



NORTH LANARKHSIRE DELIVERY PLAN

2015 - 2018

Working together to improve the quality of life for everyone affected by alcohol and drugs living in Lanarkshire

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1 SUMMARY

ADPs are responsible for developing local strategies to deliver improved outcomes on the basis of local need, and for making investment decisions regarding both earmarked funding from the Scottish Government (via NHS Boards) and from partner's core funding (e.g. North Lanarkshire Council, NHS Lanarkshire, Police Scotland). Our Strategy (2015 – 2018) set out Lanarkshire ADP's approach to improving the lives of everyone affected by alcohol and drug related problems. The Scottish Government further identified core outcomes which all Alcohol & Drug Partnerships are expected to deliver against. These seven core outcomes thus form the basis of our Delivery Plan:

1	People are healthier and experience fewer risks as a result of alcohol use
2	Fewer adults and children are drinking or using drugs at levels or patterns that are damaging to themselves or others:
3	Individuals are improving their health, well-being and life-chances by recovering from problematic drug and alcohol use:
4	Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life-chances:
5	Communities and individuals are safe from alcohol and drug related offending and anti-social behaviour:
6	People live in positive, health-promoting local environments where alcohol and drugs are less readily available
7	Alcohol and drugs services are high quality, continually improving, efficient, evidence-based and responsive, ensuring people move through treatment into sustained recovery

Our Delivery Plan further defines what we would like to achieve over the next three years and the actions that are required to bring this about. These key actions include:

1. Promoting the development of a recovery orientated system of care within our communities by:

- Ensuring that care pathways for adults in distress are improved and that there are appropriate systems in place within primary care, our acute hospitals, ambulance and police services which offer compassionate support
- Aligning peer support and mutual aid opportunities to existing support structures which promote mental well-being within each of our local towns and villages
- Making sure that family members who experience a problem are offered support in their own right.
- Embedding the implementation of alcohol brief interventions within our primary care, mental health, midwifery and acute services and expanding this provision within our most deprived communities, criminal justice and police custody suites.
- Working with our community safety partners to reduce the impact of health inequalities and crime.

2. Safeguarding and promoting the interests of children and young people affected by substance misuse by:

- Retaining a focus on improving the lives of children and young people affected by substance misuse through involvement in the Early Years Collaborative. This will include work to support parents/prospective parents with drug or alcohol problems to understand the importance of good attachment with their children.
- Continuing to improve outcomes for pregnant women/new mothers with substance misuse issues and their families.
- Maintaining support for grass roots initiatives that use a range of interventions to engage young people and tackle inequalities.
- Fully implementing the delivery of alcohol brief interventions within youth settings
- Continuing to deliver the Strengthening Families Programme within the North Lanarkshire Council area and expand and roll the programme into South Lanarkshire
- Increasing support for those young people who have complex issues including substance use and mental health problems related to trauma and attachment issues as well as increasing multi-agency training, consultation and care planning around this same group of young people
- Maintaining support for young people who, on release from custody are able to re-integrate fully into community life.
- Exploring and developing systemic and family therapeutic work.

3. Providing support to individuals (including parents, prisoners and older people), with alcohol and/or drug related problems by:

- Promoting engagement in treatment and care services by enhancing motivation, building psychological resources and skills which foster community links
- Commissioning evidence based psychological therapies which are trauma informed
- Having a renewed emphasis on Health and well-being outcomes within our health and social care provision
- Improving the quality of service provision and the use of a validated recovery outcome tools, including the Outcome Star, to measure progress over time.
- Expanding the use of the Promoting Well-being Assessment, Strengthening Families and Solihull approach within our alcohol and drug services.
- Ensuring offenders have access to a full range of supports which will increase their recovery capital and enhance their emotional well-being
- Safeguarding the most vulnerable members of our communities including those who continue to experience problems in later life.

2 GOVERNANCE & FINANCIAL FRAMEWORK

As outlined in our Strategy (2015 – 2018) the Lanarkshire ADP has worked with North Lanarkshire shadow Health & Social Care Integrated Partnership during 2014 – 2015 to ensure our Strategy and Delivery Plan is embedded within local arrangements for health and social care. This means that all decisions that we have made to fund our strategic priorities have been endorsed by our Community Planning partners, including those partnerships responsible for adult alcohol and drug services, children’s services, community justice and community safety. We have also developed a joint performance framework for our statutory and third sector providers which support the seven national ADP outcomes.

The ADP funding envelope available within North Lanarkshire has increased significantly since 2008 and has contributed significantly towards the current locality based models of the North Lanarkshire Integrated Addiction Service, the Community Adolescent Mental Health Services (CAMS), the delivery of alcohol brief interventions within our Community Nursing, Midwifery and acute services. Moreover the investment within the Community and Youth Bridges projects has helped to improve the outcomes for prisoners within HMP Addiewell and Polmont respectively. The totality of this spend within the North Lanarkshire area for 2015/16 is summarised in Table 1. Please note that this funding envelope does not include core funding (£1,331,097) from North Lanarkshire Council or NHS Lanarkshire (£2,506,378). As we move into Health and Social Care partnership arrangements an integrated resource framework which includes North Lanarkshire’s and NHS Lanarkshire’s overall contribution to meeting the needs of this population will require further exploration.

Table 1: ADP Funding within North Lanarkshire

Description of Service	ADP Budget
Healthy Working Lives -provides advice and guidance to small to medium social enterprises re alcohol and drug policy	9,537
Community Nursing staff provide screening and alcohol brief interventions (ABIs)	211,403
Specialist Midwives work with four link nurses across North Lanarkshire to provide specialist support and advice to pregnant women	43,745
EVA Provides counselling, support and advocacy for women who have been victims of domestic violence and abuse	35,129
Substance Misuse Liaison Nurse Service within acute hospital sites	133,104
Provides Tier 2 Community Adolescent Mental Health Service within each secondary school in North Lanarkshire.	270,372
Provides Sexual Health care and guidance, including long-acting contraceptives to young people who are looked after and accommodate or who refer the NHSL sexual health services presenting with alcohol and drug related problems	44,585
Youth Bridges	64,360
North Lanarkshire Integrated Addiction Services	1,208,527
Protective Medical Clinic	84,877
Community Prescribing Service	195,840
Addiction Psychology Service	179,987
Lanarkshire Community Bridges Project: Provides through care for prisoners leaving Addiewell	39,000
Enhances existing service to prisoners with addiction problems within HMP Shotts	23,772
Police Custody Suites – provision of healthcare within police custody suites for prisoners with alcohol/drug related problems	146,370
Peer Support & Mentoring Service (Phoenix Futures)	57,630
Provides a service to 15 – 18 years old who require intensive support (Barnardo's)	127,500
Provide counselling and support to individuals and their families affected by alcohol and drug problems (Meridian)	382,500
Provide support to ADP members to take forward the ADP Strategy & Delivery Plan	141,903
Training for a range of staff which is compatible with the ADP Strategy & Delivery Plan	5,100
Commissioning Fund	132,826
Total (£)	3,538,067

Decisions on what to fund continue to be prioritised by our Community Planning partners, with the final decision resting with the ADP Implementation & Finance Group on behalf of the ADP Board. This funding (£3,538,067) is conditional on demonstrating progress towards both national and locally relevant drug and alcohol outcomes and the following ministerial and local priorities:

3 PRIORITY AREAS FOR FUNDING

1. Workforce Development

The Scottish Government (2010) framework *Supporting the Development of Scotland's Alcohol and Drug Workforce* (9) set out the learning priorities for all levels of the alcohol and drug workforce, including the requirement to deliver evidence based psycho-social interventions. Drug and alcohol services working within a Recovery Orientated System of Care (ROSC) naturally draw on psychological knowledge and skills to work effectively. Alongside this the Healthcare Quality Strategy promotes that individuals in contact with drug and alcohol services are offered care that is safe, effective, evidence based and robustly governed to ensure that it results in positive outcomes. Therefore, using psychological practice in this area can be seen to best deliver these expectations. This can be evident in each phase of treatment, for example focusing on enabling engagement, developing motivational strategies or being able to understand the impact of trauma.

Overall, the evidence base for psychosocial interventions in the field of drugs and alcohol is well established and within Lanarkshire the practice of delivering psychologically informed work has been embedded with the use of the *Treatment Process Model* (TPM), and the accompanying *MyRAP*. In addition, the *Lanarkshire Psychosocial Interventions Manual* provides a standardised set of interventions that can assist all workers to adopt some basic psychological approaches in supporting the individuals they are working with. Also, to assist with the delivery and governance of these tools, all services can access training and support, offered by the Addiction Psychology Service. A stepped care model of service delivery can demonstrate the implementation of psychologically informed skills to enable recovery orientated ways of working across services (Figure 1).

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Figure 1: Stepped care model of psychologically informed work

Stepped care model of psychologically informed work



Source: The Psychological Matrix: A guide to Delivering Evidence Based Psychological Therapies in Scotland, 2013

The use of the TPM and psychosocial interventions can therefore be seen within the more holistic provision of psychological work. The stepped care model reinforces that there are common, key psychologically informed skills and approaches that all workers can base their practice on to assist the majority of individuals towards recovery. Then for individuals where further interventions may be required, by moving up a tier to

more specialist services, the skill set similarly becomes more specialised. These approaches draw on the psychological therapies identified in the Psychological Matrix which summarises the evidence to guide practice in this area. In adopting this approach, services in North Lanarkshire continue to strive towards optimal, recovery-orientated care by being psychologically informed.

As outlined in our strategy (2015 – 2018) our Workforce Development Groups focus on workforce planning issues for staff employed within our Recovery Orientated System of Care and report on progress quarterly to our ADP and relevant partnership groups including the North Lanarkshire Addictions Partnership Board. We recognise that we have a responsibility to ensure that staff are suitably trained and supported. A confident, competent and well-supported workforce is of paramount importance if we are to deliver good outcomes for our client group. We will therefore continue to invest £55,000 per annum to fund a range of workforce development opportunities (including a workforce development lead officer) as outlined within this Delivery Plan.

2. Consolidating a Whole Population Approach to Reducing Overall Alcohol Consumption

In 204/15 NHS Lanarkshire delivered 9,966 Alcohol Brief Interventions (ABIs) which has ensured we have exceeded our local delivery plan target of 6,167 by March 2015. The new target for 2015/16 is 7,381; however a greater challenge is to embed the routine screening and delivery of ABIs into routine clinical practice. To this end we will continue to invest £211,403 into our Community Nursing Service, while maintaining current levels of funding for our Substance Misuse Liaison Nurses (£133,104), Specialist Midwives (£43,745) and Sexual Health Nurses (£44,585). We will also work with Alcohol Focus Scotland and our local licensing forums and boards to raise awareness of issues associated with overprovision in on and off licenses within our towns and villages.

3. Responding to the recommendations outlined in the independent expert group on opioid replacement therapies (ORT)

Some of the key recommendations within the review included that consideration be given to how to better address the link between health inequalities and problem substance use. As outlined within our strategy this is a key priority area. As highlighted under "*Measuring Success*" we will roll out training and on-line recording of the outcome star which should be able to identify that everyone who is prescribed ORT are able to demonstrate their progress towards recovery during their quarterly reviews. The variations within general practice within the Northern Corridor and the rest of Lanarkshire will be reduced as the Lanarkshire Community Prescribing Service takes over responsibility for this in April 2015. As part of our workforce development we will also continue to ensure that third sector and statutory providers are offered appropriate training in recovery orientated systems of care. This will include staff working within Criminal Justice, Housing, Jobcentre Plus, Children and Family services and community groups.

4. Increasing the reach and coverage of the national naloxone programme and tackling drug related death (DRD)/risks in our local ADP

In 2013 there were 9% fewer drug-related deaths reported in Scotland than the previous year. Despite the commitment to support this agenda in Lanarkshire, we were one of 6 areas to report an increase in drug related deaths going from 53 in 2012 (50 DRD, 3 intentional self-poisoning) to 68 in 2013 (59 DRD, 9 intentional self-poisoning). The local interim figure for drug-related deaths for Lanarkshire for the year 2014 is 67, which is a decrease of 1 from the previous year, however this number may change once analysis and data collection has been finalised in September 2015. The ADP DRD Report 2013 indicated that 68% of the people who died of a drug related death were not engaging with services at the time of death.

To maximise the impact of the Naloxone programme in Scotland, the Scottish Government set a new overall target of 25% to be achieved by 31st March 2015; this is a cumulative target and includes those kits given out from 2011-2014. A recent report from ISD indicates that Lanarkshire is on course to reach the 25% target. At a local level, Lanarkshire ADP in collaboration with partner agencies set Local Improvement Targets in relation to overdose awareness training and the provision of new Naloxone supplies; these were set at 10% of the problem drug using population by locality. Overall, Lanarkshire have so far achieved and are expected to achieve the targets set by the Scottish Government, however there are still gaps in reaching "at risk" populations.

5. Implementing improvement methodology at local level, including implementation of the Quality Principles: Standard Expectations of Care and Support in Drug and Alcohol Services

Explicit within all Service Level Agreements and Performance Frameworks with our third sector and statutory providers is a requirement to demonstrate compliance against the eight national quality principles for substance misuse services.

1. You should be able to quickly access the right drug or alcohol service that keeps you safe and supports you throughout your recovery
2. You should be offered high-quality; evidence-informed treatment, care and support interventions which reduce harm and empower you in your recovery.
3. You should be supported by workers who have the right attitudes, values, training and supervision throughout your recovery journey
4. You should be involved in a full, strength-based assessment that ensures the choice of recovery model and therapy is based on your needs and aspirations.
5. You should have a recovery plan that is person-centred and addresses your broader health, care and social needs, and maintains a focus on your safety throughout your recovery journey.
6. You should be involved in regular reviews of your recovery plan to ensure it continues to meet your needs and aspirations.
7. You should have the opportunity to be involved in an on-going evaluation of the delivery of services at each stage of your recovery.
8. Services should be family inclusive as part of their practice

To this end we have developed a working group which has co-produced a self- assessment audit template. To date all third sector providers have completed this template and been audited externally by the ADP Support Staff. Locally we have input from all project managers and team leaders as well as expertise from the Early Years Collaborative and the Scottish Government Improvement Team. They have developed a course on improvements methodology specifically for managers to take forward the recommendations contained within their action plans as small *Tests for Change*.

6. Ensuring a proactive and planned approach to responding to the needs of prisoners affected by problem drug and alcohol use and their associated through care arrangements.

Alcohol and Drug Partnerships have been asked to consider how they can identify and support the needs of offenders engaged in problematic alcohol use within community settings and within prison. A continued investment of £39,000 in the prison through care team (Community Bridges) and of £64,360 for young offenders leaving Polmont (Youth Bridges) will ensure that we are able to achieve this. Moreover we will continue to invest £146,370 in our police custody suites, to address the needs of people who are deemed "*drunk and incapable*" and/or in police custody. We will also continue to invest an additional £23,772 into the health care needs of prisoners within HMP Shotts, and continue to fund our colleagues in Police Scotland to deliver on the Safer Lanarkshire initiatives (£100k). Over the next three years we will continue to support HMP Shotts with their Recovery Strategy and continue to work closely with HMP Addiewell in relation to through care arrangements.

7. Improving identification of, and preventative activities focused on, new psychoactive substances (NPS).

We have a well established Emerging Trends Group in Lanarkshire. The group provides up to date information to ADP services on the different trends taking place in Lanarkshire. A great deal of this information is harnessed through colleagues in Police Scotland, presentations at A+E departments and service user disclosure at Substance Misuse Services. A consultation event on NPS has helped us to prioritise actions for 2015 – 2018. These include greater collaboration between Trading Standards, Police Scotland and local clinicians to create a greater understanding on the impact of NPS on the user's behaviour, clinical presentation and methods of purchase. In addition we have prioritised opportunities for training on NPS for school teachers, clinicians, staff who work with young people and prisoners. We have also set up a working group between Trading Standards, Police Scotland and our Community Prescribing Service. This group will build upon our local evidence base on the prevalence, harms and emerging trends which will be used to inform enforcement decisions.

The following section of our Delivery Plan summarises the priority actions and interventions to improve the outcomes of individuals, families and communities affected by alcohol and/or drug problems in Lanarkshire. It has been informed by the *Alcohol and Drug Logic Models*, the *Quality Alcohol Treatment & Support Services (QATS)* report, the *Alcohol & Drugs Workforce Statement*, *Delivering Recovery – Opioid Replacement Therapies in Scotland* report and the *Quality Principles: Standard Expectations of Care and Support in Drug and Alcohol Services*.

HEALTH: People are healthier and experience fewer risks as a result of alcohol use: a range of improvements to physical and mental health, as well wider well-being, should be experienced by individuals and communities where harmful alcohol use is being reduced, including fewer acute and long-term risks to physical and mental health, and a reduced risk of or alcohol-related mortality.

National Outcome: People are healthier and experience fewer risks as a result of alcohol and drug use										
Local Outcome	Relevant Indicators	Data / Geography					Local Targets / Timescales	Key Actions	Lead	ADP Budget
Fewer individuals in Lanarkshire will suffer alcohol related injuries, physical and psychological morbidity and mortality.	General Acute Inpatient Discharges with an Alcohol-Related Diagnosis (EASR rate per 100,000 population) Source: ISD Reference: IR2015-00328	09/10	10/11	11/12	12/13	13/14	Reduce the rate of alcohol related hospital discharges to 700 by 2018	We will extend the Service Level Agreement with our three Acute Hospitals to ensure that all patients are provided with:- ❖ advice and support to reduce problems related to alcohol and drug misuse, including health, social and psychological problems. ❖ access to practical supportive measures for harm reduction and for accessing health and social care. ❖ advise on safer sex and reducing the risks of sexually transmitted infections. ❖ information about other alcohol and drug misuse treatment services or referred direct for further comprehensive assessment where appropriate. ❖ interventions and health promotion advice (e.g. BBV screening and vaccination). In addition our substance misuse liaison nurses will also: ❖ ensure that training is provided on screening and the delivery of alcohol brief interventions to medical and nursing staff throughout the hospital ❖ that the needs of adults in distress are understood and appropriate pathways of care are developed.	NHSL Acute Services	£133,104
		696	684	768	774	784				
	North Lanarkshire Council									
	General acute inpatient discharges with a diagnosis of Alcoholic Liver Disease Source: ISD Reference: IR2015-00328	09/10	10/11	11/12	12/13	13/14	Reduce mortality and morbidity from alcohol related liver disease by 10% by 2018			
		138	134	132	145	153				
	North Lanarkshire Council									
	General Acute inpatient & day case discharges (EASR) with a diagnosis of drug misuse in any position; by year. EASR per 100,000 Source: ISD Reference: IR2015-00328	09/10	10/11	11/12	12/13	13/14	Reduce general acute inpatient and day discharges with a diagnosis of drug misuse by 10% by 2018			
		46	46	61	68	85				
	North Lanarkshire Council									

National Outcome: People are healthier and experience fewer risks as a result of alcohol and drug use

Local Outcome	Relevant Indicators	Data / Geography					Local Targets / Timescales	Key Actions	Lead	ADP Budget																														
Fewer individuals in Lanarkshire will suffer alcohol related injuries, physical and psychological morbidity and mortality.	Number of screenings and brief interventions delivered in the community	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">2014/15</th> <th style="width: 20%;">Screenings</th> <th style="width: 20%;">ABI</th> <th colspan="3"></th> </tr> </thead> <tbody> <tr> <td>Primary care</td> <td style="text-align: center;">20286</td> <td style="text-align: center;">5738</td> <td colspan="3"></td> </tr> <tr> <td>A&E</td> <td style="text-align: center;">N/A</td> <td style="text-align: center;">2545</td> <td colspan="3"></td> </tr> <tr> <td>Antenatal</td> <td style="text-align: center;">3880</td> <td style="text-align: center;">6</td> <td colspan="3"></td> </tr> <tr> <td>Wider</td> <td style="text-align: center;">8158</td> <td style="text-align: center;">1677</td> <td colspan="3"></td> </tr> </tbody> </table> <p style="text-align: center;">NHS Lanarkshire</p>					2014/15	Screenings	ABI				Primary care	20286	5738				A&E	N/A	2545				Antenatal	3880	6				Wider	8158	1677				Deliver 2,252 ABIs each year within community nursing	<p>We will embed the routine screening and delivery of alcohol brief interventions by:</p> <ul style="list-style-type: none"> ❖ continuing our Service Level Agreement for our community nursing staff to add capacity within this service ❖ working in partnership with Keep Well to ensure there are effective mechanisms in place which will facilitate access to Tier 2 alcohol services ❖ delivering training to our community nurses, allied health professionals and staff in other settings ❖ developing additional resources to support delivery (e.g. unit calculators, alcohol "scratch cards") ❖ continuing to offer training on ABI delivery and on-going support to staff working within our community, including ensuring that access to learn-pro is linked to e-learning materials developed by Health Scotland 	HEAT 4 Steering Group	£211,403
	2014/15	Screenings	ABI																																					
Primary care	20286	5738																																						
A&E	N/A	2545																																						
Antenatal	3880	6																																						
Wider	8158	1677																																						
Deaths from alcohol conditions. EASR per 100,000 population Source: ISD Reference: IR2015-00354	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">2009</th> <th style="width: 10%;">2010</th> <th style="width: 10%;">2011</th> <th style="width: 10%;">2012</th> <th style="width: 10%;">2013</th> <th colspan="2"></th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">36</td> <td style="text-align: center;">38</td> <td style="text-align: center;">34</td> <td style="text-align: center;">31</td> <td style="text-align: center;">30</td> <td colspan="2"></td> </tr> </tbody> </table> <p style="text-align: center;">North Lanarkshire Council</p>					2009	2010	2011	2012	2013			36	38	34	31	30			Reduce the total number of deaths from alcohol conditions to 25 per 100,000 by 2018																				
2009	2010	2011	2012	2013																																				
36	38	34	31	30																																				

National Outcome : People are healthier and experience fewer risks as a result of alcohol and drug use										
Local Outcome	Relevant Indicators	Data / Geography				Local Targets / Timescales	Key Actions	Lead	ADP Budget	
Fewer individuals in Lanarkshire will suffer drug related injuries, physical and psychological morbidity and mortality.	Proportion of IDUs reporting using shared needles/syringes in past month Source: ISD (SDMD Initial Assessment Report)	09/10 6%	10/11 5%	11/12 7%	12/13 5%	Lanarkshire Health Board	Reduce proportion of IDU sharing needles/ syringes in past month by 2% by 2018	We will continue to work with the BBV Prevention Network, and the BBV Managed Care Network for Hepatitis C in the following ways: Injecting Equipment Provision will continue to be monitored and public awareness and education campaigns aimed at decreasing the sharing of injecting equipment will continue. Support the development of BBV Testing within Drug and Alcohol Services in South Lanarkshire and monitor via Local Improvement Target reporting. Promote and roll out BBV Dry Blood Spot Testing within Drug and Alcohol Services Increase the number of pharmacy outlets in target areas and 'hotspots' and provide safer injecting equipment, needles, syringes, foil, water, spoons and filters Increase the services available from Pharmacies i.e. development of BBV testing Train participating pharmacies across South Lanarkshire on provision of safer injecting equipment, BBV Testing and other health issues related to injecting drug users.	BBV Prevention Network and the BBV MCN	£10,224
	% of known injecting drug users tested for Hepatitis B Source: ISD (SDMD Initial Assessment Report)	09/10 72%	10/11 76%	11/12 81%	12/13 79%		90% of drug users are offered Hepatitis B vaccinations by 2018			
	% of known injecting drug users tested for Hepatitis C Source: ISD (SDMD Initial Assessment Report)	09/10 73%	10/11 77%	11/12 82%	12/13 81%		90% of drug users are offered Hepatitis C testing by 2018			

National Outcome: People are healthier and experience fewer risks as a result of alcohol and drug use

Local Outcome	Relevant Indicators	Data / Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget						
Fewer individuals in Lanarkshire will suffer drug related injuries, physical and psychological morbidity and mortality.	% of prisoners tested for Hep c Source: 14 th Prisoner Survey HMP Shotts	<table border="1" style="border-collapse: collapse; margin: auto;"> <tr> <th style="padding: 2px;">2009</th> <th style="padding: 2px;">2011</th> <th style="padding: 2px;">2013</th> </tr> <tr> <td style="text-align: center; padding: 2px;">52</td> <td style="text-align: center; padding: 2px;">57</td> <td style="text-align: center; padding: 2px;">65</td> </tr> </table>	2009	2011	2013	52	57	65	70 drug users are offered Hepatitis C testing in Shotts Prison by 2018	BBV prevention, testing, treatment and care will continue to be developed via established links within HMP Shotts and HMP Addiewell Support the development of peer education programmes in relation to Hepatitis C/safer injecting in the prison setting The 'opt out' BBV Testing protocol will continue to be supported within HMP Shotts. Weekly in reach clinics will continue to be provided to support prisoners into and on Hepatitis C treatment Staff and prisoners training and education will continue to be co-ordinated via the BBV WFD Sub Group linking with Health Improvement staff within HMP Shotts to support promotion and communication. The BBV PCN will continue to support the implementation and future direction of the BBV element of the HMP Shotts Health Improvement Strategy Links will continue to be developed with HMP Addiewell to ensure patient pathways are effective in supporting Lanarkshire residents diagnosed and/or on treatment when liberated.	BBV Prevention Network and the BBV MCN	
	2009	2011	2013									
52	57	65										
Outcome Star scores	No baseline	100% of prisoners in HMP Shotts will have demonstrated some improvement in Outcome Star domains from assessment to transfer to another establishment	Roll out training of the outcome star and psychosocial interventions to staff working within HMP Shotts addiction services. Continue performance framework should ensure prisoners in HMP Shotts are able to access appropriate physical and psychosocial supports which aids their recovery, including access to 12 step groups	HMP Shotts	£23,772							

National Outcome: People are healthier and experience fewer risks as a result of alcohol and drug use

Local Outcome	Relevant Indicators	Data / Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget																		
<p>Fewer individuals in Lanarkshire will suffer drug related injuries, physical and psychological morbidity and mortality.</p>	<p>Drug related deaths. EASR per 100,000 population</p> <p>Source: ISD Reference: IR2015-00354</p> <p>% of estimated drug users provided with naloxone</p> <p>% of estimated drug users provided with overdose awareness training</p> <p>Source: BBV Network</p>	<table border="1" style="width: 100%; text-align: center;"> <tr> <td>2009</td> <td>2010</td> <td>2011</td> <td>2012</td> <td>2013</td> </tr> <tr> <td>9.86</td> <td>10.46</td> <td>7.62</td> <td>11.08</td> <td>11.12</td> </tr> </table> <p style="text-align: center;">North Lanarkshire Council</p> <table border="1" style="width: 50%; margin: 10px auto; text-align: center;"> <tr> <td>13/14</td> <td>14/15</td> </tr> <tr> <td>10%</td> <td>4%</td> </tr> </table> <p style="text-align: center;">North Lanarkshire</p> <table border="1" style="width: 50%; margin: 10px auto; text-align: center;"> <tr> <td>13/14</td> <td>14/15</td> </tr> <tr> <td>10%</td> <td>4%</td> </tr> </table> <p style="text-align: center;">North Lanarkshire</p>	2009	2010	2011	2012	2013	9.86	10.46	7.62	11.08	11.12	13/14	14/15	10%	4%	13/14	14/15	10%	4%	<p>Reverse the upward trend in drug related deaths & reduce the total number, by at least 1 per 100,000 of the population by March 2018.</p> <p>Provide 10% of estimated problem drug using population take home Naloxone</p> <p>Provide 10% of estimated problems drug population with overdose awareness training</p>	<ul style="list-style-type: none"> The Drug Related Death Group will implement the recommendations of the 2013 review of drug related deaths in Lanarkshire. Staff will provide overdose awareness training and encourage patients to participate in the roll out of the Naloxone programme in each locality of North Lanarkshire. Continue service level agreement, in partnership with NHS Lanarkshire, to provide health care within police custody suites, including provision of naloxone and alcohol brief interventions. We will work with the Improving Responses to Distress in Lanarkshire partnership to establish a 'no wrong door' approach by building capacity across settings through building confidence and knowledge in staff, providing a safe and person centred response and connecting people with the right support, should this be required. The group will also develop alternative settings to A&E for people in distress where A&E is not required and identify and develop supportive information and resources to support individuals and staff to improve their response to distress. 	<p>Drug Related Death Group</p>	<p>Within existing resources</p>
2009	2010	2011	2012	2013																				
9.86	10.46	7.62	11.08	11.12																				
13/14	14/15																							
10%	4%																							
13/14	14/15																							
10%	4%																							

2. PREVALENCE: Fewer adults and children are drinking or using drugs at levels or patterns that are damaging to themselves or others: a reduction in the prevalence of harmful levels of drug and alcohol use as a result of prevention, changing social attitudes, and recovery is a vital intermediate outcome in delivering improved long-term health, social and economic outcomes. Reducing the number of young people misusing alcohol and drugs will also reduce health risks, improve life-chances and may reduce the likelihood of individuals developing problematic use in the future.

National Outcome : Fewer adults and children are drinking or using drugs at levels or patterns that are damaging to themselves or others

Local Outcome	Relevant Indicators	Data / Geography			Local Targets / Timescales	Key Actions	Lead	ADP Budget	
There are fewer adults who are drinking or using drugs at levels or patterns that are damaging to themselves or others in Lanarkshire	The proportion of individuals drinking above daily and/or weekly recommended limits Source: SHS	Men 52%	Women 42%	Total 46%	Lanarkshire Health Board	Reduce the incidence of adults exceeding weekly recommended limits to 40% by 2018.	We will:	HEAT 4 Steering Group	Within existing resources
	The proportion of individuals drinking above twice daily ("binge" drinking) recommended limits Source: SHS	Men 33%	Women 19%	Total 25%					
	The proportion of individuals who are alcohol dependent (two or more problem drinking indicators as per CAGE) Source: SHS	Men 14%	Women 10%	Total 12%					
		Lanarkshire Health Board			Reduce the proportion of adults drinking above daily recommended limits to 20% by 2018.	<ul style="list-style-type: none"> embed the routine screening for alcohol related problems and the delivery of alcohol brief interventions, where appropriate within a range of health and social care settings, including criminal justice, mental health, older people and police custody suites work with our partners in the third sector to reach community groups and hard to reach population introduce "alcohol scratch cards" to encourage uptake and participation within the wider community 			
		Lanarkshire Health Board			Reduce the incidence of adults who are alcohol dependent to 8% by 2018.				

National Outcome : Fewer adults and children are drinking or using drugs at levels or patterns that are damaging to themselves or others

Local Outcome	Relevant Indicators	Data / Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget						
Fewer young people in Lanarkshire will drink at levels and patterns that are damaging to themselves or others	Proportion of 13 year olds drinking on a weekly basis Source: SALSUS	<table border="1"> <tr> <td>2006</td> <td>2010</td> <td>2013</td> </tr> <tr> <td>13%</td> <td>6%</td> <td>1%</td> </tr> </table> <p>North Lanarkshire Council</p>	2006	2010	2013	13%	6%	1%	Maintain the proportion of 13 year olds reporting drinking on a weekly basis at 1% by 2018.	<ul style="list-style-type: none"> Review provision of the youth counselling service in schools to ensure that it continues to meet the needs of vulnerable young people at risk of developing alcohol and drug problems. Promote A.D.A.M. website, which is for children and young people aged 11-16 years who may be affected or are concerned by another person's drinking in each of our secondary schools in North Lanarkshire. Implement, monitor and review programme of Alcohol Brief Interventions across a range of youth settings 	Community & Adolescent Mental health Services (CAMS)	£270,372
	2006	2010	2013									
	13%	6%	1%									
Proportion of 15 year olds drinking on a weekly basis Source: SALSUS	<table border="1"> <tr> <td>2006</td> <td>2010</td> <td>2013</td> </tr> <tr> <td>34%</td> <td>20%</td> <td>13%</td> </tr> </table> <p>North Lanarkshire Council</p>	2006	2010	2013	34%	20%	13%	Reduce the proportion of 15 year olds reporting drinking on a weekly basis to 10% by 2018.	Children, Young People and Families Affected by Substance Misuse sub group	Within existing resources		
2006	2010	2013										
34%	20%	13%										
Mean weekly consumption in last week of 15 year olds Source : SALSUS	<table border="1"> <tr> <td>2010</td> <td>2013</td> </tr> <tr> <td>22</td> <td>20</td> </tr> </table> <p>North Lanarkshire Council</p>	2010	2013	22	20	Reduce the mean weekly consumption of 15 year olds in the last week to 15% by 2018.						
2010	2013											
22	20											

National Outcome : Fewer adults and children are drinking or using drugs at levels or patterns that are damaging to themselves or others

Local Outcome	Relevant Indicators	Data / Geography			Local Targets / Timescales	Key Actions	Lead	ADP Budget
Fewer young people in Lanarkshire will use drugs at levels and patterns that are damaging to themselves or others	% of 13 year olds reported having taken drugs in the last month Source : SALSUS	2006 5%	2009/10 5%	2012/13 2%	Reduce the proportion of 13 year olds reporting having taken drugs in the last month to 1% by 2018.	<p>We will</p> <ul style="list-style-type: none"> work with local partners to improve drug and alcohol education and information for young people, their parents/carers and relevant staff Support a range of local programmes co-produced with local communities to target our most vulnerable young people and reduce inequalities/improve life chances Roll out training on New Psychoactive Substance to teachers, clinicians, staff who work with young people, Trading Standards and prisoners. Ensure information flow from the Emerging Trends Group on NPS helps to inform the evidence base on prevalence and harm reduction measures 	Children, Young People and Families Affected by Substance Misuse sub group	To be confirmed
	% of 15 year olds reported having taken drugs in the last month Source : SALSUS	2006 18%	2009/10 13%	2012/13 10%	Reduce the proportion of 15 year olds reporting having taken drugs in the last month to 5% by 2018.			
	% of 13 year olds being offered drugs Source : SALSUS	2006 27%	2009/10 10%	2012/13 15%	Reduce the % of 13 year olds being offered drugs to 10% by 2018.			
	% of 15 year olds being offered drugs Source : SALSUS	2006 66%	2009/10 43%	2012/13 42%	Reduce the % of 15 year olds being offered drugs to 40% by 2018.			
	Estimated prevalence of problem drug use amongst 15-64 year olds in Scotland, by age group. Source: ISD	2006 1.5	2009/10 1.5	2012/13 1.6	Reduce the incidence of adults using drugs to 1.4% by 2018.			

- 3. RECOVERY: Individuals are improving their health, well-being and life-chances by recovering from problematic drug and alcohol use:** a range of health, psychological, social and economic improvements in well-being should be experienced by individuals who are recovering from problematic drug and alcohol use, including reduced consumption, fewer co-occurring health issues, improved family relationships and parenting skills, stable housing; participation in education and employment, and involvement in social and community activities.

National Outcome : Individuals are improving their health, well-being and life-chances by recovering from problematic drug and alcohol use						
Local Outcome	Relevant Indicators	Data / Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget
People will recover from their alcohol and drug problems and live longer, healthier lives, making a positive contribution to society and the economy.	Number of services using outcome measures to evaluate impact of care	6/9 services currently using outcomes measures (Community Bridges, Youth Bridges Phoenix Futures, Meridian, Barnardo's, Youth Counselling Service	All alcohol and drug services will have a recovery focused outcome measure in place to record the recovery outcomes for all of their services users by March 2018.	We will ensure that: <ul style="list-style-type: none"> all of our statutory service providers have performance frameworks in place which emphasise the role of measuring the outcomes for all of their clients all third sector services that we commission have service level agreements in place which ensures that outcomes measures are recorded for all clients attending their service 	NLIAS	1,208,527
				We will further invest in three trainers across North Lanarkshire to ensure that staff have an understanding of outcome monitoring tools. We will also train all staff working within our third and statutory sector on the outcome star and purchase licenses for all staff so that they can enter outcome data on-line	Outcome Star Trainers	£10k
					ADP Support Team	£10,000

National Outcome: Individuals are improving their health, well-being and life-chances by recovering from problematic drug and alcohol use

Local Outcome	Relevant Indicators	Data / Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget			
People will recover from their alcohol and drug problems and live longer, healthier lives, making a positive contribution to society and the economy.	Outcome Star Scores	At assessment & Review	100% of service users will have demonstrated some improvement in Outcome Star domains from assessment to review and/or discharge	<p>We will ensure that local improvement targets reflect the importance of capturing outcomes within each of our services. In addition we will:</p> <ul style="list-style-type: none"> ❖ work with NHS Lanarkshire, Jobcentre Plus and North Lanarkshire Councils to co-ordinate the management of alcohol and drug misusers through treatment and into work ❖ establish better links with training providers and work with other organisations providing training/vocational programmes for people with substance misuse problems ❖ ensure that Service Level Agreements with our statutory and third sector organisations incorporate interventions which promote access to additional support to support and consolidate the benefits of treatment, e.g. access to benefit advice and literacy programmes. • continue to support young people who are in custody due to offending behaviour often linked to substance use, to reintegrate fully into their communities upon release from prison. 	<p>Service Managers</p> <p>Jobcentre Plus</p> <p>Health & social Care Partnership board</p> <p>NLC Community Alternatives</p>	Within existing resources			
	SMR25 (b) returns to ISD, % Completeness Source: ISD	<table border="1"> <tr> <td>14/15 Q3</td> <td>14/15 Q4</td> </tr> <tr> <td>102%</td> <td>84%</td> </tr> </table> <p>North Lanarkshire</p>	14/15 Q3	14/15 Q4	102%	84%	100% of SMR25 (a) and (b) forms completed for relevant services users by discharge	All clients in tier 2 and 3 drug services have an SMR 25 (a) and (b) completed as part of their recovery journey.	Addictions Partnership Board
14/15 Q3	14/15 Q4								
102%	84%								

CAPSM: Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life-chances: this will include reducing the risks and impact of drug and alcohol misuse on users' children and other family members; supporting the social, educational and economic potential of children and other family members; and helping family members support the recovery of their parents, children and significant others.

National Outcome: Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life-chances

Local Outcome	Relevant Indicators	Data / Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget							
We have improved the life chances for children, and young people allowing them to realise their full potential in all areas of their lives	No. of brief interventions carried out in midwifery services	HEAT 4 quarterly performance data 3,880 alcohol screenings delivered in maternity services 2014/15	100% of pregnant women screened for alcohol related problems	We will:- ❖ continue to fund our specialist midwifery posts to provide guidance/training on brief interventions ❖ enhance multi-agency working via training, support and practice development. ❖ raise awareness of Foetal Alcohol Syndrome and neonatal abstinence by a range of mediums e.g. stakeholders events, conferences.	NHS Lanarkshire's Women's Services	£43,745							
	Pregnancy rates for under 16s per 1000 population Source: ISD	<table border="1"> <tr> <td>2007/09</td> <td>2008/10</td> <td>2009/11</td> <td>2010/12</td> </tr> <tr> <td>8.7</td> <td>7.8</td> <td>7.0</td> <td>6.7</td> </tr> </table> North Lanarkshire Council	2007/09	2008/10	2009/11	2010/12	8.7	7.8	7.0	6.7	Reduce pregnancies in under 16s to 5 per 1000 of population by March 2018	Continue to fund our sexual health specialist nurses to ensure that the service achieves positives outcomes in terms of reducing underage pregnancy	Young People's Sexual Health Steering Group
2007/09	2008/10	2009/11	2010/12										
8.7	7.8	7.0	6.7										

CAPSM: Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life-chances: this will include reducing the risks and impact of drug and alcohol misuse on users' children and other family members; supporting the social, educational and economic potential of children and other family members; and helping family members support the recovery of their parents, children and significant others.

National Outcome: Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life-chances

Local Outcome	Relevant Indicators	Data / Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget		
We have improved the life chances for children, and young people allowing them to realise their full potential in all areas of their lives	No. of Children, parents and families completing the Strengthening Families Programme Strengths and Difficulties Questionnaire (S&DQ) results from self report (young people), parents and child's Named Person	Named Person S&DQ Results			100% of families that meet the programme criteria are referred	To ensure support to vulnerable families affected by drug and alcohol problems we will: <ul style="list-style-type: none"> continue to deliver the Strengthening Families Programme on a quarterly basis refer all young people involved with SFP to mentoring project/other opportunities post programme train multi-agency staff as Strengthening Families Facilitators to ensure local sustainability of the programme continue to promote the programme to ensure that all families that meet the criteria have access 	Strengthening Families Programme Steering Group	Within existing resources
			Week 1	Week 7				
		Number of respondents	30	19				
		Emotional symptoms	3.6	2.9	0.7			
		Conduct problems	2.5	1.3	1.3			
		Hyperactivity	5.3	3.3	2.1			
		Peer problems	2.3	2.1	0.2			
		Prosocial	7.2	8.5	1.3			
		Total difficulties score*	13.7	9.5	4.2			
				80% of young people demonstrate improvements in S&DQ domains				

National Outcome Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life-chances

Local Outcome	Relevant Indicators	Data/Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget																														
<p>We have improved the life chances for children, and young people allowing them to realise their full potential in all areas of their lives</p>	<p>GIRFEC & SHINARI well-being indicators Source: Barnardo's 2014/15</p>	<p>2014/15</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr style="background-color: #ADD8E6;"> <th style="width: 30%;">Outcome</th> <th style="width: 15%;">Target</th> <th style="width: 15%;">Actual</th> </tr> </thead> <tbody> <tr> <td>Positive transition to adulthood</td> <td style="text-align: center;">80%</td> <td style="text-align: center;">100%</td> </tr> <tr> <td>Improved mental health and well-being</td> <td style="text-align: center;">70</td> <td style="text-align: center;">95</td> </tr> <tr> <td>Safer consumption of controlled substances</td> <td style="text-align: center;">60</td> <td style="text-align: center;">92</td> </tr> <tr> <td>Able to describe safety strategies</td> <td style="text-align: center;">80</td> <td style="text-align: center;">91</td> </tr> <tr> <td>Improved family relationships</td> <td style="text-align: center;">40</td> <td style="text-align: center;">80</td> </tr> <tr> <td>Satisfactory progress in learning/development</td> <td style="text-align: center;">75</td> <td style="text-align: center;">91</td> </tr> <tr> <td>Increased choice of activities</td> <td style="text-align: center;">80</td> <td style="text-align: center;">100</td> </tr> <tr> <td>Reduction in offending</td> <td style="text-align: center;">50</td> <td style="text-align: center;">64</td> </tr> <tr> <td>Access to employment, education or training</td> <td style="text-align: center;">60</td> <td style="text-align: center;">100</td> </tr> </tbody> </table>	Outcome	Target	Actual	Positive transition to adulthood	80%	100%	Improved mental health and well-being	70	95	Safer consumption of controlled substances	60	92	Able to describe safety strategies	80	91	Improved family relationships	40	80	Satisfactory progress in learning/development	75	91	Increased choice of activities	80	100	Reduction in offending	50	64	Access to employment, education or training	60	100	<p>Improvement in all domains of GIRFEC & SHINARI well-being indicators</p>	<p>In order to ensure that our most vulnerable young people who have complex issues including substance use and mental health problems related to trauma and attachment issues we will</p> <ul style="list-style-type: none"> • provide multi-agency training, consultation and care planning. • commission a third sector organisation to: <ul style="list-style-type: none"> ❖ Conduct strengths based assessment ❖ Coordinate support and services on behalf of the young person in relation to substance use, health and social needs ❖ Advocate for and behalf of young person to access services/resources i.e. literacy support ❖ Promote inclusion of young person within local the community ❖ Support and encourage the young person to be active and engage in meaningful activities ❖ where appropriate, work with the young person and the family with a view to improving relationships 	<p>ADP Young People's Commissioning Group</p>	<p>To be confirmed</p>
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National Outcome Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life-chances

Local Outcome	Relevant Indicators	Data/Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget										
<p>We have improved the life chances for children, and young people allowing them to realise their full potential in all areas of their lives</p>	<p>Satisfaction scores on key quality indicators</p> <p>Source: HMIE Inspection Reports</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; text-align: right;">2011</td> </tr> <tr> <td>Children are listened to and respected</td> <td style="text-align: right;">Very good</td> </tr> <tr> <td>Children are helped to keep safe</td> <td style="text-align: right;">Very good</td> </tr> <tr> <td>Response to immediate concerns</td> <td style="text-align: right;">Very good</td> </tr> <tr> <td>Meeting needs and reducing long term harm</td> <td style="text-align: right;">Very good</td> </tr> </table> <p style="text-align: center;">North Lanarkshire</p>		2011	Children are listened to and respected	Very good	Children are helped to keep safe	Very good	Response to immediate concerns	Very good	Meeting needs and reducing long term harm	Very good	<p>Improve satisfaction scores on key quality indicators by 2018</p>	<p>We will work with our partners within North Lanarkshire Child Protection Committee to promote better outcomes for children affected by parental drug and alcohol use by:</p> <ul style="list-style-type: none"> • 6 monthly reporting/review of the joint CPC/ADP Strategy to ensure effective communication between both structures and to progress workforce development • multi-agency training on the impact of parental drug and alcohol use on children and young people to be developed/delivered and training calendar agreed • <i>Getting it Right for Children & Families Affected by Parental Alcohol and Drug Use in Lanarkshire</i> (which replaces the GOPR guidance) promoted to senior multi-agency staff and cascaded to staff groups. 	<p>Lanarkshire Child Protection Committee/ADP Working Group</p>	<p>Within existing resources</p>
	2011															
Children are listened to and respected	Very good															
Children are helped to keep safe	Very good															
Response to immediate concerns	Very good															
Meeting needs and reducing long term harm	Very good															

National Outcome 9: Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life-chances

Local Outcome	Relevant Indicators	Data/Geography					Local Targets / Timescales	Key Actions	Lead	ADP Budget
We have improved the life chances for children, and young people allowing them to realise their full potential in all areas of their lives	Rates of domestic abuse incidence per 100,000 of population Source: Local Police Analyst	09/10 1236	10/11 1096	11/12 937	12/13 1187	13/14 1153	Reduce the incidence per 100,000 of population to 1000 by 2018	<p>We will:</p> <ul style="list-style-type: none"> ❖ ensure that there is a co-ordinated and consistent multi-agency response to women, children and young people and perpetrators with the dual experience of domestic abuse and this should read substance use ❖ work with MARAC and Violence Against Women Groups to raise awareness of gender based violence amongst staff working within Tier 2/3 of substance misuse services. ❖ work with local partners in the substance misuse field to promote the use of routine enquiry within the assessment process ❖ provide funding to EVA Services for the provision of advocacy for women affected by domestic abuse ❖ Further develop the domestic abuse perpetrator programme within HMP Addiewell 	MARAC & Violence Against Women Groups	£35,129
	Number of domestic abuse crimes/offences Source: Local Police Analyst	09/10 4144	10/11 3685	11/12 3164	12/13 4012	13/14 3894				

National Outcome 9: Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life-chances

Local Outcome	Relevant Indicators	Data/Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget												
Family members who experience problems associated alcohol or drug related problems are offered support in their own right.	Number of family support groups in North Lanarkshire Source: Internet	<table border="1"> <thead> <tr> <th>Group</th> <th>No in 2015</th> </tr> </thead> <tbody> <tr> <td>Al-Anon</td> <td>7</td> </tr> <tr> <td>Families Anonymous</td> <td>0</td> </tr> </tbody> </table>	Group	No in 2015	Al-Anon	7	Families Anonymous	0	<table border="1"> <thead> <tr> <th>Group</th> <th>Target in 2018</th> </tr> </thead> <tbody> <tr> <td>Al-Anon</td> <td>7</td> </tr> <tr> <td>Families Anonymous</td> <td>6</td> </tr> </tbody> </table>	Group	Target in 2018	Al-Anon	7	Families Anonymous	6	<p>We will:</p> <ul style="list-style-type: none"> work in partnership with 12-step and other family support groups and encourage staff to pro-actively encourage family members to utilise existing groups in the local community. Where there are none we will work with the fellowship public information officers to highlight need and support local delivery collaborate with Scottish families Affected by Alcohol & Drugs (SFAD) to deliver a programme of support to the families of prisoners within HMP Shotts 	Service Managers	Within Existing Resources
		Group	No in 2015															
		Al-Anon	7															
		Families Anonymous	0															
Group	Target in 2018																	
Al-Anon	7																	
Families Anonymous	6																	
Number of resources for family members	1 (Family & Carers Pack)	1 further resource developed by March 2018	<ul style="list-style-type: none"> facilitate the Families and Carers Working Group to develop further resources and training opportunities for family members which support their recovery 															
Number of family members attending training/events	80 in 2014	300 by March 2015																
Number of staff trained in CRAFT	1	6 members of staff trained to deliver CRAFT by March 2018	<ul style="list-style-type: none"> In collaboration with the Workforce Development Group roll out Community Reinforcement & Family Training (CRAFT) to staff working within our third and statutory sector 	Addiction Psychology Service														

- 5. COMMUNITY SAFETY: Communities and individuals are safe from alcohol and drug related offending and anti-social behaviour:** reducing alcohol and drug-related offending, re-offending and anti-social behaviour, including violence, acquisitive crime, drug-dealing and driving while intoxicated, will make a positive contribution in ensuring safer, stronger, happier and more resilient communities.

National Outcome 9: Communities and individuals are safe from alcohol and drug related offending and anti-social behaviour										
Local Outcome	Relevant Indicators	Data/Geography					Local Targets / Timescales	Key Actions	Lead	ADP Budget
Communities in Lanarkshire are safer and stronger places to live and work because crime, disorder and danger related to alcohol and drug use has been reduced	Number of anti social behaviour offences reported	09/10	10/11	11/12	12/13	13/14	Reduce the number of anti-social behaviour offences reported to 22,000 by 2018	We will engage and persuade all stakeholders with an interest in – or experience of – alcohol and drug problems to become actively involved in local planning groups, licensing forums or programmes of prevention by advising them of the measures which local communities can take to highlight local problems.	Divisional Commanders, Police Scotland	Within Existing Resources
	Source: Local Police Analyst	51,995	46,234	37,531	32,691	25,538				
	Driving motor vehicle with blood alcohol content over limit	09/10	10/11	11/12	12/13	13/14	Reduce to 250 the number of people involved in road accidents with blood alcohol content over limit by 2018	Police Scotland will develop targeted campaigns around the dangers of drink driving		
		370	347	253	266	298				

- 5. COMMUNITY SAFETY: Communities and individuals are safe from alcohol and drug related offending and anti-social behaviour:** reducing alcohol and drug-related offending, re-offending and anti-social behaviour, including violence, acquisitive crime, drug-dealing and driving while intoxicated, will make a positive contribution in ensuring safer, stronger, happier and more resilient communities.

National Outcome 9: Communities and individuals are safe from alcohol and drug related offending and anti-social behaviour										
Local Outcome	Relevant Indicators	Data/Geography					Local Targets / Timescales	Key Actions	Lead	ADP Budget
Communities in Lanarkshire are safer and stronger places to live and work because crime, disorder and danger related to alcohol and drug use has been reduced	Number of drunk & incapable offences	09/10	10/11	11/12	12/13	13/14	Reduce number of drunk and incapable offences to 100 by 2018	In conjunction with the Community Safety Partnership we will continue support of the "Safer Lanarkshire" campaigns which feature a variety of initiatives designed to reduce alcohol related violence, incorporating high visibility police patrols, taxi marshalling scheme and joint visits to licensing premises which remind retailers and licensees of their responsibilities under the Licensing Act. We will also link with our partner agencies to ensure that local problem solving groups, Local Area Partnerships and local licensing forums have adequate representative from the local community.	Police Scotland	£100,000
	Source: Local Police Analyst	261	184	224	187	129				
	North Lanarkshire									
One year reconviction rate (number of reconvictions per offender), for offenders given a Drug Treatment and Testing Order	Source: Scottish Government	2007/08	2008/09	2009/10	2010/11	2011/12	Reduce one year reconviction rates for offenders given DTTOs to 1 by 2018			
		1.8	1.4	1.1	2.1	1.1				
Lanarkshire										
Proportion of victims of a crime who reported that the offender was under the influence of alcohol / drugs	Source: Scottish Crime and Justice Survey	Alcohol			Drugs			Reduce the proportion of victims of a crime who reported that the offender was under the influence to 10% by 2018		
		09/10	10/11	12/13	09/10	10/11	12/13			
		17%	32%	14%	13%	20%	13%			
Lanarkshire CJA										

National Outcome: Communities and individuals are safe from alcohol and drug related offending and anti-social behaviour

Local Outcome	Relevant Indicators	Data/Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget
Communities in Lanarkshire are safer and stronger places to live and work because crime, disorder and danger related to alcohol and drug use has been reduced	Outcome Star Scores	As assessment & review	100% of service users will have demonstrated some improvement in Outcome Star domains from assessment to review and/or discharge from the Community Bridges Service	<ul style="list-style-type: none"> Continue our service level agreement with North Lanarkshire Council for the Community Bridges Project Train the remainder of justice staff to deliver screening and brief interventions In addition we will ensure that clinical services are offered using consistent outcomes for substance misusing offenders in custody within Addiewell Prison, by training staff in the Treatment Process Model. Develop the Prolific Offender Programme into each locality within North Lanarkshire 	North Lanarkshire Council, Justice Services	£39,000
	Number of Referrals to Alcohol & Drug Services	ADASTRA (no baseline)	Increase the number of referrals from police custody suites each year by 50 by 2018	<ul style="list-style-type: none"> Improve the outcome for individuals who are arrested as a consequence of their behaviour whilst drinking, by investing in police custody suites. Ensure that medical and nursing staff operating within police custody suites support pro-active referral to alcohol and drug treatment services 	Police Custody Suite Steering Group	£146,370

6 LOCAL ENVIRONMENT: People live in positive, health-promoting local environments where alcohol and drugs are less readily available: alcohol and drug misuse is less likely to develop and recovery from problematic use is more likely to be successful in strong, resilient communities where healthy lifestyles and wider well-being are promoted, where there are opportunities to participate in meaningful activities, and where alcohol and drugs are less readily available. Recovery will not be stigmatised, but supported and championed in the community.

National Outcome: People live in positive, health-promoting local environments where alcohol and drugs are less readily available

Local Outcome	Relevant Indicators	Data/Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget										
People living within our Lanarkshire communities are engaged in a range of positive, health-promoting activities	Percentage of people perceiving drug misuse or dealing to be very or fairly common in their neighbourhood Source: Scottish Household Survey	<table border="1"> <tr> <td>05/06</td> <td>07/08</td> <td>09/10</td> <td>2012</td> <td>2013</td> </tr> <tr> <td>14%</td> <td>15%</td> <td>12%</td> <td>18%</td> <td>10%</td> </tr> </table> <p>North Lanarkshire</p>	05/06	07/08	09/10	2012	2013	14%	15%	12%	18%	10%	Decrease the % of adults reporting dislike and/or have personal experience of drug misuse and dealing in their neighbourhood to 8% by 2018.	<ul style="list-style-type: none"> Intelligence led Policing to increase the deployment of high visibility patrols to the right place and at the right time, to reduce crime and the fear of crime Adopting measures to reduce the potential for incidents of violence, disorder, anti-social behaviour, vandalism, street drinking and other alcohol and drugs related offending Implementing action plans that take a partnership approach to tackling alcohol and drugs related issues associated with town centres and identified trouble areas Creating a safer environment for patrons frequenting licensed premises, particularly at weekends and especially during the festive period Priority problem households – Pro-active joint visits by police and partner agencies to households where disorder has historically occurred again relating to alcohol or drugs. 	Police Scotland	£100,000
	05/06	07/08	09/10	2012	2013											
	14%	15%	12%	18%	10%											
	Percentage of people experiencing drug misuse or dealing in their neighbourhood Source: Scottish Household Survey	<table border="1"> <tr> <td>07/08</td> <td>09/10</td> <td>2012</td> <td>2013</td> </tr> <tr> <td>7%</td> <td>5%</td> <td>7%</td> <td>5%</td> </tr> </table> <p>North Lanarkshire</p>	07/08	09/10	2012	2013	7%	5%	7%	5%						
07/08	09/10	2012	2013													
7%	5%	7%	5%													
Percentage of people perceiving rowdy behaviour (e.g. drunkenness, hooliganism or loutish behaviour) to be very or fairly common in their neighbourhood Source: Scottish Household Survey	<table border="1"> <tr> <td>05/06</td> <td>07/08</td> <td>09/10</td> <td>2012</td> <td>2013</td> </tr> <tr> <td>20%</td> <td>20%</td> <td>17%</td> <td>20%</td> <td>14%</td> </tr> </table> <p>North Lanarkshire</p>	05/06	07/08	09/10	2012	2013	20%	20%	17%	20%	14%	Decrease the % of adults perceiving or experiencing rowdy behaviour to be very or fairly common in their neighbourhood to 10% by 2018.				
05/06	07/08	09/10	2012	2013												
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07/08	09/10	2012	2013													
16%	14%	17%	12%													

LOCAL ENVIRONMENT: People live in positive, health-promoting local environments where alcohol and drugs are less readily available: alcohol and drug misuse is less likely to develop and recovery from problematic use is more likely to be successful in strong, resilient communities where healthy lifestyles and wider well-being are promoted, where there are opportunities to participate in meaningful activities, and where alcohol and drugs are less readily available. Recovery will not be stigmatised, but supported and championed in the community.

National Outcome: People live in positive, health-promoting local environments where alcohol and drugs are less readily available

Local Outcome	Relevant Indicators	Data/Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget													
People living within our Lanarkshire communities are engaged in a range of positive, health-promoting activities	Number of premise licences in force (per 10,000 population 18+) On Trade as at 31 st March 2014	414 (16) North Lanarkshire	Reduce the number of premise licences in force (per 10,000 population 18+) to 400 On Trade by March 2018	Encourage our health improvement leads to become active members of our local licensing forum and use the information we have collated on alcohol-related harm and present this to local licensing forums, licensing boards, elected members and the community to assist in building a case for a reduction in the density of alcohol outlets. Use service user involvement data, opportunistic and commissioned research to supplement standard data with information on the impact of the environment on drinking patterns and behaviours within our town and villages. Provide advice to our local licensing board's licensing policy and overprovision statements Work with our local communities to identify and understand local alcohol issues and take effective action	Health Improvement Leads	Within Existing resources													
	Number of premise licences in force (per 10,000 population 18+) Off Trade as at 31 st March 2014	296 (11) North Lanarkshire	Reduce the number of premise licences in force (per 10,000 population 18+) to 280 Off Trade by March 2018																
	Number of personal licences in force (per 10,000 population 18+) Off Trade as at 31 st March 2014	2515 (95) North Lanarkshire	Reduce the number of personal licences in force (per 10,000 population 18+) to 2,400 in Off Trade by 31 st March 2018																
	Number of new applications for premise and personal licences during 2013/14, and number refused on the grounds of overprovision Source: Scottish Government (Liquor Licensing Statistics)	<table border="1"> <thead> <tr> <th colspan="3">Premise licenses</th> <th colspan="2">Personal licences</th> </tr> <tr> <th colspan="2">New applications</th> <th rowspan="2">Refused</th> <th rowspan="2">Granted</th> <th rowspan="2">Refused</th> </tr> <tr> <th>on sale</th> <th>off sale only</th> </tr> </thead> <tbody> <tr> <td>8</td> <td>14</td> <td>0</td> <td>252</td> <td>3</td> </tr> </tbody> </table>	Premise licenses				Personal licences		New applications		Refused	Granted	Refused	on sale	off sale only	8	14	0	252
Premise licenses			Personal licences																
New applications		Refused	Granted	Refused															
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National Outcome: People live in positive, health-promoting local environments where alcohol and drugs are less readily available

Local Outcome	Relevant Indicators	Data/Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget																				
People living within our Lanarkshire communities are engaged in a range of positive, health-promoting activities	Number of mutual aid groups in North Lanarkshire	<table border="1"> <thead> <tr> <th>Organisation</th> <th>No of Groups in 2015</th> </tr> </thead> <tbody> <tr> <td>Alcoholics Anonymous</td> <td>50</td> </tr> <tr> <td>Narcotics Anonymous</td> <td>3</td> </tr> <tr> <td>Cocaine Anonymous</td> <td>3</td> </tr> <tr> <td>SMART</td> <td>1</td> </tr> </tbody> </table>	Organisation	No of Groups in 2015	Alcoholics Anonymous	50	Narcotics Anonymous	3	Cocaine Anonymous	3	SMART	1	<table border="1"> <thead> <tr> <th>Organisation</th> <th>Target No of Groups in 2018</th> </tr> </thead> <tbody> <tr> <td>Alcoholics Anonymous</td> <td>50</td> </tr> <tr> <td>Narcotics Anonymous</td> <td>6</td> </tr> <tr> <td>Cocaine Anonymous</td> <td>6</td> </tr> <tr> <td>SMART</td> <td>6</td> </tr> </tbody> </table>	Organisation	Target No of Groups in 2018	Alcoholics Anonymous	50	Narcotics Anonymous	6	Cocaine Anonymous	6	SMART	6	We will work in partnership with 12-step and other peer support groups and encourage staff to pro-actively encourage their service users to utilise existing groups in the local community. Where there are none we will work with the fellowship public information officers to highlight need and support local delivery	Service Managers	Within existing resources
	Organisation	No of Groups in 2015																								
Alcoholics Anonymous	50																									
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	<p>% of respondents who have given up time as an organiser/volunteer in past 12 months Source: Scottish Household Survey</p> <p>Number of peer supporter/mentors in North Lanarkshire Source: Phoenix Futures Annual Report</p>	<table border="1"> <thead> <tr> <th>07/08</th> <th>09/10</th> <th>2012</th> <th>2013</th> </tr> </thead> <tbody> <tr> <td>24%</td> <td>21%</td> <td>21%</td> <td>20%</td> </tr> </tbody> </table> <p>North Lanarkshire</p> <p>16 Peer mentors</p>	07/08	09/10	2012	2013	24%	21%	21%	20%	<p>Increase to 22% the number of respondents who have given up time as an organiser/volunteer in past twelve months by March 2018</p> <p>24 Peer mentors by March 2018</p>	<p>We will work with our third sector interface to:</p> <ul style="list-style-type: none"> enhance the opportunity for training and volunteering opportunities in North Lanarkshire and align peer support and mutual aid opportunities to existing support structures which promote mental well-being within each of our local towns and villages 	<p>Voluntary Action North Lanarkshire</p> <p>Peer Support Commissioning Group</p>	TBC												
07/08	09/10	2012	2013																							
24%	21%	21%	20%																							

SERVICES: Alcohol and drugs services are high quality, continually improving, efficient, evidence-based and responsive, ensuring people move through treatment into sustained recovery: services should offer timely, sensitive and appropriate support, which meets the needs of different local groups (including those with particular needs according to their age, gender, disability, health, race, ethnicity and sexual orientation) and facilitates their recovery. Services should use local data and evidence to make decisions about service improvement and re-design.

National Outcome : Alcohol and drugs services are high quality, continually improving, efficient, evidence-based and responsive, ensuring people move through treatment into sustained recovery:						
Local Outcome	Relevant Indicators	Data/Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget
Lanarkshire's Alcohol and drugs services are high quality, continually improving, efficient, evidence-based and responsive whilst, ensuring people move through treatment into sustained recovery	Treatment Waiting Times, % seen within 3 weeks Source: Local Waiting Times Database Q4 2014/15	100% of service users are seen within 3 weeks of referral	Maintain current level of performance e.g. 100% < 3 weeks from referral to treatment by 2018	<p>We will</p> <ul style="list-style-type: none"> Continue to fund the North Lanarkshire Integrated Addiction Service for the next three years for those people who are dependent on alcohol/or drugs. Continue to provide funding to the Addiction Psychology and the Community Prescribing Services to take forward the recommendations of the Opiate Treatment therapy review Review support available with our alcohol and drug services to ensure that the support needs of vulnerable people, particularly those who are homeless or suffering from ARBI are adequately resourced. 	NL Partnership Board	NLIAS 1,208,527
	% of people with drug problems in treatment	Approx 1800 (54%) PDUs on Substitute Prescribing (2013/14)	Increase the % of drug misusers in treatment and care services to 60% by 2018		Addiction Psychology Service	£179,987
	% of people with alcohol problems in treatment Source: National needs assessment	11% of problematic alcohol users in treatment (2004/05)	Increase the % of problematic alcohol users in treatment to 15 by 2018		Community Prescribing Service	£195,840
					NL Partnership Board	To be confirmed

National Outcome: Alcohol and drugs services are high quality, continually improving, efficient, evidence-based and responsive, ensuring people move through treatment into sustained recovery:

Local Outcome	Relevant Indicators	Data/Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget
Lanarkshire's Alcohol and drugs services are high quality, continually improving, efficient, evidence-based and responsive whilst, ensuring people move through treatment into sustained recovery	Number of staff and services engaged within each aspect of the NL ROSC	North Lanarkshire Workforce Development Blueprint	Deliver recommendations from the North Lanarkshire review of ROSC service provision by March 2018	<p>We will bench-mark the capacity of staff complements and match this to current and future projections on need.</p> <p>The Workforce Planning Group will prioritise training within health, social care and third sector organisations to ensure evidence based practice is embedded within each organisation and every locality of Lanarkshire. This training will include:</p> <ul style="list-style-type: none"> • drug and alcohol awareness (including Novel Psycho-active substances) • Basic principles of a ROSC • Improvement Methodology • Alcohol Brief Interventions & Alcohol Related Brain injury • Psycho-social interventions • Assessment of mental and physical health needs • Adult & child support and protection • Mental Health first Aid • GIRFEC (promoting well-being assessment) • Solihull and Strengthening Families approaches • Finance/Benefit Maximisation. 	NL Workforce Development Group	£55,000

National Outcome : Alcohol and drugs services are high quality, continually improving, efficient, evidence-based and responsive, ensuring people move through treatment into sustained recovery:

Local Outcome	Relevant Indicators	Data/Geography	Local Targets / Timescales	Key Actions	Lead	ADP Budget
Lanarkshire's Alcohol and drugs services are high quality, continually improving, efficient, evidence-based and responsive whilst, ensuring people move through treatment into sustained recovery	Staff surveys Client Surveys Audit of Case Files Environmental Audit Local and national indicators Annual Reports	Audit of Quality Principles of Substance Misuse Services	All third sector and statutory services to complete audit template by March 2018	<ul style="list-style-type: none"> Implement recommendations arising from external review of Stirling University within NLIAS Implement recommendations arising from audit of Meridian and Phoenix Futures against quality principles. Ensure that all actions and recommendations are shared with relevant colleagues, services and forums and are taken forward accordingly. Deliver workshop on improvement methodology to equip managers and their staff to develop test for change 	Manager NLIAS Steering Groups Early Years collaborative & Scottish Government	Within existing resources
	The % engagement rate of clients attending services at assessment and treatment appointments	66% of clients engage with treatment services in NL	Increase engagement with services from 67% to 70% by March 2018	<ul style="list-style-type: none"> Facilitate Iconic Consultancy to access people who have consistently failed to engage with existing service provision Implement recommendations arising from this review Consider a range of methods to increase engagement rates within services. We will also promote engagement in treatment and care services by enhancing motivation, building psychological resources and skills which foster community links 	Iconic Consultancy Staff & Service Managers	£10,000