

Working Together to Reduce Harm

Substance Misuse Strategy
Annual Report – 2015



Llywodraeth Cymru
Welsh Government

www.gov.wales



'WORKING TOGETHER TO REDUCE HARM'

**SUBSTANCE MISUSE STRATEGY
ANNUAL REPORT – 2015**

'WORKING TOGETHER TO REDUCE HARM' SUBSTANCE MISUSE STRATEGY ANNUAL REPORT – 2015

Ministerial Foreword



As we approach the final period of our 10 year strategy, “Working Together to Reduce Harm”, the Welsh Government remains focused on tackling the devastating effect substance misuse can have on individual, their families and communities. We continue to invest almost £50m in tackling the harms associated with the misuse of alcohol, drugs and other substances in Wales and remain focussed on our *Programme for Government* commitment to reduce the prevalence of problematic substance misuse and the numbers of drug and alcohol related deaths.

The strategy is supported by a detailed delivery plan which spans all four key aims of the strategy. The delivery plan focuses attention on the range of actions necessary to improve the long term outcomes for those affected by substance misuse and shows that our action in this area is making an impact. We have seen an overall trend of improvement to reported waiting times for those accessing treatment services over the last 5 years and latest statistics show reductions in both drug and alcohol related deaths in Wales. We have also made very good progress to deliver against our policy and delivery priorities with the vast majority of actions contained within the 2013-15 delivery plan now complete.

Preparations are underway for the 2016-18 delivery plan, which is being developed through extensive stakeholder engagement and informed by the recommendations from two recent Health and Social Care Committee inquiry reports into New Psychoactive Substances and Alcohol and Substance Misuse.

Substance misuse services have long demonstrated the principles of prudent healthcare with a track record of user led and collaborative approaches in the design and delivery of services across Wales. In order to build on this ethos the actions within the 2016-18 plan will have the principles of prudent healthcare at its core.

The substance misuse agenda, rooted as it is in building in the needs of service users at the outset and delivered by professionals in both the statutory and third sector is a good example of how these principles underpin service delivery and examples of this approach has been shared via our making prudent healthcare resource www.prudenthealthcare.org.uk. We have also recognised the importance of the Wellbeing of Future Generations Act 2015 and the next substance misuse delivery plan is being shaped in a way that will contribute to this ground breaking legislation.

We have a lot to be proud of in our achievements, which has only been made possible by the collaboration of partners across Wales and I would like to thank all those involved for their continued commitment and support in the delivery of the strategy and its delivery plan. I look forward to working with you to build on

this progress and continue to reduce the harms associated with substance misuse.

Vaughan Gething AM
Deputy Minister for Health
November 2015

SUMMARY

In October 2008 the Welsh Government published its 10 year substance misuse strategy “Working Together to Reduce Harm”. This strategy sets out a clear national agenda for tackling and reducing the harms associated with substance misuse in Wales.

This strategy is supported by a detailed delivery plan which informs how the Welsh Government, in partnership, intends to implement the actions contained within the strategy. Some of the significant developments in this reporting period include:-

- In 2014 there were **168** drug poisoning deaths (involving both legal and illegal drugs) in Wales, **a decrease of 40 (19%)** compared with 2013 and 113 drug misuse deaths (involving illegal drugs), **a decrease of 22 (16%)** compared with 2013 and a 30% drop since 2010.
- In 2013, there were **467** alcohol-related deaths in Wales, **a decrease of 7.3%** from the previous year and a new systematic process for reviewing alcohol related deaths has been developed in order to help lower this figure further.
- We have seen an increase in the total number of clients assessed in 2014-15 up 11% from 2013-14. Similarly the total number of clients starting treatment in 2014-15 was up 10% from 2013-14. Of the 16,497 clients who started treatment (and had valid waiting times), the percentage that started within 20 working days was 87% in 2014-15, slightly down on 2013-14.
- During 2014-15, the amount of Take Home Naloxone (THN) kits distributed has **increased 55%** with **2,785** kits supplied, of which **257** kits used in opioid poisoning events. WEDINOS is now operating from all emergency departments across Wales, with **3,172** samples analysed to date which have identified **298** substances either in isolation or combination within the samples.
- We are currently waiting for a final decision from the Welsh European Funding Office (WEFO) on an European Social Fund (ESF) project which will help support those out of work with substance misuse and mental health needs achieve economic independence. An ‘in-work support’ project has also been developed by the Welsh Government and has received an indication of approval from WEFO.
- The Public Health Wales ‘Have a Word’ alcohol brief intervention programme has continued throughout the year and has now trained over **8,000** practitioners to help reduce the harm caused by alcohol across Wales
- A pilot Substance Misuse Residential Rehabilitation Framework has been launched to ensure that Welsh substance misuse clients can access services which are compliant with the Welsh core standards for substance misuse.

- The revised Service Framework for the treatment of people with a Co-occurring Mental Health and Substance Misuse problem which encompasses the key mental health and substance misuse legislative and policy developments that have taken place since first publication in 2007 was published on the 9 September 2015.
- The draft Public Health (Minimum Price for Alcohol) (Wales) Bill was published on 15 July 2015 and issued for a 5 month consultation exercise.
- Publication of the revised Night Time Economy framework for a 12 week consultation.
- During the 2014/15 academic year, the All Wales Schools Liaison Core Programme (AWLSCP) was operational in every primary and secondary school across Wales.
- The publication of revised Commissioning Guidance, which provides updated guidance to our Substance Misuse Area Planning Boards (APBs) on developing their commissioning responsibilities.

Further details on each of these developments and more are set out in the following chapter.

INTRODUCTION



This report provides progress on the delivery of the Welsh Government's 2008-2018 substance misuse strategy 'Working Together to Reduce Harm' and its supporting delivery plan.

The strategy's priority areas are as follows:-

Preventing harm - The actions within the preventing harm chapter of the strategy and delivery plan aim to help children, young people and adults resist or reduce substance misuse by providing information about the impact substance misuse has on their health, their families and the wider community.

Supporting substance misusers – aiding and maintaining recovery - this action area aims to enable, encourage and support substance misusers to reduce the harm they are causing to themselves, their families and communities, and ultimately for them to remain substance free. It addresses the provision of support available for substance misusers from brief intervention and harm reduction advice to residential treatment services, dependent on the clients needs. This section also considers the importance of providing services which are recovery based which enables access to support services such as access to accommodation, training and employment.

Supporting and protecting families - this section reports on a number of initiatives which aim to support the families of those with a substance misuse problem.

Tackling availability and protecting individuals and communities via enforcement activity - describes the actions taken to assist in reducing the harm caused by substance misuse related crime and anti-social behaviour by tackling the availability of illegal drugs and the inappropriate availability of alcohol and other substances, including the sale of alcohol or solvents to young people.

Delivering the strategy and supporting partner agencies – this section sets out the governance arrangements in place for supporting and monitoring the delivery of this strategy at a national and regional level. It also describes initiatives and actions we will take to support partner agencies to deliver this strategy.

1. PREVENTING HARM

Preventing the harms associated with substance misuse continues to be a major focus of our work. This is in line with our prudent healthcare approach where we know that by intervening early we can provide the minimum appropriate intervention whilst improving the life chances of individuals. We aim to assist people in Wales to be better informed about the impact of substance misuse, to make better decisions and know where they can seek further help and support should they need it.

Our progress in the last year includes:

Raising awareness of the harms associated with alcohol

Tackling alcohol misuse remains a priority for the Welsh Government as alcohol remains a major cause of death and illness. The 2014 Welsh Health Survey (WHS) headline results show that 40% of adults reported drinking above the recommended guidelines on at least one day in the past week, including 24% who reported drinking more than twice the daily guidelines. The WHS data between 2008 and 2014 suggests that the percentage of adults reporting drinking above the daily guidelines has decreased slightly, but the pattern by age varies.

Long-term trends in the initial findings of the Health Behaviour in School-aged Children 2013/14 survey show that there have been substantial declines in the proportions reporting drinking. For example in 1998, the proportions of year 11 pupils reporting four or more episodes of drunkenness in their lifetime were 40% for girls and 53% for boys. In 2014, these proportions had fallen to 12% and 14%, respectively, the lowest levels recorded since data were first collected in 1986. A similar trend can be seen for weekly drinking.

1.1 *Alcohol Concern Cymru*



We continue to work with Alcohol Concern Cymru (ACC) to raise awareness of alcohol misuse issues across Wales and to campaign for effective alcohol policy and improved services for people whose lives are affected by alcohol-related problems. ACC's role includes raising awareness of alcohol misuse issues, monitoring and reporting on questionable alcohol labelling and promotions, leading on information campaigns, issuing good practice guidance and undertaking research.

Work completed since the last report includes:

- Launch of the 2015 Dry January campaign, with over 900 formal sign-ups in Wales.
- Policy reports on:

- Holiday drinking habits;
 - 'Creating Customers' looking at how global producers are finding new ways and places to sell alcohol, and new people to sell it to;
 - Alcohol and gambling - commissioned Roehampton University Business School to undertake a literature review, focussing in particular on any links between the rise of home drinking and the increase in online gambling;
 - Drinking responsibly, looking at where the drinks industry has breached the UK Department of Health's Responsibility Deal by placing advertising posters within 100m of schools and promoting their brands, rather than helping consumers to make sensible choices about their drinking.
- Continued delivery of the Communities Together project in Pembrokeshire showing how techniques of community development and co-production can be used to address alcohol-related harms.
 - Hosted conference on alcohol and pregnancy, which included clarifying the advice given to pregnant woman about their alcohol consumption.
 - Building partnerships with other countries to discuss examples of best practice.

1.2 *Review of Alcohol Guidelines*

The Chief Medical Officer is working with the Department of Health on the UK-wide review of alcohol guidelines. The new draft guidelines will not differentiate between men and women and will be consulted on early in 2016..

Providing Information and Support

1.3 *The Welsh Drug and Alcohol Helpline (DAN 24/7)*



In 2014/15 financial year DAN 24/7 responded to **3,991** direct contacts as compared to 4,332 in 2013/14 (calls, emails and text messages); a small drop in direct contacts but as with previous years it is more than off set by the increased website traffic.

The interactive web page which in 2013/14 had 53,891 hits has increased in 2014/15 to **68,577 a 29% increase** and individual page views on the website also increased from 118,903 in 2013/14 to **136,749** in 2014/15 a **15% increase**.

The website has continued to be updated throughout the period to reflect changes in drug classification and the improved information available on new psychoactive substances. We have also highlighted the risks of Hepatitis C on the home page on the website and linked this to a Welsh Government awareness raising campaign.

The campaign has resulted in an increase in the page views on drug injection from 5,347 in 2013/14 to 10,128 in 2014/15.

DAN 24/7 has also continued to develop its social media presence via Facebook and Twitter and now has 963 followers on Twitter, compared to 593 in April 2014 and 593 followers on Facebook compared to 402 in April 2013. On social media the key is how many retweets on Twitter and post shares on Facebook you get as this increases the reach of the social media posts to many thousands. DAN 24/7 are well supported, especially on Twitter by other organisations that retweet posts and help to reach a larger audience than just our own immediate followers. More information is available at <http://dan247.org>

1.4 *Change4Life Wales*



The Change4Life Wales alcohol campaign continues to promote sensible drinking messages and encourages people, who may be unaware that they are risking their health by drinking more than they should, to have a healthier relationship with alcohol.

Following the early successes of Alcohol Concern's Dry January challenge, the Change4Life Wales alcohol campaign has continued to challenge people to change their behaviour by encouraging them to take at least 2 alcohol-free days per week, through social media and engagement with internal and external stakeholders.

The Change4Life Wales alcohol web-pages have had over **11,500** hits since the last report.

1.5 *Prevention Messages in the Workplace*

The Welsh Government continues to develop its work and health programme, 'Healthy Working Wales' (HWW), which includes the Corporate Health Standard (CHS) and Small Workplace Health Award, with the aim to provide free support and advice to employers in developing health and well-being policies and practices in the workplace (including alcohol and substance misuse). **31%** of the working population of Wales work for an employer engaged in HWW. To-date, **78** employers have achieved the Corporate Health Standard and **185** smaller businesses/organisations have achieved the Small Workplace Health Award. A further 307 employers are engaged and working towards recognition through the quality frameworks.

The criteria of the CHS have been refreshed to reflect the latest developments in policies and practices. This includes the alcohol, drugs and other substance use module which is supported by Drug and Alcohol Charities Wales (DACW) and Alcohol Concern Cymru.

Educational Based Support

1.6 All Wales School Liaison Core Programme (AWSLCP)

We continue to jointly support the AWSLCP with the four Welsh Police and Crime Commissioners. The programme provides consistent substance misuse education and wider community safety messages to children and young people across Wales. During the 2014/15 academic year, the scheme was operational in **100%** of primary and secondary schools across Wales, an increase of 0.3% on 2013/14 figures and the first time in the programme's history that all schools across Wales have received the programme in the same academic year.

Ensuring that the programme is fit for purpose, is evidence based and is responsive to changing trends is essential to the programme's credibility. As such the educational content of the programme is reviewed on an annual basis. This has resulted in new lessons focussing on new psychoactive substances for the 2015-16 academic year. The lesson matrix for 2015/2016 can be accessed at: <http://www.schoolbeat.org/en/teachers/lesson-matrix/>

A review of the AWSLCP is currently underway and will assess the programme's effectiveness in the current context. This will include consideration of blanket versus targeted delivery; whether the programme should be restricted to delivery in schools or have the flexibility to engage with young people in other ways. There will also be a need to take account of proposed changes to the schools curriculum in Wales as a result of the Donaldson review.

1.7 Welsh Network of Healthy School Schemes (WNHSS)

The WNHSS ensures that schools consider a whole-school approach to health. A key component of this is the consideration of substance use and misuse (incorporating tobacco, alcohol, legal and illegal drugs).

The WNHSS consists of a local healthy school schemes in each local authority. Each scheme employs one or more healthy schools' practitioners who support schools to develop a whole-school approach.

The WNHSS National Quality Award (NQA) looks for a whole school approach to the seven health topics incorporated in the areas of leadership and communication, curriculum, school environment and ethos, and family and community involvement. Schools can apply to be assessed once they have been involved in the scheme for nine years. In August 2015, **87** schools across Wales had achieved the NQA, an increase from 65 in August 2014. A further 266 are working towards being assessed.

1.8 Engagement with Further/Higher Education Settings

The Welsh Government has worked with Public Health Wales and others to finalise a framework for 'Healthy and sustainable Further Education and Higher Education settings'. Public Health Wales will publish the framework later in 2015.

Substance Misuse in Older Age

1.9 Older People and Substance Misuse

The number of people aged over 50 commencing substance misuse treatment in Wales continues to rise. During 2014/15, 2,880 (17% of all treatment commencements) were people aged 50 and over. This was an increase of 512 (1.6%) on 2013/14 figures. Of the 2,880 treatment commencements, 2,364 (82%) commenced treatment because of problems with alcohol.

Following on from the publication of the substance misuse treatment framework 'Improving Access to Substance Misuse Treatment for Older People' in October 2014, health boards, Area Planning Boards, substance misuse and mental health service providers, commissioners and those working in primary care have been working to implement the framework recommendations.

The Advisory Panel on Substance Misuse review of the Welsh Government policy interventions needed for tackling substance misuse in an ageing population is also progressing well. Community visits have been undertaken and written and oral evidence received and are being used to inform the report which is currently being drafted. The final report is expected to be published in March 2016.

Emerging Trends in Drug Use

1.10 Health and Wellbeing Compendium

Following the launch of the 'Health and Wellbeing Compendium' in 2013, which provided an overview of the principles of harm reduction, baseline audits have been undertaken by regional harm reduction groups. These groups continue to focus on key priority areas contained in the compendium in order to reduce the harms caused by substances.

1.11 Steroids and Image Enhancing Drugs

Over the last few decades, the use of Steroids and Image Enhancing Drugs (SIEDs) has become more widespread. Alongside this increase in use, there has been an associated rise in the number of reported infections and complications associated with SIEDs use.

The Welsh Government has funded Public Health Wales to initiate and implement a number of projects to help raise awareness of SIEDs harm reduction, and promote local health/support services such as needle exchange in recent years.

These include the SIEDs Educational Toolkit for Young People (11-16 years), SIEDs Training Package, SIEDs Online Survey and the SIEDs Info Website.

In November 2014, the educational toolkit was shared with all personal and social education (PSE) co-ordinators across Wales to increase young peoples' knowledge and understanding of these drugs and the associated risks.

1.12 Prescription Only Medicines and Over the Counter Medicines

Tackling prescription only medicines (POMs) and over the counter (OTC) medicines remains a priority for Welsh Government. This includes responding to the Health and Social Care Committee inquiry into alcohol and substance misuse recommendation to review the guidelines for GPs and pharmacists to reduce the potential for overprescribing and over-supply, thereby improving patient monitoring, and ensure that, where appropriate, there is an exit plan for patients.



The All-Wales Prescribing Advisory Group (a sub-group of the All-Wales Medicines Strategy Group) will be asked to consider the evidence submitted to the Committee, identify any gaps in current guidelines and develop further guidance as appropriate during 2016.

The Welsh Government's independent Advisory Panel on Substance Misuse is also currently reviewing the harms associated with prescription only analgesics; part one of this review, which focuses on tramadol, will be reporting next month (November).

2. SUPPORT FOR SUBSTANCE MISUSERS - AIDING AND MAINTAINING RECOVERY

Supporting substance misusers to reduce the harm they are causing to themselves, their families and communities, and ultimately enabling them to return to a life free from dependent or harmful use of drugs or alcohol is a key aim of the Welsh strategy. This section also focuses on the Welsh Government's work to ensure that recovery-based approaches are integrated into core substance misuse treatment services. Also demonstrated is the importance of support services such as access to accommodation, training and employment and the unique opportunities afforded by the client and provider working together on the basis of co-production to agree treatment goals.

Encouraging and Maintaining Engagement with Services

2.1 Service User Involvement.

Meaningful involvement of service users remains a critical aspect to ensuring that services are relevant to local needs, are accountable to service users and work towards an ethos of co-production. Such an approach enables service users to actively engage with services, putting forward their knowledge and experiences, voicing their opinions on services and equally, identifying, supporting and sharing the development of good practice. The development of "Recovery hubs" such as Champion's House/ Ty Hyrwyddwyr in Wrexham, North Wales is an example of such collaboration whereby, service users were involved from the inception of the project to actively managing daily operation and its continued development.

The 'Service User Involvement Framework' which was refreshed in 2014 remains a key document, outlining the expectations of Area Planning Boards as commissioners of services, alongside the valuable role that service users contribute. The framework is available at www.wales.gov.uk/substancemisuse. An easy read version is also available.

Regional service user groups across Wales continue to evolve based upon positive experiences and outcomes from other areas. Not only do these engage with Area Planning Boards, provide information to individuals entering treatment, helping them understand the treatment process and to allay any concerns, but provide significant mutual support which enable individuals to achieve and maintain sustainable recovery.

Having delivered a successful annual service user conference in March 2014 entitled "Empowerment", the All Wales Service User Movement (AWSUM) is currently planning a conference scheduled for March 2016.

Harm Reduction Initiatives

2.2 Reducing Drug Related Deaths (DRD).

Latest statistics, published by the Office of National Statistics ONS on 3 September 2015 showed that in 2014 there were **168** drug poisoning deaths (involving both

legal and illegal drugs) in Wales, a decrease of **40 (19%)** compared with 2013, and the lowest since 2008. There were **113** drug misuse deaths (involving illegal drugs) in Wales, a decrease of **22 (16%)** compared with 2013, and the lowest since 2006. Drug deaths were more common among men than women, although the drop in numbers between 2013 and 2014 was entirely among men. Mortality rates from drug misuse were similar in Wales and England in 2014, at 39.0 and 39.7 deaths per million population respectively, although there was geographical variation within England.

Both drug misuse and drug poisoning deaths have continued to fall since 2010 when both reached a peak of 162 and 224 respectively.

Whilst this trend is welcomed, we are not complacent and continue to support Harm Reduction Groups to implement the new systematic review processes for both fatal and non fatal drug poisonings. This has included developing and launching a new module of the harm reduction database in June 2015 to capture information on fatal and non fatal poisonings and establishing a National Implementation Board for Drug Poisoning Prevention.

2.3 Alcohol Related Deaths

ONS statistics, published on 11 February 2015, showed that in 2013, there were **467** alcohol-related deaths in Wales. This was a **decrease of 7.3** per cent from the previous year (504). This reduction was almost entirely due to the fall in the number of alcohol related deaths amongst women, with the number of deaths decreasing from 193 in 2012 to 161 in 2013 (16.6 %). Amongst men, there were 306 alcohol related deaths in 2013, a reduction of 5 (1.6%) compared with 2012.

The new systematic process for reviewing alcohol related deaths has commenced and Public Health Wales have begun the data collection phase and a new Alcohol Related Death Implementation Board will be established in the new year to review the analysed data and consider what actions can be taken nationally and locally to reduce alcohol related deaths across Wales.

2.4 Take Home Naloxone Scheme (THN)



The take home naloxone scheme has been successfully running since 2009. This scheme is an important harm reduction tool to aid in the continuing downward trend of drug poisonings in Wales. Naloxone is a prescribed medication used in the emergency treatment of suspected opiate overdose to rapidly reverse the effects of opiates.

Since 1st July 2009 7,364 THN kits have been issued in Wales with 632 being used to reverse an opioid poisoning. During 2014-15, **2,785** THN kits were supplied with 257 kits used in opioid poisoning events. The amount of THN kits distributed throughout 14-15 has increased 55% from the previous year

2.4.1 Paramedic Supplied THN

The randomised feasibility study which started in 2013 surrounding the distribution of THN by paramedics in Cardiff and The Vale has now been completed. To the best of our knowledge, this is the first study to test the feasibility of the involvement of paramedics in the supply of THN during an emergency care episode where environmental and interpersonal challenges are even higher. Evidence about feasibility, clinical and cost effectiveness of THN provision is needed to inform the development of policy and practice for this high risk population.

85 paramedics took part in the study and early indications suggest there were around 180 opioid related contacts during the study period. Of this number, it would appear that trained paramedics encountered approximately 55 eligible patients. 35 of these were offered THN and 25 accepted the intervention. Focus groups with study participants and paramedics are complete. The focus for 2015/16 will now shift to consolidating and cleansing data before analysis commences, in line with the study data analysis plan.

2.4.2 Wider Distribution

We continue to seek opportunities for the wider distribution of THN, especially amongst those at highest risk. We have worked with partners in both health and criminal justice to establish THN within custody suites and emergency departments. This work will continue into 2016 with the focus upon rolling these projects throughout Wales to ensure THN is easily accessible to anyone at risk of opiate overdose

2.4.3 Legislation

On 1 October 2015, new legislation came into force that enables naloxone to be supplied to individuals by drug services without prescription. This follows responses to a public consultation undertaken by the Medicines and Healthcare products Regulatory Agency (MHRA) in 2014. The responses were largely supportive of the Advisory Council on the Misuse of Drug's recommendation that naloxone be made more widely available, and regulations to that end were laid in July 2015. The legislative change means that naloxone is made exempt from prescription only medicine requirements when it is supplied by a **drug service commissioned by a local authority or NHS**. It may then be supplied to any individual needing access to naloxone. This enables easier access to naloxone and provides agencies with the means to train and distribute more widely in an attempt to further reduce fatal poisonings. A bulletin regarding the new legislation can be found at <http://gov.wales/topics/people-and-communities/communities/safety/substancemisuse/?lang=en>

2.5 WEDINOS – Welsh Emerging Drugs and identification of Novel Substances

Building on the successes of the first year, WEDINOS has continued to identify novel substances and combinations of, in 2015 to address the harms associated with use of new psychoactive substances (NPS) and, most importantly disseminate (via the website - www.wedinos.org and quarterly newsletter 'Philtre') pragmatic evidence based harm reduction information and advice. There are 71 sites across Wales

where WEDINOS packs are available for providers to complete the effects form and submit samples.

To better evidence trends in use, substance availability and harms in a market that has no physical boundaries due to the availability of NPS via the internet; WEDINOS also actively collaborates with services from across the United Kingdom. To date:

- 3,172 samples have been analysed.
- Tests have identified 298 substances either in isolation or combination within the samples.
- Of these 298 separate substances, a total of 32 reporting forms were submitted to the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) Early Warning system, in relation to substances that were of concern, substances that were undergoing a risk assessment or substances that had not been reported in the UK prior to WEDINOS identification.
- The most commonly identified psychoactive substances were the chemical group, Synthetic Cannabinoid Receptor Agonists (SCRAs). Mephedrone was the second most commonly identified New Psychoactive Substance (NPS) followed by Methiopropamine and Ethylphenidate.

WEDINOS is now operating from all emergency departments across Wales, and a mechanism is in place for the receipt, storage and transportation of samples. Information on findings is fed back to the emergency departments via the website and direct correspondence with the sender.

The WEDINOS service also provides information and support via reports or face to face training to: community based substance misuse and wider health services, criminal justice services including the four Welsh police forces and the Welsh prisons.

2.6 Reducing Transmission of Hepatitis Infection in Wales

Since the introduction of the Blood Borne Viral Hepatitis Action Plan for Wales 2010-2015 (BBVHAP), all NHS health boards with hepatitis treatment centres in Wales now have a designated clinical lead to take forward local implementation. With the support of Welsh Government funding, additional clinical nurse specialists and other support staff have been recruited across Wales to take forward service development, increasing the capacity of the NHS in Wales to diagnose, treat and care for individuals with chronic viral hepatitis infection.

Dried blood spot testing (DBS) for hepatitis B, C and HIV was rolled out by Public Health Wales in October 2010. It is estimated that the number of individuals tested by DBS was 1531 in 2011, 1675 in 2012, 1874 in 2013 and 1639 in 2014 (based on samples attributed to substance misuse services or prisons). Work continues to promote testing within substance misuse services to help the early identification of individuals with hepatitis infection.

Blood Borne Virus (BBV) Level 1 training has been redeveloped to incorporate new emerging issues relating to BBVs and changes to hepatitis C treatments to help raise awareness of those working with 'at-risk' individuals. Since its introduction, 128 specialist and non-specialist staff including prison staff, have been trained to deliver the session within their own organisations and it is estimated that this onward training was provided to over 500 people

A voluntary, unlinked enhanced surveillance scheme to provide epidemiological data has been introduced in substance misuse services in Wales. The number of individuals completing these surveillance forms and who were tested for hepatitis C was 1,023 in 2011, 750 in 2012, 984 in 2013, and 815 in 2014. This scheme was re-launched in 2014 following the decrease in the number of forms returned in 2012-2013. Participation in this surveillance scheme has varied across Wales. A revised scheme is being rolled out in 2015 with the aim of improved coverage.

The progress achieved by the BBVHAP will be taken forward in future through the Liver Disease Delivery Plan for Wales.

A working group has been established to drive improvements in the range and quality of needle exchange paraphernalia and products used by services across Wales. A standardised list of products has been developed through consultation with service providers and service users and an all Wales contract is expected to be in place by April 2016.

2.7 Supporting and Maintaining Recovery

The Recovery Framework was launched in February 2014 and a Welsh Recovery Group established. The main priority of the Recovery Group is to ensure that the principles of the framework are embedded throughout Wales and it was recognised that a comprehensive implementation support plan will be integral to this.

Recovery means different things to different people

Training the workforce is a key element and therefore, two courses have been designed by partner organisations in the Recovery Group for Wales to facilitate this process, namely: Embracing Recovery and Recovery Framework: Theory 2 Practice.

Between 1st April 2014 and 31st March 2015 the group have delivered embracing recovery courses to 79 people in 6 courses across Wales. In the same period, the group delivered Recovery Framework from Theory 2 Practice to 122 people, in 8 courses across Wales.

The first official through care, aftercare and recover community service was commissioned in Cardiff and the Vale of Glamorgan, pioneering new approaches to a comprehensive recovery oriented system of care and establishing best practice. This will form one of the Recovery Framework test sites in 2015/16.

The Recovery Group has also recently re-evaluated its purpose and aims. In 2015, a new Chair and Vice Chair were appointed and revised terms of reference and a new action plan put in place.

Feedback from work undertaken to date has enabled the identification of future priorities which will form part of the forthcoming delivery plan. This includes auditing services to ensure compliance with the recovery framework, further training and guidance specifically aimed at commissioners.

Employment Focused Support

2.8 Together for a Health Working Wales Strategic Programme:

2.8.1 Out-of-Work Peer Mentoring Service (Substance Misuse / Mental Health) (OOWS)

Drawing on lessons learned from the Substance Misuse Peer Mentoring Project 2009-2014, the Out-of-Work Service fills a currently unmet need to support long-term unemployed and economically inactive people recovering from substance misuse and / or mental health conditions. Its main goal is to help participants to enter and retain employment or to get measurably closer to the labour market. It will achieve this by providing peer support and specialist employment support, along with other interventions designed to help participants to overcome complex barriers to work. WEFO has approved the first of part of the project in September 2015; a decision is expected on the next (largest) part in October 2015.

2.8.2 In-Work Support Service (IWSS)

Under the 2014-2020 European Social Fund (ESF) bidding round, an 'in-work support' project has also been developed by the Welsh Government and has received an indication of approval from WEFO. The project builds upon the previous Well-being Through Work and Fit for Work ESF projects and proposes rapid access to work-focused interventions to help employees with substance misuse or health problems to remain in employment.

It also intends to support small and medium-sized employers to improve or develop workplace policies to prevent ill-health and support individuals to remain in work, or to remain in work with a health issue. The 'in-work' support project will be linked with the 'out-of-work service' peer mentoring project.



Meeting the Treatment Needs of Identified Groups

2.9 Services for Children, Young People and Families.

The Welsh Government continues to provide £2.75 million per annum of ring fenced funding to support the delivery of children and young people services. An example of projects across Wales include the North Wales 'SORTED' team who provide education and prevention services alongside a referral based treatment service which provides one to one treatment aimed at those young people with an identified substance misuse problem.

Cardiff and Vale Area Planning Board deliver the CRAFT Project (**C**ommunity **R**einforcement and **F**amily **T**raining). CRAFT is a non-confrontational, motivational and structured therapeutic intervention designed to work with family members / partners who are struggling to cope with a loved ones substance / alcohol misuse. The projects three main objectives are to reduce the loved one's substance use; improve the emotional functioning of the family member and to influence a loved one to get help or 'enter treatment'. CRAFT has shown that almost 7 out of 10 people who use the programme get their friends or family members to attend treatment. Functions of the families involved improve often regardless of whether the substance user enters treatment.

2.10 Young People's Outcome Tool

In order to inform the development of an outcome measurement tool that could assist in the collection of outcomes for young people who access substance misuse treatment services in Wales, a working group was established to consider a range of existing tools to identify and share current best practice in capturing outcomes in young persons' settings,.

During 2015, a wide range of stakeholders (both commissioners and providers) with some advice from academia considered how the people's specialist substance misuse outcomes record (YPOR) developed by the National Treatment Agency (Now part of Public Health England) could be developed. A pilot tool is now available and includes fields covering substance use, risky behaviours, emotional health, physical health and treatment goals attained.

Substance Misuse Service Providers started using the pilot tool with young people from the 1 September 2015. The pilot will run until February 2016 at which time a working group will be reconvened to evaluate the tool further.

Following this, a further 3 month pilot will be run capturing any changes from the initial evaluation prior to the new data requirements being incorporated into the Welsh National Database for Substance Misuse

2.11 Promote Brief Interventions for Alcohol Misuse in both Primary and Secondary Health Care Settings

The Public Health Wales 'Have a Word' alcohol brief intervention programme has continued throughout the year and has now trained over 8,000 practitioners to help reduce the harm caused by alcohol across Wales. In addition, 'Have a Word' has also developed innovative methods to engage with the public about their alcohol consumption.

In partnership with Alcohol Concern Cymru, the Public Health Wales Alcohol Team has developed supporting resources including scratch-cards and the 'One Click One Drink' smart-phone app to tackle alcohol misuse. The scratch-cards are a screening tool to initiate the conversation on risky drinking behaviour; the app allows people to record their drinking and receive simple brief advice based on their data.

The 'train the trainer' module of 'Have a Word' is firmly established and has been accessed by delegates from primary and secondary care, health and social care, criminal justice, third sector organisations, the police, Royal British Legion, local authorities, Communities First and health boards. This aspect of the training has also been adopted by Public Health England and the Ministry of Defence.

2.12 Tier 4 Services (Residential Rehabilitation and Inpatient Detoxification Services)

The Welsh Government continues to ring fence £1m of the Substance Misuse Action Fund (SMAF) specifically for Tier 4 services for Welsh clients.

Since 1 April 2015, the Welsh Government has been piloting a Substance Misuse Residential Rehabilitation Framework for residential rehabilitation places commissioned using SMAF ring fenced monies. The framework ensures that Welsh substance misuse clients that access residential rehabilitation receive treatment and support from providers who are compliant with the Welsh core standards for substance misuse.

In September 2015, the Welsh Government published the information leaflet 'A Guide to Inpatient Detoxification and Residential Rehabilitation Centres in Wales'. The leaflet is designed to inform client choice and provides a comprehensive overview of the inpatient detoxification and residential rehabilitation services available across Wales.

Leaving a detox, rehab or prison can place clients at a higher risk of overdose, if their tolerance is lower than previously. Western Bay Area Planning Board have developed a 'Risks after Detox' leaflet which provides pragmatic harm reduction advice and lists a number of key safety points that clients should be aware of. The leaflet has been shared with other Health Boards across Wales for information.

Everyone has the right to a Community Care Assessment and we have written to Directors of Social Services to seek confirmation of the procedures in place to ensure that local authorities are complying with their responsibilities under the NHS

and Community Care Act 1990 in relation to drug and alcohol assessments. The responses received are currently being considered and will inform follow up action.

Looking ahead from April 2016 onwards, this duty will be superseded by the Social Services and Well-being (Wales) Act 2014 which places a duty on local authorities to assess whether an adult has needs for care and support and if so, what those needs are. The new Act makes it clear that the duty to carry out an assessment applies regardless of the level of need for care and support and the level of the adult's financial resources. The assessment must focus on the outcomes the adult wishes to achieve in his or her daily life and consider the extent to which the provision of care and support, preventative services, or the provision of information, advice or assistance, could help the adult to achieve those outcomes. In addition, the regulations on eligibility specifically refer to the need arising from dependence on alcohol or drugs. The Act and regulations will be supplemented with further detail about the requirements for assessing and meeting needs in the codes of practice which will be laid before the Assembly later in the autumn.

Improving the Treatment Options for Individuals in the Criminal Justice System and Expanding the Support Available to Offenders on Release

2.13 Criminal Justice

Police and Crime Commissioner's (PCCs) and the Probation Service also have a responsibility to commission substance misuse services in order to deliver their reducing offending priorities and are working closely with Area Planning Boards in order to align commissioning strategies, with a number of APB areas undertaking joint procurement exercises over the past twelve months.

2.14 Treatment for Offenders in Custody

In relation to offenders within the custodial setting, focus has continued to concentrate on improving service delivery at critical points both at reception, into and discharge from custody. Access to accurate advice and where appropriate, clinical intervention remains a dominant theme for the offender at whatever point of contact pre or post custody. As a result of Welsh Government officials working with colleagues from National Offender Management Service (NOMS) and representatives from local health boards and the Area Planning Board, specialist nurse cover has been enhanced within HMP Cardiff and is being considered within other parts of the public sector prison estate.

The Transitional Support Scheme (TSS) - a joint funded initiative by Welsh Government and NOMS concluded in March 2015: its purpose and focus will be absorbed under the Transforming Rehabilitation programme, lead by Ministry of Justice. The important work on assisting short-term prisoners with substance misuse difficulties getting access to appropriate help and treatment at the point of release will now form part of new supervision arrangements, lead by the Probation Service.

2.15 Drink Drive Rehabilitation Scheme

There have been substantial reductions in the number of people convicted of drink driving in the last 20 years as it has become more socially unacceptable.

We assumed responsibility for the 'Drink Drive Rehabilitation Scheme' in Wales in June 2013. We work closely with the Police, DVSA, HM Courts and Tribunals Service along with the approved course providers to deliver the scheme in Wales and to ensure all offenders who want to undertake the training are able to do so. Between June 2013 until March 2015, Welsh providers received 4,225 referrals and delivered 222 courses.

The scheme aims to change behaviour to prevent further offending in exchange for a slightly shorter driving ban. Research indicates those not attending a course are 2 and 3 times more likely to reoffend. We will be monitoring reoffending rates in Wales to ensure the scheme continues to be effective.

We continue to press the UK Government to devolve responsibility for this area to Wales.

Improving Treatment Options Available

2.16 Substance Misuse Co-occurring with Mental Health

The final version of the revised framework which encompasses the key mental health and substance misuse legislative and policy developments that have taken place since first publication in 2007 was published on the 9 September 2015.

Responsibility for implementing the framework locally rests with the health board's executive director with overall responsibility for the operational delivery of adult mental health services in partnership with their local authority colleagues. Such individuals have been tasked with establishing local implementation and delivery mechanisms within the work programme of their Area Planning Board (APB), and the Local Mental Health Partnership Board (LMHPB) to include:

- Conducting an audit of numbers of staff who have had formal dual diagnosis training and development of a training plan in place to ensure that at least 70% of relevant staff has undertaken formal training by June 2016 and 100% by 3rd March 2018.
- Identification of APB and LMHPB board members to act as a lead for the implementation and delivery of this framework;
- Development of a joint LMHPB and APB delivery plan by June 2016, which should act as the primary delivery vehicle for the local implementation of this framework.
- Development of jointly agreed local care pathways and protocols which should be published by local health boards and local authorities on their websites by June 2016
- Inclusion of progress against delivery of this framework in APB and LMHPB annual reports/other performance reporting mechanisms.

The Welsh Government will monitor the adoption of this framework closely and will take remedial action where it appears that progress is not being made.

2.16 Alcohol Related Brain Damage (ARBD)

Alcohol Related Brain Damage (ARBD) is a term used to describe a spectrum of conditions characterised by prolonged cognitive impairment due to changes in the structure and function of the brain linked to chronic, excessive alcohol consumption.

The Welsh Government recognises that there is much more that can be done to prevent, diagnose and treat ARBD patients in Wales and has taken a number of steps to address an area which is poorly understood by the public and many professionals alike. These have included:

- Raising awareness about preventing ARBD in the Chief Medical Officer for Wales March Update. The update highlighted that the key recommendations were to offer oral and, if indicated, parental thiamine at the upper end of the BNF range to those at risk of developing Wernicke's encephalopathy e.g. those drinking harmfully or dependent on alcohol and those who may be malnourished, in acute withdrawal or have decompensated liver disease.
- Supporting an ARBD conference which was held at the Pierhead Building, Cardiff Bay on the 3rd March 2015. (<http://www.brynewel.org/arbd>) The conference 'Diagnosis to Recovery, from Planning to Action' provided the opportunity to learn, from the experience of pioneering services, of the potential for the recovery of a significant percentage of people with Alcohol Related Brain Damage, offering both an improved quality of life and potential social and economic cost savings to health and social care services.
- Establishing an ARBD Working Group to build on the work undertaken over the last 18 months by the ARBD task and finish group led by Brynewel Rehab; to advise on what further action needs to be taken at both national and local level and to identify areas of good practice and disseminate information with regard to progress and existing barriers to progress in relation to implementation, to all relevant stakeholders.

The outcomes of the conference and the actions emerging from the Working Group will be considered alongside the recommendations from the Alcohol Concern Cymru 'All in the Mind' and Public Health Wales 'evidence based profile of the scale of, services in place for individuals with ARBD and used to inform the ARBD actions within the new substance misuse delivery plan 2016-18.

2.18 *Improving Access to Substance Misuse Service for those that are engaged in sex work*

Following a quantitative study carried out in 2013, a qualitative study carried out by Swansea University is now completed. The study involved interviews with 40 sex workers to ascertain patterns of drug and alcohol use and treatment options available. The report is currently in draft form but early indications suggest a range of recommendations including increasing treatment provision specifically for sex workers, expanding outreach services, ensuring a holistic package of care is in place and training the workforce to assist sex workers who wish to address problematic substance misuse. Recommendations will be used to inform actions within the forthcoming delivery plan.

2.19 *Long Acting Reversible Contraception (LARC)*

Last year the Welsh Government began funding Public Health Wales (PHW) to offer the uptake of Long Acting Reversible Contraception (LARC) within substance misuse services in Wales until the end of March 2017. The aim of this intervention is to decrease unintended pregnancies by using LARC as a way of delaying conception in drug dependent women until such time as their recovery has progressed to allow them to parent effectively.

The funding has been used to develop a computerised module, which is part of the harm reduction database, for use by staff to ensure discussion around LARC is part of consultations with patients. In addition the funding is providing accredited training across health boards in contraceptive and sexual health provision to fit and remove LARCs. In addition Tier 3 nurses, who currently provide blood borne virus testing, vaccination and wound care, are being trained to provide contraception and sexual health in Tier 3 and 2 services, where they are not already trained. Once trained there will be ongoing ability to provide this service. There is also work being undertaken to establish a training programme for the future to ensure sustainability.

PHW are continuing to look at the data regarding use of LARC, pregnancies and pregnancy outcome, as well as longer term outcome for the parent and child, and will be making recommendations for future provision.

3. SUPPORTING AND PROTECTING FAMILIES

Substance misuse is a complex issue which not only affects individuals who misuse substances but also their families. This chapter outlines what work the Welsh Government is doing to support these families.

Protecting Vulnerable Children

3.1 Safeguarding Agenda

Alongside misuse of substances by children and young people, parental substance misuse places a greater risk on children and young people and those working in the substance misuse arena must consider safeguarding issues as part of their core role.

Safeguarding is a priority for the Welsh Government and is a key theme of the Social Services and Well-being (Wales) Act. Among other things, the Act which will be implemented from April 2016, will ensure effective leadership arrangements via the establishment of a National Independent Safeguarding Board to advise Ministers on the adequacy of existing arrangements, support effective co-operation and drive up standards. To provide more effective collaboration and multi-agency working, the Act also provides for the establishment of Safeguarding Children Boards on the public service delivery model of 6 instead of the current number of 22. Statutory Safeguarding Adults Boards will also be established for the first time on this same footprint.

3.2 Supported Family Interventions

3.2.1 Families First

Families First promotes the development of effective multi-agency systems of support for families, particularly those living in poverty. The programme places a clear emphasis on early intervention and prevention and on bringing organisations together to work with the whole family to help stop problems from escalating towards crisis. A key feature of the programme is that services are bespoke and tailored to individual family circumstances to maximise the effectiveness of interventions.

The nature of Families First means that local authorities are able to commission services which are focussed on meeting identified needs within their local area, and in many areas services have been commissioned which can provide support to families affected by alcohol and substance misuse.

More information on the Families First programme is available at:

<http://gov.wales/topics/people-and-communities/people/children-and-young-people/parenting-support-guidance/help/families-first/?lang=en>

3.2.2 Strengthening Families

The Strengthening Families Programme 10-14 is a substance misuse prevention intervention for children aged 10 to 14 and their parents/carers. The programme was evaluated as part of a Randomised Control Trial to provide an evidence base and examine any long-term public health benefits in relation to preventing alcohol, tobacco and drug use, and anti-social behaviour in young people. The Strengthening Families evaluation report was published in numerous publications along with the main findings paper and the process evaluation report and consideration will need to be given to the findings of the paper on whether to continue with the strengthening families programme at a local level.

3.3 Accessing Advice and Support on Financial Matters

In May 2013, the Welsh Government published its 'Advice Services Review'. This review looked, in particular, at the not-for-profit advice sector and at the information, advice and guidance services provided by the public and private sectors. Since publication of the report, the Welsh Government has been working closely with the advice sector and other stakeholders to take forward the recommendations of the Review prioritising the following themes:

- (i) Funding, Commissioning and delivering not-for-profit advice providers**
 - £2m of funding to support front-line advice services on welfare benefits; debt; housing and specialist discrimination advice has been secured for 2015/16 and is in addition to over £2 million to support a Communities First/Citizen's Advice Shared Outcome project and £2.2 million for the Better Advice: Better Lives programme which is delivered by Citizens Advice bureaux across Wales usually through primary healthcare settings.

- (ii) Developing Advice Networks** –Priorities for the National Advice Networks in 15/16 include quality assurance, mapping existing advice services and understanding future advice needs and developing principles for local advice networks which ensure effective referral pathways with other professionals.

- (iii) Developing national standards for information and advice** - Welsh Government commissioned an independent report on the options for quality assurance which reported in June 2015. Work is continuing towards a new national approach to standards so that funders, providers, and clients can feel confident that the services being provided by the not-for-profit sector in Wales are of good quality.

3.4. Understanding the impact of Welfare Reforms in Wales

Whilst the Welsh Government cannot meet the shortfall created by the welfare reform changes it is committed to taking action to mitigate the impact of the reforms. We are continuing to use the findings from research on the impact of the UK Government's reforms in Wales to help target support and to prioritise resources to reduce poverty in Wales. The Ministerial Task and Finish Group have commissioned a further research programme following the announcement in the UK Government's Summer Budget 2015 of significant welfare cuts of £13 billion a year

by 2020-21. The first report 'The impact of the UK Government's welfare, personal tax and minimum wage reforms in Wales' was published in September 2015.

This report is available at:

<http://wales.gov.uk/topics/people-and-communities/welfare-reform-in-wales/analysingreforms/?lang=en>

The Department for Work and Pensions (DWP) is working closely with the Welsh Government on the implementation within Wales, of their policy to introduce Tailored Conditionality for claimants of Universal Credit undergoing structured treatment for substance misuse. The DWP is also working closely with Local Authorities on the development of the Universal Support to be delivered locally for the most vulnerable claimants for the implementation of Universal Credit and launched 11 robust trials across Wales, Scotland and England for a 12 month period starting in September 2014. DWP have posted an interim evaluation report conducted by the Centre for Economic and Social Inclusion in September 2015 on the Learning Network an online facility for Local Authorities and delivery partners.

4. TACKLING AVAILABILITY AND PROTECTING INDIVIDUALS AND COMMUNITIES VIA ENFORCEMENT ACTIVITY

The Welsh Government is aiming to reduce the harm caused by substance misuse related crime and anti-social behaviour by tackling the availability of illegal drugs and the inappropriate availability of alcohol and other substances, including the sale of alcohol or solvents to young people. This section outlines the work the Welsh Government is doing to achieve this aim.

4.1 Availability of Alcohol

4.1.1 Minimum Unit Pricing

There is compelling evidence that minimum unit pricing for alcohol is an effective public health measure aimed at reducing the health harms associated with excessive alcohol consumption.

In order to support the evidence base, Sheffield University were commissioned to undertake specific modelling work for Wales using the Sheffield Alcohol Policy Model. The work, published on 8 December 2014, concluded that the effect of modelled policies on consumption and expenditure for a 50p MUP would reduce alcohol consumption for the overall population by 4.0% or 30.2 units per drinker per year. It also found that high risk drinkers have much larger estimated consumption reductions for MUP policies than increasing risk or moderate drinkers.

A public attitude survey was also commissioned from Beaufort Research to test the Welsh public's responses to introducing a minimum unit price for alcohol in Wales. The survey, also published on 8 December, found that 49% are in favour of introducing MUP compared with 37% against. The survey found that the higher the level of MUP the more likely people were to drink less.

Following this further impact assessments and evidence gathering was undertaken which culminated in the Welsh Government publishing the draft Public Health (Minimum Price for Alcohol) (Wales) Bill on 15 July 2015 for a 5 month consultation exercise.



The draft Bill proposes to introduce a minimum unit price for a serving of alcohol sold in Wales, with a power for Welsh Ministers to set and amend this unit price in future through the use of subordinate legislation. The draft Bill also proposes provisions for local authorities to issue fixed penalty notices to anyone they suspect to have committed the offence of selling or authorising the supply of a serving of alcohol for a selling price below the minimum unit price.

On 3 September 2015, the opinion of the Advocate General of the European Court of Justice (ECJ) on the Scottish Government's legislative proposals for minimum unit pricing for alcohol was published. The Advocate General stated that having regard to

the principle of proportionality, the Scottish legislation may be perceived as discriminatory, restrict trade and distort competition, but could be justified on public health grounds if the Scottish Government could prove that it was more effective and less damaging than other measures such as targeted taxation.

The Welsh Government has welcomed the opinion of the ECJ Advocate General which indicates that minimum unit pricing may be compatible with EU law if it can be shown to be more effective than other alternative measures.

The final response from the European Court of Justice is due in the coming months, following which the case will return to the Scottish courts. In the meantime, we will continue to consult on our own proposals to introduce a minimum unit price for alcohol during the current consultation which ends on 11th December 2015.

4.12 Alcohol Licensing

The Welsh Government is disappointed that the UK Government St David's Day command paper, published on 1 March 2015, did not address the issue of devolution of alcohol licensing.

However, the Welsh Government continues to make the case for devolution of alcohol licensing due to the strong public health considerations and have continued to pursue this, as part of the Wales Bill process. A detailed analysis of the policy rationale for devolving the licensing of the sale and supply of alcohol and late night refreshment to the National Assembly has been undertaken and used to inform the First Minister's representations to the Secretary of State for Wales on the content of the Wales Bill.

4.13 Welsh Government Alcohol Industry Network

The Welsh Government has continued to support the UK Government's Public Health Responsibility Deal and we have established an alcohol industry network so that we can gain a better understanding – at the Wales level - of how industry are delivering on the Public Health Responsibility Deal pledges. We are also considering what further action could help us address issues surrounding alcohol misuse and responsible drinking in Wales. Three meetings of the group have been held to date.

4.2 Tackling the Availability of Illegal Drugs



During 2014/2015 the Welsh Government has continued to support the Police led Regional Organised Crime Unit (ROCU), Tarian which encourages all partners to develop stronger links between drug enforcement activity at a local and regional level, both in terms of intelligence gathering, assistance with local initiatives and community reassurance.

Tarian's key successes for the financial year 2014/15 are:

- 39 persons sentenced to a total of 171 years and 8 months.

- The seizure of 1Kg of heroin, 41Kg of cocaine, 700 tablets of MDMA (Ecstasy), 7Kg of amphetamine and 185Kg of cannabis (bush and resin), 45Kg of cutting agent.
- The seizure of a Baikal pistol, with silencer and 10 rounds of ammunition.
- The seizure of £32,500 in cash with major confiscation cases ongoing.
- The major disruption of 7 Organised Crime Groups (OCG's) following significant sentences and seizures.

4.3 Night Time Economy

The consultation on the revised managing the night time economy framework went live on 24 September and will run until 17 December 2015. The purpose of this document is to provide a framework for local authorities, local health boards, night time economy teams, community safety leads and other stakeholders to assist them in developing and delivering local plans and strategies to address drug and alcohol-related disorder and anti-social behaviour in our towns and cities, and to improve access to the night-time economy for a wider population.

5. SUPPORTING THE DELIVERY OF THE STRATEGY

This chapter sets out the arrangements in place for supporting and monitoring the delivery of the strategy at a national and regional level.

5.1 *Substance Misuse National Partnership Board*

The Substance Misuse National Partnership Board, continues to oversee the delivery of the 'Substance Misuse Strategy for Wales 2008-2018 - Working Together to Reduce Harm' and the associated delivery plan.

Membership of the board comprises Welsh Government, statutory agencies, criminal justice agencies, the third sector and service user representatives. Its role is to advise Ministers, via Welsh Government officials, on progress relating to any related work streams, emerging issues and any risks to the delivery of the substance misuse strategy and the 2013-15 delivery plan.

The board also has a key role in the development of the 2016-18 delivery plan.

5.2 *Advisory Panel on Substance Misuse (APoSM)*

The Advisory Panel on Substance Misuse is an expert Welsh Government Sponsored Body, which advises on the delivery of the Welsh Substance Misuse Strategy, on substance misuse issues, operational arrangements and the impact of policy development in related fields.

The Panel's focus this year has been on reviewing the harms associated with prescription only analgesics. This review is being undertaken in two parts with part one of the review, which focuses on tramadol, scheduled to report next month (November). Part two which will look at wider opiates will report in April 2016.

Good progress has also been made to review the Welsh Government policy interventions needed for tackling substance misuse in an ageing population. Community visits have been undertaken and written and oral evidence received and are being used to inform the report which is currently being drafted. The final report is expected to be published in December 2015.

The focus for 2016 will be part two of the harms associated with prescription only analgesics and providing advice on the recommendations from the Health and Social Care Committee Inquiry into New Psychoactive Substances.

5.3 *Development of 2016-18 Delivery Plan*

High level substance misuse outcomes mapped against relevant Goals contained within the 'Well being for Future Generations Act 2015' have been agreed and six stakeholder workshops have been held across Wales during April / May to explore what actions were needed to deliver the substance outcomes identified. Across the workshops 109 people attended from approximately 50 organisations, including

Housing, Probation, DWP, service users, commissioners and education representatives.

The outcomes of these workshops have been followed up with individual discussions with policy leads across Welsh Government and other specialist agencies to develop proposed 'SMART' actions. Further consultation has also taken place with 'Young People in Wales' in order to gain insight from a children and young person's perspective.

Alongside this, the Data Information and Analysis Board (DIAB) have been reviewing the available population and performance indicators available to ensure the impact of the next delivery plan is effectively measured.

A draft delivery plan in line with the principles of prudent healthcare has developed in order to be considered by the National Partnership Board. Formal consultation will be held over November / December with the new plan commencing in 2016.

5.4 Research

The Welsh Government continues to be committed to undertaking research in order to support the development of evidence based practice. Two research projects have been carried out in 2015. This has involved Welsh Government officials working closely with both the University of South Wales and Swansea University.

Both projects involved in depth qualitative research including further analysis of those who engage with sex work and use substances and the nature and consequences of no fatal overdoses.

The data collection element of the research is now complete and is currently being analysed before reports are compiled later in the Autumn.

5.5 Health and Social Care Committee Inquiries into Substance Misuse

The recommendations from the National Assembly for Wales Health and Social Care Committee inquiry into New Psychoactive Substances (NPS) were published on the 18th March 2015 and a ministerial response accepting all 14 recommendations was submitted on 29th April 2015.

The Health and Social Care Committee also published their report on their inquiry into alcohol and substance misuse in August 2015. A ministerial response accepting all 21 recommendations was submitted on 16th September 2015. The report can be accessed at:

<http://www.senedd.assembly.wales/mglIssueHistoryHome.aspx?Ild=11450>

Recommendations from both inquiries are being considered as part of the development of the new three year delivery plan.

Strengthening Arrangements for Delivery at a Regional Level

5.6 Substance Misuse Area Planning Boards (APBs)

The regional APBs across Wales that were established in 2010 now routinely report to the Welsh Government in relation to progress against the APB actions in the national 'Substance Misuse Delivery Plan 2013-15', progress in achieving the substance misuse Key Performance Indicators and compliance against the core standards, which set out the minimum standards expected for substance misuse services.

The Welsh Government also recently published revised Commissioning Guidance, which aims to provide guidance to APBs on developing a commissioning strategy and takes into account emerging expertise on commissioning; the strengthened role of the APBs, the requirement to establish an outcome based commissioning strategy and new national and local priorities.

A copy of the guidance can be found below:

www.wales.gov.uk/substancemisuse

5.7 *Developing the Substance Misuse Workforce*

Significant emphasis is placed by Welsh Government upon Area Planning Boards having a suitably trained work force across their commissioned provider network with ongoing development opportunities being made available. This principle is supported by the 'Substance Misuse Workforce Development Action Plan 2011-2014'. A review of the plan will take place next year to ensure that appropriate training and developmental opportunities continue to be made available to meet existing and future needs and to reflect prudent healthcare principles which suggest that the workforce should be organised around the 'only do what only you can do' principle; for example nobody should be seen routinely by a nurse when their needs could be appropriately dealt with by a substance misuse worker.

Following the successful second year of the Welsh Government substance misuse bursary scheme, which enabled over 200 individuals to access a variety of development opportunities, the funding in 2014/15 for the Bursary scheme has been directly allocated to Area Planning Boards to meet specific regional training needs. The funding provided a variety of training opportunities on a range of topics including New Psychoactive substances (NPS), Volatile Substance Abuse to supporting Recovery in a variety of contexts and understanding Alcohol Related Brain Damage (ARBD), with again over 350 individuals across Wales engaging in and benefitting from the process which represents a substantial increase on 2013/14.

5.8 *Measuring Progress*

Information on the performance of substance misuse services can be found in the Welsh Government's annual statistical report drawn from data collected via Welsh National Database for Substance Misuse (WNDSM). The report entitled 'Treatment Data -Substance Misuse in Wales 2014-15', showed that the total number of clients

assessed in 2014-15 was up 11% from 2013-14 and the total number of clients starting treatment in 2014-15 was up 10% on 2013-14.

Of the 16,497 clients who started treatment (and had valid waiting times), the percentage that started within 20 working days was 87.0% in 2014-15, slightly down on 2013-14.

Further information on the prevalence and profile of substance misuse in Wales can be found in the Public Health Wales document entitled 'Profile of Substance Misuse in Wales 2014-15', which summarises routinely-reported substance misuse related evidence currently available in Wales

A copy of the reports can be found :-

www.wales.gov.uk/substancemisuse

5.9 Funding the Strategy

The Substance Misuse Action Fund (SMAF) budget for 2015-16 remains at £32.047 million. £22.663 million of the SMAF Revenue budget is allocated to the Area Planning Boards. This budget continues to support a number of projects ranging from education and prevention projects to treatment services. The budget also includes £2.75 million in revenue funding ring-fenced for Children and Young People's services to fund the continued development of substance misuse services for under 18s and additional ring fences are also in place to secure counselling and Tier 4 service delivery.

The voluntary sector receives a significant proportion of this funding equating to just under £11 million in 2014/15.

A breakdown of the full Substance Misuse Action Fund can be seen below:-

Budget	2015-16
SMAF Revenue APB Allocations	£ 22,663,000
All Wales Schools Programme	£ 2,200,000
Out of Work Service Project	£ 600,000
SMAF Capital Funding	£ 5,072,000
*Policy Development	£ 1,012,000
Operation Tarian	£ 500,000
Total	£ 32,047,000

** includes funding for Naloxone, Public Health Wales, DAN 24/7 Helpline and, the Welsh National Database for Substance Misuse*

Additionally £17.134m continues to be ring fenced within the Health Board budget for substance misuse services, bringing the total Welsh Government investment in 2015-16 to almost £50m.

5.10 Capital Funding

Capital resources continue to be allocated to APBs. A total of 57 projects have been approved for funding from the Capital fund since the last annual report. The Third Sector continues to benefit substantially from this funding stream and received £2.18 million for 45 capital projects during this period.

Celtic Court, Bridgend

Successful utilisation of the capital fund in the last year has included the development and provision of a multi agency base in Bridgend 'Celtic Court' which has been designed to ensure that services are integrated and being provided in a safe, accessibly, modern and clinically compliant environment. The project has been developed over the last three years with a total SMAF Capital investment of £2,411,341. The co-location of services will also offset wasted resource with at least two agencies sharing facilities such as training room, toilets, car parking, kitchen, and administrative space facility complementing the existing estate and services already available in the area.

<u>Before</u>	<u>After</u>
	
	

Champions House, Wrexham

In North Wales, following a SMAF Capital investment of £536,919 the Deputy Minister formally opened Champions House/ Tŷ Hyrwyddwyr on the 27th November 2014.

Champions House/ Tŷ Hyrwyddwyr, managed by CAIS, a third sector provider, is a new multiagency Recovery Hub managed by service users for service users.



Deputy Minister at opening of Champions House 27 November 2014

The facility will support referrals for an estimated 1,500 service users. It empowers and enables service users and those who have recently left structured treatment to develop and implement various self help and peer approach groups in a dedicated supported environment. The resource will be self financing and does not draw on Substance Misuse Action Fund (SMAF) revenue funding.

In addition, the first and second floors have been used to relocate CAIS and local Criminal Justice staff working on projects in a multiagency context across the Wrexham area. These include Counselling, Parabl (Mental health), Therapeutic Interventions, supporting people, Change Step Military Veteran's service, Mentoring and Recovery Coaching, Service User Groups and Drug Intervention Programme. The resource also provides rooms for confidential counselling/therapeutic services.

Further information is available at:

<http://www.cais.co.uk/services/champions-house-recovery-hub/>

CONCLUSION

This report demonstrates that there continues to be significant progress made to deliver the key priorities set out in the Substance Misuse Strategy 'Working Together to Reduce Harm' and the accompanying Delivery Plan 2013 – 15.

We must not under-estimate the challenge that the public sector faces in light of ongoing budgetary pressures. Therefore we must continue to focus on prudent, evidence based activity to ensure that every pound of tax payers' money is used to achieve the greatest impact on outcomes.

Our priorities for the forthcoming year include:

- Finalisation and delivery of the agreed commitments in the next 2016-18 Substance Misuse Delivery Plan. This will include ::
 - Greater involvement of primary care services.

- Further emphasis on embedding recovery approaches into treatment.
- Greater emphasis on workforce development.
- Requirement to refresh the national core standards and to review the regulatory environment.
- Continue to raise awareness and develop policy responses in relation to New Psychoactive Substances.
- Further work to reduce blood borne viruses.
- Further work in relation to prevention and education (including parents specifically)
- Further emphasis required to reduce the stigma relating to substance misuse and ensuring clients are treated with dignity and respect.
- Reviewing the responses to the consultation on a draft Public Health (Minimum Price for Alcohol) (Wales) Bill and consider next steps.
- Working with primary care practitioners so that they are better equipped to address the needs of those with substance misuse issues
- Implementing the two European Social Fund (ESF) projects to support people with substance misuse issues in the workplace and to help people with substance misuse issues back into work.
- Responding to the Advisory Panel on Substance Misuse review of the harms associated with prescription only analgesics Part 1: Tramadol and the review of the policy interventions necessary to tackle substance misuse in an ageing population.
- An increased focus on Alcohol Related Brain Damage to prevent, diagnose and treat ARBD more effectively at a regional and national level.
- Developing practice guidance for the assessment of people with Substance Misuse issues in line with the implementation of the Social Services and Well-being (Wales) Act 2014
- Analysing the responses from the 12 week consultation, revising and publishing the Night Time Economy Framework.
- Complete and implement the all Wales contract for needle exchange paraphernalia and products used by services across Wales.
- Complete the pilot of Young Persons Outcome tool and incorporate finalised tool into the Welsh National Database for Substance Misuse

For further detail on the Welsh Government's work programme over the next year please refer to the Substance Misuse Strategy Delivery Plan 2013 – 2015 at <http://wales.gov.uk/topics/housingandcommunity/safety/substance/publications/dplan/?lang=en>.