

**REPORT TO: POLICY AND RESOURCES COMMITTEE - 22 MARCH 2010**

**REPORT ON: MISUSE OF DRUGS AND ALCOHOL**

**REPORT BY: CHIEF EXECUTIVE**

**REPORT NO: 119-2010**

**1. PURPOSE OF REPORT**

To provide Committee with information requested when the issue of drug and alcohol misuse was discussed in September 2009.

**2. RECOMMENDATIONS**

It is recommended that Committee note the contents of the report.

**3. FINANCIAL IMPLICATIONS**

All of the expenditure identified in this report is contained within existing budgets.

**4. BACKGROUND**

4.1 At its meeting in September 2009, Policy and Resources Committee discussed the impact which substance misuse is having on individuals, families and communities across Dundee, and confirmed the Council's commitment to tackling, in partnership, the effects of this increasing problem.

4.2 The Committee requested:

- a report from the Alcohol and Drug Partnership which sets out a plan for effectively tackling the issue of drugs and alcohol in Dundee
- a report from the Chief Executive estimating what additional funding would be required for the removal of specific Drug and Alcohol services waiting lists
- a report from the Chief Executive detailing those Council services where misuse of drugs and alcohol have an effect on service delivery, giving examples of the additional work involved

**5. A PLAN FOR EFFECTIVELY TACKLING THE MISUSE OF DRUGS AND ALCOHOL**

5.1 The first meeting of the new Dundee Alcohol and Drug Partnership took place in October 2009. Key issues discussed included:

- Strategy and Action Plan - the previous Drug and Alcohol Action Team strategy is being revised to take account of national strategies, the Single Outcome Agreement, new NHS targets and the recent HMIe inspection. A draft version of the new strategy is to be discussed by the Partnership early in 2010 then circulated to partners, including the Council, for consultation and comments
- Engaging with Local Communities - the importance of developing a profile and engaging with local communities was acknowledged. It was suggested that Local Community Planning Partnerships could provide a structure for dialogue with communities and that the Partnership should develop an engagement strategy linked to other issues such as Violence Against Women, Child Protection, Youth Justice and Vulnerable Adults

- Drug Related Deaths - the Alcohol and Drug Partnership identified reducing the number of drug-related deaths as one of its main priorities. Over the past 2 years, a database has been developed to provide detailed information on each drug-related death and this will now be analysed to identify patterns and appropriate responses
- Children affected by parental misuse and young people affected by their own misuse - the Partnership approved funding for a Vulnerable Families proposal, an 18 month trial of interventions aimed at improving parenting capacity and strengthening families, and a contribution to re-design of the New Beginnings service

5.2 A further report will be brought to Committee once the Partnership's draft Strategy and Action Plan is produced for consultation.

## 6 REMOVAL OF WAITING LISTS FOR DRUG AND ALCOHOL SERVICES

### 6.1 Waiting Times for Tayside Substance Misuse Service

6.1.1 In November 2009, the Tayside Substance Misuse Service underwent a 'Rapid Improvement Event' - a process which allows an organisation to undergo a substantial restructuring of all its processes and develop new ways of delivering services that respond more efficiently to the needs of clients. One of the main reasons for undertaking this was the existence of unacceptably long waiting times for treatment services. Prior to the Rapid Improvement Event, clients who were not identified as a high priority could wait up to 18 months for a treatment service. Since preparations began for the Rapid Improvement Event, all individuals referred to the Service have received an appointment for an initial assessment within 28 days. Although initially this improvement in waiting times reduced the quality of the service delivered (due to the need to switch resources to the front end of the service) this issue has been addressed by the Rapid Improvement Event and its implementation plan.

6.1.2 A clinical service delivery plan has been developed and is now in the process of being implemented. This plan includes:

- all individuals who are referred to the service will be given an initial appointment for assessment within 72 hours
- clients who require specialist treatment will begin to receive that treatment within a maximum of 14 days. This will include replacement prescribing, detoxification and structured therapeutic contact
- for the first 4 weeks of the treatment programme, clients will be seen between 5-7 days depending on their needs
- a high intensity service will be available for clients who do not progress with treatment. This will improve outcomes for those traditionally lost to services by improving retention and improving the outcomes achieved by clients

6.1.3 The changes proposed will ensure that clients are assessed quickly and issues such as Child Protection/neglect issues, parenting gaps and Blood Borne Viruses will be identified very quickly. Clients will be able to access the appropriate treatment for their needs with little delay and will be more likely to remain engaged with treatment services to see real progress towards recovery. Using the Rapid Improvement Event methodology to re-design the service means that the new plan for delivering the first

part of the treatment services (the daily service) can be implemented broadly within existing resources.

## 6.2 Waiting List for Social Work Assessment

The waiting list for the Social Work Department's care management/social work caseload currently stands at 12 - none of these have children in the household. Where children are involved there is immediate allocation to a Social Worker.

## 7 **EFFECT ON COUNCIL SERVICE DELIVERY**

### 7.1 Social Work

7.1.1 The Social Work Department estimates that direct expenditure on services as a result of the use of drugs and alcohol is as follows:

<b>Service</b>	<b>Direct expenditure</b>
Children's Services	£602,000
Community Care	£734,000
Criminal Justice	£536,000
<b>Total</b>	<b>£1,872,000</b>
Supporting People (separate budget jointly managed by Social Work and Housing)	£1,668,000

Figures which demonstrate the need for service provision include:

- over 62% of children on the Child Protection register are affected by drug and/or alcohol misuse at the point of registration. There is now a specific Substance Misuse Worker for Looked After Children ensuring links to appropriate services
- around 91% of residents admitted to East Port House Offender Accommodation Unit disclose a substance misuse problem. Services provided through criminal justice include an arrest referral service for those whose offending is linked to substance misuse, implementation of Drug Treatment and Testing Orders, and throughcare addiction service for those returning to the Dundee area from prison.

7.1.2 There will also be expenditure on mainstream services where substance misuse is an issue, but this is impossible to estimate accurately.

### 7.2 Education

7.2.1 The Education Department has identified the following effects on young people if their parents misuse drugs and/or alcohol:

- foetal alcohol syndrome or similar leading to long-term problems in learning and behaviour

- inconsistent parenting leading to child unable to understand boundaries between acceptable and unacceptable behaviour
- children arriving tired/hungry/dirty at school through lack of care
- inability to concentrate because of background issues such as domestic abuse, unemployment and poverty
- anxiety and feelings of shame about the parent which can lead to aggressive behaviour towards others
- isolation due to fear of taking friends home
- lack of attendance at parents' evenings not allowing progress to be discussed
- becoming a young carer and anxiety about survival of parent

#### 7.2.2 The effects of drugs and alcohol use by young people can include:

- impaired memory and verbal skill deficiencies
- fatigue and lack of interest in school work
- increased probability of absence, resulting in interrupted learning and lower levels of achievement
- greater risk of violent behaviour, resulting in possible exclusion and interrupted learning
- more likelihood of becoming involved in risky behaviour, including criminal activity and under-age sex

#### 7.2.3 The Education Department advises that it is impossible to quantify the impact in terms of staff time and costs because:

- they have very few reports of drug or alcohol-related incidents in school. Instead, schools tend to deal with the physical or social after-effects of alcohol or drug use. So, if a young person is removed from mainstream education because of aggressive behaviour or long-term truancy, although the root of the problem may be associated with alcohol or drug use by the young person or their family, Education cannot attribute the costs associated with providing the subsequent intensive additional support to that drug and/or alcohol use
- young people may have parents who misuse alcohol and drugs to the extent that the young people become carers of their parents and require additional learning or behaviour support because they miss out on schooling or are unable to concentrate. Education do not attribute the costs associated with meeting the child's additional support needs in terms of drug and/or alcohol use

### 7.3 Other Departments

It is not practical to give an accurate, meaningful figure for the financial impact on other departments, but some of those affected are:

- Housing - the Housing Department estimates that a high % of officer time is spent dealing with issues relating to drug and alcohol misuse, which impacts on many aspects of the service including homelessness, tenancy management, housing support, rent recovery and anti-social behaviour
- Leisure and Communities - the Leisure and Communities Department estimates that a significant % of the time of field workers is spent working with individuals and groups on drug and alcohol issues through geographic youth work teams, community safety wardens and workers, peer education, healthy living initiative, Xplore and community regeneration
- Waste Management - officers are involved in work relating to drug misuse such as collection of used needles
- Senior Management and Support Departments - although this is very difficult to quantify, a proportion of the time of senior corporate and departmental managers, and staff in support departments, will be spent as a consequence of drug and alcohol issues.

#### 7.4 Cost of Crime and Vandalism

The cost of vandalism to Council property is around £800,000 per annum, arising from around 4,000 separate incidents. Although it seems likely that some of this is caused by young people under the influence of drugs or alcohol, there is no hard data which would allow this cost to be quantified.

### 8 **POLICY IMPLICATIONS**

This report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues.

### 6. **CONSULTATIONS**

The Depute Chief Executive, Director of Finance and Assistant Chief Executive have been consulted on this report and are in agreement with its contents.

### 7. **BACKGROUND PAPERS**

None.

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Chief Executive

16/03/2010