



7th July 2008

Dear Colleague

On behalf of the Eastern Drugs and Alcohol Co-ordination Team, please find attached EDACT's (Draft) Action Plan for 2009-2011. This document sets out EDACT's priorities for the next two years, and outlines how the outcomes identified will be taken forward i.e. via partnership working at Team, Subgroup, Forum or Stakeholder level or via the tendering/commissioning of services.

EDACT wishes to consult with the substance misuse sector and other interested parties on these priorities, and specifically on the objectives and outcomes detailed within the document before publishing the final version in early August 2008 (having revised the Action Plan to reflect feedback from the consultation process).

The deadline for receipt of responses to the consultation is Tuesday 29 July 2008.

EDACT apologises for the short notice and tight timescale, however the Team only recently received confirmation of the 2 year (2009-11) funding allocation from the DHSSPS and it needs to be in a position to give three months notice to existing service providers and to allow adequate time for the new services to be operational by the start of April 2009. Page one of the Action Plan outlines the provisional timeframe we are working to.

Also attached is the Equality, Good Relations and Human Rights Screening document pertaining to this Action Plan (equality screening must be undertaken as part of the EHSSB's Equality Scheme) – please review this document and if you have any comments or concerns regarding these issues, note them in the relevant section of the consultation response form.

We look forward to hearing from you over the next few weeks.

Yours sincerely

GARY McMICHAEL
Chairperson
EDACT

Enc

EASTERN

DRUGS AND ALCOHOL COORDINATION TEAM

ACTION PLAN

2009-11

CONSULTATION DOCUMENT

July 2008

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Background

The Eastern Drugs and Alcohol Co-ordination Team (EDACT) is an interagency partnership with lead responsibility for the local implementation of the New Strategic Direction (NSD) for Alcohol and Drugs (2006-11) in the EHSSB area.

This Action Plan outlines the key areas which EDACT believes need addressing locally taking cognisance of the NSD for Alcohol and Drugs (2006-11). With the allocation that EDACT received in 2006, the partnership was able to fund 22 services covering the following areas; workforce, services for adults, services for young people and services for the community. This plan reflects the learning that has been borne out of the previous plan. It details the key objectives and outcomes that EDACT deliver on and provides an explanation where appropriate. The plan also details how it intends to further develop the key interagency initiatives it is involved in and how the partnership liaises with and involves all relevant stakeholders.

The Department of Health, Social Services and Public Safety has confirmed funding to EDACT under the NSD allocation for 2 years only.

Provisional Timescales

July 2008	Consultation period
August 2008	Tender / service specifications developed and finalised
Last week of August 2008	Specifications advertised / tender round open
1 st week of September 2008	Briefing sessions on application process (to be facilitated by Regional Supplies Service)
Last week of September 2008	Deadline for submissions
October 2008	Panels meet to review submissions
November 2008	Final decisions made
December 2008	Successful tenderers notified
April 2009	New services in place

Adults and the General Public

NSD Priorities	Reducing illicit drug use Targeting those at risk and vulnerable Addressing binge drinking
EDACT Objective 1	Ensure that those most vulnerable to substance misuse have access to interventions at the earliest opportunity
Outcome 1	<p>Substance misuse education and early intervention services will be available for at risk and vulnerable adults</p> <p><i>Vulnerable groups are a major priority within the NSD on Alcohol and Drugs. The NSD identified a number of key adult groups namely;</i></p> <ul style="list-style-type: none"> ▪ <i>Homeless, including rough sleepers</i> ▪ <i>Refugees and asylum seekers</i> ▪ <i>Ethnic minorities</i> ▪ <i>People living with domestic violence</i> ▪ <i>Sex workers</i> ▪ <i>Ex-offenders</i> ▪ <i>Older people dependant on alcohol and/or drugs</i> ▪ <i>People with mental health problems</i> ▪ <i>People with learning disabilities</i> ▪ <i>Street drinkers</i> ▪ <i>Those excluded from communities because of their alcohol and/or drug use</i> <p><i>In addition to this EDACT undertook research to identify key adult groups within the EHSSB area and this research stressed the need to engage with offenders, the elderly, people with mental health problems, people with learning disabilities, those subject to sexual exploitation and migrants. (Please note that the homeless population was not included in this research)</i></p> <p>EDACT would welcome views on which groups should be prioritised under the new plan 2009-11</p>
Outcome 2	<p>GP's and Primary Care staff will be supported to deliver screening and brief intervention programmes</p> <p><i>EDACT will support the development of a regional training programme and will consider how to locally support the Directed Enhanced Service currently being proposed by DHSSPS.</i></p>
Outcome 3	<p>Alcohol Liaison Posts will be expanded across the EHSSB area</p> <p><i>EDACT has recommended to the EHSSB that two Alcohol Liaison Posts (ALN) should be commissioned - one in each Health and Social Care Trust (HSCT) area until 2011. Currently there is one ALN based in each Trust area (Mater and Ulster Hospitals) and EDACT believes that these services should be further expanded to other hospital sites within the Board area. Funding for this is from additional monies made available to Health and</i></p>

Outcome 4	<p><i>Social Services Boards for new public health service developments.</i></p> <p>The harm caused by alcohol and drug misuse within the homeless population will be reduced</p> <p><i>EDACT will discuss with the Belfast HSCT the implications of the needs assessment report on Community Detox produced by Deloitte.</i></p> <p><i>EDACT will support, either through a tendering initiative or through collaborative working, the implementation of the recommendations in the report on “Floating Support for Those at Risk of Losing Their Accommodation Through Alcohol Misuse”.</i></p> <p><i>EDACT will continue to support the work of the Housing, Homelessness and Substance Misuse Steering Group.</i></p> <p>The HPANI campaign on binge drinking will be supported by EDACT</p>
EDACT Objective 2	Provide a range of treatment and support services for alcohol and drug users and their families
Outcome 1	<p>Low threshold services* for Chronic Dependant Drinkers to reduce the harm associated with their alcohol use will be available in areas of need (* A low threshold service is one which aims to reach more alcohol misusers with problematic use patterns earlier and to remain in contact with a highly problematic group of alcohol misusers in order to prevent health damage while not requiring abstinence)</p> <p><i>The need for low threshold services for chronic drinkers remains a priority. EDACT proposes to resource initiatives which can demonstrate a need in specific areas/localities across the EHSSB through a tendering process.</i></p>
Outcome 2	<p>A low threshold service for Intravenous Drug Users to reduce the harm associated with their drug use will be available across the EHSSB area</p> <p><i>The need for an outreach service for IDUs and crack cocaine users particularly within the Belfast area remains a priority. EDACT proposes to commission this service with the Belfast HSCT.</i></p>
Outcome 3	<p>Prescribed Medication Treatment and Support Services will be available across the EHSSB area</p> <p><i>In 2006/08 EDACT tendered for two prescribed medication workers to cover the EHSSB area and one worker was employed within Belfast and one outside of Belfast. This situation has been reviewed and given that there are two recurrent posts within the South Eastern HSCT, EDACT proposes that two posts should be commissioned with the Belfast HSCT. It also proposes that an aftercare service within each Trust area should be developed in partnership with the specialist prescribed medication services.</i></p>
Outcome 4	<p>IV drug users will have access to needle exchange services</p> <p><i>EDACT proposes to undertake a scoping exercise to ascertain if there is a need to expand current provision.</i></p>

Young People

NSD Priorities	Addressing under-age drinking Targeting those at-risk and vulnerable Tackling alcohol and drug related anti-social behaviour Reducing illicit drug use
EDACT Objective 3	To support the provision of universal prevention and targeted education initiatives for children, young people and their parents in schools and the community
Outcome 1	<p>A universal alcohol education initiative will be available to support schools in addressing alcohol misuse among young people <i>In 2006-08 EDACT took the decision that a universal alcohol education initiative was required in post primary schools incorporating direct delivery and teacher training. Given the continued rise in under-age drinking this area remains a priority and needs to be resourced through tendering for a further 2 years.</i></p>
Outcome 2	<p>An improved co-ordinated response to supporting substance misuse education in schools <i>A mapping exercise is currently being undertaken in relation to the support schools currently receive in relation to substance misuse education. EDACT wishes to discuss with external providers how to ensure that their interventions add value to the school curriculum and thus makes best use of scarce resources.</i></p>
Outcome 3	<p>At risk and vulnerable young people have access to substance misuse education programmes <i>EDACT proposes that targeted education programmes should be tendered for aimed at children aged 11 years and older who are currently using, or at risk of using, substances.</i></p>
Outcome 4	<p>Parents will be able to access information, education and support programmes in relation to substance misuse <i>The Talking to Your Children About Tough Issues (like alcohol) programme course will be evaluated in the Autumn and it's findings will determine how the programme will be delivered during 09-11.</i></p> <p><i>EDACT, in partnership with Community Safety Partnerships, intend to develop a campaign aimed at supporting parents whose children may be engaging in substance misuse and other risk-taking behaviours. The possibility of this being rolled out across all the EHSSB area is being discussed with the other Community Safety Partnerships. A mapping exercise identifying sources of support for parents will also feed into this campaign.</i></p>

EDACT Objective 4	Provide a range of early intervention and treatment and support services for children, young people and their families
Outcome 1	<p>Early intervention and treatment and support services will be available to those young people and their families in need of help and support in relation to substance misuse</p> <p><i>EDACT proposes to tender for a service operating at Trust level which will be capable of providing a range of interventions appropriate to this client group which will encompass early intervention to treatment and support and include a family support / work element. It is also recommending that such a service should be available to young adults up to the age of 20.</i></p>
Outcome 2	<p>An intensive support service will be available to those young people aged 16-18 with significant substance misuse problems</p> <p><i>In discussions with the main statutory services working with vulnerable young people there is a need for a multi-agency initiative which targets young people who have significant substance misuse problems. This multi-agency initiative will seek to provide an intensive support and intervention initiative for those young people. Further discussions are required with regard to the need, approach of such a service.</i></p>

Service User Involvement

NSD Priorities	Promoting good practice
EDACT Objective 5	Increase service user involvement in the planning and delivery of substance misuse services
Outcome 1	<p>Service users will become involved in the planning and delivery of substance misuse services</p> <p><i>EDACT is committed to the need to promote service user involvement in all the services funded by the Team. EDACT proposes that all services funded by EDACT will have to demonstrate how they are involving service users. In addition, £20,000 has been made available by DHSSPS until 2011 for additional work in relation to service user involvement. EDACT proposes to develop an award scheme for services who wish to pilot innovative approaches towards involving service users.</i></p>

Communities

NSD Priorities	Addressing community issues
EDACT Objective 6	Support local community groups and organisations to respond to drug and alcohol related issues appropriately
Outcome 1	<p>Community organisations will be assisted in identifying need and developing appropriate responses to address substance misuse issues within their communities</p> <p><i>It is proposed community support services will be tendered for and that these services should be able to provide direct support in the form of education and information to communities about substance misuse issues. It is also recommended that these posts should prioritise the Neighbourhood Renewal areas across the EHSSB.</i></p> <p><i>Community drug and alcohol awareness education remains a priority for EDACT and will be resourced through a tendering initiative.</i></p>
EDACT Objective 7	Facilitate local strategic planning and information sharing
Outcome 1	<p>Local drug and alcohol forums will be able to access support to respond to substance misuse issues locally</p> <p><i>EDACT proposes that the resources currently used to support the forums, namely the Forum Facilitator and Action Plan allocations (approximately £100,000 per annum), need to be re-directed into front-line services due to the need to address the growing demands for early intervention and treatment services. Partnership, networking and local collaboration is still needed and local forums will continue to be supported by the Drugs and Alcohol Co-ordinators and will be able to apply for financial support via an enhanced small grants scheme.</i></p>
EDACT Objective 8	Support local initiatives tackling alcohol and drug misuse through EDACT's Small Grants Scheme
Outcome 1	<p>Substance misuse initiatives will be delivered in areas of need</p> <p><i>EDACT proposes to increase the level of funding available via the Small Grants Scheme to £50,000 per annum.</i></p>

Workforce

NSD Priorities	Workforce Development
EDACT Objective 9	Implement a four tier workforce development plan to improve the skills of those working with alcohol and drug users / misusers
Outcome 1	<p><i>A range of training opportunities will be available to those working with substance misusers across the Four Tiers of service delivery</i> <i>EDACT's 06-08 Action Plan addressed the needs of the workforce in an opportunistic manner, relying chiefly on resourcing training through its underspend. For this Action Plan EDACT feels it is necessary to have a more planned and focused approach to workforce development. To achieve this EDACT proposes to:</i></p> <ol style="list-style-type: none"> <i>1. Tender for a service to train the workforce at Tiers 1 and 2 to be able to deliver a core set of evidence based and DANOS compliant competencies</i> <i>2. Tender for additional workforce initiatives that address the needs of specific groups</i> <i>3. Consider a number of options in relation to the workforce at Tiers 3 and 4</i> <ol style="list-style-type: none"> <i>a) The development of a train the trainer initiative focused on CBT</i> <i>b) Provide opportunities for individual services to develop their workforce via a workforce development plan</i> <i>c) Develop a foundation substance misuse module.</i> <p><i>EDACT will be consulting further with Tier 3 and 4 service providers on the merits of these options before any final decisions are taken.</i></p>

Hidden Harm

NSD Priorities	Reducing illicit drug use Targeting those at risk and vulnerable Addressing binge drinking
EDACT Objective 10	Ensure that information, support and treatment services are available to families affected by substance misuse
Outcome 1	Treatment and support services for families affected by parental substance misuse will be available across the EHSSB The need for such services continues to exist and will be resourced through a tender process.
Outcome 2	Ensure effective co-operation and collaborative decision making between services addressing parental substance misuse A draft protocol to “Promote Inter-Agency Working With Children and Families Affected by Substance Misuse” is currently being piloted with both the South Eastern and Belfast Trusts. Following the outcome of the pilot which is being evaluated by QUB, EDACT will ensure that the findings are used to further develop and support co-operation and collaborative working and to feed into the EHSSB’s Hidden Harm Action Plan due to be completed by April 2009.
Outcome 3	Ensure that EDACT’s Workforce Development Plan addresses the needs of the Hidden Harm agenda

Overarching

NSD Priorities	Promoting good practice Reducing illicit drug use Addressing community issues Addressing under-age drinking
EDACT Objective 11	Keep the sector informed of the latest alcohol and drug news, trends, research and availability of services
Outcome 1	Sector will be better informed about services and emerging issues in relation to substance misuse <i>EDACT will continue to publish their Service, Training and Resources Directory</i> <i>EDACT will continue to collect data on key substance misuse indicators and disseminate these findings via their Annual Report, Statistical Overview, Newsletters, Website and E-mail alert system</i>
EDACT Objective 12	Work collaboratively with other key stakeholders responsible for address substance misuse
Outcome 2	Information is regularly shared between stakeholders in relation to emerging trends, good practice and funding priorities <i>EDACT will continue to work with and involve key stakeholders in all it's work. Regular information exchange events will be planned over 2009-2011. EDACT will review whether it's present structures and level of membership is effective.</i>
Outcome 3	Joint commissioning initiatives are agreed with key stakeholders EDACT has worked closely with both the Community Safety Partnerships and NIHE in the past and is interested in exploring the possibility of jointly commissioning initiatives to address some of the NSD priorities and EDACT outcomes detailed within this Plan for 2009-11 with both these partnerships / sectors and others.
NSD Priorities	Developing effectiveness indicators for treatment
EDACT Objective 13	Assess the impact of services funded in the EHSSB in support of the NSD
Outcome 1	EDACT will be able to demonstrate the impact of the services funded through the NSD Allocation <i>EDACT proposes to work collaboratively with the other DACTs to consider how best to evaluate the services funded via the NSD allocations.</i> <i>This may involve allocating some money towards this activity but this will be kept to a minimum and the 4-DACT approach will be used to ensure value for money.</i>

EASTERN

DRUGS AND ALCOHOL COORDINATION TEAM

**RESPONSE TO
ACTION PLAN
2009-11
CONSULTATION DOCUMENT**

July 2008

If you would like to comment on EDACT's Action Plan 2009 -2011 please complete the following template and return to EDACT at 1 Cromac Quay, Gas Works, Ormeau Road, Belfast BT7 2JD or email: info@edact.org by **Tuesday 29th July 2008**

Name:	
Organisation:	
Address:	
Telephone:	
Email:	

Adults and the General Public

NSD Priorities	Reducing illicit drug use Targeting those at risk and vulnerable Addressing binge drinking
EDACT Objective 1	Ensure that those most vulnerable to substance misuse have access to interventions at the earliest opportunity <i>(EDACT would welcome views on which adult groups should be prioritised see page 2).</i>
Comment	
EDACT Objective 2	Provide a range of treatment and support services for alcohol and drug users and their families
Comment	
General Comments	

Young People

NSD Priorities	Addressing under-age drinking Targeting those at-risk and vulnerable Tackling alcohol and drug related anti-social behaviour Reducing illicit drug use
EDACT Objective 3	To support the provision of universal prevention and targeted education initiatives for children, young people and their parents in schools and the community
Comments	
EDACT Objective 4	Provide a range of early intervention and treatment and support services for children, young people and their families
Comments	
General Comments	

Service User Involvement

NSD Priorities	Promoting good practice
EDACT Objective 5	Increase service user involvement in the planning and delivery of substance misuse services
Comments	
General Comments	

Communities

NSD Priorities	Addressing community issues
EDACT Objective 6	Support local community groups and organisations to respond to drug and alcohol related issues appropriately
Comments	
EDACT Objective 7	Facilitate local strategic planning and information sharing
Comments	
EDACT Objective 8	Support local initiatives tackling alcohol and drug misuse through EDACT's Small Grants Scheme
Comments	

General Comments	
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Workforce

NSD Priorities	Workforce Development
EDACT Objective 9	Implement a four tier workforce development plan to improve the skills of those working with alcohol and drug users
Comments	
General Comments	

Hidden Harm

NSD Priorities	Reducing illicit drug use Targeting those at risk and vulnerable Addressing binge drinking
EDACT Objective 10	Ensure that information, support and treatment services are available to families affected by substance misuse
Comments	
General Comments	

Overarching

NSD Priorities	Promoting good practice Reducing illicit drug use Addressing community issues Addressing under-age drinking
EDACT Objective 11	Keep the sector informed of the latest alcohol and drug news, trends, research and availability of services
Comments	
EDACT Objective 12	Work collaboratively with other key stakeholders responsible for addressing substance misuse
Comments	
General Comments	

NSD Priorities	Developing effectiveness indicators for treatment
EDACT Objective 13	Assess the impact of services funded to implement the NSD
Comments	
General Comments	

Comments

Please include here any other comments you would like to make

Equality, Good Relations and Human Rights

An initial screening exercise has been undertaken for equality, good relations and human rights on this Action Plan. If you have any additional comments or concerns on the information contained within this document please record your comments below:

Equality, Good Relations and Human Rights SCREENING TEMPLATE

For further information on screening, please refer to the 'Guidance Notes', which are also available in hard copy from your organisation's equality contact.

(1) INFORMATION ABOUT THE POLICY/DECISION

1.1 Title of policy/decision

Eastern Drugs and Alcohol Co-ordination Team (EDACT)
– Action Plan for 2009-2011 (Consultation Document)

1.2 Description of policy/decision

- **what is it trying to achieve? (aims/objectives)**
- **how will this be achieved? (key elements)**

The Eastern Drugs and Alcohol Co-ordination Team (EDACT) is a multi-agency partnership with responsibility for implementing the New Strategic Direction for Alcohol and Drugs for Northern Ireland at a local level. The Team's remit covers the six district council areas of the Eastern Health and Social Services Board (EHSSB), namely Ards, Belfast, Castlereagh, Down, Lisburn and North Down.

EDACT's Action Plan for 2009-2011 sets out the Team's priorities for the years ahead in terms of the work it intends to undertake and the services it intends to commission or tender for.

EDACT is seeking the views of the general public, the drugs and alcohol sector and any other interested parties on these priorities (consultation deadline of 29 July 2008) before publishing the final version of the Action Plan and integrating it into a commissioning plan for 2009-2011. The public tender process must commence by August 2008 to allow tenders

to be awarded by December 2008 and services to commence by April 2009.

- **what are the key constraints? (e.g. financial, legislative)**

Time Constraints:

EDACT/EHSSB has made a commitment to give those services funded under the Team's current Action Plan 2006-2008 three month's notice – decisions around new projects and services as a result of the tendering/commissioning processes will therefore have to be made prior to the 1 December 2008.

Legislative Constraints:

EDACT will continue to seek advice from the EHSSB representatives who sit on the Team regarding the implications of the Review of Public Administration (RPA) and ensuring that services are planned with the new structures and procedures in mind.

1.3 Main stakeholders affected

(e.g. staff, actual or potential service users, other public sector organisations, voluntary and community groups, trade unions/professional organisations or private sector organisations)

- Statutory and Voluntary/Community Sector organisations with a responsibility for, or interest in, drugs and alcohol issues
- Current service providers
- General public – actual and potential service users
- Staff and EDACT members

1.4 Other policies/decisions with a bearing on this policy/decision

- **what are they?**
- **who owns them?**
 - The New Strategic Direction for Alcohol and Drugs 2006-2011 (Northern Ireland's current five-year strategy) – Department of Health, Social Services and Public Safety (DHSSPS)
 - EHSSB's policies and procedures for tendering and commissioning – Central Services Agency Regional Supplies Service (CSA RSS) will also be involved in terms of

overseeing the tender process)

- NI Hidden Harm Strategy/Action Plan (currently in draft format) – DHSSPS
- Investing for Health Strategy – DHSSPS
- Eastern Area Health and Wellbeing Improvement Plan – EHSSB

(2) SCREENING THE POLICY/DECISION

2.1 In terms of groupings under Section 75, what is the make up of those affected by the policy/decision?

Group	Please provide details
Gender	<p><u>Prevalence Data:</u> Drugs -</p> <ul style="list-style-type: none"> • Within the EHSSB males are more likely than females to report lifetime use (47% compared to 27%) and last year use (18% compared to 7%) of any illegal drugs [<i>Drug Prevalence Survey, 2006-07, DHSSPS</i>]. <p>Alcohol -</p> <ul style="list-style-type: none"> • A larger proportion of males (77%) than females (70%) drink alcohol. More than twice the proportion of male drinkers (13%) compared to female drinkers (6%) drink on an almost daily basis. Males are more likely than females to have a problem with alcohol. [<i>Adult Drinking Patterns Survey 2005, DHSSPS</i>]. <p>All residents within the EHSSB can avail of services regardless of gender.</p>
Age	<p><u>Prevalence Data:</u> Young people (drugs and alcohol) -</p> <ul style="list-style-type: none"> • Thirty eight percent (1,421) of all P5 to P7 primary school children surveyed (3,734) reported that they had tried alcohol. Thirteen percent (485) of all P5 to P7 primary school children surveyed (3,734) reported that they were currently using alcohol. Less than two percent (1.6% = 58 pupils) of all P5 to P7 primary school children surveyed (3,734) reported that they had tried drugs. Less than two percent (1.6% = 58 pupils) of all P5 to P7 primary school children surveyed (3,734) reported that they had tried drugs. [<i>Knowledge & Use of Alcohol, Cigarettes and Drugs Primary School Survey, 2006, DHSSPS</i>].

	<ul style="list-style-type: none"> In 2003, 23% of all pupils had used drugs/solvents, with 60% having used alcohol. Compared with 2000, this represents a statistically significant decrease in the use of illegal drugs, and a statistically significant increase in the use of alcohol [<i>Secondary Analysis of the 2003 Young Persons Behaviour and Attitudes Survey, DHSSPS</i>]. <p>Adults (drugs) -</p> <ul style="list-style-type: none"> Within the EHSSB area young adults aged 15-34 were more likely than their older counterparts (aged 35-64) to report lifetime use (54% compared to 24%) and last year use (23% compared to 5%) of any illegal drugs [<i>Drug Prevalence Survey, 2006-07, DHSSPS</i>]. <p>Adults (alcohol) -</p> <ul style="list-style-type: none"> Across NI, younger adults (18-29 years) are more likely to drink than older adults (60-75 years). However, drinkers who are 45 years old or over are more likely than those under 45 to drink alcohol every day [<i>Adult Drinking Patterns Survey 2005, DHSSPS</i>]. <p>All residents within the EHSSB can avail of services regardless of age.</p> <ul style="list-style-type: none"> However, the Action Plan has also identified the need to commission certain services for specific age groups namely for young people in terms of an early intervention and treatment substance misuse service and an older people's substance misuse service.
Religion	<p>All residents within the EHSSB can avail of services regardless of religion.</p> <ul style="list-style-type: none"> However, services to support the Action Plan will be commissioned taking into account geographical spread and local accessibility issues to ensure that the needs of people of different religious backgrounds are met.
Political Opinion	<p>All residents within the EHSSB can avail of services regardless of political opinion.</p> <ul style="list-style-type: none"> However, services to support the Action Plan will be commissioned taking into account

	<p>geographical spread and local accessibility issues to ensure that the needs of people with different political opinions and/or persuasion are met.</p>
Marital Status	<p>All residents within the EHSSB can avail of services regardless of marital status.</p>
Dependent Status	<p>All residents within the EHSSB can avail of services regardless of dependent status.</p> <ul style="list-style-type: none"> • However, the Action Plan has also identified the need to commission specific services in support of the Hidden Harm agenda in addressing the needs of children living with substance misusing parents/carers and in working holistically with the whole family.
Disability	<p><u>Prevalence Data:</u></p> <ul style="list-style-type: none"> • 49% of the 2265 admissions to acute psychiatric in-patient facilities involved ‘dual diagnosis’ – that is the person had significant problems with alcohol and/or drugs as well as having a severe mental illness [<i>Audit of Admissions 2003-04, EHSSB</i>]. • Research commissioned by EDACT into the needs of vulnerable groups within the EHSSB identified people with mental health and people with learning disabilities as having significant issues relating to substance misuse [<i>Clinical Effectiveness Support Unit, Keele University, 2007</i>]. <p>All residents within the EHSSB can avail of services regardless of disability.</p> <ul style="list-style-type: none"> • However, based on the prevalence data and research outlined above the Action Plan has also identified the need to commission specific services to address the needs of those with dual diagnosis needs (that is to say co-presenting substance misuse and mental health/disability needs).
Ethnicity	<p>All residents within the EHSSB can avail of services regardless of ethnicity.</p>

Sexual Orientation	<p>Whilst the DHSSPS NSD for Alcohol and Drugs 2006-2011 does not identify the gay and lesbian community as significantly vulnerable to substance misuse – several reports recently published by the community themselves would suggest that they should also be considered vulnerable.</p> <p>The needs of this community can be addressed as the Action Plan allows for organisations to tender to provide services to specific vulnerable groups on the basis of demonstration of need.</p> <p>All residents within the EHSSB can avail of services regardless of sexual orientation.</p>
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2.2 Is there any indication or evidence of higher or lower participation or uptake by different groups?

Group	Yes/No/ Don't Know	Please provide details
Gender	YES	Varies from service to service. In terms of treatment services it is recognised that more males than females avail of services within the EHSSB (68% male to 32% female split), however more females than males would attend the funded alcohol and drugs training services/courses.
Age	YES	Data on age is collected via the regional monitoring tool from current service providers however representation/ breakdown would vary from service to service.
Religion	NO	Not known - data not collected by services/via current monitoring processes.
Political Opinion	NO	Not known - data not collected by services/via current monitoring processes.
Marital Status	NO	Not known - data not collected by services/via current monitoring processes.
Dependent Status	NO	Not known - data not collected by services/via current monitoring processes.
Disability	NO	Not known - data not collected by services/via current monitoring processes.

Ethnicity	YES – to some extent	Data on ethnicity is collected via the regional monitoring tool by some current service providers – specifically those focusing on treatment – majority of clients presenting to services currently are on the whole being classified as ‘white.’
Sexual Orientation	NO	Not known - data not collected by services/via current monitoring processes.

2.3 Is there any indication or evidence that different groups have different needs, experiences, issues and priorities in relation to the policy/decision?

Certain groups (both for adults and young people) were identified within the DHSSPS’s New Strategic Direction for Alcohol and Drugs 2006-2011 as being potentially vulnerable in respect of alcohol and drug misuse, namely;

- Homeless, including rough sleepers (***prioritised in EDACT Action Plan 09-11***)
- Refugees and asylum seekers
- Ethnic minorities
- People living with domestic violence
- Sex workers
- Ex-offenders
- Vulnerable young people including – looked after children, young homeless, young offenders, school excludees and children of alcohol/drug using parents (***prioritised in EDACT Action Plan 09-11***)
- Older people dependent on alcohol and/or drugs
- People with mental health problems
- People with learning disabilities
- Street drinkers (***prioritised in EDACT Action Plan 09-11***)
- Those excluded from communities because of their alcohol and/or drug use

DHSSPS recognised that the list above was by no means exhaustive and asked that services funded to support the strategy be asked to give high priority to targeting these groups (and others) where needs/vulnerability to substance misuse could be demonstrated.

NB Furthermore, as part of the consultation on EDACT’s Action Plan 2009-2011 we are asking whether any of the adult groups listed above (or others not identified within the DHSSPS strategy but for whom needs and/or vulnerability relating to substance misuse can be demonstrated) should be/need to be prioritised.

Group	Yes/No/ Don't Know	Please provide details
Gender		N/A
Age		<p>Within its Action Plan, EDACT is proposing to put in place services/initiatives for both adults and for young people (aged 17 and under) – different methods of working and engagement are required when working with the younger population in terms of addressing their alcohol and drugs needs and this is to reflect that.</p> <p>Furthermore, both within its previous plan (2006-08) and this proposed plan (2009-2011) EDACT is suggesting that a specific service to meet the needs of the older population in terms of alcohol/drugs misuse within the EHSSB is required and should be tendered for (one of the target groups listed in the NSD).</p>
Religion		N/A
Political Opinion		N/A
Marital Status		N/A
Dependent Status		<p>All youth services identified within the EDACT Action Plan will be required to have a parental support/family work element built into them.</p> <p>Specifically, in support of the Hidden Harm agenda, EDACT also feels that a service to meet the needs of families affected by alcohol/drugs misuse within the EHSSB remains a priority and should be tendered for (one of the target groups listed in the NSD).</p>
Disability		Those with learning disabilities and mental health needs/issues have also been identified as priority target groups both within the NSD and in a specific piece of research commissioned by EDACT –

		therefore relevant services will also be tasked with focusing on these groups and/or the needs of those working with these groups.
Ethnicity		As ethnic minorities have been identified as being vulnerable to alcohol and drugs misuse both EDACT and the services it funds will be mindful of this when assessing need and planning responses.
Sexual Orientation		As lesbian, gay, bisexual and transgendered people have been identified as being vulnerable to alcohol and drugs misuse both EDACT and the services it funds will be mindful of this when assessing need and planning responses.

2.4 Is it likely that the policy/decision will meet those needs?

Group	Yes/No/ Don't Know	Please briefly give details
Age		Yes – EDACT previously funded a range of adult education and early intervention services as well as youth education, early intervention and treatment services and it is expected that these services will build on their experience and learning and apply again under the new tender round to support this priority within the Action Plan. Furthermore, as this is an open process it is expected that new proposals/bids will also be put forward in respect of these tenders.
Dependent Status		Yes – EDACT previously funded Barnardos to provide a Family Support Service and it is expected that this service will build on their experience and learning and apply again under the new tender round to support this priority within the Action Plan. Furthermore, as this is an open process it is expected that new proposals/bids will also be put forward in respect of these tenders.

		The inclusion of parental support/family work in other relevant tender specifications is based on feedback from services.
Disability		Yes – EDACT previously funded an education/awareness raising programme targeted at those working with people with learning disabilities and it is expected that this project will build on experience and learning and apply again under the new tender round to support this priority within the Action Plan. Furthermore, as this is an open process it is expected that new proposals/bids will also be put forward in respect of these tenders.
Ethnicity		Yes – the regional monitoring tool gathers data on ethnicity and if a prospective tenderer can demonstrate need there are a number of priorities under which they can apply to work with minority ethnic groups in relation to addressing their alcohol and drugs needs specifically.
Sexual Orientation		Yes – if a prospective tenderer can demonstrate need there are a number of priorities under which they can apply to work with lesbian, gay, bisexual and transgender people/groups in relation to addressing their alcohol and drugs needs specifically.

2.5 Is there an opportunity to better promote equality of opportunity or good relations by altering the policy/decision or working with others in government or in the larger community?

Group	Suggestions
All groups	The Action Plan is being put out for consultation and any suggestions and concerns in this respect will be considered.

	EDACT already works closely with others in community, statutory and government settings to promote equality of opportunity and promote good relations via its Team meetings, Subgroup, Taskgroup or Forum meetings.
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2.6 What changes to the policy/decision – if any – or what additional measures would you suggest to ensure that it promotes good relations?

Group	Suggestions
All groups	The Action Plan itself is flexible and can take account of developments if and when they arise – likewise flexibility will be built into the tender specifications and EDACT will be able (as it has in the past) to work closely with service providers to ensure that equality and good relations issues are addressed.

2.7 Have previous consultations with relevant groups, organisations or individuals indicated that particular policies create problems that are specific to them? Indicate what these problems are. Also, please detail information used to answer any of the questions above (e.g. statistics; research reports; views of colleagues, service users, or other stakeholders).

In developing this draft Action Plan for 2009-2011 EDACT has already held a number of Team meetings, subgroup meetings, consultation events and meetings with stakeholders and other relevant partnerships to ensure that the priorities outlined within it accurately reflect the views and address the concerns voiced by all those involved/affected.

Team members and staff have consulted a variety of documents prior to formulating the plan, including –
 DHSSPS documents: NSD for Alcohol and Drugs 2006-11, Drug Misuse Database reports, and a variety of research and survey reports focusing on alcohol and/or drugs.

EHSSB and regional monitoring data as provided by the services providers funded under the current Action Plan.

EDACT-funded research into the alcohol and drugs needs of vulnerable groups in the EHSSB area (carried out by Keele University).

This consultation process will allow the Team to consult further and address any problems which haven't been previously considered.

2.8 Please detail what data you will collect in the future in order to monitor the effect of the policy/decision on any of the groups under Section 75?

- Feedback gathered from the consultation on the Action Plan.
- Monitoring data and qualitative feedback gathered from successful service providers (as a result of the tendering/commissioning processes in support of the Action Plan).
- Qualitative feedback from subgroups (EDACT has several subgroups and forums which focus on the needs of vulnerable groups such as young people and the homeless population).
- Analysis of all available data gathered by the DHSSPS, EHSSB, EDACT and Service Providers in relation to alcohol and drugs.

(3) SHOULD THE POLICY/DECISION BE SUBJECT TO EQUALITY IMPACT ASSESSMENT?

Equality impact assessment procedures are confined to those policies/decisions considered likely to have significant/major implications for equality of opportunity.

If your screening has indicated that a policy/decision is likely to have an adverse differential impact, how would you categorise it? Please tick.

Significant/major impact	<input type="checkbox"/>
Low impact	<input checked="" type="checkbox"/>

Do you consider that this policy/decision needs to be subjected to a full equality impact assessment?

Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>

Please give reasons for your decision.

The Action Plan and the priorities outlined within it have been developed with the equality agenda and legislative framework in mind.

Whilst specific vulnerable groups have been identified within the DHSSPS NSD document it will be up to potential service providers applying for tenders to demonstrate need and to outline their reasons for wanting to work with/prioritise/target specific groups.

The funding for services, in support of this Action Plan, is non-recurrent and is being applied for the 2-year period commencing in April 2009 and ending in March 2011.

(4) DISABILITY DISCRIMINATION

4.1 Does the policy/decision in any way discourage disabled people from participating in public life or does it fail to promote positive attitudes towards disabled people?

N/A - no

4.2 Is there an opportunity to better promote positive attitudes towards disabled people or encourage their participation in public life by making changes to the policy/decision or introducing additional measures?

The Action Plan is focused first and foremost on addressing needs in relation to alcohol and drugs, across the spectrum from information/education to treatment and support.

Prospective service providers can tender to meet the needs of disabled people if they can identify that they have specific substance use/misuse needs – those with learning disabilities have already been identified as a group significantly vulnerable to substance misuse and EDACT has funded services/initiatives under its previous plan which targeted this client group. There will be opportunities under the current plan for these services and perhaps new initiatives to apply.

4.3 Please detail what data you will collect in the future in order to monitor the effect of the policy/decision with reference to the disability duties?

Draft Action Plan 2009-2011 will be forwarded to the main umbrella Disability Organisations for comment/feedback and their views or concerns considered prior to the Plan being finalised.

(5) CONSIDERATION OF HUMAN RIGHTS

5.1 Does the policy/decision affect anyone's Human Rights? [PLEASE COMPLETE THE TABLE BELOW]

ARTICLE	POSITIVE IMPACT	NEGATIVE IMPACT = human right interfered with or restricted	NEUTRAL IMPACT
Article 2 – Right to life	✓		
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment			✓
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			✓
Article 5 – Right to liberty & security of person	✓		
Article 6 – Right to a fair & public trial within a reasonable time			✓
Article 7 – Right to freedom from retrospective criminal law & no punishment without law			✓
Article 8 – Right to respect for private & family life, home and correspondence	✓		
Article 9 – Right to freedom of thought, conscience & religion			✓
Article 10 – Right to freedom of expression	✓		
Article 11 – Right to freedom of assembly & association			✓
Article 12 – Right to marry & found a family			✓
Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			✓
1 st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			✓
1 st protocol Article 2 – Right of access to education			✓

*If the effect you have identified is positive or neutral please move on to **Question 5.3***

5.2 If you have identified a likely negative impact who is affected and how?

N/A

At this stage we would recommend that you consult with your line manager to determine whether to seek legal advice and to refer to Human Rights Guidance to consider:

- *whether there is a law which allows you to interfere with or restrict rights*
- *whether this interference or restriction is necessary and proportionate*
- *what action would be required to reduce the level of interference or restriction in order to comply with the Human Rights Act (1998).*

5.3 Outline any actions which could be taken to promote or raise awareness of human rights or to ensure compliance with the legislation in relation to the policy/decision.

Approved Lead Officer:	<u>Gerry Bleakney</u>
Position:	<u>Head of Health Promotion Commissioning</u>
Date:	<u>2 July 2008</u>
Policy/Decision Screened by:	<u>Kelly Gilliland (EDACT)</u>

Please note that having completed the screening, you will need to ensure that a consultation on the outcome of screening is undertaken, in line with Equality Commission guidance.

Please forward completed schedule to Equality Manager, Planning & Contracting Department. The EHSSB Equality and Human Rights Quality Assurance Group will consider the Screening Form.