

DUNDEE CITY DRUG AND ALCOHOL ACTION TEAM

CORPORATE ACTION PLAN 2007-8

CONTENTS

Section A: Alcohol and Drug Action Team details and support funding

Section B: Performance Contract

Section C: Allocation of resources and provision of services

Section D: Support and Treatment Tables

Section E: ADAT Progress

Section F: Drug and Alcohol Direct Spend By Partner Organisations

Section G: ADAT certification of Corporate Action Plan

SECTION A:

Alcohol and Drug Action Team details and support funding

(See paragraphs 5 and 6 of the Scottish Executive guidance notes)

A. ADAT details and support funding

A.1 ADAT details

A.1.1 ADAT Members (please complete the table below)

Name	Designation	Organisation	Member of Workgroup/Subgroup
Dr Brian Kidd - Chair	Consultant Psychiatrist, Tayside Drug Problem Service	NHS Tayside	Chair – Tayside Process of Care Group
Margaret Brown	Head of Regimes	HM Prison, Perth	
Steven Dalton	Lead Officer	Dundee City DAAT	Substance Forum member/Chair – Alcohol and Drug Related Deaths/ Children and Young Person’s Sub Group/ DAAT Commissioning group
Arron Duncan	Superintendent	Tayside Police	Chair of DAAT Commissioning group
Neil Fraser	Strategy & Performance Manager	Tayside Primary Care Trust	Member of DAAT Commissioning group
Councillor Liz Fordyce	Member, Social Work Committee	Dundee City Council	
David Lynch	General Manager	Dundee Community Health Partnership	
John Hosie (replaced Stewart Murdoch)	Leisure and Communities Department	Dundee City Council	Chair – Prevention, Training and Education Group
Jenni Tocher	Strategy & Performance Manager	Tayside Primary Care Trust	Children and Young Person’s Sub Group (Chair)
Lina Waghorn (until December 06)	Manager, Education Department	Dundee City Council	
Jim Gibson (replaced Lina Waghorn)	Education Department	Dundee City Council	Member of DAAT Commissioning group
Morna Wilson	Chief Executive	Dundee Voluntary Action	Substance Forum (Chair)
Ballie Helen Wright	Convenor, Social Work	Dundee City Council	

A.1.2 Please list ADAT subgroups and working groups for 2006-7 in the space below:

- Children and Young Person's Sub Group – Task Groups: Children at risk through their own substance use and Children at risk through others' substance misuse
- Adult's subgroup (created March 2007)
- Substance Forum – Task Group: Drug Related Deaths
- Prevention, Education and Training subgroup
- Health Advisory Forum
- Social Work Advisory Forum
- Multi Agency Task Group on Alcohol
- Process of Care Group
- Complex and Multiple Needs Management Committee

A.1.3 Please list the ADAT's partners for 2006-7 in the space below:

- Partners in Evaluation Scotland
- Dundee University School of Social Work and Education
- Griesbach and Associates
- STRADA
- The Scottish Leadership Foundation

A.2 ADAT support funding

A.2.1 Total Support Allocation:

2006-7 allocation (£): 74,000

Carry forward (£): 5,703

Total (£):

79,703

A.2.2 Breakdown of Support Allocation Spend

Category of Spend	Scottish Executive Funding Expenditure (£)	Funding from other sources (£)	Total (£)
Salaries	79,703	12,450	92,153
Staff costs		1,342	
Forum/meetings		1,861	
Seminars/conferences/events		1,485	
Training		DAAT Support Staff 540 STRADA 10,161	
Miscellaneous spending		836	
Total	79,703	28,675	108,378

A.2.3 Other Ring-fenced funding

Funding stream	Allocation	Amount spent (£)
Communications Funding (alcohol and drugs)	£8,000	£6,482

SECTION B:

Allocation of resources and provision of services

(See paragraph 9 of the Scottish Executive guidance notes)

B. Allocation of resources and provision of services

B.1 Please list the ADAT's key priorities for 2006-07:

Developing and supporting ECLIPS (employability / moving on service)
Developing and supporting the new Direct Access service
Continuing to develop a local system for measuring outcomes and collecting monitoring information for all services in Dundee
Prevention of Drug and Alcohol related deaths
Children and Young People

B.2 Please list the local strategies considered when allocating resources for 2006-07:

Dundee Joint Health Improvement Plan
Dundee Community Plan
Dundee Council Plan
Dundee Community Safety strategy
All local strategies contributing the Dundee Community Care strategy
BBV strategy
Sexual Health strategy
Community Justice Authority Area Plan
Youth Justice Strategy
Child Health Strategy

B.3 Please list any needs analysis carried out which influenced the allocation of resources in 2006-07 and a summary of the key findings:

Needs Analysis	Key findings (please provide no more than 25 words of description for each key finding)
Programme Budgeting & Marginal Analysis (PBMA)	Programme Budgeting and Marginal Analysis (PBMA) is an approach to priority setting that allows for the complexities of social and health care decision-making while adhering to basic economic principles. The PBMA process identified gaps and prioritised the following areas for investment in Dundee - Moving On (Employability) Service – Direct Access Service – Harm reduction services – community detoxification services
Blood Born Viruses / Harm Reduction re-design	An extensive consultation took place with service users in relations to all Blood Born Viruses services. Information from consultation was used to inform the redesign of BBV services.
Alcohol Related Brain Damage & Single Homeless Needs Assessments	People with assessed ARBD are mainly single older men; however there is a rising prevalence amongst younger people and women. The highest incidence appeared to be in Dundee. Most need support to access housing services as well as support for ordinary living and to maintain a tenancy or home. While a diverse range of health, housing and support services across statutory and voluntary sectors respond to alcohol-related needs, GPs were key referrers to specialist alcohol-related support services.
Prevention, Education & Training	Most agencies in Dundee carry out some prevention work using a range of approaches including: information and advice, Substance awareness, Support and counselling, life skills training, diversion, resistance skills, and peer education. The aims of these interventions include: to reduce harm caused by substance misuse, to prevent people from starting to use substances, to slow down the rate at which a person uses substances, to prevent the development of problematic/ risky patterns of behaviour, and to prevent episodes of relapse.
User Involvement	Respondents warned against UI activities being 'tokenistic' and involving service users who are not ready for such activities. Most of the agencies in Dundee are involved in one-off user involvement activities in relation to specific issues. Mechanisms and activities that allow regular consultation and access to the views of users are less established. Services find it difficult to access the views of service users who lead chaotic lifestyles, those with low self-esteem and those who have no interest in being involved.

B.4 Please list any other factors which influenced the allocation of resources in 2006-7 (optional):

B.5 Please list any needs analysis research planned for 2007-8:

- Needs assessment and consultation process to inform the development of the DAAT's 3-year strategic plan
 - Multiple and Complex Needs Project
 - Children & Young People subgroup plan to undertake needs assessment in relation to children's services

SECTION C:

Support and Treatment Tables

(See paragraphs 10-12 of the Scottish Executive guidance notes)

DTTO Criminal Justice Services Social Work Dept. (Dundee Service)	D	£531,000 Pro Rata p.a for Tayside DTTO	174	48	1362 aprox	14	5	4	4	2	4	4	4	4	5	X		X			X	X			X	X	X	X	X		X	X	X
Time Tay Change	D	N £185248	97	193		21	5	4	4	2	4	4	2	4	4	X		X	X			X			X	X	X	X	X	X	X	X	
Tayside Arrest Referral Scheme	DA	£5,869 (L) £69,701 (SE)	515	53		515		4	4	4	4	4	4	4	4						X			X		X	X	X	X		X		
Direct Access	DA	126,000	4	4	12	3	4	4	4	4	4	4	4	4	4								X		X	X		X		X			
NHS Tayside Drug Problems Service	D	£1,965,310	527	940	10,749	349	4	4	4	4	4	4	4	4	4	X		X	X			X	X		X	X	X	X	X	X	X	X	
NHS Tayside Alcohol Problems Service	A	£1,078,018	561	500	4,786	239	4	4	4	4	4	4	4	4	4	X		X	X			X	X		X	X	X	X	X	X	X	X	
NHS Tayside Harm Reduction Service	D	£277,202					4	4	4	4	4	4	4	4	4				X	X	X	X			X	X	X	X	X		X		
Choice Project	DA	40k					2	4	4	4	4	4	4	4	5	X		X							X	X	X	X	X	X	X	X	
Axis Dundee	D	£57000 (L)	24	38	35	10		4	4		4	4		4	4		x							x		x	x	x	x			x	x

<p>Specific Group Codes:</p> <p>1= Drug and/or alcohol service dedicated solely to the specific group.</p> <p>2= Drug and/or alcohol service with specialist workers, dedicated clinics, or facilities for the specific group.</p> <p>3= Drug and/or alcohol service which has undertaken specific action to attract specific group.</p> <p>4= Drug and/or alcohol service which treats clients from the specific groups but has no specialist facilities.</p> <p>5= Drug and/or alcohol service which does not treat clients from the specific group.</p>	<p>Dedicated Drug and/ or Alcohol Service – A service with dedicated workers or facilities for supporting alcohol and/ or drug misusers, where the focus of the intervention is on alcohol and/ or drugs during 2006-7.</p> <p>Number of New Clients – Number of clients attending the service for (a) the first time ever or (b) it has been at least six months since their last attendance at the services during 2006-7.</p> <p>Number of Actively Managed Clients – Number of clients for whom treatment and/or dedicated support is being managed in accordance with a care plan at the service during 2006-7.</p> <p>Number of Planned Discharges – Number of clients from each service who completed a treatment or support intervention, or moved from one treatment and /or support provider to another in a planned way during 2006-7.</p>
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RESIDENTIAL SERVICES IN ACTION TEAM AREA:

SERVICE	REMIT	NUMBER OF BEDS	TOTAL ADMISSIONS			ADMISSIONS FROM ACTION TEAM AREA			DETAIL ANY TARGETED GROUPS
			Apr 2006 to Dec 2006	Jan- Mar 2007 Projected if actual not available	Projected Apr 07–Mar 08	Apr 2006 to Dec 2007	Jan- Mar 2007 Projected If actual not available	Projected Apr 07–Mar 08	

DEDICATED SERVICES USED OUTWITH ACTION TEAM AREA:

SERVICE	REMIT	LOCATION	NUMBER OF CLIENTS REFERRED			NUMBER OF CLIENTS ADMITTED			TOTAL ANNUAL SPEND
			Apr-Dec 2006	Jan-Mar 2007	Projected Apr 07 - Mar 08	Apr-Dec 2006	Projected Jan-Mar 07	Projected Apr 07 – Mar 08	

SHARED CARE: (Drugs Only)

Number of GP Practices signed up to local shared care scheme	20
Number of pharmacists signed up to local shared care scheme	36
Number of dispensings of methadone mixture	181,665
Number of supervised dispensings of methadone mixture	113,256

NEEDLE EXCHANGE: (Drugs Only)

SERVICE TYPE	NUMBER OF FACILITIES	NUMBER OF NEEDLES / SYRINGES DISTRIBUTED	NUMBER OF NEEDLES / SYRINGES RETURNED
Specialist	1	165375	33688
Outreach			
Community Pharmacies	4	33688	2349

PREVENTION SERVICES: (Alcohol Only)

How many dedicated alcohol prevention services have been funded by the Action Team using existing monies:		
	Actual 2007-8	Projected 2007-8
ADULT SERVICES	Tayside Council on Alcohol; Tayside Alcohol Problem Service; Direct Access	Tayside Council on Alcohol; Tayside Alcohol Problem Service; Direct Access
CHILDREN'S SERVICES	All funded children's services cover both drugs and alcohol	All funded children's services cover both drugs and alcohol

SECTION D:

ADAT Progress

(See paragraphs 13-24 of the Scottish Executive guidance notes)

D.1 ADAT Progress – Culture Change and Communities

National Priority: Reduce binge drinking

Target: Reduce the incidence of adults exceeding weekly sensible drinking levels from:

- 33% to 31% for men between 1995 and 2005, and to 29% by 2010
- 13% to 12% for women between 1995 and 2005, and to 11% by 2010

D.1.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority and target
2. performance over the last 5 years (in statistical terms)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6
Admissions for acute intoxication	Dundee City Hospital (NAIR)	367	328	288	264
Number of Drunkenness offences recorded in Dundee City	SE Criminal Justice Statistics	369	388	383	
Alcohol related deaths ('any mention') in Tayside for males and females	Alcohol Statistics Scotland ISD 1007	2002 156	2003 186	2004 183	2005 177

Indicator(s)	Tayside Males aged 16+	Tayside Females aged 16+
Consumed 8(6) or more units on heaviest drinking day in last week (Scottish Health Survey 2003)	25%	14%
Estimated usual weekly consumption over 21(14) units (Scottish Health Survey 2003)	25%	13%

D.1.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. 'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing /partially		
Dundee CHP in Partnership with Dundee DAAT will explore a variety of training and operational developments related to Screening and Brief Interventions for alcohol misuse.	√			Screening and brief intervention for alcohol misuse (SBI) is incorporated into the <i>Keep Well project</i> . This comprises alcohol screening of all participating patients, with brief intervention available to all patients screening positive, and further referral based on a local alcohol care pathway to existing tier 3 services. Screening will be undertaken by primary care practices, and <i>Keep Well's</i> motivational Health Coaches. The primary care alcohol liaison nurse is providing ongoing training and supervision to relevant professionals and NHS <i>Health Scotland</i> commissioned 'Health Behaviour Change' training to <i>Keep Well</i> clinical staff.	
Establish the Direct Access service in Dundee	√			The Direct Access service has been in operation since March 2007. The service offers low threshold, open access information, assessment, brief interventions advice and support services to drug and alcohol users. Access can be based on self or agency referral.	
Develop and standardise shared outcomes and local improvement targets within	√			Training delivered in collaboration with Partners in Evaluation. Each local agency selected relevant	

performance frameworks for all service providers in Dundee				outcomes from the "menu" and developed own indicators and measure. Two reporting templates developed by the DAAT Support Team and piloted during January-March 07. The DAAT has adopted the performance framework used by Local Authority and Health partners which will be incorporated to the Outcomes and Monitoring Reporting process	
Act on the information provided through the mapping exercise to streamline and co-ordinate all drug and alcohol prevention activities in Dundee	√			A Training, Prevention and Education Subgroup of the DAAT has been established. The group will streamline and co-ordinate all drug and alcohol prevention activities in Dundee	
Develop a governance protocol in relation to prevention and training in Dundee	√			The draft protocol has been finalised and will be implemented by the P, T & E subgroup.	

D.1.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
Work was undertaken with Dundee GP practices, to discuss alcohol-related issues and promote availability of training, advice and support in addressing alcohol misuse (including hazardous drinking and binge drinking). Brief Training in <i>Health Behaviour Change</i> (focusing on alcohol) was undertaken with over 200 Dundee primary care practitioners at a <i>Protected Learning Time</i> event in May and June 2005. Training in Screening and Brief Interventions for alcohol misuse was provided to Dundee Community Nurses in January 2006.	On going	Dundee CHP funded the printing of A5 SBI booklets, which guide clinical staff in providing a brief intervention and provide a patient handout. SBI is now being provided through practices involved in <i>Keep Well</i> activity. Dundee CHP's formal system of <i>protected learning time</i> has allowed the provision of training sessions in relation to women's health and alcohol, screening and brief intervention, and motivational interviewing/ health behaviour change. <i>Keep Well</i> provides training, support and supervision for clinicians in relation to alcohol misuse.
Tayside Chief Fire Officer has convened a task group to examine the situation in Tayside regarding alcohol-related house fires and ways of preventing them.	February 2006 – April 2007. A joint conference held December 2006.	The group raised public awareness on issues relating to binge drinking, alcohol health consequences and the role of alcohol in fire related deaths. As of April 2007 the work of this group will be incorporated into the work plan of all Tayside DAATs.
The Dundee DAAT has developed an Adult Subgroup.	On going	The group will bring together the key strategic and operational stakeholders involved in adult services and, in line with the

		other sub groups, develop working groups to target specific issues (including co-morbidity, vulnerable adults etc). The sub group will enable the DAAT to focus on its executive role
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D.1.4 Planned Action 2007-8

Briefly outline the key actions that you intend to take during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Progress with the Implementation Embedding stage of the outcomes and monitoring reporting process	Dundee DAAT Support Team	Review day with Partners in Evaluation November 2007. Ongoing
Evaluate Tayside Council on Alcohol (TCA)	Dundee DAAT	By January 2008
Contribute to the Multiple and Complex Needs initiative	Housing Department Dundee Council	31 st March 2008
Develop a work plan for the newly established Training, Prevention and Education Subgroup	Dundee DAAT	By July 2007
Develop a work plan for the newly established Adult subgroup	Dundee DAAT	By July 2007

D.2 ADAT Progress – Culture Change and Communities

National Priority: Reduce drug and alcohol related crime and reassure communities that effective action is being taken.

D.2.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	2001	2002	2003	2004	2005	2006
Number of Drunkenness offences recorded in Dundee City (SE Criminal Justice Statistics)	424	369	388	383		
Number of drunk driving offences recorded in Dundee City (SE Criminal Justice Statistics)	413	440	505	375	Tayside figures 1,022	
Drug-related offences recorded in Dundee City by Scottish police forces (SE Justice Dept recorded crime series)	904	1167	1307	1652		
Indicator(s)	1999/00	2001/02	2003/04	2004/05	2005/06	
Experience of neighbourhood problems in Dundee City: people drinking or using drugs % saying it is very or fairly common (Scottish Household Survey)	20%	18%	22%			

D.2.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. *'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'*.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing /partially		
Develop Operation Dry-up to include multi agency involvement			√	A multi- agency response is co-ordinated through the Children and Young People's Sub Group. A proposal for a local strategy is to be explored with elected members following May 2007 election. Research into the nature and extent of problem drinking among young people in the City together with research undertaken into A&E referrals will inform a local strategic action plan. Principles of Operation Dry Up have been piloted in one area of the City	
Refocus the Key to Change project in line with the evaluation and identified need	√			Key to Change has moved from being managed jointly by DDAP/WEB and TCA to a single management structure by DDAP/WEB. The service operates stricter referral and intervention criteria.	
Develop the new Direct Access service to encourage more people to access treatment and care interventions	√			See p. 20 above	

D.2.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
The DAAT has contributed to and supported the development of an advertising campaign organised by the Dundee Community Safety Partnership	Posters on local buses launched Friday 24 March 2007	Awareness raising
Lead Officer is member of the Dundee Community Safety Partnership	On going	Joint working between the DAAT and the Community Safety Partnership which has resulted in the creation of a jointly funded prevention post and a city wide campaign to reduce the impact of alcohol related crime.
Investment and expansion of the Tayside Arrest Referral scheme. Additional resource provided to enable rapid access to treatment.	On going	Reduction of waiting times and reduction in relapse episodes.
Involvement of the newly formed Community Justice Authority (CJA). DAAT Lead Officer member of the Area Plan Implementation group; DAAT Development Officer involves in the Outcomes Framework subgroup of the CJA	On going	Better joint working
Proactive relationship with local media	On going	Greater public awareness of the issues and more accurate reporting.

D.2.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
The Drug Treatment and Testing Order will raise its profile and build positive relationships in the community. The service will also monitor outcomes for the service user and the impact on the community	DTTO	On going
Tayside Police will Address the relationship between alcohol and crime in order to reduce the impact of such crimes	Tayside Police	April 2008
Tayside Police will pursue local Anti Social Behaviour Strategies (includes Drug Dealing) in order to help respond to anti social behaviour	Tayside Police	April 2008
Includem will further develop relationships with referring agencies (Social Work and Throughcare) to identify young people where drug and alcohol misuse is a significant risk factor for offending	Includem	On going
To expand the Arrest Referral service to enable fast track access for appropriate clients to substitute medication and health interventions.	DAAT / Criminal Justice Partnership	2007/8

D.3 ADAT Progress – Prevention, Education and Young People

National Priority: Reduce hazardous or at risk drinking by children and young people because of the particular health and social risks.

Target: Reduce frequency and level of drinking from 20% of 12 – 15 year olds to 18% between 1995 and 2006, and to 16% by 2010.

D.3.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national target
2. performance over the last 5 years (in statistics)

Indicator(s)	Dundee City 2002 Age 13 (%)	Dundee City 2002 Age 15 (%)				
Last occasion of drinking; percentage drinking during the last week (SALSUS)	17	44				
Ever been drunk; percentage reporting more than 10 times (SALSUS)	8	20				
Consumed five or more drinks on the same occasion in last 30 days; percentage reporting 4 or more times (SALSUS)	8	18				
Usual drinking frequency; percentage reporting once a week or more (SALSUS)	14	37				
Indicator(s)	1997-98	1998-99	1999-00	2000-01	2001-02	2002-03
Dundee City Hospital Admissions for acute intoxication for those aged 0-24 (NAIR)	76	80	112	103	88	83

D.3.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. *'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'*.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing /partially		
Dundee CHP in Partnership with Dundee DAAT will explore a variety of training and operational developments related to Screening and Brief Interventions.	√			See update p. 20 above	
Support the establishment of the Direct Access service in Dundee	√			See update p. 20 above	
Develop and standardise performance frameworks for all service providers in Dundee	√			See update p. 20 above	
Act on the mapping exercise information to streamline and co-ordinate all drug and alcohol prevention activities in Dundee	√			See update p. 21 above	
Develop a governance protocol in relation to prevention and training in Dundee	√			See update p. 21 above	
Develop Operation Dry-up to include multi agency involvement			√	See update p. 24 above	
Develop and implement 3 year Strategic Action Plan for Services to children, young people and their families affected by drug and alcohol misuse.			√	The 3-year strategic plan is under development. A consultation event has will take place in August 2007 to develop a 3-year action plan and key priorities. Completed by Autumn 07.	
Children's services directory	√			The Directory includes details of services to	

				children, young people and their families affected by substance misuse. Contents updated regularly	
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D.3.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
'Kick it Kick off' project: programme includes sessions about the consumption of alcohol and anti-social behaviour	On going	Diversionary activity offered to assist young people in healthy lifestyle choices
The Corner Young People's Health and Information Services (11 – 25 years old) provide drug/alcohol awareness and/or support from the city centre drop-in base and through extensive health outreach work across the city.	On going	Young People provide with accurate information regarding drugs/alcohol to enable healthy choices to be made. Support provided to young vulnerable people
Developed a protocol for children and young people at risk through their own behaviour	Planned implementation to take place over next 12 months following model that proved successful in the launch of 'Getting Our Priorities Right'. This will include evaluation.	Consistent responses from agencies and higher level of partnership working.
Dundee City Council Education Department launched a new Health Education Programme (including revised drug and alcohol lesson programmes) for all Secondary Schools	On going	Information and awareness
Drama performance and workshops delivered to 1,200 S3 pupils in secondary schools and off-sites in Dundee	2006-2007	Information and awareness
Recruitment of Alcohol & Drug Staff Tutor	Until August 08	Staff tutors to work with secondary schools and feeder primaries. Activities to date include -Briefing provided to 9 out of 10 secondary school management teams on substance misuse and issues for schools -Training sessions provided for Newly Qualified Teachers as part of programme for those in probationary year-Reviewing and updating guidelines for schools on drug related incidents, including alcohol- Input on health weeks in schools for pupils in P 5 & 6, including information and display evenings- Further planned training for staff includes externally facilitated awareness raising and learning on substance misuse for staff in and beyond the classroom, including methodology for teachers in working with groups and individuals.

A research project focussing on young people's perception of risk was undertaken in 2006. The research aimed to identify and raise awareness of any age related differences in the perception of risk.	2006-07	Greater understanding of the issues
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D.3.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Complete the DAAT 3-year strategic plan and action priorities	Dundee DAAT	Autumn 2007
Building on the small research project undertaken in 2006, the potential for a large scale research project into young people's perception of risk will be explored.	KTC	2007-08
Complete and launch the protocol for multi-agency working with young people who put themselves at risk through their own behaviour.	Children & Young People Subgroup / DAAT	May 2007
The Subgroup on Children and Young People who put themselves at risk through their own behaviour will develop and pilot training sessions to professionals around working with risk behaviour	Children & Young People Subgroup / DAAT	4 half-day sessions by March 2008 with follow up events to determine impact on practice.
Evaluate the implementation of the protocol for multi-agency working with young people who put themselves at risk through their own behaviour.	Children & Young People Subgroup / DAAT	By October 2008
Review Drugs Education Curriculum for S1 – S6	Staff Tutor / Education Department	April – June 2007
Implement a performance management framework and reporting structure for the Children and Young People's sub group reporting to the DAAT, CYPPC, Integrated Children's Services Strategic Planning Group and the Child Health Strategy Group.	Children & Young People Subgroup	October 2007

Help to ensure national standards are reflected in all Service Level Agreements	DAAT Support Team	
Develop and implement an integrated model of needs assessment to ensure service development and delivery is based on best information	Children & Young People Subgroup/DAAT	December 2007
Produce an annual report on the output of sub group based on the agreed shared Performance Improvement Model.	Children & Young People Subgroup	December 2007
Develop an information pack for professionals to highlight young people's perceptions of risk	Children & Young People Subgroup	On-going
Develop and implement a user involvement strategy to gain the views of children, young people and parents to improve service planning, development and delivery.	Children & Young People Subgroup	December 2007
Co-ordinate of activity around children and young people affected by domestic abuse, those where there are welfare and protection issues and those affected by parental substance misuse, through relevant membership of key strategic planning and task groups and regular meetings of Lead Officers	Children & Young People Subgroup	On -going

D.4 ADAT Progress – Prevention, Education and Young People

National Priority: Reduce the proportion of young people reporting use of illegal drugs.

Target: Reduce proportion of under 25's reporting use of illegal drugs in the last month and previous year substantially, and heroin use by 25% by 2006.

D.4.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national target
2. performance over the last 5 years (in statistics)

Indicator(s)	2001-02	2002-03	2003-04	2004-05
New individual patients/clients in Dundee City aged under 25 reported to the SDMD	98	99	124	160

Indicator(s)	2000-01	2001-02	2002-03	2003-04	2004-05
New individual patients/clients in Dundee City reporting heroin use in the last month (SDMD)	59	73	88	199	248
Percentage aged under 15 years	-	2.7%	-	0.5%	-

Percentage aged 15-19	8.5%	26.0%	9.1%	10.1%	10.1%
Percentage aged 20-24	45.8%	26.0%	29.5%	34.7%	37.1%
Indicator(s)	Under 15		15-19		20-24
Age when first started using illicit drugs 2004/05; percentage in Dundee City that were aged under 25 (SDMD)	41%		44%		8%
Age at onset of problem drug use 2004/05; percentage in Dundee City aged under 25 (SDMD)	4%		47%		28%
Indicator(s)	Dundee City 2002 Age 13 (%)	Dundee City 2002 Age 15 (%)			
Pupils taking drugs; percentage taking drugs in last month (SALSUS)	4	18			
Pupils taking drugs; percentage reporting using heroin in the last year (SALSUS)	0	1			

D.4.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. *'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'*.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing /partially		
Dundee CHP in Partnership with Dundee DAAT will explore a variety of training and operational developments related to Screening and Brief Interventions for alcohol misuse	√			See update p. 20 above	
Support the establishment of the Direct Access service in Dundee	√			See update p. 20 above	
Develop and standardise shared outcomes and local improvement targets within performance frameworks for all service providers in Dundee	√			See update p. 20 above	
Act on the information provided through the mapping exercise to streamline and co-ordinate all drug and alcohol prevention activities in Dundee	√			See update p. 21 above	
Develop a governance protocol in relation to prevention and training in Dundee	√			See update p. 21 above	
Refocus of the Key to Change project in line with the evaluation and identified need	√			Single management implemented leading to improved service provision	

D.4.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
Identify local need and preference for STRADA courses by circulating a questionnaire to all local agencies. Compile annual programme of STRADA Courses in conjunction with STRADA Trainer.	6 weeks to circulate and analyse questionnaires to enable a yearly timetable of courses to be compiled. Yearly	Plug gaps in basic level training and meet local needs 25 training days for the year, 11 basic courses ran and 2 x 3 day Practice based workshops with specialist local practitioners.
Aberlour Outreach service and TCA have developed a Kinship support group for extended family members who are looking after children affected by parental substance misuse.	12 week pilot ends June 2007	To be determined at the end of the pilot
Aberlour Outreach service, in partnership with Red Cross, have been offering First Aid/Self esteem workshops for children. These are weekly workshops focusing on developing first aid skills	April – June 2007	Increase self-esteem and resilience of children
Developed a protocol for children and young people at risk through their own behaviour	April 2008	The final report will be going to the next C & YP substance misuse Group on 24 th May, and from there to the DAAT, CYPPC, CHSG and Integrated Children's Planning Planned implementation to take place over next 12 months following model which proved successful in the launch of 'Getting Our Priorities Right'. This will include evaluation.
Children's Services Directory	April 2008	Directory in place which includes details of services to children, young people and their families affected by substance misuse. Contents updated regularly

D.4.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
The New Direct Access service will sign post young people to appropriate services and will give information to parents and carers	Direct Access service	On going
The new Prevention, Training and Education subgroup will co-ordinate prevention and training interventions in the City	Dundee DAAT	On going
Key to Change will increase the number of self referrals by young people aged 12 - 17	KTC	On going
Evaluate the Dundee Aberlour Outreach service	Aberlour, Lloyds TSB, Scottish Executive and Dundee DAAT	By December 2007

D.5 ADAT Progress – Prevention, Education and Young People

National Priority: Reduce harm to children affected by substance misusing parents/carers through improved multi-agency support to parents and children.

D.5.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6
Percentage of new clients in Dundee City living only with dependent children	SDMD	13%	11%	8%	10%
Percentage of new clients in Dundee City living with dependent children and parents	SDMD	1%	1%	2%	1%
Percentage of new clients in Dundee City living with dependent children and spouse/partner	SDMD	10%	13%	13%	9%
Percentage of new clients in Dundee City with a presenting issue of pregnancy	SDMD	4%	4%	5%	13%

D.5.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. *'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'*.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing /partially		
Monitor the use of the Dundee Getting Our Priorities Right protocol together with the Children & Young People Protection Committee	√			Role out of GOPR Workshops to 300 key staff. Programme evaluation indicated significant attitudinal change impacting positively on practice.	
Support the development of the Direct Access and Moving On services	√			See update p. 20 above	
Support the research by academics from Dundee University looking at the emotional deficits experienced by children of drug using parents		√			Funding application made to the Economic and Social Research Council. Application was rejected; alternative funders will be sought in future.
Further develop performance management information framework, which will report to DAAT and CYPPC, and will be used to drive continuous improvements.	√			See update p. 20 above	
Children's Services Directory	√			Directory in place which includes details of services to children, young people and their families affected by substance misuse. Contents updated regularly.	

D.5.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
Hidden Harm event was jointly organised by the Dundee DAAT and CYPPC Feb 2007	22 nd February 2007	Action points and priorities from the day will be develop and implement
The Dundee City CYPPC completed development and began a pilot of 'Charterman [®] ' pupil education programme in Dundee schools	On going	Increased awareness
The Dundee CYPPC revised the Child Protection Multi-Agency Guidance published and supported by comprehensive staff development programme	April 2007	Coordinated service delivery – improved joint working
Aberlour Outreach service and Tayside Council on alcohol have developed a Kinship support group.	12 weeks pilot	Dependant on outcomes of pilot
Following on from successful joint event hosted by DAAT and CYPPC roll out 'Getting Our Priorities Right' to classroom teachers as this was recognised as a gap	On going	Increase awareness of classroom teachers of impact of parental substance misuse on children and young people, improve communication and information sharing and improve outcomes for children and young people
Evaluate and redesign the New Beginnings Service which works with pregnant women who misuse substances	On going	Improve the care pathway of women who misuse substances who are pregnant during their pregnancy and after birth. Improve the outcomes for babies of women who misuse substances
Explore service delivery redesign to achieve better outcomes for children of substance misusing parents by better integration of adult health, social work and voluntary sector organisation services using a lean system approach.	October 2007	Improved outcomes for children of substance misusing parents

D.5.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
The Dundee CYPPC will implement public awareness-raising campaign to raise the profile of the message that 'It's Everyone's Job to make sure I'm alright'	Dundee City CYPPC	April 2008
The Dundee CYPPC will deliver multi-agency staff development programme to c1100 members of staff. All programmes relevant to reducing harm to children	Dundee City CYPPC	April 2008
The Children & Young People Affected by Parental Substance Misuse Task Group will develop and pilot a section within a single shared assessment on parenting capacity.	C & YP subgroup / DAAT	By December 2007
Determine strategic actions to be taken in respect of parents of children on the CP register where household characteristics indicate dual diagnosis of mental health and drug misuse problems	Children & Young People Subgroup	October 2007
Determine strategic actions to be taken in respect of parents of children on the CP register where household characteristics indicate dual diagnosis of mental health and alcohol problems	Children & Young People Subgroup	October 2007
Facilitate improved co-ordination of activity around children and young people affected by domestic abuse, those where there are welfare and protection issues and those affected by parental substance misuse, through relevant membership of key strategic planning and task groups and regular meetings of Lead Officers	Children & Young People Subgroup	On -going
Implement 'Child Protection Messaging' as part of the implementation of the national electronic information sharing agenda through the work of the Dundee Data Partnership	Children and Young People sub group	On going
Implement multi agency Child Protection training on Information Gathering/Sharing, Assessment and Care Planning	CYPPC and Children and Young People sub group	June 2007

D.6 ADAT Progress – Provision of Support and Treatment Services

National Priority: Reduce waiting times for drug treatment and rehabilitation services

D.6.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	Apr-Jun 04	July-Sept 04	Oct-Dec 04	Jan- Mar 04	Apr-Jun 05	July-Sept 05	Oct-Dec 06
Percentage of clients receiving an assessment appointment within 21 days of referral	45%	17%	19%	19%	20%	30%	43%

D.6.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. *'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'*.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing /partially		
To achieve no waiting list in Dundee, high risk or standard risk via redesign of treatment services in Tayside. Working 100 per cent to 28-day assessment (7 days if urgent).			√	<p>The outstanding waiting list of standard people at TDPS has been cleared. People who had been waiting up to 2 years for treatment are now actively in treatment. A plan was put in place to work through this waiting list with a target of completion of April 2007. This has been achieved.</p> <p>The standard of 28 days for assessment and 7 days for emergency assessment continues to be adhered to, more recently the time associated with this has reduced.</p>	Outstanding issues to be addressed over next 3 months relate to the emphasis now being on the management of new referrals and allocation of new cases in this service. Work is ongoing with partner agencies with an aim of making this pathway seamless and timely in terms of intervention. The main influence on the achievement of these plans sits with staffing levels and the process of changing practice within the relevant teams. Key partners are the Direct Access Service, NHS Harm Reduction Services and the Time Tay Change Element of service (NHS/SAMH Collaborative).
To be able to record and report more accurately via new IT system on activity including information associated with Waiting Times Initiative			√	<p>Lack of clarity and coherent information which can be accessed easily.</p> <p>Paper systems remain to ensure back up.</p>	<p>Developing IT systems which are able to accurately collate the information required, has been a challenge. The systems developed to date have been generic systems that need to be adapted. This work is ongoing and gradually improving.</p> <p>The other factor in the success of these systems has related to the ability of the users of the system. Intensive training has taken place and is</p>

					ongoing with the aim of achieving success.
To ensure all the relevant agencies in Dundee city contribute accurate waiting time information			√	4 additional agencies in Dundee (including alcohol agencies) report to the Scottish Executive waiting time initiative	Individual work currently takes place with 2 additional agencies who will begin contributing to the WT initiative from the second quarter of 2007
Work individually with agencies to analyse their own waiting-time information			√	DAAT Information Officer is currently developing a local template with which to report individual information to agencies.	As soon as the template is completed and piloted individual reports will be provided to all participating agencies

D.6.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
DAAT Support Staff worked individually with agencies to ensure information provided to the WT initiative is accurate	On going	More agencies contribute to the WT initiative and the information provided is more accurate.

D.6.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Monitor referrals to Eclips and ensure there are clear pathways to move clients from mainstream services on to employability service	DAAT Support Team	On going
Monitor referral rates to the Direct Access Service	DAAT Support Team	On going

Encourage and support more local agencies, including alcohol agencies, to contribute to the Scottish Executive waiting times initiative. Work with local agencies to analyse information provided through WT initiative and use such information for their own development purposes	DAAT Support Team	On going
Time-Tay-Change will work to ensure clients do not wait more than 28 days from referral to an appointment of key worker	Time-Tay-Change / SAMH	July 2007

D.7 ADAT Progress – Provision of Support and Treatment Services

National Priority: Increase the number of drug misusers in contact with treatment and care services.

Target: Increase the number of drug misusers in treatment and care services by 10% by 2008.

D.7.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national target
2. performance over the last 5 years (in statistics)

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6
New individual patients/clients in Dundee City	SDMD	235	332	378	604

Indicator	Data Source	2007
Estimated number of people in Tayside currently on Methadone	Tayside Drug Problem Service	1300

D.7.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. *'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'*.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing /partially		
Conduct a survey with service users and carers, and develop a User Involvement Action Plan			√	An extensive consultation took place with service users in relations to all Blood Born Viruses services. Information from consultation was used to inform the redesign of BBV services.	
Develop and standardise shared outcomes and local improvement targets within performance frameworks for all service providers in Dundee	√			See update p. 20 above	
Support the development and monitor the effectiveness of the Direct Access service			√	See update p. 20 above	

D.7.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
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Tayside Drug Problem Service held a number of consultation meetings with service users. The aim was to update clients about changes to the service and get feedback regarding the treatment and care process (including assessment, treatment and discharge processes).	2006/07	Service development and restructure are informed by views of clients.
Expansion of the Arrest Referral service.	2007/8	Dedicated medical service providing access to prescribing will enable fast track access for appropriate clients to substitute medication and health interventions.
DTTO staff have improved liaison with Social Enquiry Report authors	2006/07	Greater co-ordination of service provision

D.7.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Increase proactive relationship with the media	DAAT Support Team	On going
Key to Change will aim to increase number of self-referrals by young people	KTC	On going
KTC will continue to improve Transitional Care Pathways from young people to adult services	KTC	On going
KTC and Barnardo's will expand the Fighting Against Child Exploitation (FACE) project to young people age 16 and over.	KTC / Barnardo's	On going

D.8 ADAT Progress – Provision of Support and Treatment Services

National Priority: Increase the number of drug misusers successfully completing treatment.

D.8.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	Jan-Mar 2005	Apr-Jun 2005	July-Sept 2005	Oct-Dec 06
Percentage of planned discharges in Dundee City who were engaged with the service for more than 12 weeks (DAAT Waiting Times Framework)	23%	40%	38%	50%
Percentage of planned discharges in Dundee City who were retained in treatment for more than 12 weeks (DAAT Waiting Times Framework)	80%	50%	32%	

D.8.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. *'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'*.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing /partially		
Develop outcome measures that will be used by all agencies in Dundee	√			See update p. 20 above	
Commission Partners in Evaluation Scotland to provide technical assistance to individual agencies	√			2 half-day seminars delivered. A monitoring and outcomes reporting templates developed and piloted (during January-March 07) by all agencies. A review and consultation seminar delivered 9 th May	
Conduct a survey with service users and carers, and develop a User Involvement Action Plan			√	See update p. 46 above	
Support the development of the Moving On service in Dundee	√			The new moving on service is called ECLIPS. Project manager and staff recruited throughout July / August and referrals accepted from September 06. Outcome monitoring is currently being piloted for ECLIPS and in 2007/08 the service will report on both soft and hard outcomes for clients.	

D.8.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity
The Tayside Process of Care group has developed multi-agency care pathways.	On going (lead by the 3 Tayside locality Substance Forums)	Clear care pathways and referral routes have been identified and mapped for the use of staff from a range of agencies. This would improve clients' transition between services and help identify gaps as they emerge.
The Dundee substance forum had a development day to re-examine its aims and objective and develop a focused action plan	18 th October 06 and on going	The Substance Forum confirmed its aims and objective, clarified its relationship with the Dundee DAAT and is currently in the process of developing a clear work plan for 2007-08.
The Dundee DAAT hosted and supported the Post Graduate Certificate course delivered by STRADA.	July 2007 – December 2007	10 members of staff from a range of Dundee agencies attended the course. Feedback indicated those who attended increased their competence in service delivery

D.8.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Develop care pathway for Criminal Justice Service	CJA	April 2008
Time-Tay-Change will establish service user involvement opportunities to ensure clients have the forum to feedback and influence the service provided. This increased involvement should assist the retention of users in the service.	Time-Tay-Change / SAMH	2007/08
The Dundee Substance Forum will take forward the work of the Tayside Process of Care group and progress the implementation of care pathways	Substance Forum	2007/08

D.9 ADAT Progress – Provision of Support and Treatment Services

National Priority: Increase the number of people recovering from drug and alcohol problems entering training, education and employment.

D.9.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

*** See Eclips Treatment Table**

D.9.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. *'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'*.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing /partially		
Support the development and monitor the effectiveness of the new Moving On service	√			See update p. 49 above	

in Dundee					
Develop clear outcome measures and performance indicators to monitor the development of the Moving On service	√			Eclips is participating in the Dundee-wide process of developing and reporting on outcomes and monitoring information. See update above	

D.9.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity

D.9.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Continue to monitor the rate of referrals to Eclips and support the service to deliver on its outcomes	DAAT Support Team	On going
Time-Tay-Change will form closer relationships with education and employability agencies with a view to providing minimum 3 joint agency groups by end 07-08.	Time-Tay-Change / SAMH	2007 / 08

Time-Tay-Change will incorporate a certificated education/training element to our home-run groups and will link with to Dundee College cooksafe course, and to University of Abertay catering dept to train clients in healthy eating skills	Time-Tay-Change / SAMH	2007 / 08
KTC will increase the numbers of NEET young people accessing Eclips	KTC	2007 / 08

D.10 ADAT Progress – Provision of Support and Treatment Services

National Priority: Reduce the number of drug related deaths.

Target: Reverse the upward trend in drug-related deaths and reduce the total number, by at least 25% by 2006.

D.10.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	1999	2000	2001	2002	2003	2004	2005
Number of drug-related deaths in Dundee City	12	7	13	6	9	11	11

D.10.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. *'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'*.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing /partially		
To develop a proforma to allow the individual examination of each drug related death occurring in Dundee City	√			Greater involvement across agencies	
To systematically collate data from all the relevant agencies about near-deaths experience			√	On going discussions between Tayside Police and local agencies regarding the development of a protocol for information sharing	
To create better links with the local Transitional Care service			√		Redesign of service provision
To implement the overdose-prevention training strategy	√			Strategy completed and an implementation plan is being developed.	
To develop a protocol for multi-agency working with young people who put themselves at risk through their own behaviour. A report to be considered jointly by the DAAT and CYPPC who will agree on joint action to be taken	√			The final report will be going to the next C & YP substance misuse Group on 24th May, and from there to the DAAT, CYPPC, CHSG and Integrated Children's Planning.	

			√		
To ensure effective links are made to the local CHOOSE Life Strategy				An expression of interest was made to the Choose Life Co-ordinator. The planned activity did not fit into the Choose Life remit	

D.10.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity

D.10.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Launch and begin implement the Overdose prevention Training strategy	3 Tayside DAATs	2007-08
Organise a joint Tayside seminar with local lead clinicians to discuss their work on drug-related deaths	Dundee DAAT Support Team	Autumn 2007
Facilitate and support the development of a local protocol for sharing information between Tayside Police and local agencies regarding individuals who have experienced non-fatal overdose	Tayside Police	April 2008

D.11 ADAT Progress – Protection, Controls and Availability

National Priority: Reduce the proportion of under 25's offered illegal drugs.

Targets:

- Reduce the proportion of under 25's who are offered illegal drugs significantly, and heroin by 25%, by 2006.
- Continuous improvement in the weight of Category A drug seized.
- Continuous improvement in the detection of offences for supply or intent to supply Category A drugs.

D.11.1 Performance

Complete the table below, on the basis of available information, detailing:

1. the national and local indicator(s) you are using to measure the national priority
2. performance over the last 5 years (in statistics)

Indicator(s)	Dundee City 2002 Age 13 (%)	Dundee City 2002 Age 15 (%)
Percentage of pupils ever offered drugs (SALSUS)	27	60
Percentage of pupils ever offered stimulants (SALSUS)	14	29
Percentage of pupils ever offered opiates (SALSUS)	4	6

Percentage of pupils who reported it to be fairly or very easy to get drugs (SALSUS)	26	57
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Local figures provided by Tayside Police:

Drugs figures (weight total of seized drugs) for the period 01/01/2006 – 31/01/2007

Drug	Value (weight in grams)
Cocaine	7127.86g
Heroin	12703.61g
Ecstasy Powder	17.381g
Ecstasy Tablets	19420.5 Tabs
Methadone	228.01 mls
Methadone Tablets	1 tab
Morphine Mls	1 ml
Morphine Tablets	112.5 Tabs

Figures for drugs charges for the period 01/01/2006 – 31/01/2007

Charge/Section of Misuse Of Drugs Act 1971 (MODA)	Number of offences reported in each MODA category
Possession (section 5, subsection 3)	1288
Supply/offer to Supply (section 4, subsection 3 and a)	19
Concerned in Supply (section 4, subsections 3 and b)	209
Possession with Intent (section 5. subsection 3)	170

D.11.2 Key achievements in 2006-7

Objectives should be provided in SMART format. SMART means the objective is Specific, Measurable, Achievable, Realistic and Time bound. Describe the objective in as few words as possible e.g. *'Homelessness service to provide first aid training to 20 clients by March 2006. Clients to provide feedback on training through a brief questionnaire'*.

Briefly summarise the key achievements in 2006-7					
SMART objective for 2006-7 (taken from 2006-7 CAP)	Was this achieved? (please tick)			Impact at local level	Reason(s) why objective not achieved
	Yes	No	Ongoing /partially		
<p>The Tayside Police prevention, intelligence and enforcement priorities in relation to Class A drugs for 2006/7 are as follows:</p> <p>Prevention Priorities:</p> <ul style="list-style-type: none"> ▪ Impact upon demand for Class A drugs through education and awareness ▪ Support and participate in multi-agency and reduction harm projects <p>Intelligence Priorities:</p> <ul style="list-style-type: none"> ▪ Intelligence gathering on activities of Class A drug dealers. ▪ Intelligence monitoring of drug dealers to ensure swift intervention to disrupt activity. ▪ Intelligence gathering on transport, routes and unusual packaging. 			√	<p>Class A drug trafficking remains on the Scottish Police Control strategy and is therefore replicated within the Tayside Police Force and Divisional Control strategy.</p> <p>Enforcement Activity continues to be prioritised as intelligence led and focussed through Tactical Co-ordinating meetings. Action is targeted at individuals identified as dealers and premises where such activity takes place.</p> <p>Individuals continue to be found in possession of small personal quantities of drugs when detained or apprehended for other offences.</p> <p>This year the continuing rise in availability of Heroin on the streets of Dundee is a major concern. The associated impact on the safety of the general community includes:</p> <ul style="list-style-type: none"> • deaths from Overdoses • non fatal overdoses in public and private places and its impact on the emergency services. • the rise of associated acquisitive crime to pay for drug habits- particularly concerning is 	

<p>Enforcement Priorities:</p> <ul style="list-style-type: none"> ▪ Disrupt the operations of organised criminal groups involved in the emergence of crack cocaine. ▪ Arrest and report those involved in Class A drug trafficking particularly Heroin. <p>Seize drugs and assets of the above groups</p>				<p>a rise in street robberies or "snatch" type thefts</p> <ul style="list-style-type: none"> • unsafe practises by drugs users eg unsafe disposal of needles • community fears regarding the unspecified or unsubstantiated dangers caused by individuals with drug habits. <p>Preventative activity continues to take the form of full participation in partnership activity to reduce Harm. Providing education and awareness to our children, youth, and adult representative communities is also prioritised with support of the Get Real Education DVD and Choices for life events.</p> <p>Reducing the Harm caused by Heroin will be a main priority for Tayside Police in the coming year</p>	
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D.11.3 Please provide detail of any other achievements/initiatives (not detailed above)

Description of activity	Timescale for activity (e.g. ongoing, yearly, etc)	Impact of activity

D.11.4 Planned Action 2007-8

Briefly outline the key actions that you intend to taking during 2007-8. These must be presented in a SMART objective format.

Key actions for 2007-8		
SMART objective	Lead organisation	Timescales
Increase intelligence on drugs mater	Tayside Police	April 2008
Role out the Get Real Education DVD and participate in the Choices for Life Events	Tayside Police	April 2008
Arresting Drug dealers and reducing the availability of drugs	Tayside Police	April 2008

SECTION E:

Drug and Alcohol Direct Spend By Partner Organisations

(See paragraphs 25-29 of the Scottish Executive guidance notes)

E.1 Drug Specific Spend

Tier 1-4	Category of Spend	Scottish Executive Allocation: Drugs 2006-7 (£)	Allocation from Partner Organisation 2006-7 (£)	Partner Organisation e.g. NHS Board/Local Authority etc.	Breakdown of actual spend in 2006-7 (£)	Underspend/ overspend to 31 March 2007 (£)	Projected Spend 2007-8 (£)
1&3	Tayside Drugs Problem Service	1,355,149	806,386	NHS Tayside	2,210,210	+48,675	2,349,000
1&3	Harm Reduction Service		333,466	NHS Tayside	333,338	-128	350,981
	Fairbridge	14,000			13,998	-2	
	Salvation Army	22,500			22,500	0	0
	Aberlour	19,300			19,241	-59	15,000
	Training (Incl STRADA)	14,200			11,961	-2,239	5,000
	Health Intelligence	5,000			5,000	0	5,000
	Arrest Referral						10,000
	Moving on Service	114,094			91,355	-22,739	101,222
	Direct Access Service	126,771					126,771
	Support work	10,173			10,173	0	10,173
	Staff Tutor (25%)						10,000
1	Detox in private institutions			NHS Tayside	10,610	+10,610	11,000
	Total:	1,681,187	1,139,852				2,994,147

Service Tiers:

- 1 Services for the whole community
- 2 Local services that identify and respond to people with substance misuse problems
- 3 Services for people with more complex needs
- 4 Services for people with highly specialised needs

E.2 Alcohol Specific Spend

Tier 1-4	Category of Spend	Scottish Executive Allocation: Alcohol 2006-7 (£)	Allocation from Partner Organisation 2006-7 (£)	Partner Organisation e.g. NHS Board/Local Authority etc.	Breakdown of actual spend in 2006-7 (£)	Underspend/ overspend to 31 March 2007 (£)	Projected Spend 2007-8 (£)
1&4	Inpatient Services	126,000	559,705	NHS Tayside	635,624	-50,081	684,725
1&3	Community Teams		126,070	NHS Tayside	100,353	-25,717	126,070
1&3	Liaison Team	83,000	189,124	NHS Tayside	308,620	+36,496	267,223
	Tayside Council on Alcohol	36,000			36,032	+32	36,032
	Police Alcohol Officer				9,000	+9,000	0
	Direct Access Service	76,000					73,000
	Moving on Service	30,000			22,500	7,500	30,000
	Staff Tutor Post (75%)	30,000					30,000
	Total:	381,000	874,899				1,247,050

Service Tiers:

- 2 Services for the whole community
- 2 Local services that identify and respond to people with substance misuse problems
- 3 Services for people with more complex needs
- 4 Services for people with highly specialised needs

E.3 Combined Drug and Alcohol Specific Spend

(Only for spend which cannot be readily or meaningfully split for either drugs or alcohol and has not been accounted for elsewhere in plan)

Tier 1-4	Category of Spend	Scottish Executive Allocation 2006-7 (£)	Allocation from Partner Organisation 2006-7 (£)	Partner Organisation e.g. NHS Board/Local Authority etc.	Breakdown of actual spend in 2006-7 (£)	Underspend/overspend to 31 March 2007 (£)	Projected Spend 2007-8 (£)
	Total:						

Service Tiers:

- 3 Services for the whole community
- 2 Local services that identify and respond to people with substance misuse problems
- 3 Services for people with more complex needs
- 4 Services for people with highly specialised needs

SECTION F:

ADAT certification of Corporate Action Plan

(See paragraph 30 of the Scottish Executive guidance notes)

This is to certify that the ADAT Chair and partners agree the contents of this Corporate Action Plan.

Sign below:

ADAT Chair _____

NHS Chief Executive _____

Director of Social Work _____

Chair of Dundee Voluntary Action _____