

Leeds

Drug and Alcohol Strategy and Action Plan

2019 – 2024

Leeds is a compassionate city that works with individuals, families and communities to address drug and alcohol misuse.

Our vision supports the wider vision for Leeds - that, by 2030, Leeds will be locally and nationally recognised as the best city in the UK - driving forward change by working effectively with our partners, stakeholders and service users.

This document describes our plans for addressing drug and alcohol misuse in Leeds. Informed by the ambitions and challenges of the Government's latest Drug and Alcohol Strategies, as well as our local ambitions to deliver the Safer Leeds Community Safety Strategy, the Leeds Health and Wellbeing Strategy, Best Council Plan and The Leeds Health and Care Plan, we have worked collaboratively to agree our vision, and the priorities and actions to achieve agreed outcomes.

The success of this strategy will also contribute to achieving our City Priorities including ensuring that Leeds is the best city for Health and Wellbeing; a Child-Friendly City and contributes to Safe, Strong Communities.

Our strategy and action plan covers children, young people and adults and takes account of an individual's life course.



Why have a Drug and Alcohol Strategy?

Drug and alcohol misuse affects a large number of people, not just those who misuse drugs and alcohol but also their families, loved ones, carers, wider communities, services and businesses.

The consequences of drug and alcohol misuse for people and society are wide ranging and can be long lasting. Our vision is that Leeds is a compassionate city that works with individuals, families and communities affected by drug and alcohol use to help them to make better and informed choices, and lead healthier, safer and happier lives. An important element of the strategy is around minimising drug and alcohol misuse, in order to reduce harm and prevent associated problems from escalating.

In October 2018, the government announced that there would be a major independent review of drug misuse. Looking at a wide range of issues, including the system of support and enforcement around drug misuse, to inform thinking about what more can be done to tackle drug harms. The Review will seek to discover as much as possible about who drug users are, what they are taking and how often, so that law enforcement agencies can target and prevent the drug-related causes of violent crime effectively. The Review will also look at the health and social harms associated with drug use, identifying evidence-based approaches to preventing and reducing drug use, as well as highlight any gaps in the evidence about what works.

The Review will be held in two parts, with part one focusing on:

- i. The demographics of drug use. This will look at demand, including who uses which types of drugs, together with patterns of, and motivations for, use; and
- ii. The drugs market. This will look at supply into and within the UK and how criminals meet the demand of users.

The scope of the second part will be determined once the first part has reported, this is expected by summer 2019.

This is supported by the government's appointment of a Drug Recovery Champion, who will help drive forward the aims of the government's Drug Strategy and Serious Violence Strategy and work with ministers to agree an annual delivery plan for drug recovery. They will also support collaboration between partners such as local authorities, housing groups and criminal justice agencies at national and local levels, offering advice on best practice in relation to treatment and recovery.

The governance in place to deliver the local strategy and action plan will ensure we input into, and keep up to date with the developments of the national review and action plan, any other national government recommendations, and update local plans where appropriate.

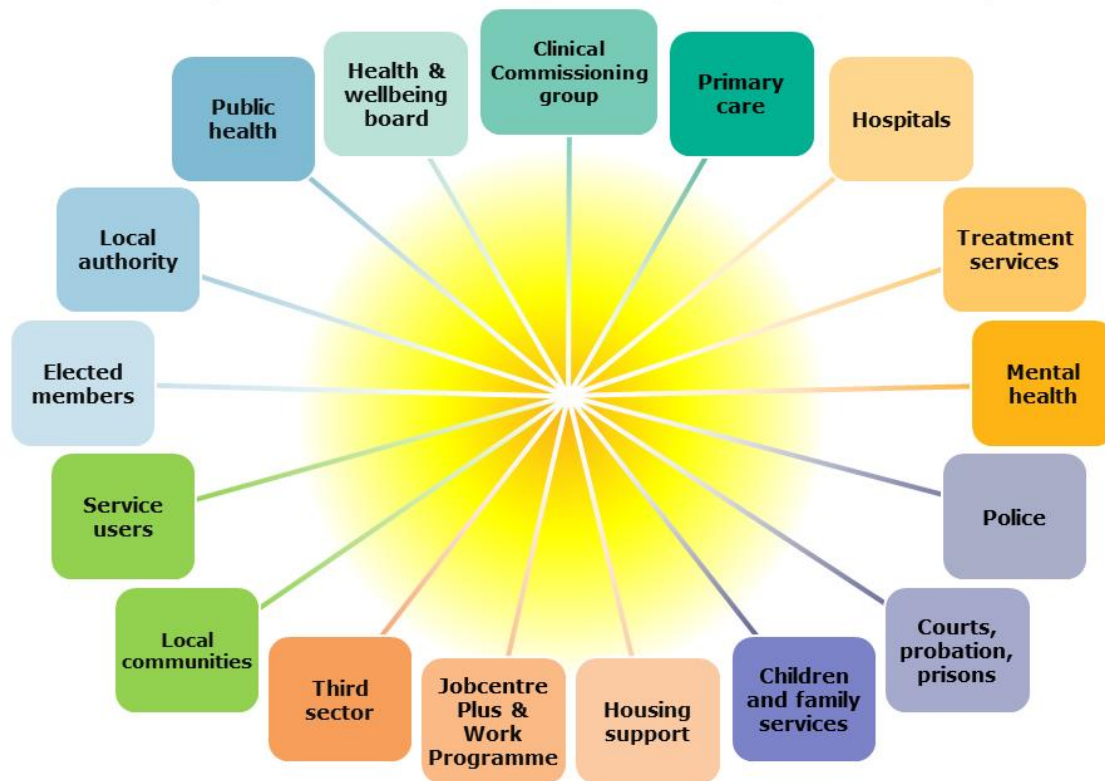
How are we going to achieve the vision?

- Whilst the aim is to prevent or reduce drug and alcohol misuse, it is recognised that some people are unable or unwilling to stop using drugs and/or alcohol. Therefore, a harm reduction approach will also be taken, which aims to reduce the harms associated with the use of drugs and alcohol. This very much fits with the ambition to be a compassionate city.
- The Leeds Drug and Alcohol Strategy and Action Plan feeds into the Leeds Best Council Plan. Therefore, it impacts on, and is influenced by, a number of different council strategies and plans including, but not limited to:
 - Leeds Health and Wellbeing Strategy
 - Leeds Health and Care Plan
 - Leeds Community Safety Strategy
 - Leeds Reducing Reoffending Strategy
 - Leeds Inclusive Growth Strategy
 - Leeds Housing Strategy
 - Leeds Mental Health Strategy
 - Leeds Children and Young People's Plan
 - Leeds Best Start Plan
 - Future in Mind: Leeds (a strategy to improve the social, emotional, mental health and wellbeing of children and young people aged 0-25 years)
 - Leeds Maternity Strategy
 - Leeds City Council Equality Improvement Priorities
 - Leeds Better Lives Strategy
 - West Yorkshire and Harrogate Health and Care Partnership Plan.
- An effective governance framework will be developed to monitor the drug and alcohol strategy and deliver the accompanying action plan.
- We acknowledge the importance of close working with NHS partners to deliver this strategy and reflect the NHS Forward Plan, which encourages the NHS to do more around the prevention agenda. We will also engage with Primary Care Networks and Local Care Partnerships across the city to ensure that primary care play their part.
- The importance of our third sector partners who contribute to the drug and alcohol agenda is recognised and highly valued; ensuring partnership working is effective, developing a shared citywide approach to addressing the challenges caused by drug and alcohol misuse, resulting in services that are better integrated, including mental and physical health, criminal justice, housing, and employment and skills.
- We recognise the work being done across West Yorkshire and the wider region and how what we do in Leeds fits into this, as well as where we can work collaboratively with partners in other areas. In addition, the priorities outlined within the West

Yorkshire and Harrogate Health and Care Partnership Plan align well with the drug and alcohol agenda and this provides a valuable platform for partnership building.

In order to deliver this strategy we will also ensure that we:

Drug and alcohol partnership working



- Work in partnership and co-produce with service users
- Work with vulnerable people, including families and those who are not currently accessing services, to direct help to those who need it most in order to better understand and meet their needs
- Use the best available evidence, data and intelligence to inform citywide decisions on drug and alcohol misuse and ensure resources are allocated effectively
- Review the action plan annually to take stock of what we have achieved and review and set actions for the following year(s)
- Work restoratively, using a 'Think Family' approach and to remain alert to current and emerging safeguarding issues
- Are aware of new and emerging issues and establish mechanisms to be able to quickly and effectively respond
- Respond to any recommendations relating to drugs and alcohol made in the Director of Public Health's annual report
- Encourage innovation and the use of new technologies
- Seek additional funding opportunities through business, private enterprise and academia to support the drug and alcohol agenda

What we know in Leeds:

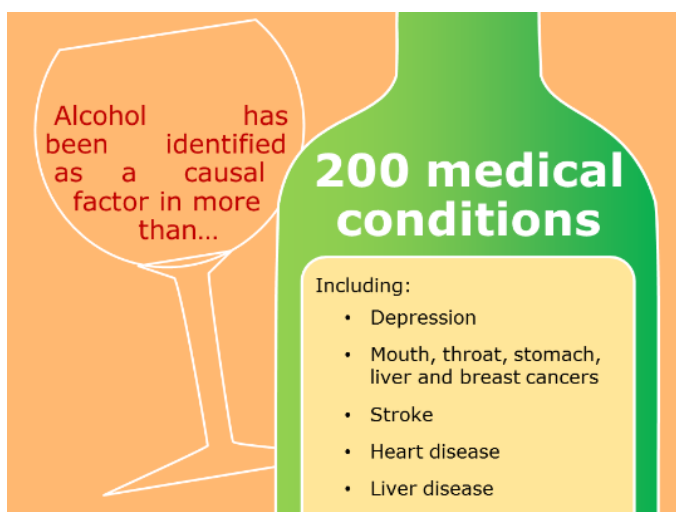
- Drug and alcohol problems are becoming increasingly complex. For example, there are more cases of poly-drug use, people often have co-occurring conditions such as mental health issues alongside their addiction and greater numbers of people addicted are to prescribed and over-the-counter medicines
- In addition to the above, people who misuse drugs or alcohol are at an increased risk of physical and mental health issues and social issues, such as insecure housing, unemployment and involvement in crime
- Children can suffer significantly where there is antenatal and parental drug and/or alcohol misuse, resulting in long term health problems into adulthood
- Of children in Leeds coming into care, a significant number are from families where the parents misuse drugs and/or alcohol
- Self-reporting of drug and alcohol use by children shows usage has dropped over the past few years
- There is an increase in numbers and visibility of vulnerable people involved in street based activities, including people who are rough sleeping, begging and street based sex working, who have complex needs and require intensive support
- Synthetic Cannabinoid Receptor Agonists – SCRAAs (which includes ‘spice’) are increasingly used in specific populations, including prisoners, rough sleepers and vulnerable young people, and despite the change in law, are having a negative impact across the city, with significant issues occurring in prisons and parts of the city centre
- We have an ageing cohort of heroin users who have been using for many years and consequently have many physical health issues, such as liver and kidney disease
- A new cohort of younger (18-25 year olds) heroin users has recently been identified, many of whom are new drug users (which increases the risk of harm)
- Misuse of prescription and over the counter drugs is an increasing concern and is often a factor in drug-related deaths
- There has been a national rise in drug related deaths and locally we have seen a larger proportion of men dying prematurely from drug and alcohol misuse, particularly in deprived areas
- There has been a significant increase in the number of women dying, and at a younger age, because of their alcohol misuse in Leeds
- Drug litter such as syringes, needles and foil is a growing issue across the city
- A considerable amount of crime, including serious organised crime, is linked to drugs and alcohol
- An increasing amount of drugs are purchased over the internet, including on the “Dark Web”
- Leeds has a growing and vibrant nightlife and an availability of cheap alcohol, which impacts upon drinking behaviours
- LGBT+ communities are disproportionately impacted by drug and alcohol abuse, driven by experiences of social marginalisation, discrimination and prejudice.

What are we going to do?

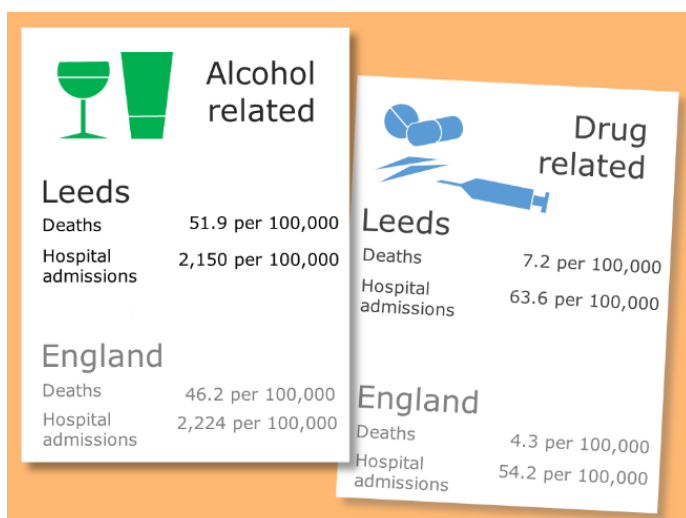
We have set out 5 key outcomes supported by an action plan:

1. Fewer people misuse drugs and/or alcohol and where people do so they make better, safer and informed choices

We will ensure people understand the potential harms of drugs and alcohol, and that they have the knowledge and options available to them to make better, safer and informed choices, giving everyone opportunities to lead fulfilling lives. We will work to ensure that we 'Think Family' and are better able to identify and support vulnerable individuals and families affected by drug or alcohol misuse. We will ensure we recognise and act on key points where people are considered most vulnerable to harm, such as people leaving custody. We will do this by focussing on the following sub outcomes:



Medical conditions where alcohol has been identified as a causal factor (Public Health England, 2018)



Alcohol and drug-related deaths and hospital admissions in Leeds, compared to the national rate, per 100,000 (Public Health England, 2018)

Outcome 1.1 – Increase public awareness of issues relating to drugs and alcohol

Outcome 1.2 - Increase the safety of all our communities by reducing the amount of drug-litter on our streets and improving use of pharmacy based needle exchange services

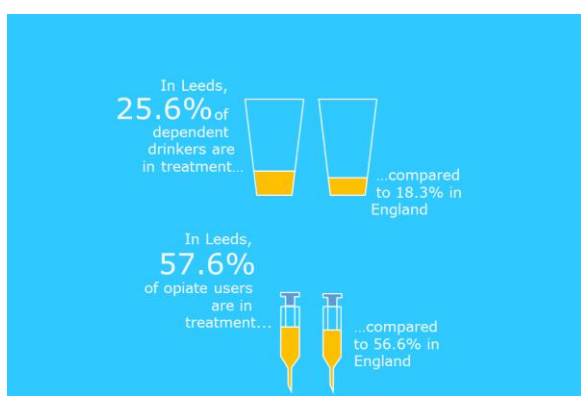
Outcome 1.3 – Ensure the availability of high quality harm reduction services

2. Increase in the proportion of people recovering from drug and/or alcohol misuse

Drug and alcohol treatment is effective in improving health and saving lives. We will ensure services continuously improve and are informed by, and responsive to, the needs of those who misuse drugs and alcohol. We will provide clear and easy routes into treatment and services that support recovery and address people's individual needs, including mental and physical health, housing, and employment and skills. We will prioritise vulnerable groups for treatment including people who are homeless, rough sleeping, sex working, leaving prison, and parents and families who need more support and flexibility to access services. We will do this by focussing on the following sub outcomes:



Social return on investment of drug and alcohol treatment (Public Health England, 2018)



Percentage of dependent drinkers and opiate users in treatment in Leeds, compared to the national average (Public Health England, 2019)

Outcome 2.1 – Ensure treatment services are effective, of high quality and are easily accessible
Outcome 2.2 – Ensure that there are pathways and services in place to support drug and alcohol users to access the support they need for issues linked to their drug and alcohol use
Outcome 2.3 – Leeds provides a wide and varied number of options to promote and support recovery

3. Reduce crime and disorder associated with drug and/or alcohol misuse

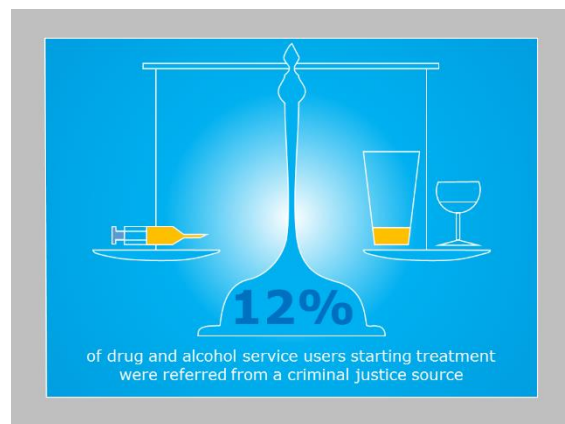
A significant amount of crime in the city is linked to drug and alcohol misuse, either through people committing crime to fund drug and alcohol use, or through behaviours associated with the use of drugs and alcohol, e.g. street drinking and street drug use. Leeds has three prisons within its boundary and a women's feeder prison just outside. We will work across the prisons, police and probation to ensure offenders with drug and alcohol misuse issues have clear routes into services and opportunities for effective rehabilitation.

Working with partner agencies, we will influence the night time economy and reduce drug and alcohol harm. We will also work with relevant criminal justice agencies to disrupt and reduce the impact of organised crime groups and reduce the inappropriate availability of drugs and alcohol.

We will ensure that we protect children and young people from being exploited by addressing the impact of drugs and alcohol on Child Sexual Exploitation (CSE)/Child Criminal Exploitation (CCE) including across county lines. We will also improve our understanding of links between youth violence and drugs and alcohol and develop our responses accordingly.

With well evidenced links to drug and alcohol use, domestic violence and abuse is a priority for many partnerships. We will ensure that these links are embedded within the action plan.

We will do this by focussing on the following sub outcomes:



Percentage of drug and alcohol service users starting treatment who were referred from a criminal justice source (Public Health England, 2019)



Percentage of known organised crime groups who are associated with illicit drug supply, in Leeds (Leeds City Council, 2019)

Outcome 3.1 – Reduce offending and antisocial behaviour associated with drug and alcohol use and improve outcomes for drug and alcohol offenders

Outcome 3.2 – Reduce the inappropriate availability of illicit drugs and alcohol

Outcome 3.3 – Ensure services are in place to tackle domestic violence and abuse linked to drugs and alcohol

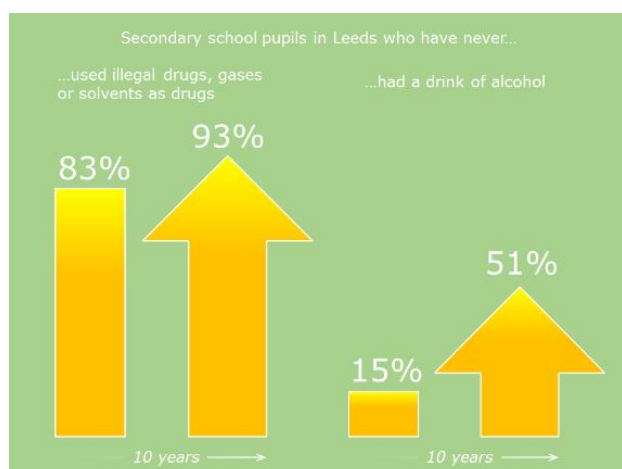
4. Reduce impact of harm from drugs and alcohol on children, young people and families

Leeds wants to be the best city for children and young people to grow up. We want to ensure that we protect children and young people from the harmful effects of substance misuse and aim to achieve this by an effective prevent and treatment approach that is bespoke to children's and young people's needs. We recognise that a number of children and young people have had adverse childhood experiences (ACEs), caused by parental/carers substance misuse and we aim to reduce this number by supporting their parents and carers to address their substance misuse. We know that the vast majority of young people in Leeds do not have any issues with substances.



Potential financial benefit from investment in young people's drug and alcohol interventions (Public Health England, 2018)

However there are a small minority that need this additional support. We will do this by focussing on the following sub outcomes:



Percentage of secondary school pupils in Leeds who have never used illegal drugs, gases or solvents as drugs, or had a drink of alcohol – 2017/18 compared to 2007/08 (Leeds City Council, 2018)

Outcome 4.1 – Make sure children and young people are informed about the potential harms of drugs and alcohol

Outcome 4.2 Protect children and young people and prevent harm by supporting parents / carers into effective treatment

Outcome 4.3 – Protect children and young people; including addressing the impact of drugs and alcohol on Child Sexual Exploitation (CSE)/Child Criminal Exploitation (CCE)/domestic violence and abuse (DVA)

Outcome 4.4 – Ensure children and young people are supported to access services for their drug and/or alcohol use

5. Addressing specific emerging issues

Drug and alcohol misuse is an ever changing landscape, requiring systems, mechanisms and structures in place to respond quickly and effectively to new and emerging issues. A section of the action plan will focus on these specific issues and processes for responding to them. We will ensure that the complexity and vulnerability around drugs and alcohol is on the agenda of safeguarding boards, encouraging collaborative work across the wide range of agencies and services throughout the city.

How will we check on progress?

The Drug and Alcohol Board is a partnership of Public Health, Safer Leeds, the NHS, Police, Prisons, Probation, Adults and Health, Children's Services and the third sector. The board has developed the strategy and action plan in consultation with a wide range of partners, providers and service users. This Board will set key performance indicators and oversee and drive the delivery of the action plan.

Members of the board will be responsible for different areas of the action plan and will be accountable to the Board for the delivery of that area.

A regular update will be provided to the Board on the progress of the action plan, against key performance indicators, which will be refreshed annually by the board.

The Board will report on the progress towards achieving strategic outcomes to the Health and Wellbeing Board. Progress on priorities to reduce the impact of drugs and alcohol on crime and disorder will also be reported to the Safer Leeds Executive. Progress on priorities for children and young people will be reported to the Children and Families Trust Board.

Appendices:

1. Achievements over the last year
2. Performance and intelligence to support the strategy and action plan
3. Governance structure
4. Action plan
5. Plan on a page

Appendix 1

Achievements over the last year (2018-2019):

This appendix will be updated on an annual basis following the review of the action plan to highlight the achievements over the previous year.

Much has changed in Leeds since the last Drug and Alcohol Strategy. Forward Leeds was commissioned in 2015 to provide an integrated prevention, treatment and recovery service to support people with drug and / or alcohol issues. The service is provided by a consortium of four organisations, led by Humankind, and delivered from three hubs (in Armley, Seacroft and Kirkgate), as well as in primary care settings. It provides tailored support to around 3,500 individuals at any one time. The integrated service includes:

- Early intervention and prevention
- Harm reduction (including needle exchange)
- Recovery co-ordination
- Access into community and residential detox
- Support for families
- Young people's services
- Specialist services for those who have additional complex needs e.g. mental health or pregnancy
- Supporting a dedicated and thriving recovery community.

Forward Leeds have recently developed and introduced a number of specialist services, in order to respond to local need, including:

- Actively working with BASIS Yorkshire and the Joanna Project, to provide enhanced support for women involved in sex work, who require treatment for their drug and alcohol use, with a dedicated recovery co-ordinator in each hub
- A new service for 'entrenched users', called *Positive Challenge* – an approach that seeks to address the needs of service users who are five years or more in treatment, who are recognised as needing dedicated support through the Recovery Co-ordinators and the prescribing team
- Improved pathways for 18-24 year olds, with those defined as vulnerable (e.g. care leavers) now seen by the Young People team, to utilise their expertise with this client group
- A refocus of the Dual Diagnosis team to work with service users who are experiencing or have experienced suicidality, trauma, personality disorder and psychosis
- The development of a community-based reduction and medically assisted detoxification programme for Synthetic Cannabinoid Receptor Agonists (e.g. "spice")
- The development of specific referral pathways from hospital into treatment for young people aged 16-17.

Ultimately, the aim is for Leeds to be one of the best performing cities in the country, something it is on its way to achieving. Outcomes for people affected by alcohol and non-opiate substances are better than they have ever been in Leeds and the ambition is to achieve the same for opiate users.

To complement this work, the Drug and Alcohol Social Marketing Planning Group (S-MAP), have delivered a number of citywide drug and alcohol campaigns over the last year, including:

- Guides to Synthetic Cannabinoid Receptor Agonists (e.g. “spice”) produced for both professionals/ businesses/ the public, and those who use/might use SCRAAs. This was supplemented by a series of *Want to Know More About* training sessions in partnership with the Public Health Resource Centre
- The *No Regrets* campaign – a website and social media-based responsible drinking campaign, aimed at 18-25 year olds
- Show cannabis some respect campaign, aimed at Leeds school children
- A series of events held across the city, where people could pledge a positive change to their drinking, as part of 2018’s Alcohol Awareness Week.

In addition, a wide range of health (including primary care, secondary care and the third sector), criminal justice (including the police, prisons and probation) and community safety partners, and children’s services across the city have worked collaboratively to address a wide range of drug and alcohol-related issues, including:

- Using the Leeds Alcohol Licensing Data Matrix, to inform the alcohol licensing process
- Providing free drug and alcohol awareness training, aimed at the night time economy and those who work in the bars, pubs and clubs in the city whether behind the bar or working on the door in a security role. This training is also open to partners including security firms who work across all the main shopping arcades in the city
- Training hospital staff in the delivery of Identification and Brief Advice (IBA) to those with alcohol issues
- Delivering drug and alcohol programmes in schools
- Developing an alcohol education tool
- City wide distribution of naloxone to those at risk of overdose
- Early identification and treatment of those with alcohol-related liver disease, as part of a Community Hepatology Programme in partnership with primary care
- Identifying hard to reach drug and alcohol using populations, with street outreach teams operating in the city centre alongside a newly established Street Support team – an integrated, multidisciplinary team who work to ensure those with the highest levels of need receive bespoke support
- Responding to discarded needles/ drug paraphernalia issues, including the introduction of a new enhanced needle waste service and the installation of a number of needle bins across the city.

The Leeds Drug and Alcohol Strategy and Action Plan will build on what has already been achieved and provide clear focus and direction to further develop the city’s response to drug and alcohol issues.

Appendix 2

Key Performance Indicators:

Key Outcomes 1: Fewer people misuse drugs and/or alcohol and where people do so they make better, safer and informed choices

- Decrease in prevalence of opiate and / or crack users
- Decrease in prevalence of dependent drinkers
- Increase in pharmacy needle returns

Key Outcome 2: Increase in the proportion of people recovering from drug and/or alcohol misuse

- Increase in successful completions of drug treatment
- Increase in Hep C testing and referrals into treatment

Key Outcome 3: Reduce crime and disorder associated with drug and/or alcohol misuse

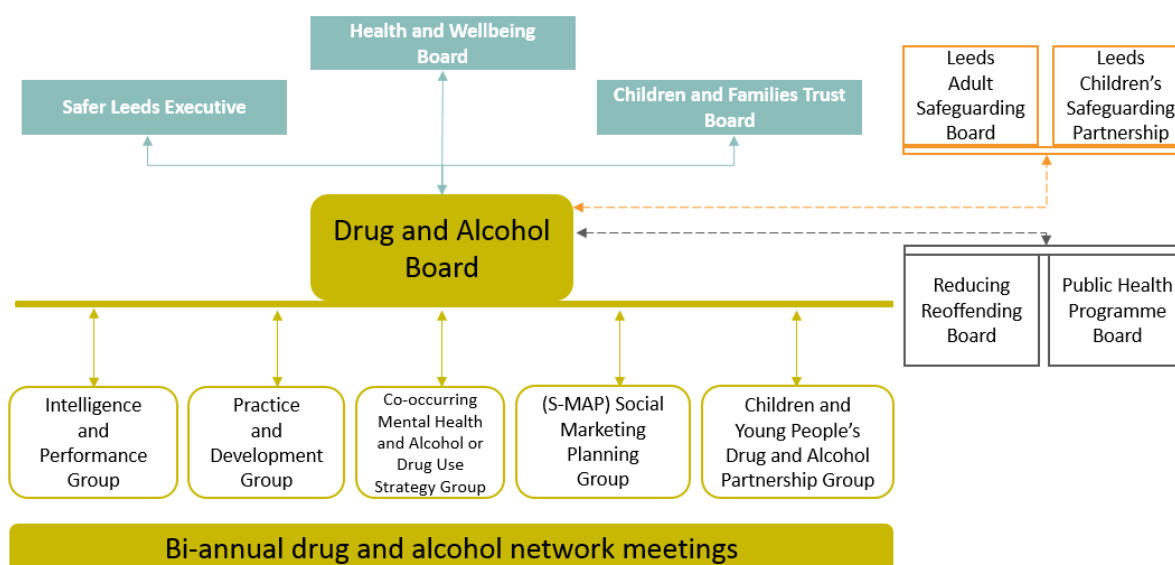
- Increase in successful completions as a proportion of all Criminal Justice clients in treatment
- Reduce violent crime involved with alcohol consumption
- Reduce A&E assault admissions with alcohol involved
- Increase positive outcomes for drug offences

Key Outcome 4: Reduce impact of harm from drugs and alcohol on children, young people and families

- Increase in secondary school pupils who have never had a drink of alcohol
- Decrease in secondary school pupils who have ever used illegal drugs, gases and solvents as drugs
- Decrease in children and families where drugs or alcohol was main reason for issuing care proceedings

Appendix 3

Governance structure:



The purpose of the Drug and Alcohol Board is to provide strategic leadership and ensure effective partnership work to deliver a city-wide Drug and Alcohol Strategy and Action Plan to achieve the following vision:

- *Leeds is a compassionate city that works with individuals, families and communities to address drug and alcohol misuse.*

It is supported by:

- Intelligence and Performance Group

The Intelligence and Performance Group of the Drug and Alcohol Board is established to provide the most accurate and up to date intelligence to support the delivery of the Drug and Alcohol Strategy and Action Plan

- Practice and Development Group

The Practice and Development group of the Drug and Alcohol Board is established to ensure best practice is delivered in drug and alcohol services, and that robust systems are in place to support the delivery of the Drug and Alcohol Strategy and Action Plan

- Co-occurring Mental Health and Alcohol or Drug Use (COMHAD) Strategy Group

The COMHAD Strategy Group is established to provide city wide strategic direction to ensure the development and delivery of excellent practice in working with services users with co-existing substance misuse and mental health problems. It will report to both the Mental Health Partnership Board and the Drug & Alcohol Board

- Drug and Alcohol Social Marketing Planning (S-MAP) Group

The Drug and Alcohol Social Marketing Planning (S-MAP) Group of the Drug and Alcohol Board is established to provide campaigns and promotional activity to support the delivery of the Drug and Alcohol Strategy and Action Plan

- Children & Young people's Drug & Alcohol Partnership Group

The Children & Young People's Drug & Alcohol Partnership Group of the Drug and Alcohol Board is established to provide oversight and delivery of the areas of the strategy and action plan that relate to children and young people

- Reducing Reoffending Board

The Reducing Reoffending Board (ROB) has a remit wider than that of drugs and alcohol and reports to the Safer Leeds Executive. All items considered by the ROB that relate to the Drug and Alcohol Strategy and Action Plan will be brought to the Drug and Alcohol Board

- Public Health Programme Board

The Public Health Programme Board (PHPB) has a remit wider than that of drugs and alcohol and reports to the Public Health Leadership Team. All items considered by the PHPB that relate to the Drug and Alcohol Strategy and Action Plan will be brought to the Drug and Alcohol Board

Appendix 4

Our vision and priorities action plan:

Leeds is a compassionate city that works with individuals, families and communities to address issues caused by the misuse of drugs and alcohol.

Although the strategy outlines our strategic objectives for the next five years, it is through the Action Plan where detailed progress and updates will be formally reported and regularly reviewed by the Drug and Alcohol Board. There is an expectation that the document will be added to, or actions altered to best meet any changes occurring in the city in relation to the drug and alcohol agenda. Therefore a more detailed working action plan will be maintained alongside the one outlined in this appendix.

Outcome 1 – fewer people misuse drugs and / or alcohol and where people do use they make better, safer and informed choices			
We will ensure people understand the potential harms of drugs and alcohol, and that they have the knowledge and options available to them to make better, safer and informed choices, giving everyone opportunities to lead fulfilling lives. We will work to ensure that we ‘Think Family’ and are better able to identify and support vulnerable individuals and families affected by drug or alcohol misuse. We will ensure we recognise and act on key points where people are considered most vulnerable to harm, such as people leaving custody.			
No.	Action	Target / Product	Group / Board
Outcome 1.1 – Increase public awareness of issues relating to drugs and alcohol			
Core business			
i.	Plan, develop and deliver marketing campaigns and promotional activity, through the Drug & Alcohol Social Marketing Planning (S-MAP) Group, that are effective and responsive to need and changes in drug and alcohol use	Deliver a range of marketing campaigns and promotional activity, including: • Annual (including national) campaigns • Seasonal campaigns • Campaigns targeted at specific populations • Ad hoc campaigns and promotional activity, as required Measured by reviewing website clicks, evaluations and calls to Forward Leeds Single Point Of Contact phone number following campaign activity.	S-MAP Group

ii.	Continue to promote prevention & harm reduction, through public engagement activities	Monitored through commissioners contract management processes	Public Health Programme Board
Focus for this year 2019-2020			
Outcome 1.2 - Increase the safety of all our communities by reducing the amount of drug-litter on our streets and improving use of pharmacy based needle exchange services			
Core business			
i.	Explore ways to prevent needles being discarded in the city	Monitor the six needle bins that were installed in 2018, and evaluate after one year. Implement recommendations	Practice and Development Group
ii.	Work with the Cleaner Neighbourhoods Team and Forward Leeds to develop the new Enhanced Needle Waste Service	Monitor, evaluate and establish a baseline for the Enhanced Needle Waste Service	Practice and Development Group
iii.	Work with LCC contracted pharmacy needle exchange services to improve the service that they provide	Increase the return rate of needles to pharmacies to 70% during 2019/20	Practice and Development Group
Focus for this year 2019-2020			
iv.	Increase engagement of people using pharmacy needle exchanges into services via new role in Forward Leeds of Assertive Needle Waste Worker	Baseline data and review 6 monthly	Practice and Development Group
Outcome 1.3 – Ensure the availability of high quality harm reduction services			
Core business			
i.	Every member of Forward Leeds staff are trained to deliver Identification and Brief Advice	All staff are trained and learning reflected in practice Monitored through commissioners contract management processes	Public Health Programme Board
ii.	Capture harm reduction activity, including information around equipment, support and	Monitored through commissioners contract management processes	Public Health Programme Board

	advice, and referrals for other interventions		
iii.	Continue naloxone distribution and ensure all relevant Forward Leeds staff are trained on its use	Monitor use and administration, and training	Practice and Development Group
iv.	Ensure services are trauma informed and aware of gender specific needs	Use of 'systems change' trauma toolkit	Practice and Development Group
v.	Use the alcohol licencing data matrix to support licencing decisions	Monitor, review use and update data annually	Public Health Programme Board
Focus for this year 2019-2020			
vi.	Improve information and intelligence about drug related deaths, to better service provision	Develop a system for reporting drug related deaths, that builds on the current (deaths in service) system and feedback lessons learned to local services	Practice and Development Group
vii.	Improve the drug alerts system, to better inform drug users and services	Develop a system for responding to drug alerts, that builds on the current system, based on the latest PHE guidelines	Practice and Development Group
viii.	Increase the number of Audit C screenings completed	Increase the number of Audit C screenings completed by GP services 'ever' (50%) and 'in the last 12 months' (15%) Establish a baseline in relation to Audit C screenings completed in hospitals through the risky behaviours CQUIN	Practice and Development Group
ix.	Engage with GPs around the issue of over prescribing, and addiction to, medicines	Practice development session held with Shared Care GPs and Primary Care Extended Service GPs	Practice and Development Group
x.	Recruit to a post, in Forward Leeds, that has a specific focus on naloxone	Roll out existing naloxone plan, including the training of non-drug specific services	Practice and Development Group
xi.	Train staff of licensed premises in drug and alcohol awareness	Monitor attendance at bi-monthly training sessions and evaluate the	Public Health Programme Board

	and responding to drug and alcohol related issues	programme in partnership with the Licensing Enforcement Group	
xii.	Train Leeds City Council Licensing Committee and all elected members in alcohol related harm	Monitor attendance at sessions and evaluate the programme	Public Health Programme Board
xiii.	Forward Leeds undertake research into people engaged in needle exchange but not structured treatment	Better understanding of people not in treatment	Practice and Development Group
xiv.	Extend Forward Leeds outreach in relation to harm reduction interventions, alongside understanding access issues for women	New outreach hours implemented	Practice and Development Group
Future ambition and innovation			
a.	Training & tracking Identification and Brief Advice delivery and outcomes achieved		
b.	All appropriate police officers in Leeds to carry naloxone and be trained in its use		
c.	Engage with the CCG around addiction to prescribed medicines		
d.	Host the Harm Reduction conference in Leeds		

Outcome 2 – Increase in the proportion of people recovering from drug and / or alcohol misuse

Drug and alcohol treatment is effective in improving health and saving lives. We will ensure services continuously improve and are informed by, and responsive to, the needs of those who misuse drugs and alcohol. We will provide clear and easy routes into treatment and services that support recovery and address people's needs, including mental and physical health, housing, and employment and skills. We will prioritise vulnerable groups for treatment including people who are homeless, rough sleeping, sex working, leaving custody, and parents and families who need more support and flexibility to access services.

No.	Action	Target / product	Board / Group
Outcome 2.1 – Ensure treatment services are effective, of high quality and are easily accessible			
Core business			
i.	Maintain effective treatment outcomes, including engagement with drug and	Improve drug and alcohol treatment summary ranks (against similar local authorities), on the	Public Health Programme Board

	alcohol treatment, for those who need it	(Public Health England) Public Health Dashboard %age of successful completions (split via substance type). Ambition for treatment services are to be consistently above the national average %age of successful completions (split via substance type) who do not represent (Public Health Outcome Framework 2.15) Leeds to be the best performing English core city	
ii.	Maintain the maximum number of dependent drinkers successfully going through detox and/or rehabilitation	Monitored through commissioners contract management processes	Practice and Development Group
iii.	Maintain relevant and effective referrals from Forward Leeds into St. Anne's residential rehabilitation and alcohol detox	Monitored through commissioners contract management processes	Public Health Programme Board
iv.	Make most effective use of budget for out of area residential detox and rehabilitation	Monitor and review spend	Practice and Development Group
v.	Forward Leeds to use a fast track approach for anyone identified through the street support team or sex work outreach, to ensure they can get into and remain in treatment without barriers	Maintenance of a fast track approach, that meets the needs of street users and street sex workers	Practice and Development Group
Focus for 2019-20			
vi.	Plan for West Yorkshire – Finding Independence (WY-FI) service stopping	All service users engaged with WY-FI are supported into other services	Practice and Development Group
vii.	Drug and Alcohol Social Marketing Planning (S-MAP) Group Plan, develop and deliver marketing campaigns and	Deliver a range of marketing campaigns and promotional activity, including: • promotion of treatment and recovery services	S-MAP

	promotional activity that are effective and responsive to need and changes in drug and alcohol use.	promotion of Hep C treatment (measured by numbers tested and referred into hepatology at LTHT)	
viii.	Process map and implement a robust pathway for people leaving out of area rehab and returning to Leeds	More people leaving out of area rehab returning to Leeds with appropriate housing on return	Practice and Development Group
ix.	Review access to supervised consumption to ensure pharmacy services are accessible and responsive to individual needs, including sex workers, homeless, Gypsy and Travellers and other vulnerable groups	Conduct review and implement recommendations	Practice and Development Group
x.	Increase the number of people accessing Forward Leeds hubs who are tested for Hepatitis C	15 staff trained on Dried Blood Spot testing 80% of new clients tested via DBST	Practice and Development Group
xi.	Undertake city-wide workforce skills audit of people who come into contact with drug and alcohol users	Audit and training needs assessment completed with recommendations made for improvement as required	Public Health Programme Board
xii.	Percentage of inpatients in LTHT who are screened for alcohol use	50%	Public Health Programme Board
xiii.	Percentage of screened patients in LTHT who drink alcohol above lower-risk levels given brief advice.	80%	Public Health Programme Board
xiv.	Percentage of screened patients in LTHT who drink alcohol at possible dependant levels offered a specialist referral.	80%	Public Health Programme Board
xv.	Effectively manage impact of Preventing Ill Health by Risky Behaviours CQUIN on commissioned services	Agree referral targets from LTHT and monitor progress	Public Health Programme Board
xvi.	Forward Leeds to develop a training programme ensuring all	All staff have undertaken trauma informed training	Practice and Development Group

	staff are trauma informed trained		
xvii.	Roll out new training: - low-level mental health training for all Forward Leeds staff - drug and alcohol training in all sex work services	All 95 frontline drug and alcohol workers trained in low-level mental health All sex work services trained drug and alcohol issues	Practice and Development Group
xviii.	Forward Leeds to work collaboratively with GPs to ensure they have a better understanding of addiction to prescribed medication and refer appropriately	Practice development session held with Shared Care GPs and PSC GPs	Practice and Development Group
Outcome 2.2 – Ensure that there are pathways and services in place to support drug and alcohol users to access support they need for issues linked to their drug and alcohol use			
Core business			
i.	Maintain appropriate treatment pathways for those who test positive for Hepatitis C in all Forward Leeds hubs	80% of those tested access and complete hepatitis C treatment	Practice and Development Group
ii.	Develop a dual diagnosis work plan that addresses the needs of those with coexisting drug and/or alcohol with mental health issues, including trauma.	Improve how drug and alcohol treatment services work with mental services	Dual Diagnosis Strategy Group
Focus for 2019-20			
iii.	Conduct an audit of provision for those with coexisting drug and/or alcohol with mental health issues, including trauma specific needs of women accessing services	Produce a report, through the Dual Diagnosis Strategy Group, that highlights good practice and gaps in service provision, and make recommendations for improvement	Dual Diagnosis Strategy Group
iv.	St. James's Hospital to work in collaboration with GP services and Forward Leeds to identify and treat those at risk of Alcohol-related liver disease	Monitor and review progress and establish baseline data	Practice and Development Group
v.	Strengthen pathways for LGBT+ clients between drug and alcohol treatment services and	Pathways developed with sexual health services	Practice and Development Group

	others providing support around risky behaviours		
vi.	Identify people with Hepatitis C through pharmacies for onward referral into hepatitis C treatment, by exploring the feasibility of hepatitis C testing in pharmacy needle exchanges	Increase the number of people getting tested for hepatitis C in pharmacies and, where testing positive, referred into treatment	Practice and Development Group
Outcome 2.3 – Leeds provides a wide and varied number of options to promote and support recovery			
Core business			
i.	Ensure the drug and alcohol recovery offer in Leeds is joined up, responsive and shares good practice	Regular meetings held with all the recovery service leads to ensure timetables, and events are complementary	Practice and Development Group
ii	Leeds will continue to support a diverse and thriving recovery community, with a range of opportunities for involvement	Annual recovery graduation events Events including but not limited to 'open mic 'nights and theatre performances	Practice and Development Group
iii.	5- ways Recovery Academy to have strong links with community learning providers including: The Cardigan Centre, Norton Web, Swarthmore and lifelong learning @Leeds Uni	80 people enter either further education, employment or structured volunteering	Practice and Development Group
iv.	Continue to support the Recovery Wrx website	Leeds provides regular web content for the site	Practice and Development Group
Focus for 2019-20			
v.	Ensure ongoing support in recovery for women involved with Children's Services	Set up peer support at 5 Ways with links across to all recovery services	Practice and Development Group
vi.	5 Ways provides a wide range of non-accredited courses	Minimum of 6 people complete each course Drama course performs Macbeth at the Leeds Playhouse, if funding is secured	Practice and Development Group
vii.	Widen Recovery Wrx roadshows to include input from all Leeds recovery services	Monitor number of people involved and roadshows delivered	Practice and Development Group

viii.	Submit application to host the Recovery Walk in Leeds	Application successful	Practice and Development Group
ix.	Increase the number of opiate and crack users, who have completed treatment, involved in the recovery community offering taster sessions, from Forward Leeds hubs that are opiate focussed	Specific opiate and crack support groups set up	Practice and Development Group
x.	Increase the number of women in recovery	Monitor percentage increase	Practice and Development Group
xi.	Support ex-users in the community, by exploring linking those in recovery with local businesses and work opportunities in their communities	Increase the number of people in recovery accessing employment in their community	Practice and Development Group
xii.	Develop a pack for all recovery services to be used to promote what is available in Leeds	Recovery services promoted every month at the FL hubs	Practice and Development Group
Future ambition / innovation			
a.	Explore opportunities to provide a Leeds residential drug detox and rehabilitation centre with recognition of need for gender specific services		
b.	Leeds hosts the annual national Recovery Walk		
c.	Better understanding impact of e.g. CQUINs on the treatment systems		
d.	Identify and treat all individuals with Hepatitis C - Eradicate Hepatitis C in Leeds by 2025 – in line with the NHS national target		
e.	Forward Leeds to develop the medical alcohol detox route and treatment pathway with hospitals		
f.	Explore how mainstream mental health services can ring-fence some time to be in drug and alcohol services		

Outcome 3 – Reduced crime and disorder associated with drug and/or alcohol misuse

A significant amount of crime in the city is linked to drug and alcohol misuse, either through people committing crime to fund drug and alcohol use, or through behaviours associated with the use of drugs and alcohol, e.g. street drinking and street drug use. Leeds has three prisons within its boundary and a women's feeder prison just outside. We will work across the prisons, police and probation to ensure offenders with drug and alcohol misuse issues have clear routes into services and opportunities for effective rehabilitation.

Working with partner agencies, we will influence the night time economy and reduce drug and alcohol harm. We will also work with relevant criminal justice agencies to disrupt and reduce the impact of organised crime groups and reduce the inappropriate availability of drugs and alcohol.

We will ensure that we protect children and young people from being exploited by addressing the impact of drugs and alcohol on Child Sexual Exploitation (CSE)/Child Criminal Exploitation (CCE) including across county lines. We will also improve our understanding of links between youth violence and drugs and alcohol and develop our responses accordingly.

With well evidenced links to drug and alcohol use, domestic violence and abuse is a priority for many partnerships. We will ensure that these links are embedded within the action plan.

No.	Action	Target / Product	Board / Group
Outcome 3.1 – Reduce offending and antisocial behaviour associated with drug and alcohol use and improve outcomes for drug and alcohol offenders			
Core business			
i.	Improve drug and alcohol treatment outcomes for offenders	Increase proportion of criminal justice service users who successfully complete treatment Monitored through contract management processes	Public Health Programme Board
ii.	Reduce reoffending rates following Drugs Intervention Programme	Monitored through contract management processes	Public Health Programme Board
iii.	Reduce offending behaviour in people leaving drug and alcohol treatment	Monitored through contract management processes	Public Health Programme Board
iv.	Continue to use out of court disposals for substance misuse with positive requirements	Maintain referrals to TWP for women and CGL/Humankind for men	Reducing Reoffending Board
v.	Ensure that women involved in street sex work, and identified as at risk of offending, are offered diversionary pathways alongside drug and alcohol and mental health treatment	Initial meeting with police and CPS to be widened to other partners	Practice and Development group
vi.	Where people stop using substances in prison, continue the recovery pathway for 'support only' from HMP Leeds, HMP Newhall and HMP	Monitor members accessing 5 Ways, engagement with provision and the impact on re-offending rates	Practice and Development group

	Wealstun, with 5 Ways Recovery Academy		
vii.	Introduce Conditional Cautions for low level SCRA's use	Increase the number of people using SCRA's referred for three sessions of treatment, as an alternative to prosecution	Reducing Reoffending Board
viii.	Continue drug testing for SCRA's in prison	Increase percentage rate in testing of those identified as using Increase in the number of those testing positive receiving treatment Monitor and review test results	Practice and Development group
ix.	Introduce drug testing on SCRA's seized by the police	Liaise with Manchester police Disseminate findings to increase knowledge of SCRA's and their use	Reducing Reoffending Board
Focus for this year 2019-2020			
x.	Improve Drug Rehabilitation Requirement breach process	Number of appropriate DDR breach sanctions increases	Practice and Development group
xi.	Increase drug testing and cell intervention	More people identified with a positive drug test referred to intervention services	Practice and Development group
xii.	Review the treatment process for offenders specifically around short-term sentence prison release and Friday court releases	Report findings and make recommendations to improve services for this population	Practice and Development group
xiii.	Undertake a thematic review of offenders with dual diagnosis with particular reference to trauma	Use of systems change trauma toolkit Make recommendations for service improvement and implement changes.	Dual Diagnosis Strategy group
xiv.	Test and evaluate where to use peer mentors from substance use and offending across the city	Report produced	Practice and Development group
xv.	Review drug and alcohol training for ASB officers	New programme of drug and alcohol training implemented	Practice and Development group
xvi.	Where ASB and drug or alcohol use is identified, and the person gives consent, a referral to Forward Leeds is made	All referrals made	Practice and Development group

xvii.	Work with prison drug and alcohol strategy managers to develop a city approach for support to people moving in and out of prison	Processes developed and agreed	Reducing Reoffending Board
	Work with the Youth Violence Strategic Group to better understand the links between youth violence and drugs and alcohol.	Undertake analysis and produce recommendations.	Youth Violence Strategic Group
Outcome 3.2 – Reduce the inappropriate availability of drugs and alcohol			
Core business			
i.	Continue to undertake licensing compliance visits	Problem premises and compliance visits will be identified and carried out, via the Licensing Enforcement Group (LEG) Continuation of the licensing scores programme through the LEG and to encourage 'problem premises' to engage with the LEG organisations	Practice and Development group
ii.	Support the work of the Purple Flag Working Group and contribute to actions around the night time economy, including delivery of safeguarding and free drug and alcohol training to licenced premises	Retain Purple flag status	Practice and Development group
Focus for this year 2019-2020			
iii.	Engage with the courts/sentencers to ensure they are aware of how drugs get into prisons e.g. through individuals deliberately getting short sentences to act as "drug mules", and improve awareness of DRR/community orders	Increase in the use of community orders / DRRs as an alternative to custodial sentences, where appropriate	Reducing Reoffending Board
iv.	Deliver SCRA awareness training to magistrates	20 trained	Reducing Reoffending Board

v.	Roll out of partner intel sharing portal to ensure a consistent approach to reporting	Increase in intelligence to police on drug issues coming from partners agencies	Reducing Reoffending Board
vi.	Host prison tours for magistrates	At least 1 tour per prison within the year	Reducing Reoffending Board
vii.	New police recruits to visit prisons with a focus on the impact of drugs and alcohol	Visits built into the training programme	Reducing Reoffending Board
viii.	New police recruits and magistrates to visit treatment services	Develop visit programme	Reducing Reoffending Board
ix.	Target high risk, high harm drug and alcohol related Organised Crime Groups (OCG) with disruption tactics	Reduced number of active OCGs	Reducing Reoffending Board
x.	Develop a de-escalation approach to alcohol and drug related violent disorder at night	Manage regular night time economy at an 'events' level	Reducing Reoffending Board
Outcome 3.3 – Ensure services are in place to tackle domestic violence and abuse linked to drugs and alcohol			
Core business			
i.	Continue to develop joint work with Leeds Domestic Violence Service (LDVS), when responding to victims of domestic violence where drugs and/or alcohol is involved	Monitored through contract management arrangements	Public Health Programme Board
ii.	Provide specialist drug and alcohol support to those experiencing domestic violence	Specific role within Forward Leeds	Public Health Programme Board
Focus for this year 2019-2020			
iii.	Implement any recommendations involving drugs or alcohol identified through the Front Door Safeguarding Hub review	All changes implemented	Drug and Alcohol Board
iv.	Forward Leeds to deliver the Relationships and Recovery group, working with perpetrators of domestic violence with drug and alcohol issues	Referrals and outcomes based lined	Practice and Development group

Future ambition and innovation	
a.	Explore use of the Reducing Re-offending Analysis Tool (RRAT) to understand offenders with drug and alcohol flags
b.	Conduct research to get a better understanding of the first few days following release from prison, identify gaps in provision, and make recommendations for improvement

Outcome 4 – Reduce impact of harm from drugs and alcohol on Children, Young People and families			
Leeds wants to be the best city for Children and Young People to grow up. We want to ensure that we protect Young People from the harmful effects of substance misuse and aim to achieve this by an effective prevent and treatment approach that bespoke to Young People's needs. We recognise that a number of Children and Young People experience adverse childhood experiences (ACEs) caused by parental/carer substance misuse and we aim to reduce this number by supporting their parents and carers to address their substance misuse. We know that the vast majority of Young People in Leeds do not have any issues with substances however there are a small minority that need this additional support.			
	Action	Target / Product	Board / Group
Outcome 4.1 – Make sure children and young people are informed about the potential harms of drugs and alcohol			
Core business			
i.	Health & Wellbeing service to continue to support schools to deliver drug & alcohol education and in reviewing and updating drug & alcohol education and incidents policies	Monitor delivery and review in line with development of working group	Children and Young People's Group
ii.	Deliver drug and alcohol targeted education to vulnerable groups. Vulnerable groups currently include Looked After Children (CLA), those at risk of or experiencing DVA, CSE, CCE; at risk of exclusion or most at risk of using drugs and alcohol, also service to consider working with community and youth groups to identify opportunities to engage cohorts of other young people	To deliver 50 sessions to Pupil Referral Units, alternative education providers and children's homes, and vulnerable groups in mainstream schools	Children and Young People's Group
iii.	Develop a drug and alcohol input, for Safer School Officers to deliver in schools	Monitor the delivery of drug and alcohol input in schools throughout Leeds	Children and Young People's Group

Focus for this year 2019-2020			
iv.	Undertake audit of drug and alcohol targeted early intervention and prevention work with vulnerable groups	Implement recommendations from audit to improve early intervention and prevention services	Children and Young People's Group
v.	Set up a working group to review and develop drug and alcohol education in schools including, incorporating mandatory health education from September 2020 into drug and alcohol schools delivery plan	Group set up to develop content and increase the quality and uniformity of drug and alcohol education for under 18 year olds and explore the development of a commissioned resource	Children and Young People's Group
vi.	Train the children and young people workforce around cannabis, specifically those providing 1-1 support, including family support workers, learning mentors and foster carers	100 people trained to provide cannabis advice and information to young people	Children and Young People's Group
vii.	S-MAP group to deliver specific campaigns during this year	Campaigns this year to include: • Cannabis awareness for young people • 2 alcohol campaigns, focussed on under 18 year olds and 18-25 year olds	S-MAP Group
Outcome 4.2 Protect children and young people and prevent harm by supporting parents / carers into effective treatment			
Core business			
i.	Ensure staff in contact with families where parental drug and/or alcohol use is identified are skilled in addressing the issues and can offer support to the children and parents/carers, as necessary	To have a robust identification process for children's services with clear referral pathways into support services. Develop stronger links with Children's Social Work, Health Visitors, Forward Leeds and Willows Young Carers	Children and Young People's Group
ii.	Review the report that was set up for the D&A board which highlights the number of cases going through the decision and review board	Reduced number of children coming into care, through the family court	Practice and Development Group & Children and Young People's Group

	Establish a baseline Review process for parents identified as D&A users fast-tracked into adult treatment with an enhanced offer to make sustainable changes. Services share best practice on working with families going through the care proceedings process		
iii.	Undertake an annual audit of clients in Forward Leeds who have children living with them	Audit informs ongoing work to support children living with parents/carers who use drugs or alcohol	Practice and Development Group
iv.	Forward Leeds refer families to their 'family plus' service	Increase in number of families seen in the service to prevent them moving into social care	Practice and Development Group
Focus for this year 2019-2020			
v.	Reduce the number of children of adults with drug and alcohol issues taken into care by fast tracking and retaining parents/carers into treatment	Parents are seen quickly in treatment services and staff are trained within the think family model and ensure they offer a 'you and your family' approach to parents or anyone with children living in their household to ensure better treatment outcomes	Practice and Development Group
vi.	Increase identification of, and support to, children who have parents/carers identified as having drug and alcohol issues	Explore how information on looking out for signs/symptoms, and basic needs being met, can be provided to the wider workforce	Children and Young People's Group
vii.	Work with partner services to look at ongoing provision of the FDAC service from 2020	FDAC court continues past March 2020	Children and Young People's Group
Outcome 4.3 – Protect children and young people; including addressing the impact of drugs and alcohol on Child Sexual Exploitation (CSE)/Child Criminal Exploitation (CCE)/domestic violence and abuse (DVA)			
Core business			
i.	Continue to use the screening matrix for existing child exploitation pathways	Risk and vulnerability plans in place	Children and Young People's Group

ii.	Refer all cases that have gone through a Multi-Agency Risk Assessment Conference/Front Door Safeguarding Hub with children where drugs or alcohol are involved are fast-tracked to the Young Peoples team at Forward Leeds	All cases referred	Children and Young People's Group & Practice and Development Group
iii.	Ensure young people who are using drugs and/or alcohol, and experiencing domestic violence and abuse (or are at risk of domestic violence and abuse), can access appropriate support from Forward Leeds and Leeds Domestic Violence Service (LDVS)	Clear pathways developed with LDVS Forward Leeds. Establish Forward Leeds Young People's team representation at relevant forums where young people are discussed	Children and Young People's Group
Focus for this year 2019-2020			
iv.	Screening matrix developed for all vulnerabilities for young people including CCE	Screening matrix developed	Children and Young People's Group
v.	Police to develop a city wide protocol/guidance to calls of drugs in schools that is disseminated to all police officers and schools	Information developed and disseminated to all schools	Children and Young People's Group
vi.	Ensure effective and priority response to those identified as at risk or subject to CSE/CCE or trafficking	Better pathways in place with police and drug/alcohol service and with services working with CSE/CCE Develop a programme of communications on CCE, including using people with lived experience	Children and Young People's Group
vii.	Conduct test purchasing of alcohol by underage young people	Report findings and make recommendations for future targeted work	Children and Young People's Group
Outcome 4.4 – Ensure Children and Young People are supported to access services for their drug or alcohol use			
Core business			
i.	Monitor the percentage of young people who use alcohol and/or drugs regularly	Monitor and review data relating to drug and alcohol use and education from My Health and My School Survey and make recommendations	Children and Young People's Group

ii.	Maintain all appropriate referrals from schools and Children's services to Forward Leeds when young people are identified with drug/alcohol issues	All appropriate referrals are made and receive the right response	Children and Young People's Group
iii.	All Forward Leeds staff have up to date safeguarding training	Monitored through staff training records	Practice and Development Group
Focus for 2019-20			
iv.	Develop a Children and Young People's social care, children in care and care leavers pathway	Completed pathway for implementation to ensure young people are identified appropriately and referred to service	Children and Young People's Group
v.	Develop a Children and Young People's mental health pathway – "mind mate", CAMHS and Forward Leeds	Complete pathway for implementation to ensure young people are identified appropriately and referred to service	Children and Young People's Group
vi.	Extend drug & alcohol A&E pathway to include 16 and 17 year olds from St. James's and LGI	Existing model in LGI is replicated in St. James's, with appropriate thresholds for referral	Children and Young People's Group
vii.	Ensure any recommendations in the new Young Carers Strategy around drugs and alcohol are implemented	All recommendations implemented	Children and Young People's Group
viii.	Ensure any recommendations in the new "Think Family" protocol around drugs and alcohol are implemented	All recommendations implemented	Children and Young People's Group
ix.	Youth panel YJS and police 1 st contact maximise options to divert out, if substance use identified, and referred to Forward Leeds	Deferred prosecution where individuals engage with Forward Leeds Training for Youth Panel members and police around identification and referral pathway. To monitor percentage of young people where a referral is identified, made, and taken up	Children and Young People's Group
x.	Increase referrals into treatment for young people being released from secure settings	More young people released on temporary license prior to release Arrangements in place to meet need prior to release	Children and Young People's Group

Future ambition and innovation	
a.	All schools deliver high quality locally agreed drug and alcohol education
b.	Using My Health My Schools data, understand the use of vapes by young people who have never smoked and develop pathways into treatment
c.	Assess need for preventative work on drink/drug driving/passenger by young people
d.	Families, via care proceedings, all have the opportunity to access a problem solving court model

Outcome 5 – addressing specific emerging issues			
Drug and alcohol misuse is an ever changing landscape, requiring systems, mechanisms and structures in place to respond quickly and effectively to new and emerging issues. A section of the action plan will focus on these specific issues and processes for responding to them. We will ensure that the complexity and vulnerability around drugs and alcohol is on the agenda of safeguarding boards, encouraging collaborative work across the wide range of agencies and services throughout the city.			
No.	Action	Target / Product	Board / Group
Core business			
i.	Respond to, and meet, identified needs and recommendations highlighted in the Director of Public Health's annual report	Ensure new issues highlighted in the annual report are actioned	Public Health Programme Board
Focus for this year 2019-2020			
ii.	Forward Leeds to continue to develop its community-based reduction and medically assisted detoxification programme for Synthetic Cannabinoid Receptor Agonists ("spice")	Monitor delivery of programme	Practice & Development Group
iii.	Gather and monitor data on ambulance call outs, including to Forward Leeds and the prisons	Establish a working group to analyse data and make recommendations on ways to reduce call outs / improve recording	Intelligence & Performance Group
iv.	Understand drug use in poly drug users	Gather research and intelligence and make recommendations for future action	Intelligence & Performance Group
Future ambition and innovation			
a.	Develop better understanding of steroid use		

Leeds Drug and Alcohol Strategy and Action Plan 2019-2024

Leeds is a compassionate city that works with individuals, families and communities to address drug and alcohol misuse				
Vision:	1. Fewer people misuse drugs and/or alcohol and where people do so they make better, safer and informed choices	2. Increase in the proportion of people recovering from drug and/or alcohol misuse	3. Reduce crime and disorder associated with drug and/or alcohol misuse	4. Reduce impact of harm from drugs and alcohol on children, young people and families
Outcomes:	1.1 – Increase public awareness of issues relating to drugs and alcohol	2.1 – Ensure treatment services are effective, of high quality and are easily accessible	3.1 – Reduce offending and antisocial behaviour associated with drug and alcohol use and improve outcomes for drug and alcohol offenders	4.1 – Make sure children and young people are informed about the potential harms of drugs and alcohol
To achieve this we will:	1.2 – Increase the safety of all our communities by reducing the amount of drug-litter on our streets and improving use of pharmacy based needle exchange services	2.2 – Ensure that there are pathways and services in place to support drug and alcohol users to access the support they need for issues linked to their drug and alcohol use	3.2 – Reduce the inappropriate availability of illicit drugs and alcohol	4.2 Protect children and prevent harm by supporting parents / carers into effective treatment
	1.3 – Ensure the availability of high quality harm reduction services	2.3 – Leads provides a wide and varied number of options to promote and support recovery	3.3 – Ensure services are in place to tackle domestic violence and abuse linked to drugs and alcohol	4.3 – Protect children and young people; including addressing the impact of drugs and alcohol on Child Sexual Exploitation (CSE)/Child Criminal Exploitation (CCE)/domestic violence and abuse (DVA)
How we will measure success (key performance indicators):	- Decrease in prevalence of opiate and / or crack users - Decrease in prevalence of dependent drinkers - Increase in pharmacy needle returns	- Increase in successful completions of drug treatment - Increase in Hep C testing and referrals into treatment	- Increase in successful completions as a proportion of all Criminal Justice clients in treatment - Reduce violent crime involved with alcohol consumption - Reduce A&E assault admissions with alcohol involved - Increase positive outcomes for drug offences	- Increase in secondary school pupils who have never had a drink of alcohol - Decrease in secondary school pupils who have ever used illegal drugs, gases and solvents as drugs - Decrease in children and families where drugs or alcohol was main reason for issuing care proceedings

An effective governance framework will monitor the drug and alcohol strategy and deliver the accompanying action plan:

