deliver targeted operations |  | • |
| ER4 Work closely with police to prevent/address crime and disorder in and around licensed premises | Ongoing | • Fortnightly joint tasking meetings with police  
  • Proactive use of information/intelligence including from victims |
| ER5 Effective communication of successful operations via promotion of positive stories in East End Life and via other channels | Ongoing | • Improved perceptions of drug / alcohol related anti-social behaviour and crime amongst residents |
| ER6 Improve coordination of young people’s and adults outreach with anti social behavior hotspots | Ongoing | • Reduce antisocial behaviour by using joint tasking approach across full range of regulatory and enforcement powers  
  • 104 outreach referrals into structured treatment annually |
| ER7 Disrupt the supply of drugs through effective enforcement | Ongoing | • Minimum of 365 arrests for drug dealing offences |
| ER8 Ensure drug misusing offenders receive a holistic support package aimed at stopping offending and drug dependence. | March 2013 | • Implementation of a results-focussed Integrated Offender Management programme  
  • Reduced re-offending rates amongst drug users |
| ER9 Support community groups to provide an impetus for sustained, co-ordinated action aimed at reducing drug related crime  
  - Continue to meet with CADAA and provide support for their annual event | Ongoing | • Improved perceptions of drug / alcohol related anti-social behaviour and crime amongst residents  
  • Proactive champion in place |
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<th>ER10</th>
<th>Utilise powers available within the remit of the borough wide alcohol control zone to control alcohol related anti-social behaviour and crime</th>
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<td>- Target problem areas via joint tasking approach</td>
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|      | Improved perceptions of drug / alcohol related anti-social behaviour and crime amongst residents |

- Appoint a communities recovery champion to support and drive the recovery agenda across the borough

- Ongoing