



Action Plan

2021/22 – 2024/25

‘Addressing Drugs and Alcohol Together’



Strategic background

Southern DACT was re-started in 2019. DACT Terms of Reference, and the relationship between each DACT and its Connections service are outlined here: <https://drugsandalcoholni.info/creative3media/uploads/2021/12/DACT-TORs-Role-of-DACT-and-Connections.pdf>.

*In September 2021, the new substance use strategy **Preventing Harm, Empowering Recovery** was launched, recognising that **local assessment of need, and the development and delivery of services, programmes and initiatives to meet those needs, is paramount to address these issues effectively.***

It is therefore vital that local structures are in place that support these functions.

Previously these had been delivered through the local Drug and Alcohol Co-ordination teams (DACTs), supported by the PHA and the DACTs Connections Service.

However, the local delivery landscape has changed dramatically in recent years.

Policing and Community Safety Partnerships (PCSPs) are now well established and Community Planning structures at local government level also now exist.

We believe there is still a need for local partnerships focused specifically on the harm related to the use of alcohol and other drugs, however, it would now be appropriate for the PHA to review the role, function and membership of Drug & Alcohol Co-ordination Teams, supported by DoH and other partners, to ensure they are effective and strategically placed to inform, support and monitor the delivery of Preventing Harm, Empowering Recovery. This review will include an assessment of the linkages and overlaps with other local delivery structures. DACTs will remain until the review is done.

Further mention of DACTs is made in terms of Service User Involvement and Community & Voluntary sector involvement as key values. *It is essential that their voices are heard throughout the strategy's governance structures with membership at the programme board, the sub-committees, and DACTs.*

Scope and duration

SDACT members connect to many other partnerships that plan and deliver for the same public. This action plan focuses on *those actions that SDACT members can achieve through SDACT itself, and which could not be achieved at all, or as well, in the absence of SDACT* as a purposeful partnership addressing D&A issues and opportunities local to the Southern area.

This action plan is for the period 2021/22 – 2024/25. However, it will have ongoing/annual review during that period with new actions added as appropriate. We expect there to be emerging issues and strategic asks of DACTs coming from the implementation of the Strategy.

Where an action has originally been identified by SDACT, and subsequently taken on by the Strategy or within its outcome groups, this is noted below so it remains 'live' on SDACT agenda.

Relationship with mental health

The current strategy highlights the need for an increased focus on co-occurring mental health and substance use issues and to this end, the SDACT has secured members from the mental health agenda, bridging the SDACT to the Southern Protect Life Implementation Group.

Geography of SDACT

SDACT's geography includes several cities/towns/areas – **Armagh, Banbridge, Craigavon, Dungannon, Newry & Mourne** - one Trust – Southern Health and Social Care Trust, one council in full (**ABC**) and two part councils (**NMD & MUDC**), with their corresponding co-terminous PSNI districts.

SDACT objectives – we will:

- 1. influence** others' and our own organisations' **policy and strategy, and agendas of relevance** for people at risk of harm from alcohol and/or drugs.
- 2. influence Research** of relevance for people at risk of harm from alcohol and/or drugs.
- 3. improve transition** between services.
- 4. share and develop our intelligence, knowledge and practice.**
- 5. ensure connection** between SDACT and other relevant agendas.
- 6. ensure connection** between referrers, communities signposting agencies and services.
- 7. make 'seeking support' simple.** We will **promote relevant services** and how to access them.
- 8. develop care and concern among our communities** regarding mental ill-health, substance use and associated harm.
- 9. develop safer communities** in Southern area regarding substance use.
- 10. raise awareness** of low risk drinking, medicines management and disposal, hidden harm, polydrug use.

ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
At Strategy level: Influencing and aligning policy to address health inequalities				
Obj 1. We will influence others' and our own organisations' policy and strategy, and agendas of relevance for people at risk of harm from alcohol and/or drugs.				
<p>i. Identify relevant opportunities, consultations, pre-consultations etc.</p> <p>Submit SDACT collective response where appropriate.</p> <p>Encourage individual responses where appropriate.</p>	<p>All members, through the Chair.</p>	<p>Routinely at and between SDACT meetings.</p>	<p>Collective responses made by SDACT:</p> <ul style="list-style-type: none"> • PHA pre-consultation 2020 • DH SUS. <p>SDACT members have been encouraged to submit own responses to:</p> <ul style="list-style-type: none"> • PL2 • Draft Homelessness Strategy Nov 2021 • Suggestions for use of SPLIG funding (Oct 21). 	<p>Successfully influenced PHA to delay the procurement of D&A services to align with publication of the SUS.</p> <p>Successfully influenced the allocation of 21/22 SPLIG monies to include the provision of training to D&A service providers.</p>
<p>ii. Conduit to and from SDACT to the Substance Use Strategy working groups.</p>	<p>Nominated members of SUS working groups who are also SDACT members.</p>	<p>Updates every 6 weeks as required and necessary - led by SUS Programme Board.</p>	<p>Nominations have been made to SUS Outcome Groups as noted.</p> <p>Feedback on progress from other Outcome Groups will flow to and from SDACT through other DACT reps.</p>	<p>Outcome Group members:</p> <p>A – Prevention & Early Intervention – Danny Sinclair (as PHA rep)</p> <p>C (a) CYP – Stephanie Hanlon (as PHA rep)</p> <p>C (b) Co-occurring Mental Health Substance Use – Lydia Scholes</p> <p>C (d) Advice & Support – Catriona Fitzsimons (DACT)</p> <p>D - Supported & Empowered Recovery – Emma Dinsmore (DACT)</p>

Obj 2. We will **influence Research** of relevance for people at risk of harm from alcohol and/or drugs.

ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
i. Identify unmet research needs, gaps in evidence, research opportunities etc.	All members, through the Chair.	Routinely at and between SDACT meetings.	Achievements so far have been mainly in developing processes to support this: <ul style="list-style-type: none"> • Standing agenda item set and implemented. • Deirdre McParland identified as champion and conduit to academic colleagues. 	A potential research opportunity has been identified and notified to PHA Health Intelligence (Low Threshold / Counselling) however it is not viable at present.
ii. Encourage membership of NI Public Health Research Network among SDACT members.	PHA	Once a year	Weblink circulated to encourage sign up in September 2022.	SDACT members who have signed up at November 2022: Danny Sinclair / PHA

At System level:

- Enhancing multi-disciplinary working
- Strengthening collaboration and integration within the health and social care system

Obj 3. We will **improve transition** between services.

ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
i. Document 'Southern' adult stepped care pathway / referral pathways.	Adult Step 2 / 3 service providers	22/23	Stepping up and stepping down is carried out already as part of recent practice (established 2021). Leads identified: CAT SHSCT/Step 2 Partnership.	
ii. Agree and document 'Southern' youth stepped care pathway / referral pathways.	SHSCT and Youth Step 2 / 3 service providers	After 3 (i) is complete	Stepping up and stepping down is carried out already as part of recent practice? Possible leads: SHSCT Addiction Liaison Officer, (M.McCann) and Dunlewey Step 2 YT Service.	
<p>Nb. SUS Outcome C (c) will address this action.</p> iii. Identify and agree the assessment and support needs of clients entering or exiting custody/prison – re prescription medication / substitute prescribing. Scope any potential to improve current practice.	SUS Outcomes Group C (c) (Local involvement: SHSCT PBNI PSNI)	2022 onwards	Issue identified so far: Justice / health link Gap in provision of OST on exit (BHSCT has a prisons link for OST) Last minute / continuity issue re knowledge of exit Cases where released at Court vs sentenced – can pre-empt needs SUs missing OST referral appt because of justice commitments Choosing to fail drugs test to get OST	

ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
iv. Increase understanding of substitute prescribing among SDACT members.	SUS Outcomes Group C (d) SHSCT OST SU input	22/23	Presentation to SDACT arranged for Sept 2022. This will improve SDACT readiness to contribute towards SUS Outcomes Group C (d)'s work – feeding via SDACT chair/PHA through to the DACT representative/s on SUS Outcomes Group C (d).	
v. Develop and agree a set of (goodwill) standards among service providers to encourage joined up continuity of support for service users.	RSUN to lead SU input	RSUN to advise	Areas of focus have been suggested during SDACT planning workshop: <ul style="list-style-type: none"> • Transition of clients - warm handover • Service user choice and consent • Data protection, GDPR • Assessment/Reassessment and Exit/Follow Up support SHSCT has work underway on warm handover in suicide prevention.	
vi. Identify the main barriers preventing smooth transition / parallel service delivery <i>between D&A and MH services</i> . Scope potential solutions. Nb. The SUS Outcomes C (a) and (b) link to this action. Actions 3 (i) and 3 (ii) will help SDACT members'	SUS Outcomes Group C (a) & C (b) All SDACT SU input	2022 onwards	Issues for consideration identified during SDACT action plan workshop: Identify transitional barriers, Develop referral pathways in / out including to/from Adult or MH services, Develop joint case management, Develop post service signposting.	

<p>readiness to contribute to the Outcomes groups.</p>			<p>Ensure to include for D&A services linked to Justice (inc YJA, PBNI) and Education</p> <p>CYPSP Southern Area Outcomes Group maintains details of a wide range of services – services are up to date as of September 2022.</p> <p>Lydia and Stephanie to inform SDACT of SUS Outcome Groups' progress and seek involvement if/when required.</p>	
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Obj 4. We will share and develop our intelligence, knowledge and practice.				
ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
<p>i.Ensure Service User representation and participation in SDACT developments.</p>	<p>Chair/ Coordinator.</p> <p>Leads within any working groups.</p> <p>RSUN.</p>		<p>Opportunities for SU input have been identified in the following actions: 3 v.</p>	
<p>ii.Consolidate use of Local D&A Incident Protocol (LDAIP) and DAMIS by SDACT members.</p>	<p>All members.</p>	<p>TBC</p>	<p>Achievements so far have been mainly in developing processes to support this: Presentation to SDACT members, identification of overlap between LDAIP and DAMIS, identification of improvement/alignment opportunity.</p>	

ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
iii. Identify emerging substance use issues and concerns, identify most appropriate action (escalate/ address locally as SDACT/address locally as individual member) etc.	All members through DAMIS LDAIP/LISG Service Provider Network. LISG Chair. Connections team.	Ongoing	Achievements so far have been mainly in developing processes to support this: Connections identifies issues and concerns emerging at the Service Provider Network, and shares them with SDACT Chair and Coordinator. Standing agenda item at SDACT meetings includes updates from members inc: <ul style="list-style-type: none"> - Service providers via SPN - Regional updates PHA/DH - PSNI locality intelligence - PCSP - NIHE (aspiration)._ - 	
iv. Develop and pilot a web-based system to improve sharing of local intelligence.	PHA initially.		SDACT members have been introduced to the LDAIP (20/21) and are reminded at SDACT meetings of DAMIS and its annual report. PHA has developed prototype web-based system.	
v. Share relevant training and development opportunities among members.	All members through the coordinator.	Ongoing	PLIG funded training circulated and places secured for SDACT members: <ul style="list-style-type: none"> - Extern - Dunlewey Responders training Feb/March 2022.	

ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
vi. Improve reporting of RAPID (drug bins) data to SDACT.	PHA Connections	2022	Connections have all RAPID collection data input to the database, including backdated data from before the system was built. Database design has been improved, simplifying its use.	
vii. Establish and review the learning of the Step 2 partnership, including access to interpreting support. Share the model with PHA leads as part of the evidence review.	PHA Step 2 Partnership SHSCT	(In time for any review of Step 2 adult services by PHA)		

Obj 5. We will ensure connection between SDACT and other relevant agendas.

i. Identify where the Connections service can enhance and/or exploit other agendas to reduce harm from substance use.	All members, raising through Connections	Ongoing	The following stakeholders have been identified: <ul style="list-style-type: none"> - Community Planning - Age Friendly officers in Councils - Council Community Development and Health Inequalities workers. Council Inequalities teams have contract objectives to connect them with D&A Connections, eg support campaigns like NIAAW.	D&A messaging to local older people via Age Friendly (Oct 2021)
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Obj 6. We will **ensure connection** between referrers, signposting agencies and services.
We will **steer Connections' outreach** into communities and settings.

ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
i. Identify and connect with those who can promote use of services, sharing of intelligence, and who can influence our work, particularly for marginalised groups.	All members through Connections.	Ongoing	<p>The following stakeholders have been identified:</p> <ul style="list-style-type: none"> - Ethnic minority forum – local and regional - SPLIG / MH network/s - MH hubs? - Council Community Development and Health Inequalities workers - Family Support hubs - CYPSP - Primary Care - SHSCT Home Companions. 	<p>Accessibility of D&A services discussed at regional EM forum.</p> <p>Promotion of Step 2 to Primary Care during 2021. Feedback from provider that GP referrals came as a result.</p> <p>PHA messaging mailout has been used to promote D&A services – June 2022.</p> <p>Home Companions encouraged to undertake Responders training.</p>
ii. Identify any unmet need/s or new opportunity/ies to be prioritised by the Connections team.	All of SDACT	Ongoing	PHA have liaised with their Inequalities lead to identify deprived areas within SHSCT according to NISRA.	

Obj 7. We will make 'seeking support' simple. We will promote relevant services and how to access them.

ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
<p><u>Communication – service improvements</u> i. Develop a single point of contact for people considering change in use of drugs/ alcohol.</p>	Step 2 service PHA Connections		Have identified Step 2 partnership as a suitable telephone contact point (which can step down or up as appropriate).	Single point of contact for people in SDACT area.
ii. Promote the single point of contact.	Connections		Have promoted on social media as part of regional advert.	Analytics TBC.
iii. Promote the availability of help among local ethnic minorities	PHA Connections		Have linked to local Ethnic Minority lead in PHA to consider promotion methods.	Have secured use of HSC Interpreting to support Step 2 service.
iv. Promote a Southern overview of services, inc. <ul style="list-style-type: none"> • step of care • referral highlights • contact information 			Suggested items to consider: D&A directory - South SE Roadmap to services (design) Content within Down leaflet Extern brochure – online Southern Area Family Support database Collaborate with SPLIG?	
v. Liaise with potential referrers & sign posters, CYP, rural communities' vulnerable groups, key workplace settings.	Connections Step 2 Partnership	Ongoing	-SPN Networking event – Sept 2022 -Community HWB event – Connections & PCSP - October 2022 -Access to Service - Step 2 Referral Pathways via Step 2 Partnership	

ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
vi.Strengthen the connection between SDACT and Southern Area Support Hub	Southern Area PSNI / Council Support Hubs Connections		Strengthen referral arrangements from support hubs out to D&A services. ABC Hub has indicated open door for this. Connections actioning.	
vii.Share (regionally) Youth Treatment service practice of achieving and maintaining engagement among service users SUS Outcomes Group C (a) will likely drive a review of existing services.	PHA Dunlewey		Anecdotally, the Youth Treatment Step 2 service in South (DA-DACTs / Dunlewey) has been highlighted as having good engagement levels.	
<u>Communication</u>				
viii.Strengthen communication opportunities to receive and disseminate information across SDACT members and the SPN	Connections PHA PHA PHA	Ongoing Ongoing Autumn 2022 Autumn 2022	Use SPN & Connections newsletter Circulate updates to SDACT members Circulate PHA messaging service sign up arrangements CYPSP FS newsletter & Southern LPG Area Newsletter – circulate example edition, how to sign up/add service info	

ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
<p><u>Communication - Enhancing Networks / Linking Partnerships</u> ix. Strengthen the partnerships and referral processes between services and address gaps in connections with cross cutting partnerships and service areas</p>	<p>Chair / PHA</p> <p>SDACT members</p>		<p>Partnership updates are a standing agenda item at each SDACT meeting for cross cutting themes, emerging issues and service updates</p> <p>Michael Heaney YJA bridges between SDACT and CYPSP Southern Area Outcomes Group</p> <p>Deirdre McParland and Gemma Managh bridge between SDACT and Southern Area Protect Life Implementation Group (SPLIG)</p> <p>Aine Campbell bridges between SDACT and local Support Hubs</p> <p>Need to consider:</p> <ul style="list-style-type: none"> • Transitions lead SHSCT • NIHE • Southern Integrated Care • Council/SHSCT Comm Dev teams • Regional ACEs forum / Trauma informed agenda 	
<p>x. Continue to identify emerging needs and gaps in services.</p> <p>Work with service providers to meet the needs. Facilitate the</p>	<p>SPN / Connections</p> <p>All of SDACT</p>		<p>SPN to invite PCSP, SHSCT Community Development Team and Council Community Development Team to discuss current cross cutting opportunities, programmes and groups in the community.</p>	

ongoing flow of information to SPN in relation to new and continuing programmes.			Consider SPLIG presentations on YP friendship café, wellbeing café, loneliness, family supports.	
xi. Develop a consistent ACE awareness and trauma sensitive approach to practice across SDACT services. Action E5 SUS = The PHA will continue to deliver a programme of workforce development in relation to substance use, in line with national standards such as DANOS etc. This would include the need for a trauma-informed approach and appropriate training on stigma associated with substance use	All SDACT members	TBC	Service staff needs identified so far: <ul style="list-style-type: none"> • Ease of access to resources and tools for working with clients faced with many adversities affecting their treatment/support • Ensure support for the root cause of harmful substance use • Support staff Suggested steps: <ol style="list-style-type: none"> 1. Identify SDACT member knowledge of ACES/TIP and future needs? 2. What do agencies require? <ul style="list-style-type: none"> -Training -Research -Resources -Access to learning platform 	
xii. Engage and involve SDACT members in Connections campaigns (NIAAW, RAPID, Dry January, Feel Good February)	Connections			

At Community level, working in partnership to plan and deliver and Building capacity for public health				
Obj 8. We will develop care and concern among our communities regarding mental ill-health, substance use and associated harm.				
ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
i.Support regionally-agreed Hidden Harm awareness and early intervention steps, when available.	SUS Outcomes Group A & C (a)	2022 onwards	<p>PHA & DACT representation on this subgroup will inform members of progress of this action and when local responses are required</p> <p>Southern Area HH service providers will be involved in service reviews as requested via SUS outcomes groups.</p>	
ii.Implement agreed responses to Local D&A Incident Protocol issues			<p>SDACT has influenced the PHA/ Connections regional response to:</p> <ul style="list-style-type: none"> - Alprazolam - MSJs - Nitrous Oxide / canisters - Syrup - Alcoholic caffeinated drinks 	
iii.Responders – as above				
Action E5 SUS = The PHA will continue to deliver a programme of workforce development in relation to substance use, in line with national standards such as DANOS etc. This would include the need for a trauma-informed approach and appropriate training on stigma associated with substance use				

Obj 9. We will **develop safer communities** in Southern area regarding substance use.

ACTION	WHO	WHEN	PROCESS ACHIEVEMENTS	OUTPUTS / OUTCOMES
i.Maintain and develop the RAPID drugs bins initiative.	Connections PCSP	Ongoing	There are 20 bins in place across Southern area.	
ii.Implement agreed responses to Local D&A Incident Protocol issues	All of SDACT	Ongoing	LDAIP presentation to SDACT members 2021.	

At Individual level, raising awareness of services and support available, delivering evidence based services and improving health literacy to reduce inequalities

Obj 10. We will **raise awareness** of low risk drinking, medicines management and disposal, hidden harm, polydrug use

As above – SDACT Connections will engage and involve SDACT members in campaigns (NIAAW, RAPID, Dry January, Feel Good February)