

FORTH VALLEY SUBSTANCE ACTION TEAM ACTION TEAM

CORPORATE ACTION PLAN 2007-8

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SECTION A:

Alcohol and Drug Action Team details and support funding

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
Margaret Anderson	Head of Children & Families and Criminal Justice	Falkirk Council	Falkirk Substance Misuse Forum (Chair)
Maureen Brown	Assistant Chief Constable	Central Scotland Police	
Deirdre Cilliers	Chief Social Work Officer	Clackmannanshire Council	
Jan Clark <i>Representing SPS in FV</i>	Deputy Governor	Cornton Vale (SPS)	
Agnes Douglas <i>representing Community Groups in FV</i>	Project Manager	LADA Link	Process of Care; Family Support Network
Des Friel	Head of Sport, Youth & Support for People	Stirling Council	Stirling Substance Misuse Forum
Jackie Johnston <i>representing Services in FV</i>	Service Manager	Signpost Forth Valley	Process of Care (Chair); Critical Incidence Group;
Elaine Lawlor <i>SAT Support</i>	SAT Co-ordinator	NHS Forth Valley Substance Action Team	SMF Forums, Data Sharing, Critical Incidence Group, HRG, Finance, Monitoring Group
Fiona Mackenzie (Chair)	Chief Executive	NHS Forth Valley	
Claire McIntosh <i>Clinical Guidance</i>	Consultant in Psychiatry	FV NHS Community Alcohol & Drugs Service	Health Reference Group; Prescribing & Treatment sub-group
Kathy O'Neill <i>Representing CHP's</i>	Interim CHP Director	FV NHS Primary Care Operating Division	Health Reference Group (Chair)

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

Clackmannanshire Substance Misuse Forum

Falkirk Substance Misuse Forum

Stirling Substance Misuse Forum

Health Reference Group

Monitoring Group (Signpost, Alcohol Link & FV-tox)

Finance sub-group

Data Sharing Group

Critical Incidence Group

Tobacco Action Group

Process of Care Group

- **Employability sub-group**
- **Children and Young People's sub-group**
- **Prescribing & Treatment sub-group**
- **Family Support Network**

Forth Valley Service Users Group

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

NHS Forth Valley
Big Lottery
Central Scotland Police
Clackmannanshire Council
Falkirk Council
Stirling Council
Scottish Prison Service
Fife & Forth Valley Criminal Justice Authority
Barnardo's (Freagarrach)
Aberlour
Lloyds TSB
Robertson Trust
Coalfield Regeneration
Artlink
ASC
Signpost
Tudor Trust
Locals Against Drug Abuse (LADA)
Stirling Family Support Service (SFSS)
Grangemouth Family Support
Salvation Army

A.2 ADAT support funding

A.2.1 Total Support Allocation:

2006-7 allocation (£): 161,413

Carry forward (£): 0

Total (£): 161,413

A.2.2 Breakdown of Support Allocation Spend

Category of Spend	Scottish Executive Funding Expenditure (£)	Funding from other sources (£)	Total (£)
Salaries	94,475	36,572	131,047
Staff costs	7,148	0	7,148
Forum/meetings	4,597	305	4,902
Seminars/conferences/events	5,473	0	5,473
Training	645	0	645
Miscellaneous spending	49,075	9,786	58,861
Total	161,413	46,663	208,076

SECTION B:

Allocation of resources and provision of services

B. Allocation of resources and provision of services

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

We continue to market and promote STRADA training portfolio across the ADAT area.
Further development of the GP Prescribing Service
Development of an opiate detoxification service within the voluntary sector
We will deliver a multi-agency evaluation training event to assist our partners in corporate action planning.

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

NHS local delivery plan
NHS Health Plan
ACPOS Drug Strategy
Health and Homelessness 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)
GP Prescribing Service (GPPS) – Needs analysis for GPs; April 2007	<ul style="list-style-type: none"> • GPPS should be funded as part of National & Local NHS Enhanced Service • GPPS to be part of NHS Local Delivery Plan • Continue to offer training to GPs, Community pharmacists and keyworkers • Develop the GPPS to incorporate ‘Hubs’ for areas where GPs are not willing to participate in GPPS (2007/08)

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

Through the SAT data sharing group we are able to map and monitor local data which in turn informs us of local need. This aids the planning and commissioning of needs led services.

We have undertaken a gap analysis within the services to identify areas where future resource should be directed, we have sought the views of all stakeholders in this process so that we can demonstrate transparency in the decision making process locally.

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

A needs analysis was due to be carried out to ascertain the level of need for family support services in Forth Valley during 2006/7, this has now been programmed for 2007/8 due to internal difficulties within the service hosting the work.

SECTION C:
Support and Treatment Tables

CADS - Drugs	D	£935,469(N))	117	458	343 8	36	4	3	3	3	4	4	4	4	4	Y	N	Y	Y	Y	N	Y	Y	N	Y	Y	Y	N	N	N	N	N	Y
Alcohol Liaison Service started Oct06	A	£39,500(N)					4	4	3	3	4	4	4	5	4	N	N	N	Y	N	N	N	Y	Y	Y	Y	Y	N	N	N	Y	N	N
GP Prescribing Service (GPPS)	D	£242,680	100	90	276 4	4	5	4	5	4	4	4	4	5	4	x	x	x	x				x	x	x	x	x			x	x	x	
LADA	DA	£16,300(L) £13,000(O) £25,000(O) £69,300	105	280	667	N/A	4	4	4	4	4	4	4	3	4				x						x	x	x	x		x			
Freagarrach Stirling, Alcohol and Drug Service	DA	L £104,604 O £18,000	12	31	275	25	1 & 2									1		1	1		1		1		1	1	1	1	1	1	1	1	1
Stirling Family Support	D/A	£31,000 L £15,000 O £15,005 N	164	n/a	283	n/a	4	4						4	4				x					x	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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Support and Treatment Tables

Table 2 – Projected/Actual Numbers for Jan – Mar 07:

NON-RESIDENTIAL SERVICES IN ACTION TEAM AREA:

DEDICATED DRUG AND/OR ALCOHOL SERVICE	REMIT	PROJECTED/ACTUAL NUMBERS Jan –Mar 07				SPECIFIC GROUPS (Enter code 1-5* below)													TYPE OF SERVICE PROVIDED																
		New Cases	No. of Actively Managed Clients	Total Attendances	No. of Planned Discharges	Under 16s	Women	Pregnant Women	Dual Diagnosis	Ethnic Minority Groups	Equality Groups	Psychostimulant Users	Homeless People	Over 65's	Detoxification	Day-Care	Substitute Prescribing	Outreach Clinics	Needle Exchange	Criminal Justice SW Intervention	Prison Throughcare & Aftercare	Aftercare	Education/Training/Employment	Advice & Information	Counselling (Group and 1-1)	Home Visits	Family Support	Volatile Substance Abuse	Mutual Support Groups	Brief / Minimal Interventions	Community Rehabilitation	Crisis Management			
Alcohol Support and Counselling	DA	176	257	1089	33	2	2	4	4	4	4	4	3				√		√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√
Signpost Core Service	D	60	90	300	570	2	2	2	2	2		2	2			x							x		x			x			x			x	
Alcohol Link	A	78	90	400	60	2	2	2	2	2		2	2										x		x					x			x		
FV Tox (Signpost)	D	14	17	308	8	2	2	2	2	2		2	2	2	x	x							x										x		
HR Service (Signpost)	D	20	168	345	20	2	2	2	2	2		2	2	2				x					x					x			x		x		
Arrest Referral	(DA)	105	0	195	0		5	5	5	5		5	5	5									x						x			x			
LADA	DA	29	71	48	N/A	4	4	4	4	4	4	4	3	4			x					x	x	x	x	x			x						
DTTO	D	6	26	425	0	5	3	2	2	4	4	4	4	4	Y	N	Y	Y	N	Y	N	Y	N	Y	Y	Y	Y	Y	N	N	N	N	Y		
FAST TRACK	D	14	112	1208	7	5	3	2	2	4	4	4	4	4	Y	N	Y	Y	N	Y	N	Y	N	Y	Y	Y	Y	Y	N	N	N	N	Y		
CADS - Alcohol	A	216	324	1372	66	4	3	3	3	4	4	4	3	Y	N	N	Y	N	N	N	Y	N	Y	Y	Y	Y	N	N	N	Y	N	Y			
CADS - Drugs	D	37	461	1783	8	4	3	3	3	4	4	4	4	Y	N	Y	Y	Y	N	Y	Y	N	Y	Y	Y	Y	N	N	N	N	N	Y			
Alcohol Liaison	A			117		4	4	3	3	4	4	4	5	4	N	N	N	Y	N	N	N	Y	Y	Y	Y	Y	N	N	N	Y	N	N			
GPPS	D	9	93	2845	3	5	4	5	4	4	4	4	5	4	x	x	x	x				x	x	x	x	x	x			x	x	x			

Freagarrach Stirling alcohol and drug service	DA	10	28	170	8	1									1		1	1		1		1		1	1	1	1	1	1	1	1	1	1	1	1	1
Stirling Family Support	D/A	70	n/a	353	n/a	4	4	4					4	4										x	x	x	x	x	x	x	x	x	x		x	

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CADS Drugs	D		50	165	400	530 0	4	3	3	3	4	4	4	4	4	Y	N	Y	Y	Y	N	Y	Y	N	Y	Y	Y	N	N	N	N	N	Y
Alcohol Liaison	A		120	150	100	460	4	4	3	3	4	4	4	5	4	N	N	N	Y	N	N	N	Y	Y	Y	Y	Y	N	N	N	Y	N	N
GPPS	D	O £242,680	15	36	120	768 0	5	4	5	4	4	4	4	5	4	x	x	x	x				x	x	x	x	x	x			x	x	x
LADA	DA	£16,300(L) £15,300(O) £13,000(O)	N/A	160	400	800	4	4	4	4	4	4	4	4	4				x				x	x	x	x	x		x				
Freagarrach Stirling alcohol and drug service	DA	LA and O – funding arrangements TBC	35	40	60	500	1									1		1	1		1		1	1	1	1	1	1	1	1	1	1	1
Stirling Family support	D/A	£90,000 (O)	n/a		N/a	300	4	4	4					4	4									x	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 2006-07.</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	
CADS/AMH Dedicated alcohol detox bed – Ward 1 FDRI (from Nov 2006)	Inpatient alcohol detoxification	1	13 (Nov to Dec)	1 3	52	1 3	1 3	52	

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	
Ronachan House	D&A res rehab	Campbeltown - Argyll	2	2	5	2	2	3	
Brenda House	D&A Res Rehab	Edinburgh	1	0	0	1	0	0	
Rainbow House	D&A Res Rehab	Glasgow	2	1	5	1	0	3	

SHARED CARE: (Drugs Only)

Number of GP Practices signed up to local shared care scheme	15 (30 GPs)	
Number of pharmacists signed up to local shared care scheme	31	
Number of dispensings of methadone mixture	17312 (projected April06-March07)	
Number of supervised dispensings of methadone mixture	11775 (projected April06-March07)	

NEEDLE EXCHANGE: (Drugs Only)

SERVICE TYPE	NUMBER OF FACILITIES	NUMBER OF NEEDLES / SYRINGES DISTRIBUTED	NUMBER OF NEEDLES / SYRINGES RETURNED
Specialist	11	135820	125790
Outreach			
Community Pharmacies	15	60,000	42,000

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		
CHILDREN'S SERVICES		

SECTION D:
ADAT Progress

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

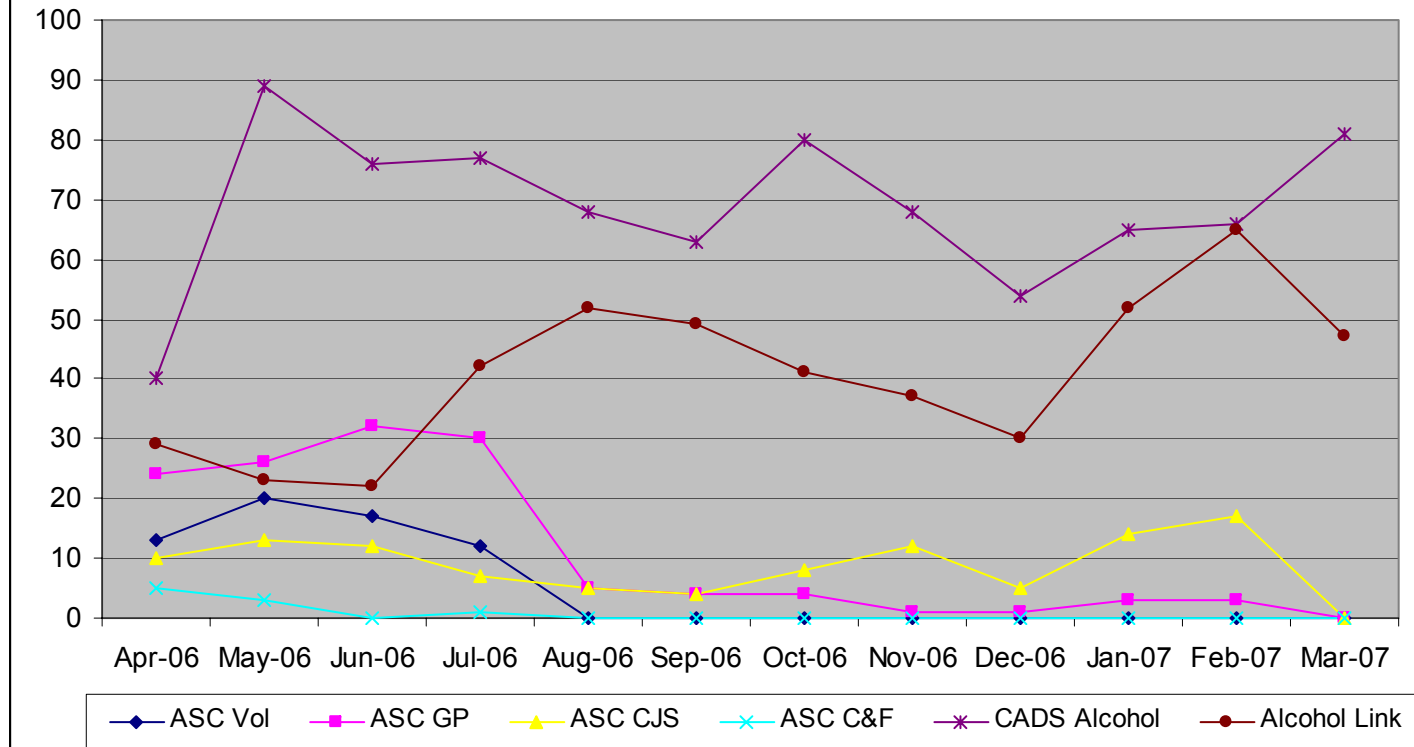
Complete the table below, on the basis of available information, detailing:

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	2006-7
% Men consumed 4 or more units on heaviest drinking day	Scottish Health Survey 2003		49			
% Men 8 or more units			29			

% Women consumed 3 or more units on heaviest drinking day	Scottish Health Survey 2003		28			
% Women 6 or more units			12			
Hospital Admissions related to alcohol		1208	1310	1453		

Referrals to Alcohol Services 2006-2007



ASC = Alcohol Support Counselling

Vol – Volunteer Service; GP – Counselling within health Centres; CJS – Criminal Justice referrals; C&F – Children & Families

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		
By March 2007 we will influence alcohol policy and behaviour in local communities through provision of Alcohol Awareness Workplace programme for 100 participants, focusing on two dates in December. (Forth Valley) We will ensure the effectiveness of these workplace programmes by the use of evaluation questionnaires and one to one interviews	√			<p>ASC delivered a presentation to Remploy staff on alcohol and drug awareness. They attended a staff health development day at Carlsberg distribution plant which was very positively evaluated.</p> <p>National Alcohol communication materials sent to 104 workplaces in the Forth Valley area. Feedback from workplaces via online "survey monkey" results indicate that 41,472 staff were reached (35% of working FV population).</p> <p>Information regularly disseminated on weekly sensible drinking levels through the Health Information & Resource service within Health</p>	

				Promotion.	
By March 2007 we will continue to receive alcohol related offences data from Police on a quarterly basis and analyse via the Data Sharing Group.	√			Membership of data sharing group has now been consolidated and Police data analyst now sits on group. This data is used to inform local planning and practice.	
By March 2007 we will ensure alcohol education is incorporated into all substance use training provided by Health Promotion. We will ensure the effectiveness of this through monitoring and evaluation of training courses to be available in local areas throughout 2006/2007.	√			36 alcohol awareness sessions delivered throughout 2006.	
By March 2007 we will promote use of the SHAW / HWL (Healthy Working Lives) scheme to encourage and support employers in the development of workplace alcohol policies. Training programme based on need expressed at local levels with continued work needed to meet the demands for the training throughout 2006/2007. Success will be measured through increasing number of	√			104 organisations have registered with the SHAW scheme and 36 of these now have an alcohol policy in place.	

workplaces within Forth Valley having supportive alcohol policies.					
By March 2007 we will further develop alcohol services to ensure that treatment can be accessed as quickly as possible within the local community. We will ensure the effectiveness of this by a review in February 2007 to monitor progress (Forth Valley)	√			The GP counselling Service of ASC (Alcohol Support Counselling) appointed an additional worker to further develop the number of GP practices utilised in the Forth Valley area. We have widened the number of practices to include the eastern villages (regeneration areas) Stirling, enabling more clients to be seen in their local communities. The number of referrals has been increased substantially and waiting times have reduced with many clients being seen immediately. The number of clients seen to February 2007 was 581 with 2741 counselling appointments.	
By March 2007 we will continue the work of Alcohol Link based on continued increase of referrals and increase in contact places through drop in clinics in all villages in Clackmannanshire area. Funding secured for further 12 months. (Clackmannanshire). We will ensure the effectiveness of this by ongoing assessment through the use of evaluation questionnaires	√			New access points have been established in Alva and Dollar. A drop-in provision has been opened in Alloa based on the outcome of questionnaires and client feedback (clients reported that they preferred travelling to a central location where they were more anonymous).	

and one to one interviews.					
By March 2007 we will make alcohol and drug counselling available throughout health centres in Clackmannan. The availability of evening counselling has been increased to meet demand and is to be ongoing throughout 2006. (Clackmannan) We will ensure the effectiveness of this by ongoing assessment using evaluation questionnaires and one to one interviews	√			The GP service in Clackmannan (ASC) has developed with a large increase in referrals and clients being seen in their local communities. We have recruited additional Counsellors to provide evening counselling in Alloa Health Centre. All services are evaluated using soft and hard indicators on our Orion database and clients complete service user questionnaires and can attend either our service user group or one-to-one interviews with the User Involvement worker.	
By January 2007 we will deliver a minimum of two separate packages of group-work sessions that will support problem alcohol and or drug using women offenders, ensuring their effectiveness by ongoing assessment through the use of attendance levels, evaluation questionnaires and one to one interviews. (Falkirk)	√			The Criminal Justice Women's Group of ASC saw a number of positive outcomes with clients moving into employment, education and training. Only one of the participants re-offended but continued to access support. A full evaluation report was produced at the end of the group programme.	
By January 2007 we will deliver a minimum of one 2-day group					

<p>work course for school nurses, enabling them to continue to deliver the 'smoke buster' programme in all secondary schools in Falkirk. The effectiveness of which will be ensured by ongoing assessment through the use of evaluation questionnaires and one to one interviews. (Falkirk)</p> <p>By January 2007 we will deliver a minimum of 3 separate 1-day training courses for youth work staff and smoking cessation practitioners, covering substance use training, working with Cannabis users and smoking cessation techniques. The effectiveness of these courses will be assured by ongoing assessment through the use attendance levels, evaluation questionnaires and one to one interviews. (Falkirk)</p> <p>By January 2006 we will deliver a minimum of 6 separate peer education sessions targeted at 10-14 year children raising their awareness of the negative effects of drug use and under-</p>			√		<p>A formal Peer Education project has not been established in Stirling and Clackmannanshire since the operational difficulties experienced with previous organisation. A bid is</p>
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<p>age drinking. During this period we will also deliver a minimum of 6 peer education sessions to 15-20 year old youths raising their awareness of the negative effects of drugs, binge drinking and alcohol related crime. We will ensure the effectiveness of these activities by ongoing assessment through the use of evaluation questionnaires and one to one interviews. (Falkirk). Stirling and Clacks to confirm number of sessions</p> <p>By December 2006 we will have raised awareness of the problems associated by volatile substance misuse by organising a conference that brings together youth workers, community police, street wardens, retailers, trading standards officers and the community. We will ensure the effectiveness of this activity by measuring attendance levels and through the use of evaluation questionnaires. (Falkirk)</p>			√		<p>currently being made to the Big Lottery for a joint 4 year Peer Education project across the 2 areas.</p> <p>Links have now been made with Re Solv and National conference has now been arranged for September 2007. This will provide a platform for the launch of the Re Solv training pack as well as raise awareness of Volatile Substance Misuse. Trading standards, Youth Services, Police, Education, Social Work and Addiction services will all be invited to attend conference.</p>
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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
We will develop service user involvement within ASC by one-to-one involvement, questionnaires, two service user groups and training. Interventions will be evaluated throughout the time of the project.	Ongoing	Two active groups have been established and a full training programme was developed. All service users were issued a questionnaire and asked if they would like to have input into the service as well as for views on the quality of services. Some chose one-to-one input and others chose the group. Service users have been on interview panels for the service, one spoke at the AGM and others have been involved in working with schools. Training was on Citizenship, confidence building and assertiveness as well as individual needs identified in personal development plans.
Safe and sensible drinking messages promoted with partnership between Health Promotion, Central Scotland Police and Central FM through “sound bites” on FM Radio during the month of December 06.	Through out December 2006.	10 sound bites delivered per day throughout December 2006. Listener figures available.
Health Promotion contributed to national research seeking the views of Forth Valley residents on the impact of the	Completed in 2006.	A representative sample of 90 Forth Valley residents was interviewed and results were analysed as part of national

tobacco legislation on 26 th March 2006 on smoking and alcohol consumption.		research into the impact of recent tobacco legislation on smoking and drinking behaviour.
We will deliver a Substance Awareness session in partnership with and Central Scotland Police to housing services across Forth Valley (Signpost)	One training session planned	
We will provide alcohol awareness sessions with frontline JCP staff based in all Forth Valley Job Centres. We will ensure the effectiveness of this through feedback from participants.	Throughout 06/07	3 sessions in each Local Authority area now complete. Job Centre staff now contact Alcohol Service where alcohol problems are a barrier to employment.
We will work with partners from Police Fire Brigade and Trading Standards to support and acknowledge licensed premises that encourage sensible drinking and ensure the safety of its customers through endorsement of the Best Bar None Scheme. We will ensure the effectiveness of this through ongoing evaluation and feedback from those premises involved. (Stirling)	Completed November 2006.	6 applications for aware made with 2 local premises in Stirling being awarded with Best Bar None award and presented with award at Lord Provost Ceremony in Stirling Castle in November 2006.
Alcohol Link Drop in service for problem alcohol users at both Falkirk and Stirling Salvation Army (Community Support Service).	Ongoing	Improved accessibility to hard to reach groups (including homeless).
We will work with partners from the Police, Youth Services, Community Wardens and Barnardos to offer a mix of related interventions to tackle comprehensively the problem of alcohol misuse amongst young people. We will	Ongoing. Project commenced December 2005 and will continue to operate throughout 07/08.	Since start of project over 2,000 young people have been engaged with by the StreetWorx team. The Police have reported a reduction in youth disorder in areas that the team is present in.

<p>monitor the effectiveness of this through regular impact reviews by services involved and through feedback from services and young people.</p>		<p>From January 2006 – January 2007 22 adults were reported to the Procurator Fiscal for acting as an agent for a young person under 18 years of age in the purchase of alcohol. As part of the PSP work, over 550 litres of alcohol has been confiscated from young people in Stirling since 1st April 2006.</p> <p>Freagarrach (Barnardos) have received 8 Vulnerable Person Reports as part of the project and have offered a service to all of these young people and their families/carers.</p> <p>Demand for the intervention of the PSP continues to grow with requests for the StreetWorx team to be deployed to other areas of Stirling. The partnership continues to review this.</p> <p>An event was held for practitioners from the partner agencies to come together and raise awareness of their role and learn about the roles of others. This was attended by 45 individuals and a DVD made of the event.</p>
<p>A Problem Solving Partnership was established at request of Falkirk Anti Social Behaviour Strategy Group to look at behaviour of young people whilst under the influence of alcohol particularly</p>	<p>Ongoing</p>	<p>Education/prevention Sub Group of PSP has been established and facilitated purchase of resource for use within schools to address subject as shown at D.3.4</p>

in relation to sexual activity .and related consequences.		The PSP have also carried out an audit of services within Falkirk Council in relation to what is provided for young people in relation to alcohol.
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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
We will develop and evaluate a winter alcohol campaign for workplaces with particular focus on women and drinking. We will ensure the effectiveness of this through ongoing review and feedback from individuals who receive the information.	NHS Forth Valley – Health Promotion.	By December 2007.
We will build on previous success and continue to promote workplace alcohol policies via national awards scheme (Safe and Healthy Working Lives). We will ensure the effectiveness of this through ongoing monitoring and evaluation.	NHS Forth Valley – Health Promotion.	Throughout 2007.
We will continue to disseminate public information around alcohol. We will ensure the effectiveness of this through	NHS Forth Valley – Health Promotion.	Throughout 2007.

ongoing monitoring and evaluation.		
We will contribute to academic publication on public attitudes to tobacco legislation and its impact on alcohol consumption in Forth Valley.	NHS Forth Valley – Health Promotion.	Throughout 2007.
We will work with partners across the Forth Valley area to address the issue of young women, alcohol misuse and sexual assault. We will work to raise awareness of personal safety and highlight the dangers of binge drinking to this vulnerable group.	3 Local Area Substance Misuse Forum	Throughout 2007/08
We will continue to work with our 4 partner agencies involved in the Problem Solving Partnership. We will build on the actions currently in place and also explore further ways to work with licensees to restrict the supply of alcohol to young people under the age of 18. We will engage with a minimum of 2,000 people over the year and also aim to confiscate 600 litres of alcohol from young people. We will work with a minimum of 10 licensees to promote responsible sales. We will ensure the effectiveness of this through ongoing monitoring and evaluation.	Stirling Substance Misuse Forum	Throughout 07/08
We will continue to promote the Best Bar None Scheme and aim to support 5 local premises to achieve standards good	Stirling Substance Forum.	By December 2007.

<p>enough for award. We will publicise the scheme and promote the premises that meet the criteria for the award. We will monitor the effectiveness of this scheme through ongoing evaluation and feedback from both partners and organisations involved. (Stirling)</p>		
<p>Licensing Forums to be established across Forth Valley. SAT Support Staff will participate and contribute in each local authority area.</p>		
<p>We will work with partners from a minimum of 4 agencies to develop a Problem Solving Partnership in Clackmannanshire to address the issue of young people and alcohol misuse. We will ensure the effectiveness of this through feedback from individuals involved and also from data gathered from the Police and other sources.</p>	<p>Clackmannanshire Substance Misuse Forum</p>	<p>Working group established in May 2007. Initial actions and business plan to be developed by December 2007.</p>
<p>Big in Falkirk – Music Festival .SAT team involved in this event, raising awareness of local services, offering targeted information on request. The event potentially can attract 100,000 people over two days, it is hoped that this will become an annual event.</p>		
<p>We will provide an up to date service directory to all wards within the acute hospital setting at Stirling Royal Infirmary, this information will be available electronically to all medical staff. It is</p>		

hoped this will facilitate early referral to services and also increase awareness of community services offering ongoing support for alcohol and drug problems		
We will hold 8 training sessions for teaching staff (Falkirk) on Substance education focusing on values/attitudes, updating knowledge and effective learning and teaching approaches.	Falkirk Council (Education)	Completed June 2008
We will hold 6 sessions on the implementation of Respect and responsibility (3-18 Curricular Package). This will have as part of its focus the relationship with alcohol and risky sexual behaviours.	Falkirk Council (Education)	Completed June 2008
We will carry out an audit of substance education resources being used in nursery/primary/secondary schools	Falkirk Council (education)	Completed December 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)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
Reported housebreakings of all types.	Police		1755	1663	1301	1440
Reported Theft By Shoplifting	Police		1422	1449	1345	1592
Drugs – Production	Police		7	19	13	9
Drugs - Supply	Police		548	554	578	629

Drugs – Possession	Police		1587	1372	1412	1417
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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		
Funding has been secured for a Forth Valley Arrest Referral Scheme to operate from the 3 Sheriff Courts within the area. This will become operational in 2006. The scheme will employ 3 members of staff, and will have an initial target of 70 assessments per month.	√			Since commencing in May 2006 the scheme has interviewed 896 persons held in custody. 466 have been referred onto treatment services within Forth Valley.	The scheme received 50% of original funding applied for. Therefore targets have been amended accordingly to 38 person interviews per month and 23 referrals per month. These figures have been exceeded. These figures have been exceeded with an average of 59 interviews and 36 referrals per month.
By March 2007 we will provide the opportunity for 30 clients to reduce the level of their offending by addressing the links between alcohol use and offending. We will ensure the effectiveness of	√			ASCs Criminal Justice Service has Continued to develop with an increased number of referrals and evaluation of outcomes including hard and soft indicators. Many of the clients have also gone on to access the	

<p>this by ongoing assessment through the use of evaluation questionnaires and one to one interviews.</p>				<p>service user group. Of the 141 new clients to date 38 have reported reduction in their re-offending and alcohol/ drug use.</p>	
<p>Facilitate the attendance of primary 7 school children from throughout the Forth Valley area at the SDEA's Choices for Life event. By March 2007 we will have raised the awareness of Primary School Pupils by providing them with information allowing them to make informed choices in relation to drug taking. We will ensure the effectiveness of this by ongoing assessment through the use of evaluation questionnaires, numbers attending and one to one interviews.</p>	√			<p>In May 2006, 3089 Primary 7 pupils form across Forth Valley attended national Choices for Life event.</p> <p>Clackmannanshire – 599 Falkirk - 1720 Stirling – 770</p> <p>The event was evaluated by MORI. Overall it was evaluated as being successful in entertaining and stimulating pupils and in making them think about and reflect on the issues surrounding drugs, alcohol and smoking.</p>	
<p>Safer Central Operations are being continually reviewed and as such will continue in the coming year. Targets for Safer Central are established in line with Key Indicators as set by the Scottish Executive in relation to binge drinking and anti-social behaviour and also in response to local</p>	√			<p>Total number of operations mounted = 221</p> <p>Total number of officers deployed = 731</p> <p>Total number of litres of alcohol seized = 1214</p> <p>Clackmannanshire:</p>	

<p>concerns in these areas.</p>				<p>Bottle marking Operation held in conjunction with licensed premises in Sauchie area to address under age purchase and consumption of alcohol.</p> <p>Anti-Social Behaviour weekend patrols. Alcohol confiscation and disposal process. Includes high visibility patrols to identified drinking dens, Parks and areas by Young People.</p> <p>Operation Sustain – joint police and Warden Operation to curb binge drinking, anti-social behaviour and violence within Town Centre area and taxi ranks etc.</p>	
<p>By March 2007 we will raise the awareness of the negative aspects of inappropriate drinking levels amongst young people by the provision of Education for Living in a Drug Using World – focus on reducing binge drinking and harmful drinking by young people, 5 training days, for a total of 110 participants. We will ensure the effectiveness of this by ongoing assessment through</p>			<p>√</p>	<p>2 x 1 day “Education for Living in a Drug Using World” has also been delivered.</p>	

<p>the use of evaluation questionnaires and one to one interviews.</p>					
<p>By March 2007 we will promote the use of Crimestoppers and encourage the reporting of the use and distribution of illegal substances. To be carried out through high profile police campaigns and involvement of local media. Past campaigns very successful with targets being exceeded and work to continue with local papers publishing informative completion slips to enable members of the community to submit drug information to Central Scotland Police. We will ensure the effectiveness of this by ongoing assessment through the use of evaluation questionnaires and one to one interviews.</p>	√			<p>During Overlord Operations leaflets are distributed throughout the local community where the operation is taking place. These leaflets have contact details for Crimestoppers as well as a completion slip to enable members of the community to submit information on drug use and dealing. Numerous press releases were distributed to accompany these operations. Police logged 975 calls from members of the public on call recording system that has a drugs marker attached. Central Scotland Police also received 413 calls through Crimestoppers and 291 of these referred to controlled drugs criminality.</p>	
<p>By March 2007 we will promote the Safer Central campaign, By continuing to encourage the community to work with Central Scotland</p>	√			<p>Safer Central has been promoted through the local media and by targeted high profile operations. In the past year the Police have logged 975 calls from members</p>	

<p>Police to tackle substance misuse problems within local areas. We will ensure that effectiveness and success will be evident through number of reports made by members of the public and continued engagement with local police forces.</p>				<p>of the public on their call recording system that has a drugs marker attached.</p>	
<p>By March 2007 we will support and develop a Community Warden scheme to establish communities in which residents feel safe. We will do this with continued liaison with community groups re effectiveness of wardens. In Stirling, there is growing demand for wardens to patrol areas not yet covered. (Stirling and Clackmannan) We will ensure the effectiveness of this by ongoing assessment through the use of evaluation questionnaires and one to one interviews.</p>	√			<p>Stirling – 4 Warden teams now operational and territorial responsibilities have been decided in partnership with Central Scotland Police and Anti-Social Behaviour Team. Peripatetic team also in place to respond to issues within Stirling Council areas outwith allocated areas.</p> <p>Clackmannanshire – Community Warden Scheme now fully integrated in Clackmannanshire. Joint working with 4 dedicated police officers and representation on all Local and Community forums and area management boards.</p> <p>K West survey completed with Warden and area profile completed.</p>	

				All Community Wardens trained in substance awareness and dealing with substance related issues within the community. Joint working with Police on intelligence and information gathering. Professional witness function during joint Police and Warden patrols. (Clackmannan-shire).	
By March 2007 we will encourage young people to develop a good citizenship approach by introducing a Junior Warden pilot scheme to encourage young people to take responsibility for their local area. 6-month pilot with possibility of scheme being rolled out to other areas in Clackmannan depending on success. We will ensure the effectiveness of this by ongoing assessment through evaluation questionnaires and one to one interviews. (Clackmannan).	√			3 junior warden schemes implemented. Schemes linked to Communities and endorsed via Educational element. This led to the development of Community Tidy teams and Tidy teams in schools via seconded school Community Warden. Assessment completed with evaluation questionnaires and interviews completed by local residents, parents and community groups.	
By March 2007 we will protect our communities by gathering data relating to	√			Data continues to be collated on a weekly basis and then mapped using GIS system. Bi annual	

<p>discarded injecting equipment. We will do this by collecting data on discarded needles and syringes and map using GIS. Data may help develop needle exchange services and reassure public that steps are being taken to increase safety. We will ensure the effectiveness of this by ongoing assessment through the use of evaluation questionnaires and one to one interviews. (Clackmannan)</p>				<p>report to be produced and disseminated to partners. Report has been passed to Hepatitis C Strategy group for action. Data also shared with Harm Reduction service and is then used to provide global education to clients accessing these services. Junior Warden Schemes also received awareness and advice on dealing with/reporting needle finds.</p> <p>(See Maps in Appendices)</p>	
<p>By November 2006 we will protect our communities by introducing a local press campaign to inform members of public of what steps they should take if they find a discarded needle. Previous campaigns indicate that local press well distributed throughout local area, reaching a wide target audience. We will ensure the effectiveness of this by ongoing assessment through the use of evaluation questionnaires and one to</p>	√			<p>Article published in July 2006 in local press in Clackmannanshire highlighting the steps that should be taken if a member of the public found a needle. 18 more additional discarded needles were reported in July than in August and Community Wardens and other SAT partners evaluated the article positively. The article was also published on the Council Intra and Internet sites in order to reach as wide an audience as possible. The information was also provided to Council Tenants,</p>	

one interviews.				businesses and educational establishments to provide increased safety.	
By March 2007 we will reduce the supply of drugs into our communities by increasing the number of individuals, identified and investigated, obtaining evidence of persons possessing and supplying drugs in the community with drug searches planned throughout 2006/2007. We will ensure the effectiveness of this by ongoing assessment through the use of evaluation questionnaires, one to one interviews and numbers of arrests made. (Clackmannan)	√			Full figures on drug related crime contained elsewhere in CAP. However, Police Service User Perceptions regarding Police actions have been measured with the following results: Complainers reassured by police actions – 82% Satisfaction with overall Police contact – 93% Complainers with a positive general impression of the Police in their local community – 72% (Clackmannanshire).	

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
Central Scotland Police track the offending behaviour of individuals who are subject to DTTOs and Fast Track monitoring as imposed by the courts and	Ongoing	Service managing the offender informed of offending behaviour in order for action to be taken.

managed by criminal justice services. Information on offending communicated to the service managing the offender.		
We will work with partners in Stirling and Falkirk to improve the recording of discarded drug litter in the area. We will collate this data and use it to develop needle exchange services and inform local action. We will monitor the effectiveness of this through ongoing monitoring and evaluation.	Ongoing	Both Stirling and Falkirk are now recording data in a more formal and consistent manner. First set of data due imminently and will be collated and mapped using GIS system. <i>See Map Appendix</i>
We will make links with the Anti-Social Behaviour team and provide information and support on substance misuse issues that form part of their work. We will monitor the effectiveness of this partnership through ongoing evaluation and feedback from colleagues. (Stirling)	Ongoing	Advice has been provided on a number of occasions in cases where substance misuse has been an issue. This as resulted in individuals accessing support from addiction services.
Provide advice and support of consultancy to criminal justice social work services (and related agencies throughout the Forth Valley area)	Ongoing	Support and raised awareness among criminal justice social work staff of substance misuse issues
Provide drug awareness training/education input to mainstream criminal justice social work clients throughout the Forth Valley area	Ongoing	Reduce drug related harm for criminal justice clients

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 Forth Valley Arrest Referral Scheme will continue to operate within the 3 Sheriff Courts in the Forth Valley area. The performance indicators will be 38 persons per month to be interviewed with 23 people per month being referred onto other agencies. Efforts will be made to secure future funding to enable the service to continue beyond May 2008.	Central Scotland Police/Signpost Forth Valley.	Further funding to be identified and in place by May 2008.
We will facilitate the attendance of Primary 7 school pupils from across the Forth Valley area at the Choices for Life Event. By March 2008, we will have made the opportunity to attend this event available to all P7 children with a target of 80% of children available. We will monitor the effectiveness of this through feedback from pupils and teachers.	Central Scotland Police	March 2008
Safer Central Operations will continue in 2007/08 with high profile operations in evidence and information provided to local communities through the media. We will provide figures on:	Central Scotland Police	March 2008

<ul style="list-style-type: none"> • Amount of alcohol seized. • Number of operations mounted. • Number of officers employed in operations. 		
<p>We will continue to encourage local communities to inform the Police of any illicit drug activity in their communities by reporting direct to the Police or through the use of CrimeStoppers.</p> <p>This will be done through local publicity, high profile operations and leafleting of local communities.</p> <p>We will monitor the number of calls received through the Police and Crimestoppers relating to controlled drugs criminality.</p>	Central Scotland Police	March 2008
<p>We will continue to support all 3 Local Authorities to formally record data on discarded drug litter and distribution through needle exchange. We will collate this information to develop our harm reduction and needle exchange services and to reassure the public that steps are being taken to make communities safe.</p> <p>We will monitor the effectiveness of this through ongoing evaluation and feedback from partners. (Forth Valley)</p>	SAT Support Team	March 2008.
<p>Central Scotland Police will continue to track the offending behaviour of individuals who are subject to DTTOs and Fast Track monitoring as imposed by the courts and managed by the Criminal</p>	Central Scotland Police	March 2008.

Justice Services. Information on offending communicated to the service managing the offender.		
We will continue to build links with the Anti-Social Behaviour team and provide support as required. We will monitor the effectiveness of this through ongoing evaluation and feedback from colleagues. (Stirling)	SAT Support Team	March 2008.
We will support the development of the local authority public web sites and ensure that up to date and accurate information is displayed to ensure the public that action is been taken to address substance misuse issues and make communities safe. We will ensure the effectiveness of this through ongoing review and feedback from the public. (Stirling)	SAT Support Team	March 2008.
Improve the knowledge base of criminal justice social workers (and related staff) about substance misuse issues	Forth Valley Criminal Justice Drug Treatment Service	Ongoing
Provide increased knowledge surrounding substance misuse issues for criminal justice clients	Forth Valley Criminal Justice Drug Treatment Service	Ongoing

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)

Table 2.2: Ever been drunk: 2002.

	Scotland		Forth Valley	
	Age 13 %	Age 15 %	Age 13 %	Age 15 %
Never	44	23	40	24
Once	22	16	22	15
2-3 times	17	24	17	26
4-10 times	9	17	11	14
More than 10 times	7	20	10	20

Base=All pupils who have ever drunk alcohol

Source: SALSUS 2002*

Table 2.1: Consumed five or more drinks on the same occasion in last 30 days: 2002.

	Scotland		Forth Valley	
	Age 13 %	Age 15 %	Age 13 %	Age 15 %
4 or more times	8	17	9	18
3 times	6	11	7	10
Twice	10	15	10	14
Once	12	16	13	14
Not in last 30 days	23	24	22	24
Never	41	19	38	20

Base=All pupils who have ever drunk alcohol

Source: SALSUS 2002*

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		
By March 2007 we will improve the quality of alcohol education by reviewing alcohol education programme in schools and deliver 3 x one-day sessions for schools (Health Promotion). We will ensure the effectiveness of this by ongoing assessment through the use of evaluation questionnaires and one to one interviews.	√			<p>ASC have been delivering alcohol and drug awareness sessions to young people within schools. One of the schools worked with has requested ongoing support due to the positive outcomes achieved in working with the young people. A full evaluation report was completed to evidence the work.</p> <p>Ongoing review of alcohol education in line with latest evidence of effectiveness. 100 participants attended conference in Feb 07. Future action is to</p>	

				develop an education and prevention sub group.	
By March 2007 we will improve and develop the skills of nurses in schools by providing accredited "Quality circle time" training to assist the delivery of alcohol education in schools. One training for trainers sessions, plus development of lesson plans showing age and stage progression in line with 5:14 curriculum. We will ensure the effectiveness of this by ongoing assessment through evaluation questionnaires and one to one interviews.	√			National training organisation delivered 5-day programme in Feb/March 07 to develop the skills of staff working with vulnerable young people to raise the awareness of the dangers and consequences of unsafe alcohol consumption.	
By March 2007 we will improve and develop alcohol education programme with further delivery of 3 x 1 day sessions as well as 1 day training course to assist the delivery of "Quality Circle time" within schools. Nationally recognised programme that ties in with 5-14 curriculum. We will ensure the effectiveness of	√ √		√	4 x 1-day sessions for police officers working in schools have been delivered. Quality Circle Time delivered "Train the Trainers" course.	2 x 1 day "Education for Living in a Drug Using World" has also been delivered.

<p>this by ongoing assessment through the use of evaluation questionnaires and one to one interviews.</p>					
<p>By March 2007 we will improve and develop peer education programmes at local levels with ongoing skill based training and support to volunteers to ensure consistency with national alcohol communications strategy and complimenting existing work in the alcohol setting. (Stirling and Clackmannan). We will ensure the effectiveness of this by ongoing assessment through the use of evaluation questionnaires and one to one interviews.</p>			√		<p>Formal agreement between Stirling and Clackmannanshire reached in April 2007 to develop joint peer education project. Bid to be submitted to Big Lottery by July 2007 for 4-year project.</p>
<p>We will reduce the level of inappropriate drinking by 2007 through the monitoring of underage sale of alcohol and working with partner agencies (e.g. Police and Trading Standards). We will ensure the effectiveness of this by collecting and measuring statistics collected re alcohol related emergency</p>	√			<p>Problem Solving Partnerships have been developed in both Stirling and Falkirk and are addressing this issue.</p> <p>Falkirk PSP established at request of Falkirk Anti Social Behaviour Strategy Group to look at behaviour of young people whilst under the influence of alcohol particularly in relation to</p>	

<p>admissions. Data being recorded by age, gender and postcode area to allow for analysis.</p>			<p>sexual activity .and related consequences. Education/prevention Sub Group PSOP has facilitated purchase of resource for use within schools to address subject as shown at D.3.4</p> <p>Stirling – PSP is currently working with Police and Trading Standards to raise awareness amongst Licensees of selling alcohol to underage people. The PSP is also working to increase awareness of “agents” who purchase alcohol for people under 18. Campaign currently about to start to raise awareness of above through Point of Sale posters and postcards being given out with every alcoholic purchase.</p> <p>Clackmannanshire – Police are currently working closely with licensees to raise awareness of underage drinking. Steps are currently been taken to mark bottles from certain licensed premises with an identifier that will then be matched with empty bottles that are found discarded</p>	
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				<p>in public places.</p> <p>Instances of underage drinking are recorded and parental letters are sent out with a follow up joint home visit by Police and CALM team.</p> <p>Wardens make frequent informative visits of off licences re sale of alcohol to minors and promote the use of proof of age scheme and other initiatives.</p>	
<p>By June 2006 we will recruit and support a minimum of 10 young people as peer educators in order that after training they will inform young people about substance related issues with particular reference to inappropriate drinking. We will ensure the effectiveness of this activity by ongoing assessment through individual questionnaires and one to one interviews. (Falkirk)</p>	√			<p>One Peer Education Worker has been employed in Falkirk and 10 Peer Educators have received training. A total of 8 Peer education sessions have been delivered with a further two presentations made in an effort to recruit Peer Educators.</p>	
<p>By March 2007 we will deliver 6 young person friendly peer led inputs to groups of socially excluded young</p>			√		<p>Partly achieved due to the Peer Educator post being vacant for 5 months</p>

<p>people. The peer led input will be devised, delivered and evaluated by the young people themselves. We will ensure the effectiveness of this activity by ongoing assessment through questionnaires and one to one interviews. (Falkirk)</p>					
<p>By March 2007 we will improve access to services for young people by directing 16-17 year olds into young persons services. We will ensure the effectiveness of this by analysing monthly service activity reports, evaluation questionnaires and one to one interviews.</p>				<p>Connect Services for young people provide a specialist service for young people 12-18 years with alcohol, drugs, smoking or sexual health problems</p>	
<p>By March 2007 we will improve and expand the range of services to young people by raising the profile of 16-17 year olds in Criminal Justice Services with sentencers and developing group work and peer education services in partnership with ASC (formerly known as CSSAD) We will ensure the</p>			√		Falkirk /CJS Redesign

effectiveness of this by analysing monthly activity reports and ongoing assessment through evaluation questionnaires and one to one interviews.					
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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
We will offer an event for young people participating in the twilight basketball sessions at Braehead Arena with time out sessions on drugs and alcohol. The event will take place by December 2007 and will be fully evaluated.	One- off activity	52 young people attended the event and were given the opportunity to meet professional basketball players and were offered basketball training. They also had the opportunity to watch a game. All the young people involved gave positive feedback as to the benefit of the event.
We will support the development of Health Promoting Education communities. (Education Services)	Ongoing	<p>Forth Valley Agreement that all schools will be accredited to Level 1 by December 2007.</p> <p>Clackmannanshire – all schools now registered.</p> <p>Falkirk – all schools will be registered by June 2007</p> <p>Stirling – 9 schools registered to date.</p>

<p>We will provide drop ins/appointments and groupwork, where required, in 3 educational settings within Stirling Council area. This will support young people to increase their knowledge and awareness of substances and the impact that they have on health and well-being. The effectiveness of this service is monitored through dedicated steering group and feedback from both young people and teachers. (Freagarrach, Stirling).</p>	<p>Ongoing</p>	<p>32 drop in appointments in total: Self Referral – 5 Referred by school staff – 14 Groupwork – 13.</p>
<p>Since September 2007 the Police have been delivering the “Get Real” drugs and alcohol education package within schools.</p>	<p>Ongoing</p>	<p>Since September 2006, Police have delivered 55 presentations to 580 young people with 97% of the young people saying that the package would assist them to make “healthy choices and informed decisions” on alcohol and drugs.</p>
<p>We will offer a number of diversionary activities to young people within Clackmannanshire. This will include Twilight football zones, SFA Early Touches course, Blue Light Discos and Drop In Centres. We will ensure the effectiveness of these through review and feedback from participants. (Clackmannanshire)</p>	<p>Throughout 06/07</p>	<p>2 Blue Light discos have been held and various sport initiatives. These have been well received by young people and have resulted in a decrease in anti-social behaviour.</p>
<p>We will second a Community Warden to one of the local secondary schools to contribute to specific curriculum inputs on issues related to substance misuse. We</p>	<p>Started November 06 – ongoing.</p>	<p>Warden building effective links with young people and addressing the issues that they highlight in relation to substance misuse and other related issues.</p>

will ensure the effectiveness of this through ongoing review. (Clackmannanshire).		
Falkirk – “Cork it Campaign”. Falkirk Herald newspaper Alcohol Awareness Campaign.	February 2007	Campaign launched to raise awareness of issues in relation to alcohol consumption and the dangers posed to young people. Articles provided by all partners involved in support and provision of services to young people as well as information for parents. The campaign also highlighted safety issues for young people involved in alcohol misuse.
Falkirk – We are currently reviewing services to young people with a view to widening referral sources to include other sources in addition to youth Justice / Social Work.	June 2007	Not all young people experiencing difficulties with substances are in touch with Youth Justice Services or Social Work

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
We will support the National Test Purchasing of Alcohol Scheme throughout 2007 and work with our partners to respond to the issues that this may raise. We will monitor the effectiveness of this initiative through	Forth Valley SAT	March 2008.

ongoing evaluation of the data collected and through consultation with organisations and individuals involved.		
We will develop an Education & Prevention Sub Group and look at actions formulated at event in Feb 07. Group to be monitored and evaluated through regular updates to the SAT and local substance misuse forums.	FV SAT	Throughout 2007.
We will continue to improve and develop the skills of individuals working with vulnerable young people through the Quality Circle Time initiative. 40 training sessions will be delivered throughout 07/08 and the effectiveness will be monitored through evaluations being completed by course participants.	NHS FV – Health Promotion.	Throughout 07/08.
We will continue to deliver the “Get Real” drugs and alcohol package within schools and other youth settings. We will deliver 100 inputs over the year to the young persons. There will be ongoing evaluations with a target of 90% of young people saying that the package would help them make “healthy choices and informed decisions” on alcohol and drugs.	Central Scotland Police	March 2008
We will form a Forth Valley wide Peer Education Communication Network to facilitate sharing of good practice and ensuring equity of service throughout Forth Valley.	FV SAT	Stirling and Clackmannanshire projects still at developmental stage. Network will be established on completion.

Dependent on successful funding bid, we will recruit a project co-ordinator and 2 project workers to develop peer education project. We will recruit staff by December 2007 and work to have operational project by February 2008.	Stirling Council & Clackmannanshire Council	Ongoing throughout 07/08.
We will involve local groups of vulnerable young people in the development of a "Girl Talk" magazine to raise the awareness of drinking too much and provide a forum to discuss prevention and harm reduction tactics. This publication will be available to senior High School pupils and further education establishments including the University of Stirling. We aim to produce 2 publications per year and the impact will be assessed through ongoing monitoring and evaluation.	CSP FV NHS – Health Promotion	October 2007
We will commission conference report to inform a review of school based substance education.	FV NHS – Health Promotion	Report published by March 2008.
We will purchase the resource 'Keeping Myself safe@ for all primary and secondary schools (55 copies) this resource will complement already existing substance education programmes.	Falkirk (Education)	Completed August 2007
Continuation of Alcohol PSP Sub Group to consider early intervention initiatives in relation to young people and alcohol and the associated problems (7 different	Falkirk Alcohol PSP	Completed June 2008

initiatives being considered)		
We will continue to provide Peer education for young people in the Falkirk area via Summer Sports Programme, Schools and Community Education (Youth Club) providing 45 peer education sessions over the year. (Falkirk) Sessions will be monitored and evaluated by Steering Group and Peer Education Project	Straight Talk – Falkirk Peer Education Project	Complete March 2008
We will continue to promote Straight Talk Peer education project and recruit volunteers to deliver peer education. Over the period aim to recruit 14 Peer educators.	Straight Talk – Falkirk Peer Education Project	Complete March 2008
We will provide additional training for staff working with cannabis users and smoking cessation workers We will ensure the effectiveness of this by delivering a minimum of 6 separate training courses for education staff, children & family social workers and the criminal justice team by January 2008 Falkirk	Connect Services for Young People	January 2008
We will improve the substance use knowledge base of criminal justice social work and children & family service related staff by providing advice support and consultancy services.	Connect Services for Young People	March 2008

Falkirk		
We will raise the awareness of substance use and reduced the harm experienced by Connect clients by providing drug awareness and education/ training. Falkirk	Connect Services for Young People	Review March 2008
We will provide support mentoring services that will address binge & under-age drinking amongst young people - linking National campaigns with local campaigns. We will ensure the effectiveness of this by delivering a minimum of 4 separate one-day training sessions for 6 volunteer mentors. Falkirk	Connect Services for Young People	Review October 2007
We will provide support a mentoring services that will address binge & under-age drinking amongst young people - linking National campaigns with local campaigns. We will ensure the effectiveness of this by delivering a minimum of 4 separate one-day training sessions for 6 volunteer mentors. Falkirk	Connect Services for Young People	Review October 2007
We will support the work of the Detached Youth work Service by providing information and advice on substance misuse to a minimum of 100 difficult to reach young people. Falkirk	Connect Services for Young people	

<p>We will contribute to the target reduction of 11% of young people smoking by 2010 by supporting & delivering smoking cessation programmes for young people. Delivering 8 cessation sessions to young people in 4 schools and 4 youth clubs. Delivering 4 training sessions to staff working with young people Raising awareness of the dangers of smoking in 4 schools (through PSE classes and 4 Youth Clubs Falkirk</p>	<p>Connect Services for Young People</p>	<p>Review March 2008</p>
<p>We will provide support for families of substance using young people by providing information and advice to a minimum of 11 individual parenting sessions for a minimum of 12 families. Falkirk</p>	<p>Connect Services for Young People</p>	<p>Review January 2008</p>
<p>We will increase the awareness of sexual health for vulnerable young people by delivering a minimum of 3 separate group-work sessions Falkirk</p>	<p>Connect Services for Young People</p>	<p>Review December 2007</p>
<p>We will reduce offending and the misuse of substances by providing counselling services to a minimum of 60 clients across the Falkirk Council area.</p>	<p>Connect Services for Young People</p>	<p>Review March 2008</p>
<p>We will support and address the offending behaviour and substance misuse of young women aged 12 – 18 by providing a minimum of eight group work sessions</p>	<p>Connect Services for Young People</p>	<p>Review March 2008</p>

Falkirk		
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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.

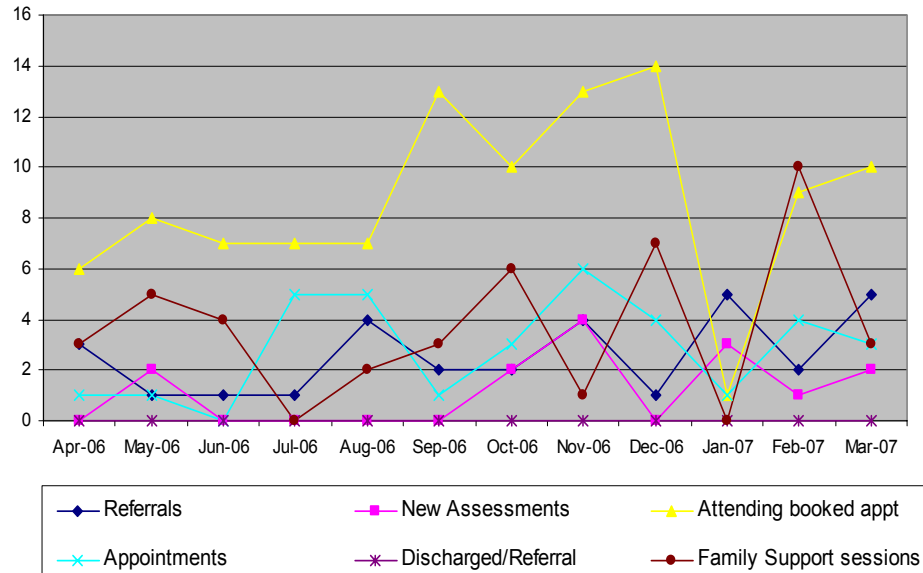
D.4.1 Performance

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

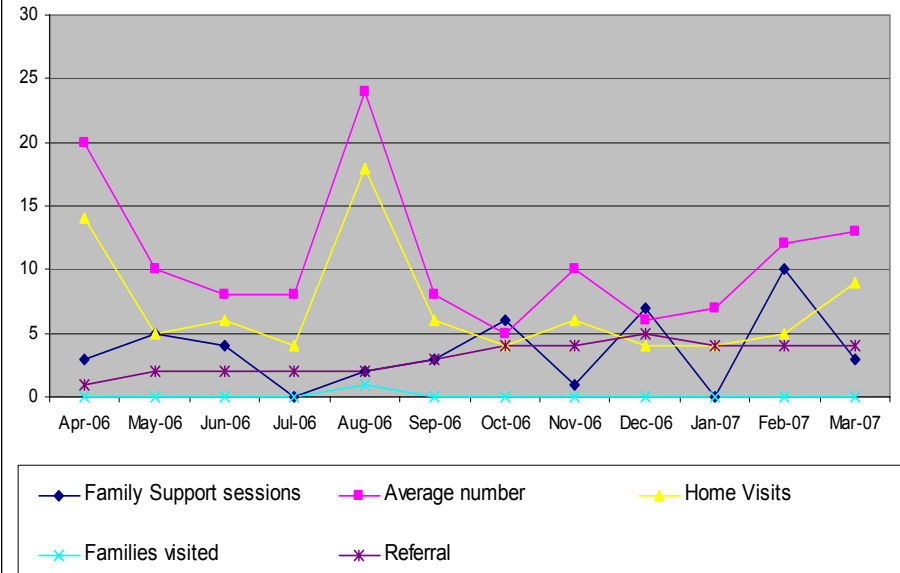
1. The national and local indicator(s) you are using to measure the national target
2. Performance over the last 5 years (in statistics)

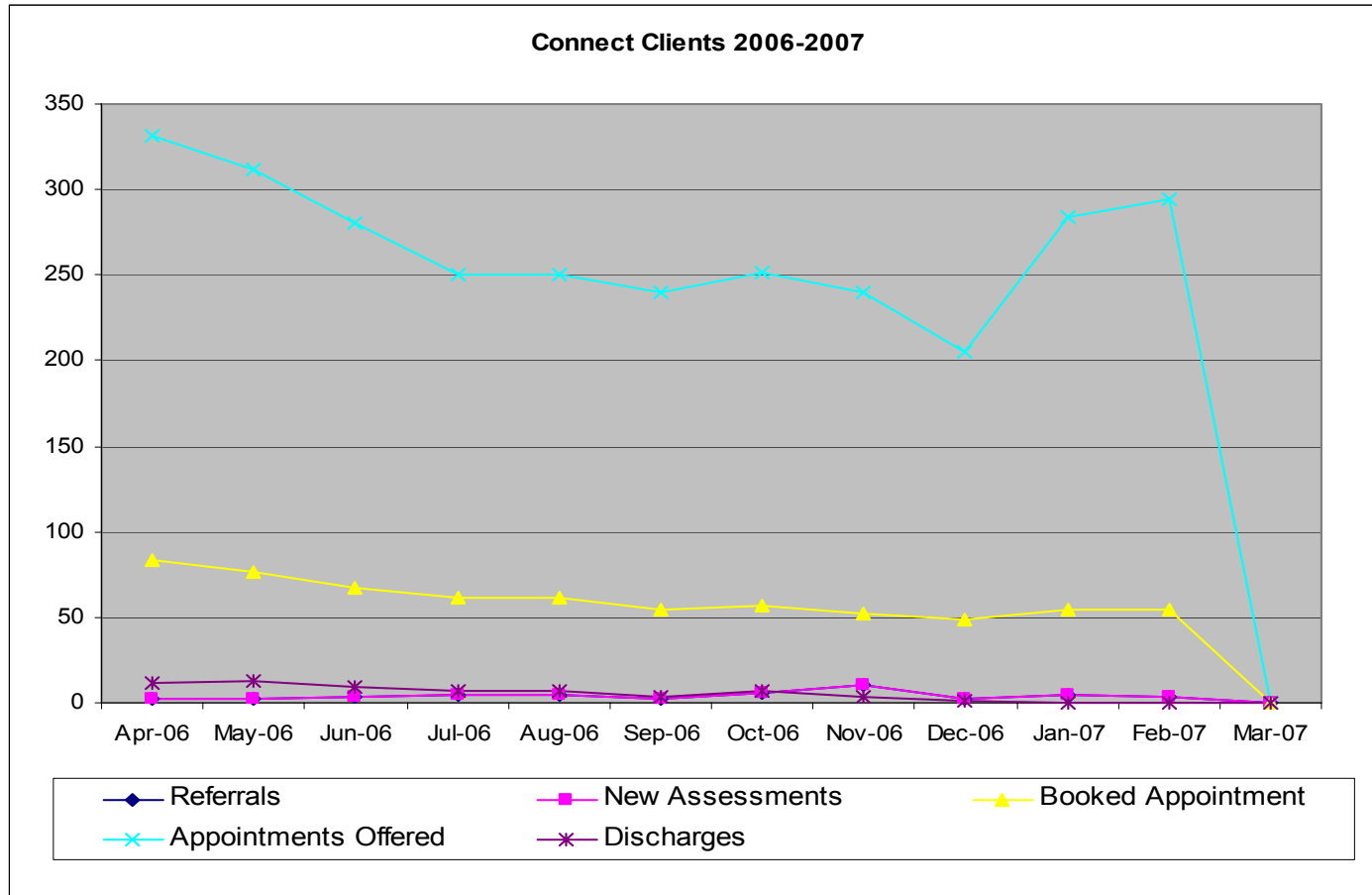
Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
All new clients (SMR24)	SDMD	312	398	378	518	N/A
Number reporting heroin use	SDMD	208	240	246	379	
Age at onset of problem drug use (%) under 15, 15-19,20-24.		8,47,22	15,39,23	7,43,26	21,58,21	
No of children referred to children's reporter where alcohol/drug misuse was cited				218 (total for Forth Valley)		Available June 2006

Freagarrach Stirling - Service Activity 2006-2007



Freagarrach Stirling - Family Support Activity 2006-07





March 2007 figures not available.

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		
Data Sharing Event planned for June 2006. Aim to increase both quality and quantity of information sharing. Target audience, all major services working with young people. Target number participants 30. Outcome detailed action plan and understanding of nature of relationship between substance misuse and young people. Outcome routine submission of data from Youth Justice, Police, Children's Reporter and A& E	√			Event held in June 2006 and attended by 58 participants. Workshop information has been collated into report that is available upon request. Young Person's sub group of Process of Care now taking action plan forward.	
Development of peer			√	Details provided elsewhere.	

education programme across Forth Valley. Details provided elsewhere.				See D.3	
To monitor impact of DTTO service				See D6.2	
To undertake an audit of parenting services across Falkirk Council area				See D6.2	
To develop Transitional care Services				See D6.2	

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
Provide one to one support and counselling to young people whose substance misuse is having a detrimental effect on their education/employment or social/emotional well being. The effectiveness of this is monitored through ongoing case review and evaluation (Freagarrach, Stirling)	Ongoing	65 young people offered one to one service. 23 were engaged with but did not take up service. Of the 42 young people involved in active casework, 29 reduced their use of substances based on measures related to risk and protective factors and reports from agencies, young people and workers.
We will provide support to young people to make healthier life style choices through needs led interventions in partnership with other agencies. (Freagarrach, Stirling).	Ongoing	Out of 42 young people engaged in active casework, 26 made healthier lifestyle choices. Education - 18 Employment – 6 Training – 6

		<p>Sport – 3 Youth Clubs – 3 Art/Music – 9 Removed from Community – 5 NEET - 6</p>
<p>We will employ a specialist nurse to provide medical interventions to high risk chaotic substance users from the Stirling Council area. (Freagarrach, Stirling)</p>	<p>Ongoing – nurse in post since October 2006.</p>	<p>Total of 8 young people referred to service. 4 young people provided with service. 2 new cases waiting to being work. 2 young people chose not to engage.</p> <p>2 out of 4 young people worked with have reduced their use of substances.</p>
<p>We will employ a specialist nurse to provide medical interventions and ongoing intensive care work to high-risk chaotic substance users from the Clackmannanshire Council area. (Children & Families Social Work, Clacks)</p>	<p>Nurse in post since November 2006.</p>	<p>Service began taking referrals in Dec 06. To date, 22 referrals received with average age being 15.</p> <p>Of these young people: 1 is stable on methadone. 1 is stable on Buprenorphine. 3 have reduced their alcohol intake and their level of offending. 4 are now in training. 1 has a private let after previously being homeless. 3 are engaged with the NCH Path programme.</p> <p>The other 7 young people are still engaged with the assessment process.</p> <p>The nurse has also improved links with</p>

		many agencies including Secondary School Support and specialist drug and alcohol services.
We will work as part of the Problem Solving Partnership to provide advice, support and information to young people referred to the service through Police, Youth Work and Accident & Emergency. We will monitor the effectiveness of the PSP through established steering group. (Freagarrach, Stirling)	Ongoing	8 referrals received in total. All referrals have been followed up and active casework being provided to 2 young people and their families.
We will develop a protocol and procedure to receive referrals from A&E and other community resources. (Freagarrach, Stirling)	Ongoing	Change of NHS personnel caused delays with this initiative. Data now being received from A&E and initiative is being progressed.
Provide a range of education based initiatives to highlight the dangers of drug misuse and young people.	Ongoing	4 x 1-day sessions for drug education officers working within school and community settings.
One Parent-to-Parent peer education programme funded through LADA.	One off	15 local families supporting in developing parenting skills using this unique peer education approach. Programme evaluated through questionnaire provided to participants.
We will continue to provide drug awareness training to young people in local secondary school and community settings. We will ensure the effectiveness of this through evaluation and feedback from participants. (Clackmannanshire)	Yearly	3 rd consecutive year that LADA has been asked to deliver training in local High school. A 6 week programme was delivered and 2 drug awareness sessions were also delivered to 8 local young people who identified substance misuse as an issue for them. Both activities very positively evaluated.

Peer Education Worker in Falkirk working with Forth Valley College to engage Sports Coaches in drug awareness for dissemination to young people	Ongoing	Increased opportunity to reach young people out with the main stream education. Directly impacting on the NEET agenda.
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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
<p>We will provide a drop in service, referral scheme and groupwork for secondary school students in 4 Stirling schools. We will offer a minimum of 30 drop in appointments and aim to receive 15 self referrals and 15 referrals from school staff.</p> <p>We will offer a minimum of 15 groupwork sessions and strive to be involved in the PSE lessons to all 2nd & 3rd year pupils in 2 high schools.</p> <p>Such support aims to promote a substance free learning environment to allow pupils the opportunity to maximise their potential.</p> <p>We will ensure the effectiveness of this service through the established monitoring group.</p>	Freagarrach, Stirling	By March 2008.

<p>We will engage with 60 young people per year and provide active casework to 45 young people to support them to reduce their substance use and aim for a minimum of 30 young people to make healthier lifestyle choices. The effectiveness of the service will be evaluated through a set of outcome measures that are reported at regular intervals.</p>	<p>Freagarrach, Stirling</p>	<p>By March 2008.</p>
<p>We will support young people whose substance use is having a detrimental effect on their education/employment or social/emotional well being. We will offer 12 groupwork sessions throughout the year and the Tik Tak group will be offered every 2 weeks and aim to have a average of 6 young people attending at any one time. We will ensure the effectiveness of this support through ongoing monitoring and evaluation.</p>	<p>Freagarrach, Stirling</p>	<p>By March 2008</p>
<p>We continue to be committed to inter agency strategic service planning and will progress various pieces of work to improve referral routes for young people. We will work in partnership with at least 2 other substance misuse services to promote interagency working and streamlining of service provision. We will ensure the effectiveness of this support through ongoing monitoring and evaluation.</p>	<p>Freagarrach, Stirling</p>	<p>By March 2008.</p>

<p>We will work to forge closer links with primary health and local CHPs and consider expanding referral sources and availability of FAADS to young people from across Stirling.</p>	<p>Freagarrach, Stirling</p>	<p>Throughout 2008</p>
<p>By August 2007, we will aim to recruit a social work assistant to support the work of the substance misuse nurse and increase capacity of the service. This post will initially be advertised for one year and the effectiveness will be monitored through analysis of service activity data and feedback from those accessing and referring to the service. (Clackmannanshire)</p>	<p>Clackmannanshire Substance Misuse Forum</p>	<p>Recruitment to be completed by August 2007.</p>
<p>By March 2008, the substance misuse nurse will work in partnership with the Youth Justice team to support a minimum of 3 persistent young offenders to reduce their substance misuse and consequent offending behaviour. (Clackmannanshire)</p>	<p>Substance Misuse Nurse – Clackmannanshire</p>	<p>Throughout 07/08.</p>
<p>By March 2008, the substance misuse nurse will have forged stronger links with the Health and Homelessness forum to increase support to young people made vulnerable through substance misuse and homelessness.</p>	<p>Substance Misuse Nurse – Clackmannanshire.</p>	<p>Throughout 07/08.</p>
<p>By September 2007, we will deliver presentations to local adult addiction services to raise awareness of the impact of substance misuse on young people and highlight the different methods of</p>	<p>Substance Misuse Nurses – Clackmannanshire & Stirling</p>	<p>By September 2007.</p>

engagement and treatment. We will ensure the effectiveness of this through review and feedback from participants.		
We will review the provision of substance education in schools and implement agreed recommendations from local conference (already detailed)	NHS FV – Health Promotion	By March 2008.
With CSP colleagues we will engage with young people and service users in the development of “Girl Talk magazine) including FV College and University of Stirling. We will aim to publish 2 copies of the magazine during 07/08 and will evaluate through consultation with young people.	NHS FV – Health Promotion	March 2008.
We will continue to respond to requests to provide drug awareness to local young people in either a secondary school setting or community setting. We will monitor the effectiveness through evaluation and feedback from participants. (Clackmannanshire)	LADA	March 2008
We will engage with partners to develop a Prevention & Education Sub Group.	FV SAT	Through out March 2008.
We will provide a pilot project to investigate how the provision of support information & substance use advice for vulnerable young people, currently excluded from mainstream education will assist with improving their self esteem, confidence and interpersonal skills with a	Ongoing	Artlink a Lloyds TSB Challenge Fund & Falkirk Council funded project working closely with education services will provide 2 group work courses of 12 weeks duration for a minimum of 6 young people. The courses are based on music, drama, film and other activities. 2

view to returning them to mainstream education training or employment. Falkirk		courses each year for the next 3 years if it evaluates positively. 1 st Review - January 2008
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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	2006-7
Percentage of new clients living with dependant children (Forth Valley)	Substance Misuse Data Base		329	368	510	
Percentage of new clients with a presenting issue of pregnancy	SMDB	57	71	87	101	
Number of maternities recording drug misuse	SMDB	14	10	34		

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		
Further develop the Family Support and Community Care Child Care in identifying and supporting families with children under age of 5. (Stirling)	√			In 2006 (March-December) 30 new referrals. 50% substance misuse families/6% alcohol misuse/20% mental health. Quarterly training provided to Childcarers on Child Protection; Infant Mental Health; Conflict Management. Development work is ongoing with Bi- monthly Training presentations to Nursery staff; Health visitors; Voluntary agencies. Monthly staff training in Legislation Guidance- Hidden Harm/GIRFEC et al. Increased targeting of Vulnerable Families as a result. (The proportion of vulnerable families with children under 5 increased from 60% in	

				<p>March to 71% in December. The proportion of families in which substance misuse was the primary ground for referral increased from 61% to 76% over the same period.)</p> <p>We have increased support for vulnerable families by identifying and training three new Community Childcarers over 2006</p>	
<p>By March 2007 we will improve child protection procedures that will include the identification of vulnerable children and young people aged 0 –16 from high risk families affected by substance misuse, to identify their support needs and to identify gaps in service provision. Child Protection guidance being re-launched and child protection training being repeated in order to update staff knowledge and awareness as well as local seminar to highlight connections between substance misuse and child protection. We will ensure the effectiveness of this by</p>	√			<p>ASC Children and Families service in Clackmannanshire works with both under 16s and their families offering counselling, diversionary activities and support. The work is evaluated by the use of our Orion database recording hard and soft indicators. 29 young people accessed the service with 5 positive outcomes recorded to date. Much of the work is long term and ongoing.</p>	

ongoing assessment through evaluation questionnaires and one to one interviews.					
We will improve child protection procedures All partner agencies to review child protection policy and procedures and for child protection to become standing item on agenda of local forum by July 2006. We will ensure the effectiveness of this by ongoing assessment through evaluation questionnaires and one to one interviews.	√			<p>Forth Valley Letter of Assurance sent to Scottish Executive in June 2006 detailing steps that were being taken to identify children vulnerable due to parental substance misuse. All specialist addiction services asked to review child protection policies and procedures at this time.</p> <p>Child Protection now a standing item on forum agendas with training and other relevant information highlighted at each meeting.</p>	
By December 2006 we will deliver 3 child protection training sessions "What About me Training" to be delivered by LADA. Funding received from Regeneration fund for 3 sessions to be delivered between May and Dec 06. We will ensure the effectiveness of this by ongoing assessment through evaluation questionnaires and one to one interviews.			√		4 programmes delivered in total with 2 being funded through Regeneration money. All programmes evaluated positively.

<p>By March 2007 LADA and Tullibody Healthy Living Initiative to work in partnership to offer befriending, advocacy and support to families in Tullibody affected by substance misuse. Funding received for year and progress to be monitored through yearly reports being submitted to the THLI board. (Clackmannan) We will ensure the effectiveness of this by ongoing assessment through evaluation questionnaires, one to one interviews and quarterly service activity reports</p>	√			<p>Funding has supported additional staff hours to provide outreach support in the Tullibody area. In addition, a new outreach clinic was established in May 2006 to provide support for an additional 1 day per week in this area.</p> <p>15 families currently being supported in the Tullibody area. Positively evaluated by family members accessing service.</p>	
<p>By March 2007 we will provide Parent-to-Parent training programme for parents and family members affected by substance misuse. 3 courses with 15 participants. We will ensure the effectiveness of this by Ongoing assessment through evaluation questionnaires and one to one interviews –</p>			√	<p>15 people registered but only 6 people attended on first night. Evaluations at the end of the course highlighted that 50% of participants felt that their skills, confidence and abilities as a parent were better as a result of the course.</p> <p>50% felt that their abilities were now “excellent”.</p>	<p>Partially achieved. One course was provided in Stirling as funding was not secured to take this forward.</p>

each participant to complete evaluation at start and end of course. (Stirling and Clackmannan)				100% of participants thought that the course had been extremely useful.	
Receive evaluation of Early Years Training from SCRE and consider further training sessions directed at early year staff (private sector and local authority) (Falkirk)	√			The report was received and training evaluated well with two courses being presented for early years staff during the period.	
Subject to funding By 2007 we will expand joint working between Aberlour and Signpost in the provision of care packages to substance misusing parents. This involves providing staged care, to 100 families per year. If funding not forthcoming to continue to provide support to parents within Langlees area of Falkirk. We will ensure the effectiveness of this by evaluation questionnaires and one to one interviews.			√		Project awaiting release of funding from Lloyds TSB. Action ongoing throughout 07/08.

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
<p>We will form an Operational Working group of professionals from across Forth Valley with a responsibility for the care and protection of children and young people made vulnerable by parental substance misuse.</p> <p>We will co-ordinate and facilitate appropriate multi-agency training and also strive to implement a developed Information Sharing system between Social Work and Addiction services to improve the identification of children and young people affected by parental substance misuse.</p>	Ongoing	<p>Group founded in Stirling but due to success of partnership working has been extended across the whole of the Forth Valley area.</p> <p>Improved Information Sharing system has now been developed and agreed and is to be piloted within one of the Local Authority Areas.</p> <p>Multi-Agency training event held in February 2007 that was attended by over 40 participants and looked at links between substance misuse and child protection. This training was offered in addition to the established local programme of child protection training and was very positively evaluated.</p>
Develop links between Family Support & Community Childcare and Mental Health Services (Stirling).	Ongoing	<p>FS&CC raised awareness of service with an additional 50 families through local promotion and partnership working.</p> <p>Infant mental health training secured for 20 members of staff due to the significant increase in families affected by mental health issues (currently 86% of active cases).</p>

<p>We will provide access to a parent support group and sibling support group as well as individual family work to assist young people to experience families who deal more effectively with substance related issues. We will ensure the effectiveness of this support through ongoing evaluation (Freagarrach, Stirling).</p>	<p>Ongoing</p>	<p>4 families accessed parent support and individual family work over the year. Positive evaluation received on 3 pieces of family work.</p>
<p>We will provide parenting programmes to increase the knowledge and skills of family members to deal with substance related issues. We will ensure the effectiveness of this support through ongoing evaluation (Freagarrach, Stirling).</p>	<p>January 2007</p>	<p>1 parenting programme completed in January 2007. Positive evaluation received from programme.</p>
<p>In response to feedback from family members, we will establish and support a group for fathers. We will aim to support a minimum of 4 fathers at any one time. We will measure the effectiveness of this support through ongoing review and feedback from participants. (LADA)</p>	<p>Ongoing</p>	<p>4 fathers currently attend group that runs on a monthly basis. Individuals report a decrease in feelings of isolation and an improvement in family relationships and dynamics.</p>
<p>We ran a Family Support evening in partnership with Daisy Chain to support families and provide an opportunity for peer support. (Family Support Network Forth Valley)</p>	<p>One off event</p>	<p>Evening attended by 50 participants and was very well received. Requests for session to be developed and built upon with a future support evening.</p>
<p>We will support families affected by child/sibling substance misuse to understand the impact of this and develop mechanisms for coping with the</p>	<p>Commenced December 06. Ongoing throughout 07/08.</p>	<p>Since December 2006, nurse has supported 12 families. Feedback from families has indicated improved family relationships and increased ability to</p>

issue (Substance Misuse Nurse – Clackmannanshire)		cope with issues related to substance misuse.
We have enhanced current Child Protection arrangements within CADS with robust protocols and procedures. We provide training to local social work departments on drug misuse, treatment & Child Protection issues. We have 3 lead nurses who have completed formal CP training. (CADS).	Ongoing.	Improved links with Child and Families Social Work services in each of the Local Authority areas.

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
We will continue to develop Family Support and Community childcare. A further 6 trainers to undertake further training to deliver parenting skills programme by March 2008. We will ensure the effectiveness of this through ongoing monitoring and evaluation. (Stirling)	Family Support and Community Childcare (Stirling Council Children's Services).	By March 2008
We will develop the Home Reading Initiative in partnership with Learning and Teaching Scotland to provide books for	Family Support and Community Childcare (Stirling Council Children's Services).	Families to be identified and books distributed throughout 2007 as required. Feedback to be collated and analysed by

<p>up to 40 vulnerable families from the Stirling Council area. Quantitative and qualitative data including feedback (written and verbal) from parents, extended family and staff will be used to evaluate and monitor the service. (Stirling)</p>		<p>early 2008.</p>
<p>The Solihull Training Programme (via Choose Life funding support) to be delivered by 12 inter agency staff to deliver 4 training programmes to communities/individuals across the Stirling Council area. The 12 staff area anticipated to undertake a follow up course 6 – 8 months later to develop a core group of trainers to disseminate training to a wider group of inter-agency professionals. We will assess the impact of training through feedback from staff and families involved in the training and use the qualitative and quantitative data provided to assess the immediate and long-term impact on families. (Stirling)</p>	<p>Family Support and Community Childcare (Stirling Council Children’s Services).</p>	<p>Initial training programme to be completed by June 2007. Implementation of training programme to follow on over the next 6-8 months. Training course for trainers identified via above programme to commence early 2008 (provisional) and programme to be self-sustaining following this.</p>
<p>Provide ongoing training to Community Childcarers and FS &CC in developing skills for working with vulnerable families. Ongoing training over the forthcoming year will include a training day in the impact of substance misuse within families (March 2007) and new Child Protection guidance (Sept 2007).</p>	<p>Family Support and Community Childcare (Stirling Council Children’s Services).</p>	<p>Rolling programme throughout 2007.</p>

Feedback will be via evaluation forms. (Stirling)		
We will continue to support and develop the work of the Operational Service Response Group. The Group will aim to deliver 3 multi- agency training events throughout 06/07 and also develop a Best Practice booklet for practitioners that will highlight good practice for working with families affected by parental substance misuse. We will assess the impact of the training and of the booklet through ongoing evaluation and feedback from participants.	Forth Valley Operational Service Response Group	Throughout 07/08. Booklet to be published by December 2007.
We will support the 6-month pilot in Stirling of the developed Information Sharing system to improve communication between addiction services and social work. We will monitor the effectiveness of this through ongoing evaluation, review and analysis of referral rates.	Operational Service Response Group	Pilot to begin by November 2007 and run for 6 months.
We will continue to develop our Fathers Support group and aim to support a minimum of 6 fathers on a fortnightly basis. We will monitor the effectiveness of this through ongoing evaluation and feedback from participants. (Clacks)	LADA	Throughout 07/08.
We will aim to develop support group for new mothers with a substance misuse issue. We will aim to support a minimum	LADA	By March 2008.

<p>of 6 mothers on a weekly basis to reduce the stigma they have reported at mainstream services. We will build links with Primary Care colleagues. We will monitor the effectiveness of this group through ongoing evaluation and feedback from participants. (Clacks)</p>		
<p>We will deliver multi-agency training across the ADAT area to 40 people on the impact of prostitution and its impact on families.</p>	<p>Action for Change Partnership SAT Support Team</p>	<p>Raising awareness on issues relating to prostitution and the links to substance use.</p>

We will support a minimum of 15 families to work together to deal more effectively with substance use issues. We will monitor the effectiveness of this service through ongoing evaluation and feedback from families and staff. (Stirling)	Freagarrach, Stirling	By March 2008
We will provide access to holiday respite for 2 families affected by substance misuse during 2008. We will monitor the effectiveness of this through feedback from families. (Stirling)	Stirling Family Support Service	By March 2008
We will evaluate current service provision through consultation with service users for a 3 month period from September - November 2007. We will use the feedback from this consultation to further develop our service.	Stirling Family Support Service.	December 2007
We will continue to provide free and confidential support to 400 family members throughout 2007. We will monitor the effectiveness of this through regular consultation with service users.	Family Support Network Forth Valley.	March 2008
We will maintain our family support group and continue to strive to increase numbers. We will review the effectiveness of this service through ongoing consultation with group members.	Stirling Family Support Service.	March 2008.
We will run a recruitment drive and aim to recruit 10 new volunteers by March 2008. We will aim to increase volunteer participation in both internal and external	Family Support Network Forth Valley	March 2008

training.		
We will strive to secure funding to deliver 2 Parent-Parent Training programmes to vulnerable families in the Stirling area. We will review the effectiveness of this programme through course evaluation.	Stirling Family Support Service.	March 2008.
We will continue to raise awareness of our service through developing a marketing strategy and providing information sessions where required. We will monitor the effectiveness of this through ongoing review of number of referrals to service.	Stirling Family Support Service.	March 2008.
We will strive to secure funding to deliver 10 Parent – Parent training to foster carers and other families identified through social work. We will review the effectiveness of this programme through course evaluation.	LADA	March 2008
By June 2007 we will submit a bid to the Big Lottery for funding to support a needs assessment of family support across Forth Valley including rural areas. We will aim to have completed the needs assessment by December 2007 and will use the findings to develop a more consistent approach to Family Support across the 3 council areas.	LADA	June 2007 December 2007
By March 2008 we will continue to promote healthy lifestyle choices through developing a garden where vegetables	LADA	March 2008.

<p>developing a garden where vegetables can be grown and maintained by service users of LADA. We will link this with our “Munch Club” service and aim to provide access to healthy snacks to a minimum of 70 individuals per week. We will monitor the effectiveness through feedback from those who access service.</p>		
<p>By December 2007 we will have established links with the Scottish Community Diets Project to provide opportunities for families accessing our service to healthy food and healthy choices. We will monitor the effectiveness through ongoing review and feedback from those who access the service.</p>	LADA	By December 2007 and ongoing.
<p>By March 2008 we will support our own and a minimum of 4 other local addictions services to reduce staff stress levels through providing access to alternative therapies such as Indian Head Massage. We will ensure the effectiveness of this through ongoing evaluation and feedback from participants.</p>	LADA	March 2008
<p>By March 2008 we will have held an open day to promote the service and raise public awareness of the support that is available. We will aim to attract 50 people to this event. We will promote this event through local press and organisations and monitor its</p>	LADA	March 2008.

effectiveness through evaluation and feedback from participants as well as analysing service activity data for potential increases in referrals to service.		
By March 2008 we will have established better links and referral pathways from treatment services to family support services. We will support 3 treatment services to develop an information leaflet for families and friends of someone engaging in a treatment regime. We will monitor the effectiveness of this through ongoing review and feedback from family members.	Family Support Network Forth Valley	Throughout 2007/08.
By March 2008 we will have established better links with 3 local Young Carer's Projects. We will promote and encourage services to refer children and young people caring for someone with a substance misuse issue. We will monitor the effectiveness of this through ongoing review and feedback from both services and young people who may access the service.	Local Area Substance Misuse Forums	Throughout 07/08.
We will support Parent's Councils to develop parent's understanding of, and positive responses to, the issues around alcohol and substance misuse. This will involve school staff, substance misuse nurse, community wardens, detached youth workers and relevant voluntary groups (e.g. LADA) in providing	Education Development Service (Health Promoting Schools) Individual Parent Councils	By June 2008

information and support at a minimum of 6 Parent Council Events. We will ensure the effectiveness of this through ongoing review and feedback from participants. (Clackmannanshire)		
Offer family support on an outreach basis to 2 other areas of Falkirk (Denny and Camelon)	Grangemouth Family Substance Abuse Group	
We will provide 8 training sessions for education staff on Hidden Harm Next Steps including 2 sessions specifically for early years staff.	Falkirk (Education)	June 2008

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)

Forth Valley has experienced difficulty with the new data base. This is being addressed in partnership with ISD and NHS Forth Valley IT department.

Indicator(s)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
Percentage of people waiting less than 14 days for structured preparatory and motivational interventions	ISD	N/A	N/A	N/A	N/A	N/A
Percentage of people waiting less than 14 days for prescribed treatment		N/A	N/A	N/A	21%	N/A

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		
By July 2006 we will Review eligibility criteria for all services through work of POC Group We will ensure the effectiveness of this by analysing quarterly service activity reports, evaluation questionnaires and one to one interviews.			√	Much work has gone into getting closer working relationships and improving pathways between Substance related employability projects and generic employability services. Progress has been made and improved definitions for criteria eligibility and processing clients has been developed. The outcome of this should result in easier access from treatment and rehabilitation services into education training & employment	Change of personnel and closure of projects and with new projects coming on stream.
By March 2007 we will have Launched and started delivering a FV-TOX service following appointment of new GP Specialist. We will ensure the effectiveness of	√			GP and 2 dedicated workers now delivering this service. 21 clients have accessed this service and to date 11 have successfully completed treatment successfully with another 8 on going.	

<p>this by analysing quarterly service activity reports, evaluation questionnaires and one to one interviews</p>				<p>Negotiations underway to expand partnership and access referrals from other treatment services.</p>	
<p>By November 2006 we will promote GP Prescribing Service to local GP's through GP Sub Committee, locality meetings and CREATE sessions throughout all three Council areas. We will ensure the effectiveness of this by analysing quarterly service activity reports, evaluation questionnaires and one top one interviews. All three areas to be covered by end November 2006.</p>	<p>√</p>			<p>By March 2007, 101 clients have received methadone treatment prescribed by their own GPs. 68 active clients at March 07. 1 GP in Clackmannanshire 15 GPs in Falkirk 14 GPs in Stirling</p> <p>5 sessions of Local Training provided by GPPC to 10 GPs and 1 Practice Manager.</p> <p>STRADA equivalent to RCGP Management of Substance Use in Primary Care Part 1 held on 27th & 28th September 2006. 22 participants attended (10 GPs, 7 Pharmacists, GPPC, CADS Team Leader, 2 Signpost staff, Employability Manager).</p> <p>RCGP Part 2 (Feb – Nov 07) 2 GPs, 2 Pharmacists & 1 Nurse from Forth Valley participated.</p> <p>GPPC presented at CREATE sessions for Stirling and</p>	

			<p>Clackmannanshire in partnership with CADS.</p> <p>GPPC participated in Forth Valley training for Pharmacists (Sept 06).</p> <p>GPPC organised delivery of a one day Sexual Health Training by Family Planning Association to 12 drug and alcohol workers in Falkirk (Jan 07). This training day evaluated positively and workers are now confident to use their skills discussing sexual health and contraception methods.</p> <p>GP Questionnaire covering Training Needs Questionnaire carried out in March/April 2007.</p> <p>GPPC completed and qualified as Extended, Independent and Supplementary Nurse Prescriber in January 2007. To be used to further develop GPPS further in 07/08 to utilise None Medical Prescribing in Primary Care Settings.</p>	
By September 2006 we will set up a system to monitor	√		Exit questionnaires assisting the service to determine the positive	

<p>successful completions of those subject to Probation orders, licence, DTTO and evaluate the progress of the Transitional Care Service. We will ensure the effectiveness of this by analysing quarterly service activity reports, evaluation questionnaires and one to one interviews.</p> <p>Integrated Case Management (ICM) system to be introduced in Summer 2006.</p>			√	<p>aspects of the service and which elements require improvements.</p> <p>ICM has been introduced but is very early days of evaluating the impact.</p>	<p>The monitoring of all criminal justice social work services is ongoing process.</p> <p>A cut in the criminal justice non-core allocation will impact on the ability to deliver certain substance services (ASC and Women's Group)</p>
<p>To establish central database of pharmacy places across Forth Valley for both supervised and unsupervised drug treatment by March 2007.</p> <p>SPISM(specialist pharmacist in substance misuse) This appointment has enabled work in the area of</p>	√			<p>Have developed a centralised database which clearly indicates capacity for supervised and unsupervised drug treatment.</p> <p>A review of community pharmacy services identified current and future capacity for dispensing and supervised consumption in</p>	

dispensing and supervision to be developed.				Forth Valley. A review of harm reduction services has informed the revised HR service which will be in place by July 07. Service specifications have been implemented to provide a framework for pharmacy services and address training needs. Medicine information and medicine management support is provided to all prescribing services in Forth Valley.	
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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
Reduction of CADS waiting times for drug treatment. Waiting times and lists continually monitored.	Achieved in 06/07 and ongoing	Waiting time from assessment to treatment now reduced from 44 weeks in July 2006 to 12 weeks in May 2007.
In November 2006 the Alcohol Service successfully negotiated the allocation of a dedicated alcohol detoxification bed in Acute hospital setting.	Established November 2006 and ongoing	Greatly improved access for alcohol detoxification with reduction in clinical risk. Improvement of clinical protocols for alcohol detoxification. Planned, elective admission with clear timescale for admission. Reduction in waiting times for access to inpatient detox from previous average of

		<p>12 weeks to current waiting time of 4 weeks.</p> <p>Detoxification treatment initiated immediately with a reduction in severe alcohol withdrawal syndrome.</p> <p>Prophylactic vitamin supplementation initiated immediately to reduce the risk of Wernickes and Korsakoff syndrome.</p>
<p>In June 2006 the Alcohol Liaison Service within the acute hospital division employed an Alcohol Liaison Charge Nurse. In October 2006, the ALN introduced the pilot in 3 wards within the acute division. The ALN provides ongoing support and training to nursing and medical personnel within the division.</p>	<p>Achieved and ongoing until 2008 Initial review and evaluation to be completed by June 2007.</p>	<p>Patients with alcohol related illness identified and assessed quickly.</p> <p>Detoxification initiated immediately with a reduction in severe alcohol withdrawal syndrome and delirium tremens.</p> <p>Early initiation of prophylactic vitamin supplementation.</p> <p>Follow up on discharge and referral onto appropriate services.</p> <p>100 patients have been referred, assessed and treated since the introduction of the pilot scheme.</p>
<p>With the additional resource of 2 staff nurses, CADS Alcohol service has introduced a liaison service with the other 2 psychiatric acute admissions wards in Falkirk Royal Infirmary. Every patient who is admitted with either a primary or secondary diagnosis of alcohol dependence is assessed whilst on the ward. The alcohol nurses advise on the care and contribute to the discharge plan. Every patient is either followed up on discharge by the alcohol service or</p>	<p>From January 2006 and ongoing</p>	<p>All patients being admitted to these wards (except the dedicated bed) are provided with a specialist service quickly.</p> <p>The intervention can reduce length of stay in hospital.</p> <p>Discharge planning includes engagement with either the alcohol service or another agency.</p> <p>Enhanced relationship between the alcohol service and adult mental health inpatient services.</p> <p>30 patients have had access to this</p>

arrangements are put in place for referral to the most appropriate agency.		service to date.
We will provide an Acu-Detox service to a minimum of 100 individuals as an alternative therapy for chemically dependent individuals. We will also make this service available to family members and will monitor the effectiveness through evaluation and feedback from participants. (LADA)	Ongoing	The service has been provided to 351 individuals throughout 06/07. An additional venue has now been established in Clackmannanshire to ensure that the service can be provided everyday.

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
<p>We will continue to promote GP Prescribing service to local GPs through GP Sub Committee, locality meetings and deliver a minimum of 3 CREATE sessions throughout all 3 council areas.</p> <p>We offer a minimum of 2 relevant training sessions to GPs, Keyworkers and Pharmacists in partnership with other relevant agencies.</p> <p>The GPPS handbook will be reviewed annually with review scheduled for June 2007.</p>	GP Prescribing Service – GP Prescribing Co-ordinator.	All actions will be carried out throughout 2007/08.

<p>We will strive to develop GPPS to include buprenorphine treatment as an option (this is subject to funding).</p> <p>We will increase the referral base for GPPS and continue to promote the service.</p> <p>Presentation to Locality GP Meeting using GPPS GP champions to promote the service.</p> <p>We will strive to develop GPPS to increase the number of spaces incorporating Non Medical Prescribing and 'GPPS Hubs' within GP Practices throughout Forth Valley. Priority areas are Falkirk and Clackmannanshire. This initiative is subject to funding.</p> <p>We will ensure the effectiveness of the service through ongoing audit and monitoring on a quarterly basis.</p> <p>A GPPS report to be completed by end of May 2007 and circulated to all Forth Valley GPs, Community Pharmacists and SAT.</p> <p>SPISM(specialist pharmacist in substance misuse).</p>	<p>Continue support to prescribing services developing prescribing strategies for drugs and alcohol, roll out training programme to community pharmacies and continue to develop needle exchange and HR services in Forth Valley.</p>	
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<p>We will increase the referral base for FV Tox and continue to promote service. We will do this by providing more resources for this service to enable a base to be established in Falkirk and thereby improve ease of access for Falkirk based clients</p>	<p>Signpost Forth Valley Falkirk Council Corporate & Commercial Services</p>	<p>Ongoing throughout 2007 – 2009</p>
<p>We will continue to manage admission to and discharges from the alcohol detoxification bed. We will manage 52 admissions and provide immediate follow up of every patient admitted to the bed. We will ensure the effectiveness of this initiative through ongoing review and clinical management.</p>	<p>CADS</p>	<p>Throughout 07/08.</p>
<p>CADS and FVCJDTs will introduce buprenorphine (Subutex) maintenance enhancing the treatment options available. This should enhance engagement and retention in treatment. We will provide this service to 40 people throughout the year.</p> <p>Service protocols and guidance have been devised, submitted and approved by the Area and Primary Care Drug and Therapeutic Committees. This will be monitored through a programme of review, evaluation and</p>	<p>CADS</p>	<p>June 2007</p>

audit.		
<p>CADS will provide a dedicated screening and vaccination service for those individuals with Hepatitis. This is a joint initiative between CADS, FVCJDTS, Hepatitis Core Service (within NHS FV Acute Division) & Liaison Psychiatry consisting of:</p> <ul style="list-style-type: none"> • Accessible screening • Hepatitis A & B vaccinations • Nurse led treatment clinic. • Psychiatric assessment and care for people with Hep C treatment. <p>CADS will provide one session per week to an estimated 100 patients per year. The service will be evaluated and audited.</p>	CADS	Commence in June 2007
<p>CADS will further develop the existing maternity liaison service with the provision of an outreach maternity service within CADS clinics. This will provide pregnant drug users access to a midwife whilst attending their drug clinic appointment therefore reducing the number of appointments to be attended in different locations and improving engagement and retention in treatment. CADS will provide one session and will support up to 6 pregnant patients at any one time.</p>	CADS	Throughout 2007/08.

<p>CADS will provide a contraceptive advice and treatment service within CADS clinics in Falkirk and Stirling for one session per week. Two CADS nursing staff are currently completing the Family Planning Diploma and will provide dedicated sessions in collaboration with the sexual health service. The service will be evaluated and audited.</p>	<p>CADS</p>	<p>Throughout 2007/08.</p>
<p>CADS will undertake a redesign of the Alcohol Service to improve and increase access to the service. This will include a review of referral, assessment and case review processes. The redesign will be based on a bio-psychosocial model and will further enhance joint working with other alcohol providers. The core intervention of community based detoxification will be maintained along with post-detox pharamacotherapy and treatment in accordance with the 4 elements of relapse prevention outlined by HTBA.</p>	<p>CADS</p>	<p>Commence April 2007 Phase 1 - June 2007</p>
<p>Dependent of funding we will provide the Acu-Detox service to 400 individuals throughout 207/08. We will know the outcome of funding application by November 2007 and, if successful, will expand the service from Clackmannanshire to across the Forth Valley area. We will ensure the</p>	<p>LADA</p>	<p>November 2007 March 2008</p>

effectiveness of this through ongoing evaluation and feedback from participants.		
Maintain access to counselling services which contribute to reduction in re-offending.	Falkirk Council Criminal Justice	March 2008
Develop the Through Care Addiction service in order to encourage engagement in services following release from custody	Falkirk Council Criminal Justice	March 2008
Maintain and develop Fast Track and DTTO service as alternative to custody	Falkirk Council Criminal Justice	March 2009

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.

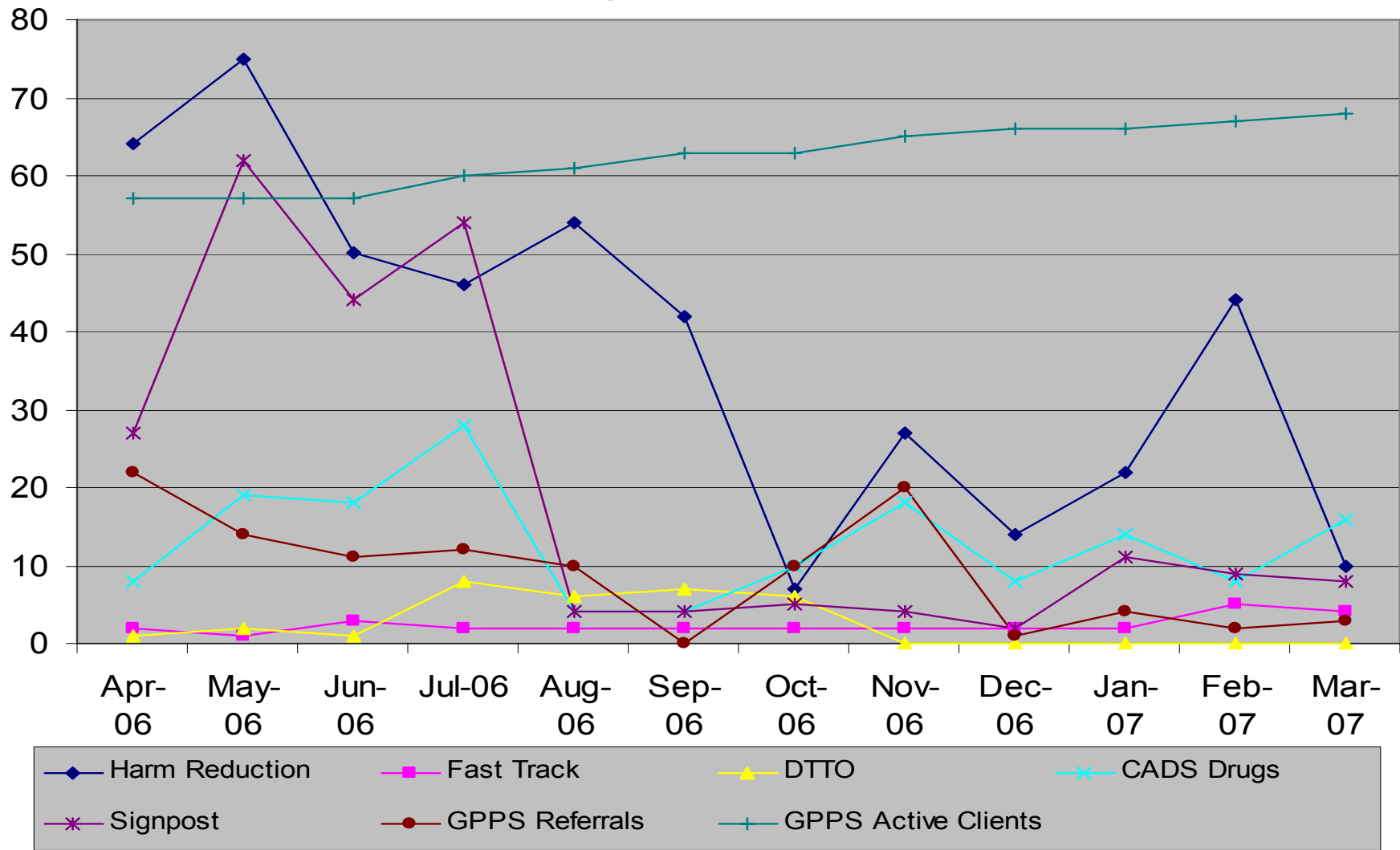
D.7.1 Performance

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	2006-7
Number of new clients in contact with treatment and care services	SDMD	312	398	378	518	NA

Referrals to Drug Treatment Service 2006-2007



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		
Agree, publish and distribute new service access flowcharts to all referral sources by October 2006.	√			Flowcharts devised through Process of Care Group to inform future referral pathways. Incorporated into SAT Service Directory.	
New Service Directory to be launched by September 2006			√		Delayed due to compliance with Disability Discrimination Act. Expected date of completion end of May 2007.
Continue to support Process of Care Group – currently meets 6 times per year. Publish revised workplan by July 2006	√			SAT Co-ordinator facilitated session to develop work plan. Substance Development Worker will support progression of work.	

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
We will provide written information on the addiction services available to all drug users who use the Needle Replacement Scheme within custody suites across the whole Forth Valley area. (Central Scotland Police)	Ongoing	Drug users who may not have been in contact with any service are provided with information and encouraged to enter drug treatment services.
Hep C Strategy Group. This group are progressing plans to provide a robust service for clients of drug services in relation to BBV health protection. It is planned to employ a co-ordinator who will lead on needle exchange services for both the pharmacy and voluntary sector harm reduction service.	Ongoing	
Provide drug treatment provision for 80 clients at any one time as a condition of a Probation Order (Fast Track Programme) throughout the Forth Valley area	Ongoing	Number of people engaged with service is currently over the scheduled capacity and additional funding is being sought through the SE
Provide drug treatment provision for 20 clients at any one time on a Drug Treatment & Testing Order (DTTO) throughout the Forth Valley area	Ongoing	Number of people engaged with service is currently over the scheduled capacity and additional funding is being sought through the SE

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
Central Scotland Police will offer the Needle Replacement Scheme to all drug users entering custody.	Central Scotland Police	Ongoing
Collection of discarded drug litter data	See Section D.2	ongoing
Linked with cardiology within acute hospital setting to map potential presentations due to misuse of stimulant drugs. Developing links with the club/leisure industry to promote awareness via education and prevention information on the premises using leaflets and national promotional material in washrooms and chill out areas.	SAT Support Team	Ongoing
Provide drug treatment provision for 80 clients at any one time as a condition of a Probation Order (Fast Track Programme) throughout the Forth Valley area	Forth Valley Criminal Justice Drug Treatment Service	Ongoing
Provide drug treatment provision for 30 clients at any one time on a Drug Treatment & Testing Order (DTTO) throughout the Forth Valley area	Forth Valley Criminal Justice Drug Treatment Service	Ongoing
An appointment has been made to the psychology post; this appointment will enable direct therapeutic interventions to	SAT Support Team	Ongoing

<p>enable direct therapeutic interventions to be delivered to individuals who misuse substances, particularly alcohol. There will be an additional training element to the post which will build capacity in the workforce in the area. The post holder will have input into the development of our web based addictions training and support resource linked to Forth Valleys "Moodjuice" web site, a resource developed to support people with mental health problems.</p>		
<p>Moodjuice Addictions: The development of this component of the already very well known "Moodjuice" web site will be a resource specifically for addictions staff and clients. The idea is to provide an online training /support resource to staff working in substance use services.</p>	<p>SAT Support Team</p>	<p>Ongoing</p>

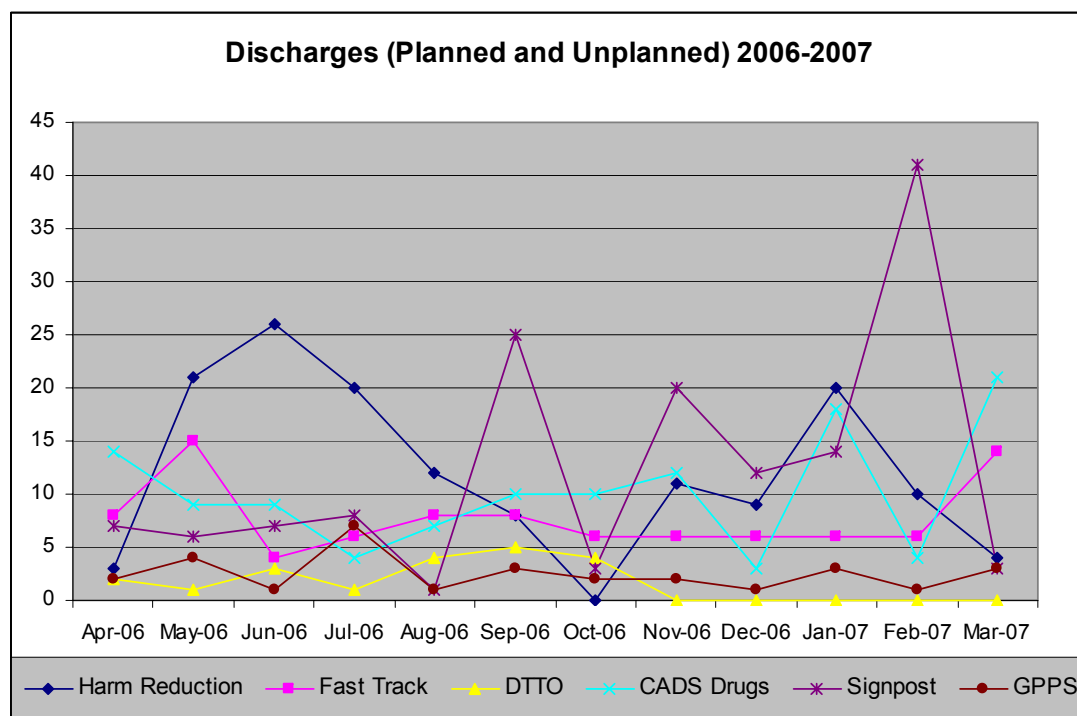
D.8 ADAT Progress – Provision of Support and Treatment Services

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)



All GPPS discharges were for non-compliance.

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		
Provide a detailed service by service analysis of discharge data on a quarterly basis for discussion by Process of Care Group.	√			Process of Care Group will monitor discharges locally and analyse. This will enhance and inform our understanding of the client journey in and out of services.	
All services to develop and publish Key Working standards by October 2006. This document includes agreed core standards applicable to all services.	√			Key worker manual available to all services and will be reviewed through Process of Care Group. Core standards adopted by all services.	
To undertake a review of referral pathways between services by November 2006				See section D 7.2 (Flowcharts)	

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
We will consult with both service users and service providers to establish current levels of service user involvement across Forth Valley.	June – December 2006. Report published in January 2007.	Report has now been sent to all service providers and is available to service users upon request. Recommendations for improving service user involvement have been made a 4 levels: <ul style="list-style-type: none"> • Service Provider • Service User • Service Commissioner • National Level. Interim service user groups are running on fortnightly basis until the end of August to allow services time to consider how they will implement the recommendations.
Carry out baseline audit for National Quality Standards.	December 2006 – February 2007	All services visited and report compiled for the SE and local champion identified.
We will run in house Quality Standard Development programmes and review these with staff (Signpost Forth Valley)	Ongoing	1 day already held with proposed follow up in August 2007. Policies and procedures now in line with requirements.

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
<p>We will continue to support local service providers and service users to improve consolidate service user involvement. We will encourage services to develop regular service user groups and provide advice and guidance where required. We will monitor the effectiveness of this through ongoing evaluation and feedback from both service users and service providers.</p> <p>We will also contribute to the National Task Group developing a Best Practice Booklet for Service User Involvement.</p>	FV SAT Support Team	Throughout 2007.
<p>We will support all addiction services to adhere to the National Quality Standards for Substance Misuse Services. We will ensure the effectiveness of this through adherence to the national implementation framework once this is published. We will promote /support local attendance at national workshops.</p>	FV SAT Support Team	Throughout 07/08

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)

Clients referred to GO FORTH between April 2006- March 2007.

	Male	Female	Total	%
<ul style="list-style-type: none"> 41 clients attended their initial assessment appointment 	25	16	41	
<ul style="list-style-type: none"> 13 did not respond to three appointment letters and phone calls 	7	6	13	
<ul style="list-style-type: none"> 7 "Inappropriate Referrals" Clients have been found ineligible on Screening and were referred to other possible routes of referral. Go Forth Introduction Programme, CADS, Alcohol link, Signpost, ASC counselling...etc 	4	3	7	
<ul style="list-style-type: none"> 37 Offered Programme Membership 	25	12	37	90% of those assessed)
<ul style="list-style-type: none"> 32 clients attended the project regularly. 	21	11	32	86% (of those offered place)
<ul style="list-style-type: none"> 14 clients entered Voluntary work (5 Clients are continuing to seek volunteering and further training opportunities and hope to move to a volunteering services by the end of May 07) 	14	5	19	60% (of those attended regularly)
<ul style="list-style-type: none"> 9 client continued with an employment service (3 Clients are continuing to seek employment and further training opportunities and hope to move to an employment services by the end of May 07) 	8	4	12	38% (of those attended regularly)
<ul style="list-style-type: none"> 19 clients were awarded with a certificate of completion on finishing the project. (10 clients are continuing the programme and will be awarded with certificate of completion by the end of may) 	20	9	29	63% (of those attended regularly)

**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		
Monitor referrals to Go Forth (new employability/rehabilitation project)	√			Go Forth service was successfully established and while referrals were slow to start with saw 67 referrals over the year. 37 clients successfully engaged with the service with 23 to date moving on to positive outcomes of employment, volunteering or training. Clients who did not engage were referred to counselling services to be admitted to future intakes. A semi-structured programme has been developed for clients not ready to engage with the structured programme.	
By December 2006 we will have reviewed the membership and function of Employability Sub- Group. We will ensure the effectiveness of this by analysing quarterly reports, evaluation questionnaires and one to one interviews.	√			Currently setting up sub-group to look at screening and referrals. Greater input from generic services.	

Participate in national Employability group to be established by SAADAT.	√			There has been one meeting of national group with Forth Valley representation.	
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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
Ensure access to Street Sport is promoted to service users as part of their preparations for work.	Ongoing throughout year.	<p>200 people referred to programme throughout 06/07. These referrals have come from Salvation Army, mental health, addiction, homeless, social work and employability services. Programme evaluated independently and was short listed for National Homelessness Award. DVD has been produced and a number of successful open days have been held.</p> <p>4 Street Sport participants also involved in input to local secondary school to explore the dangers of alcohol misuse and carrying knives.</p> <p>Drug Awareness First Aid and Mental</p>

		Health First Aid training delivered to participants.
WISH programme developed to target vulnerable females to recover from difficult issues and re enter the workplace where appropriate.	Ongoing	Programme started in January 2007 and has had 20 participants since this time. Evaluated independently through questionnaires and focus groups with participants and telephone interviews with participants.
Ensure all services are made aware of the NHS Employability scheme in order to increase the support available to people recovering from drug and alcohol problems to re enter employment.	Ongoing throughout year.	Scheme has been regularly highlighted at local level, currently limited uptake from service addiction services.

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
We will maximise the health outcomes of rehabilitation service users by providing specific confidence and skill based programmes: 2 Scottish Mental Health First Aid. 6 Drug Awareness First Aid. Community food and health promotion grants.	NHS FV – Health Promotion	By March 2008.

<p>Health assessments on request. We will monitor the impact and effectiveness through ongoing questionnaire and evaluation of courses.</p>		
<p>We will continue to promote and raise awareness of the Street Sport and WISH programmes and aim to have 20 referrals made by specialist addiction services and rehabilitation services. We will ensure distribution of any national evaluation and also seek feedback from service providers and service users who access the programme.</p>	<p>SAT Support Team</p>	<p>Throughout 07/08.</p>
<p>We will continue to raise awareness of the Go Forth service and further consolidate expansion of service across Forth Valley area. We will continue to offer the semi-structured programme and contribute to the SAT Employability group. We will ensure the effectiveness of the service through ongoing review and feedback from participants.</p>	<p>ASC</p>	<p>Throughout 07/08.</p>

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)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
Drug related deaths Forth Valley	GRO Scotland	24	12	16	14	

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		
We will revise the remit and scope of the Critical Incident Sub Group to include detailed discussion of both deaths and overdoses to identify learning points and possible recommendations for changes to practice. The group meet 6 times per year To facilitate information and data exchange from all partners on non-fatal overdoses. We will ensure the effectiveness of this by analysing the data gathered, evaluation questionnaires and one to one interviews.	√			To focus the actions of the group in relation to DRD whilst taking a closer look at the non-fatal overdose to ascertain any actions we can undertake to reduce incidents.	
To review information	√			A seminar was held to promote	100 harm reduction packs were

provided to service users by September 2006.				“Going Over” DVD with harm reduction packs being disseminated at event.	disseminated via the workshops.
To review remit of harm reduction service in preparation for devising new service specification.			√	1 years funding secured to maintain existing service until March 2008. Permanent funding to be identified by NHS to maintain this service via HEP C/BBV monies..	Forth Valley looking to standardise service to Gold Standard in line with Scottish Executive guidelines. Harm Reduction service and Pharmacy Needle exchange in discussion to unify equipment and data collection. Estimated completion date July 2007.

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
We delivered 6 drug awareness first aid programmes for drug users, their families and carers. (Health Promotion)	Throughout 06/07	99 participants attended 7 skill-based workshops. On completion, participants were certificated as competent by British Red Cross.
We delivered 5 Mental Health First Aid courses specifically to alcohol and drug service staff, volunteers and service users.	Throughout 06/07	60 participants attended. Local evaluation through questionnaires at end of course. Programme also subject to national evaluation co-ordinated by Health Scotland.
Amalgamation of the Drunk & Incapable Group with Critical Incidence Group	September 2006	Merger of these group enabled staff from emergency services to attend meetings. The main tasks of the group: Drug Related Death prevention Model of Care for Alcohol Place of Safety within the Acute setting

		Mis-use of emergency services within Forth Valley.
<p>The development of two resources:</p> <p>1) Credit card style information cards for distribution to non-fatal overdose clients. This card offers service information in the hope that people will engage with services.</p> <p>2) Credit card style card produced for A&E, emergency services and leisure industry with a view to engaging with population of people who misuse emergency services through misuse of alcohol.</p>	December 2006	<p>During the time period of this intervention service activity was monitored and there was a marked increase in referral to alcohol services.</p> <p>Partners have requested these cards are reproduced.</p> <p>NHS Patient Panel member was activity involved in the promotion and distribution of the festive campaign materials.</p>
SAT Support staff continues to disseminate information from SDEA and local police.	On-going	Inform harm reduction services and key partners of any potential harm to the community.

D.10.4Planned 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
We will continue to deliver Drug Awareness First Aid and Mental Health First Aid Programmes to vulnerable groups and will monitor the impact	NHS FV – Health Promotion	Throughout 07/08.

through ongoing questionnaire and evaluation.		
We will support local Prisons to cascade key skills and harm reduction messages to clients.	NHS FV – Health Promotion	Throughout 07/08
We will look to standardise Harm Reduction service to Gold Standard in line with Scottish Executive guidelines, a coordinator will be funded from HEP C action plan monies. Harm Reduction service and Pharmacy Needle exchange in discussion to unify on equipment quality and data collection. In partnership with NHS FV Estimated completion date July 2007.	Signpost Forth Valley	Throughout 07/08
We will continue to share information and work as partners in the Critical Incident group to look at issues surrounding drug related deaths. We will ensure the effectiveness of this by analysing the data gathered, evaluation questionnaires and one to one interviews. Progress any actions that emerge that could potentially reduce DRD.	FV SAT	Throughout 07/08

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)	Data Source	2002-3	2003-4	2004-5	2005-6	2006-7
Individuals under 25 who reported heroin use in the last month	SMDB	208	240	246	379	
Police data See table below						

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		
Operation Overlord will continue to respond to the public demand for action with both high profile and low-key operations being carried out involving the full range of force personnel including office based staff and special constables.	√			Operations ongoing to target drugs issues in the local community. Areas where operations take place leafleted with information and provided with the opportunity to submit further information re drugs.	
Central Scotland Police will continue to measure their performance in this area in line with national standards.	√			Police logged 975 drug calls on their call recording system from members of the public. Central Scotland Police also received 413 calls through Crimestoppers. 291 of these referred to controlled drugs criminality.	
Increase reporting for Class A drug supply offences –Force Target – More than 65 cases		√		Figure achieved - 71 cases per quarter.	Other operational imperatives throughout the year have impacted on the ability to deliver

per quarter.					fully on the targets set.
Increase Class A Drug Seizures – Force Target- More than 365 grams per quarter.	√			Figure achieved – 843 grams per quarter.	
Increase Class A Drug Seizures – Force Target- More than 1090 doses or tablets per quarter.		√		Figure achieved - 1020 grams per quarter.	
Increase Class A Drug Seizures – Force Target- More than 570mls per quarter.		√		Figure achieved – 101mls per quarter.	
Increase the Number of Drug Dealers Reported – Force Target – 80 per quarter.		√		Figure achieved – 77 per quarter.	

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
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D.11.4Planned 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
Operation Overlord will continue to respond to the public demand for action with both high profile and low-key operations being carried out involving the full range of force personnel including office based staff and special constables.	Central Scotland Police	Ongoing through 2007/08.
<p>Increase reporting for Class A drug supply offences: Force Target – Improve upon 3 year average – 60 cases per qtr.</p> <p>Increase Class A Drug seizures (grams per quarter): Force Target – Improve upon 3 year average – 455 grams per qtr</p> <p>Increase Class A Drug seizures (doses/tablets)</p>	Central Scotland Police	March 2008

<p>Force Target – Improve upon 3 year average – 765 per qtr.</p> <p>Increase Class A drug seizures (mls) Force Target – Improve upon 3 year average – 337 mls per qtr.</p> <p>Increase the number of drug dealers reported. Force Target – Improve upon 3 year average – 77 drug dealers reported per qtr.</p>		
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SECTION E:

Drug and Alcohol Direct Spend By Partner Organisations

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 (LA) etc.	Breakdown of actual spend in 2006-7 (£)	Underspend/ (overspend) to 31 March 2007 (£)	Projected Spend 2007-8 (£)
2	FV Tox Project	£62,000	£0	N/A	£76,646	(£14,646)	£142,131
1	Stirling Family Support	£0	£0	FV NHS Board	£15,035	(£15,035)	£0
		£0	£31,000	Stirling Council	£31,000	£0	£0
3	Community Alcohol & Drugs Service (CADS)	£585,494	£340,762	FV NHS Board	£935,469	(£9,213)	£909,222
2	DTTO	£0	£0	FV NHS Board	£2,064	(£2,064)	£0
2	Fast Track	£0	£0	FV NHS Board	£2,877	(£2,877)	£0
			£46,430	Falkirk Council	£47,620	(£1,190)	£46,430
			£13,120	Clacks Council	£9,661	£3,458	£10,000
2	FV Drug Treatment Service/Fast Track	£0	*£503,536	Stirling Council	£503,536	£0	£503,536
1	Freagarrach - Barnardos	£0	*£43,850	Stirling Council	£38,120	£5,730	£46,820
1	Compass for Life - Barnardos	£0	£7,600	Stirling Council	£7,600	£0	£0
1	Hope	£0	£34,000	Falkirk Council	£4,987	£29,013	£34,000
2	CCSF Drug Strand: Family Support	£0	£45,000	Falkirk Council	£45,000	£0	£45,000
3	CCSF Drug Strand	£0	£103,430	Falkirk Council	£108,100	(£4,670)	£113,460
4	Throughcare Addiction Services: CJ Grant	£0	£7,656	Falkirk Council	£7,656	£0	£7,656
4	Residential Rehab	£0	£12,200	Falkirk Council	£57,880	(£45,680)	£12,200
			£0	Clacks Council	£14,174	(£14,174)	£0
1	LADA	£0	£5,000	Clacks Council	£5,000	£0	£5,000
1	LADA Link Homeless Strategy	£0	£16,700	Clacks Council	£16,700	£0	£17,100
1	Tudor Trust	£0	£23,000	Clacks Council	£23,000	£0	£23,000
1	Tullibody Healthy	£0	£15,300	Clacks Council	£15,300	£0	£15,300

	Living Centre						
1	Drugs Education Officer	£0	£52,324	Central Scotland Police	£52,007	£317	£53,800
1	Operation Overlord/Safer Central	£0	£88,000	Central Scotland Police	£89,061	(£1,061)	£89,600
1	Drugs Initiative Officer	£0	£55,000	Central Scotland Police	£56,845	(£1,845)	£56,500
1	Drugs Unit	£0	£565,000	Central Scotland Police	£563,942	£1,058	£575,000
1	Tactical Drug & Crime Unit	£0	£360,000	Central Scotland Police	£366,438	(£6,438)	£370,000
-	Drugs Strategy comprising of the following projects:	£242,680					
2	Signpost Forth Valley Core Contract to provide Drug advice/support	<i>£7,500</i>	*£125,000 *£75,000 *£50,000	Falkirk LA Stirling LA Clacks LA	£256,846	£654	£257,500
2	Arrest Referral Scheme	<i>£10,000</i>	£0	N/A	£10,000	£0	£10,000
2	GP Prescribing Service (GPPS) project	<i>£170,000</i>	£0	N/A	£232,480	(£62,480)	£300,078
1	LADA project	<i>£13,000</i>	£0	N/A	£13,000	£0	£13,000
2	Harm Reduction Service Enhancement	<i>£42,160</i>	£0	N/A	£42,160	£0	£120,000
2	FV Tox sessional GP	<i>£20</i>	£0	N/A	£35,000	(£34,980)	£35,000
1	Hep B Nurse Vaccine Programme	<i>£0</i>	£0	N/A	£38,429	(£38,429)	£34,605
	Total:	£890,174	£2,618,908		£3,723,633	(£214,552)	£3,845,938

***Indicates ring fenced Scottish Executive Allocation to Local Authority**

£503,536 Fast Track/FV Drug Treatment Service to Stirling Council – Expenditure is an estimate based on budget until consolidated (deadline for allocation is September 2007)
£118,850 Treatment & Rehabilitation to Stirling Council (£75,000 Signpost & £43,850 Freagarrach)

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 (LA) etc.	Breakdown of actual spend in 2006-7 (£)	Underspend/ (overspend) to 31 March 2007 (£)	Projected Spend 2007-8 (£)
2	Alcohol Support & counselling Services – Contribution to Core Costs	£0	£40,858 *£25,380 £26,800 £7,688	FV NHS Board Stirling Council Falkirk Council Clacks Council	£50,858 £20,180 £26,800 £17,500	(£10,000) £5,200 £0 (£9,812)	£50,858 £26,010 £26,800 £9,688
2	Alcohol Support & Counselling Services – Criminal Justice Grant	£0	£7,970 £13,474	Falkirk Council Clacks Council	£7,970 £13,474	£0 £0	£7,970 £13,474
2	Alcohol Support & Counselling Services – Child Care	£0	£13,453	Clacks Council	£13,453	£0	£13,453
1	Operation Overlord/Safer Central	£0	£22,000	Central Scotland Police	£22,265	(£265)	£22,400
1	Youth Alcohol Project OT costs	£0	£9,500	Central Scotland Police	£10,622	(£1,122)	£9,785
3	Community Alcohol & Drugs Service (CADS)	£0	£521,020	FV NHS Board	£526,201	(£5,181)	£511,438
-	Alcohol Strategy comprising of the following projects:	£488,000					
2	GP Counselling Service	£101,000	£0	N/A	£101,000	£0	£101,000
2	Alcohol Links	£134,000	£0	N/A	£134,000	£0	£134,000
2	Arrest Referral Scheme	£40,000	£0	N/A	£40,000	£0	£40,000
2	Stirling Young Persons Nurse	£18,000	£0	N/A	£18,000	£0	£18,000

2	Clacks Young Persons Nurse	£18,000	£0	N/A	£0	£18,000	£0
2	Falkirk Young Persons Nurse	£18,000	£11,720	Falkirk Council	£47,720	(£18,000)	£30,870
2/3	Alcohol Liaison Nurse	£26,000	£0	N/A	£39,500	(£13,500)	£44,000
3	CADS 2 Nursing Posts	£66,000	£0	N/A	£65,100	£900	£66,000
3	Psychology Service	£67,000	£0	N/A	£13,200	£53,800	£67,000
1-2	Increase for Inflation	£0	£0	N/A	£0	£0	£11,224
	Total:	£488,000	£699,863		£1,167,843	£20,020	£1,203,970

***Indicates ring fenced Scottish Executive Allocation to Local Authority**

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.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 (LA) etc.	Breakdown of actual spend in 2006-7 (£)	Underspend/ (overspend) to 31 March 2007 (£)	Projected Spend 2007-8 (£)
4	Residential Rehab	£0	£25,000	FV NHS Board	£11,241	£13,759	£25,000
1	Connect Snr Worker	£0	£38,900	Falkirk Council	£38,900	£0	£40,460
1	ROA: Family Support	£0	£64,000	Falkirk Council	£64,221	(£221)	£61,221
1	ROA: Grangemouth Family Support	£0	£22,903	Falkirk Council	£23,103	(£200)	£22,903
1	Community Safety: Peer Education	£0	£30,000	Falkirk Council	£27,000	£3,000	£30,000
1	Peer Led Education	£0	*£9,040	Stirling Council	£7,329	£1,711	£9,270
1	Community Education Worker	£0	£13,000 £26,570	Stirling Council Falkirk Council	£13,224 £31,576	(£224) (£5,006)	£13,320 £33,580
1	Changing Children's Services Fund	£0	*£167,600	Stirling Council	£167,600	£0	£171,790
2	CCSF: Substance Misuse Nurse	£0	£34,000	Clacks Council	£18,548	£15,452	£40,000
1	SWA - CJ Project	£0	£10,000	Clacks Council	£0	£10,000	£10,000
1	Freagarrach	£0	£36,895	Clacks Council	£36,895	£0	£49,410
1	Streetsport	£0	£31,770	Clacks Council	£31,770	£0	£32,570
1	WISH	£0	£34,597	Clacks Council	£0	£34,597	£34,597
1	Health Promotion Substance Misuse Team	£0	£111,213	FV NHS Board	£101,434	£9,779	£115,213

	Total:	£0	£655,488		£572,841	£82,647	£689,334
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***Indicates ring fenced Scottish Executive Allocation to Local Authority**

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

SECTION F:

ADAT certification of Corporate Action Plan

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

Sign below:

ADAT Chair Fiona Mackenzie

NHS Chief Executive Fiona Mackenzie