

## **Merton’s Joint strategic framework for prevention of substance misuse & related harm 2017-2021**

### **1. Introduction**

This joint strategic framework between Merton Council and Merton Clinical Commissioning Group sets out a comprehensive programme of actions to prevent substance misuse & related harm.

The framework describes:

- The scale of the problem
- The Merton response – desired outcomes and the challenges and issues that need to be addressed
- Strategic objectives and
- Action plans

### **2. The scale of the problem relating to alcohol and drug misuse in Merton**

Substance misuse is associated with a wide range of harmful social and health impacts and costs for the individual, families and communities.

*Level of alcohol and drug use in Merton*

In Merton, significant numbers are drinking at levels potentially harmful to health

- An estimated 1,800 adults have some level of alcohol dependence in need of specialist assessment and treatment (based on Public Health England (PHE) borough level estimates 2017).

Alcohol is a causal factor in a significant number of medical conditions including liver disease, heart disease, depression and stroke.

- Although Merton alcohol-related hospital admission rates are below the national average, numbers are substantial –equating to 2,900 alcohol-related hospital admissions in 2014/15.
- There has been a marked increase in alcohol-specific mortality rates since 2008 (from 6.9 per 100,000 population in 2008/9 to 10.2 in 2013/14).

Co-morbidity of drug and alcohol problems and mental illness is frequent. Approximately 40% of people with psychiatric disorders, misuse substances at some point in their lifetime, at least double the rate seen in the general population.

#### *Health inequalities*

The impact of harmful drinking and alcohol dependence is much greater for those in the lowest income groups and those experiencing the highest levels of deprivation. This pattern exists despite the data showing that lower income groups do not tend to consume more alcohol than people from higher income groups.

- This pattern of inequality is marked between the East and West of the borough, with a higher rate of alcohol-related admissions in the more deprived East compared to the West.
- Those groups most at risk of harm relating to both alcohol and drug misuse include families with children in care or those excluded from school, those in contact with criminal justice or mental health services and homeless people.

#### *Harm to children and families*

Parental substance misuse, together with mental health and domestic abuse ('toxic trio') are the major risk factors that impact negatively on a child's health and wellbeing both immediately and longer term.

- Parental substance dependency is a common feature in social work cases.
- PHE is due to publish shortly borough level estimates of the number of children likely to be negatively affected by parental alcohol dependency.
- 20% of new alcohol presentations are parents living with children (2015/16) vis 24% nationally

#### *Crime and anti-social behaviour*

Availability and affordability of alcohol are the most significant factors influencing levels of alcohol consumption. The volume of alcohol sold in Merton through off licenses is similar to the national average, although higher than the London average- with Merton ranking the tenth highest in London. The two Cumulative Impact Zones (CIZs) in Merton are vital measures regulating alcohol outlet density and availability, together with sustained use of licensing powers

Alcohol is associated with a wide range of criminal and anti social behaviour, particularly public drunkenness and street drinking, violence, domestic violence, injury and deaths and casualties due to road traffic accidents.

- Merton's participation in the Home Office/ DH initiative Local Alcohol Action Areas is providing a focus for strengthening agencies' collaborative response to problems in Wimbledon and Mitcham Town Centres.

### *Specialist substance misuse treatment services*

617 adults were in contact with specialist substance misuse treatment services in 2015/16. 290 (47%) were treated for drug misuse, and 327 (53%) for alcohol. The treatment profile in Merton is distinct compared to other London boroughs with a much greater proportion of alcohol clients. Alcohol is the dominant condition in new presentations to substance misuse services, representing 64% of all presentations (2015/16).

Evidence suggests that Merton has comparatively lower service 'reach' for drug treatment. Only 25% of estimated numbers of opiate users are accessing specialist services compared to 50% nationally. Also waiting times for alcohol are higher than the national average.

Overall outcomes are comparatively positive as measured by rates of successful completion of treatment, (except for opiates) (2016/17). 60.2% of alcohol clients completed treatment successfully, a rate higher than the national average (39.2%). The rate of successful treatment completion for opiate users was 9.4%. This is a continuous decline over previous years (similar to the national trend). However Merton's ranking has declined continuously against 'comparator' boroughs.

Around 20% of substance misuse clients were treated concurrently for mental illness.

### **3. Merton response: a partnership (whole system) approach to the problem**

Policy and evidence define clearly what actions are effective in reducing misuse of alcohol and drugs and associated harm. A model based on prevention, early intervention and recovery is known to be highly cost effective, in combination with wider community safety, licencing and enforcement measures.

*Desired outcomes*<sup>1</sup> are:

- More people access and benefit from alcohol and drug prevention and early intervention services
- More people successfully recover from drug and alcohol problems and are engaged in education and employment and are not offending
- Fewer people admitted to hospital with alcohol and drug related conditions
- More children and young people are protected from the harm related to parental substance misuse, including domestic violence
- Fewer young people report drinking alcohol or using illicit drugs
- Fewer people engage in alcohol and drug related antisocial behaviour and crime<sup>2</sup>

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<sup>1</sup> As measured by Public Health England national indicators and data sets

<sup>2</sup> New data set is due to be published by the end of 2017 for alcohol- attributable crime (for total crime, violence against the person, sexual offences and public order offences) based on a PHE methodological review of crime indicators 2016.

Prevention and intervention services are 'invest to save' measures –avoiding the significant costs to the health and local authority budgets. Without this sustained strategic investment the harm and associated financial costs are likely to increase.

Review of current approaches and services has been undertaken over the last six months through engagement with partners, and benchmarking against evidence base practice, and taking account of financial constraints.

Engagement activities have included multi-agency workshop events (including with service users), discussions with CCG clinical leads, and also service users' focus group work.

Key issues and challenges are:

- Overall low strategic profile of drug and alcohol and lack of overview of coherence of activities across sectors and agencies.
- Availability and affordability of alcohol particularly of high strength beers, and need to sustain and use all prevention opportunities relating to the licensing system measures
- Prevention and early intervention activities for adults underdeveloped, including limited identification and brief advice within all key front line services.
- Individuals and families dealing with alcohol dependency report lack of information about the range of services available—with difficulties in accessing and navigating different services, issues of stigma and discrimination, and limited access to mutual support –viewed as vital to recovery
- Comparative low 'reach' of the specialist treatment services among drug users, and need for specialist services to respond to changes in pattern of drug use- including increasing problematic use of some prescription and over the counter medicines.
- Variable relationship between primary care and specialist substance misuse services –including need for better communication and a collaborative approach to case management of clients in recovery.
- Underdeveloped routes to recovery-housing, education and employment and mutual support services.
- Gaps in the criminal justice pathway for treatment and recovery of drug and alcohol problems, including difficulties relating to organisational changes in probation and community rehabilitation services (NPS and CRC)

## **4. Strategic objectives**

### **Objectives**

- To embed efforts to prevent substance misuse and related harm within council strategic governance and partnership arrangements (particularly through establishment of Substance Misuse Strategic Partnership Board accountable to the Safer Stronger Executive Board)
- To increase and improve the effectiveness of alcohol and drug prevention and early intervention services, including access to and uptake of alcohol screening and brief interventions across all appropriate health, social care, youth, criminal justice and community settings.
- To improve the effectiveness of specialist treatment services for substance misuse with the focus on recovery goals of education, housing, employment and family and social networks.
- To strengthen effective partnership arrangements, pathways and protocols to protect and promote the health and wellbeing of children and young people affected by parental substance misuse
- To ensure effective joint working between specialist services for adult and young people specialist services for alcohol and drug problems, including transition between young people and adult specialist treatment services.
- To reduce the negative impact of substance misuse (alcohol and drugs) on levels of crime and anti-social behaviour and the fear of crime on residents.

## Action Plan

### Theme 1: Governance, Partnerships and Communication

Objectives	Tasks	Who/lead	When completed	Expected outcomes/benefits
To strengthen strategic governance arrangements for the substance misuse agenda within Merton.	<ul style="list-style-type: none"> <li>Agree oversight for the SM Strategic Framework by the Safer Stronger Executive Board, with link to HWB Board</li> <li>Establish a Substance Misuse Partnership Board (SMPB). Membership to included:               <ul style="list-style-type: none"> <li>CCG</li> <li>Mental health</li> <li>CSF (incl safeguarding)</li> <li>Service user/Carer representation</li> <li>Public Health</li> <li>Adult Social care</li> <li>MVSC</li> <li>CRC/NPS/YOT</li> <li>Police</li> <li>Community Safety</li> <li>Housing</li> <li>PH England</li> </ul> </li> </ul>	Public Health (PH)	06/2017	<ul style="list-style-type: none"> <li>Defined accountability for the conduct of the substance misuse agenda</li> <li>Improved outcomes across a range of agendas :               <ul style="list-style-type: none"> <li>Treatment</li> <li>Domestic Violence /VAWG</li> <li>Health</li> <li>Mental Health</li> <li>Crime/ASB</li> <li>Children's and Adult Safeguarding</li> </ul> </li> </ul>
To develop a shared awareness and commitment across Council of priorities related to substance misuse and its impact across other service areas		PH	06/2017	
Reduced inequalities in access and outcomes for those under represented within services	<ul style="list-style-type: none"> <li>Equality Audit completed for the Adults and YP Substance misuse services at appropriate points e.g. procurement and annual basis.</li> </ul>	PH Community	11/2017	<ul style="list-style-type: none"> <li>Ensure and improve access to treatment for groups and individuals underrepresented within services.</li> </ul>

	<ul style="list-style-type: none"> <li>Equality Audit completed for LAAA.</li> </ul>	safety (CS)/PH	07/2017	
To ensure community and service user participation in the design and delivery of substance misuse treatment services.	<ul style="list-style-type: none"> <li>Establish a service user council to facilitate a 'voice' for service users in treatment</li> <li>Include service user voice in SMPB</li> <li>User voice within commissioning process – tender, monitoring, training, review and design.</li> </ul>	PH	12/2017 06/2017	<ul style="list-style-type: none"> <li>Contribute to the development of relevant, person centred substance misuse services</li> <li>Improved 'recovery capital' in service users that choose to engage</li> </ul>
To strengthen operational partnership arrangements between stakeholders.	<ul style="list-style-type: none"> <li>Identify operational partners, services and stakeholders in delivery of substance misuse.</li> <li>Explore opportunities for a Substance Misuse operational delivery group (SMODG) meeting.</li> </ul>	PH PH	06/2017 07/2017	<ul style="list-style-type: none"> <li>Maximising impact and use of resources</li> <li>A shared understanding among stakeholders of the priorities/issues related to drug and alcohol and there impact on Merton residents</li> </ul>
To effectively embed key messages associated with Substance Misuse within related work streams, to develop a shared understanding, increase awareness, minimise duplication.	<ul style="list-style-type: none"> <li>Ensure Substance misuse has profile in other relevant strategies including: <ul style="list-style-type: none"> <li>Mental Health</li> <li>Sexual Health</li> <li>Community Safety</li> <li>Teenage Pregnancy and Substance Misuse strategy</li> </ul> </li> </ul>	PH	03/2020	<ul style="list-style-type: none"> <li>An improved 'client journey' for those accessing substance misuse treatment services</li> <li>Improved recovery outcomes for those with comorbidity.</li> </ul>
To ensure that Social Value is realised as part of the adult substance misuse procurement, and pilot the process, with a view to roll out across Public Health/Council.	<ul style="list-style-type: none"> <li>Develop and pilot an approach to social value as part of the method statements in the substance misuse contract.</li> <li>Refine approach for roll out in other procurements across Public Health/council.</li> </ul>	PH Commercial & Procurement	12/2017 03/2018	<ul style="list-style-type: none"> <li>The roll out across the Council of Social value through procurement</li> <li>Improved social, economic, and environmental well-being for Merton residents as a consequence of procurement activity.</li> </ul>

<p>To ensure that all contracts that the council has, incorporates prevention (Health in All Policies).</p>	<ul style="list-style-type: none"> <li>Explore opportunities as part of HIAP to incorporate prevention e.g. supporting key campaigns including substance misuse.</li> </ul>	<p>t (CP)</p> <p>PH/CP</p>	<p>03/2020</p>	<ul style="list-style-type: none"> <li>Improved accountability for prevention throughout Council contracts</li> <li>Improved life chances for people at risk</li> <li>Improved preventative health outcomes for Merton residents</li> </ul>
<p><b>Theme 2: Prevention and early intervention of alcohol and drug related problems</b></p>				
<p><b>Objectives</b></p>	<p><b>Tasks</b></p>	<p><b>Who/lead</b></p>	<p><b>When completed</b></p>	<p><b>Expected outcomes/benefits</b></p>
<p>To raise awareness of the harms associated with drugs and alcohol use amongst those that live and/or work in Merton.</p>	<ul style="list-style-type: none"> <li>Make Every Contact Count and develop training for front line staff in Drug &amp; Alcohol Awareness and Identification and Brief Advice (IBA). (including use of over the counter/prescription medications)</li> <li>Targeted and coordinated social marketing, linked to national messages, to raise awareness on alcohol and encourage responsible drinking behaviour.</li> <li>Improve the promotion and awareness of substance misuse treatment advice and services and what they have to offer.</li> <li>Develop and/or signpost to up to date alcohol and other drug information available in public places.</li> </ul>	<p>PH</p> <p>PH</p> <p>PH</p> <p>PH</p>	<p>03/2018</p> <p>03/2020</p> <p>06/2018</p> <p>03/2018</p>	<ul style="list-style-type: none"> <li>Earlier intervention in parental substance misuse</li> <li>Reduction in drug &amp; alcohol related crime and ASB.</li> <li>Reduction in drug &amp; alcohol related health harms.</li> <li>Merton residents are able to make informed choices regarding drug and alcohol use</li> <li>Reduction in harmful and hazardous drinking behaviour</li> <li>Fewer people will experience the harm relating to drug and alcohol misuse</li> <li>Reduce the financially impact on the adult Social care (Residential Care)</li> </ul>

<p>To identify and actively engage with populations at high risk of alcohol and drug harms.</p>	<ul style="list-style-type: none"> <li>Identify key groups and communities at risk of substance misuse and use segmentation to inform assertive outreach and engagement.</li> <li>Link service information and advice to GIO website</li> </ul>	<p>PH</p>	<p>03/2018</p>	<ul style="list-style-type: none"> <li>Greater understanding of drug and alcohol use among hard to reach communities</li> <li>Reduction of health harms among older Merton residents</li> <li>Reduction in Accident and Emergency presentations</li> <li>Reduction in alcohol related hospital admissions</li> <li>Reduction in the instances of street drinking</li> <li>Prevention of drug related deaths and infection by Blood Borne Viruses</li> </ul>
<p>To increase the identification of increasing and high risk drinkers.</p>	<ul style="list-style-type: none"> <li>Embed digital IBA into the One You Merton service.</li> <li>Develop the promotion and delivery of IBA in healthcare and other settings e.g. workplaces.</li> <li>Explore opportunities for alcohol screening through CQUINs.</li> <li>Include alcohol prevention measures within QUIP programme</li> <li>Explore opportunities for supporting healthy ageing.</li> </ul>	<p>PH PH PH/CCG PH/Adult social Care (AS) To be Confirmed</p>	<p>06/2017 09/2018 12/2018 03/2019</p>	
<p>To reduce the instances of Drug &amp; Alcohol health harms.</p>	<ul style="list-style-type: none"> <li>More targeted work within Accident &amp; Emergency settings, with robust pathways into community drug &amp; alcohol treatment services, to reduce and prevent drug and alcohol attributable hospital representations.</li> <li>Increase the use of ambulatory alcohol detoxification initiated within the hospital setting.</li> </ul>	<p>PH/Adult Treatment Provider (ATP)/CCG PH/Adult Treatment Provider</p>	<p>09/2018 09/2018</p>	

To reduce the availability of high strength (over 6% abv) beers in Merton.	<ul style="list-style-type: none"> <li>Work in partnership with Responsible Authorities to continue to improve the approach to challenging high risk licence applications.</li> </ul>	(ATP) Licencing (LI)	03/2020	<ul style="list-style-type: none"> <li>Reduction in Alcohol related Health Harms</li> <li>Reduction in Alcohol related crime and ASB</li> </ul>
To prevent drug and alcohol use among young people.	<ul style="list-style-type: none"> <li>Work with colleagues in CSF to work closely on their action plan linked to Young Peoples service.</li> <li>Combat alcohol sales to underage drinkers</li> </ul>	PH/ Children's Commissioner (CC) CS	12/2017	
To support partners in Primary Care to have confidence around tackling substance misuse and be able to identify, engage and signpost/refer their patients to appropriate services and tools.	<ul style="list-style-type: none"> <li>Attend Practice Led Training for Primary Care to raise awareness of substance misuse pathways.</li> <li>Support closer working between primary care and substance misuse services.</li> </ul>	PH  PH/CCG	03/2019  03/2019	<ul style="list-style-type: none"> <li>Primary care services competent to support those with substance misuse issues.</li> </ul>
<b>Theme 3: Recovery orientated drug and alcohol specialist treatment</b>				
<b>Objectives</b>	<b>Tasks</b>	<b>Who/lead</b>	<b>When completed</b>	<b>Expected outcomes/benefits</b>
To carry out a procurement of a recovery outcome based Integrated Drug and Alcohol Treatment System	<ul style="list-style-type: none"> <li>Engage with potential providers to establish interest within the market</li> <li>Work with potential providers to upskill market on social value requirements</li> <li>Engage with the market place to</li> </ul>	PH/ CP	12/2017	<ul style="list-style-type: none"> <li>Recovery outcome based treatment service delivering on Merton substance misuse vision</li> <li>Those with substance misuse will achieve sustained recovery from drug and alcohol problems.</li> </ul>

<p>To communicate an ambition for recovery in all aspects of drug and alcohol service delivery.</p>	<p>develop specification and priorities</p> <ul style="list-style-type: none"> <li>• To develop current workforce to enable delivery of evidence based recovery focused interventions including: <ul style="list-style-type: none"> <li>○ Carry out a Training Needs Assessment (TNA) among current staff to identify training needs with regard to recovery focused delivery of services</li> <li>○ Support provider to develop a training and development plan for current and future staff</li> </ul> </li> </ul>	<p>PH/ATP</p>	<p>03/2018</p>	<ul style="list-style-type: none"> <li>• Reduction of the impact of drugs and alcohol on families.</li> <li>• Reduction in A&amp;E and hospital admissions</li> </ul>
<p>To fully integrate a recovery-based approach within the whole treatment community.</p>	<ul style="list-style-type: none"> <li>• To carry out a recovery audit of current provision including: <ul style="list-style-type: none"> <li>○ Mapping of current recovery support available to clients and families.</li> <li>○ Audit current provision against the recommendations of 'Medicines in Recovery', and develop an action plan in place to address gaps in provision.</li> </ul> </li> </ul>	<p>PH/APT</p>	<p>03/2018</p>	<ul style="list-style-type: none"> <li>• Improved outcomes for those accessing services</li> <li>• Improved access to treatment opportunities for those accessing services</li> </ul>
<p>To improve outcomes for those accessing the treatment system.</p>	<ul style="list-style-type: none"> <li>• Implement the outcome star model across treatment services.</li> <li>• Effectively monitor service delivery through robust contract monitoring.</li> </ul>	<p>PH/ATP PH/ATP</p>	<p>03/2018</p>	<ul style="list-style-type: none"> <li>• Freedom from dependence on drugs or alcohol</li> <li>• Improvement in mental and physical wellbeing</li> </ul>

	<ul style="list-style-type: none"> <li>Adult Treatment Provider to be develop approaches to attract treatment naïve drug users. To include: <ul style="list-style-type: none"> <li>Engagement with diverse community groups</li> <li>Developing outreach opportunities with establish street agencies</li> </ul> </li> </ul>	PH/ATP	Ongoing	<ul style="list-style-type: none"> <li>Prevention of drug related deaths and infection by Blood Borne Viruses</li> <li>Reduction in crime and re-offending</li> <li>Sustained employment</li> <li>Access to and sustained suitable accommodation</li> <li>Improved relationships e.g. family members, partners and friends</li> <li>Effective and caring parenting</li> </ul>
To facilitate the development of recovery capital among service users by improving pathways into ETE, work opportunities and housing.	<ul style="list-style-type: none"> <li>Community substance misuse service to develop links with local ETE providers.</li> <li>Community substance misuse service to develop links with housing providers.</li> <li>Community substance misuse team to have a named housing champion among workforce.</li> </ul>	ATP	06/2018	
To develop a visible recovery community in Merton.	<ul style="list-style-type: none"> <li>Identify named Recovery Champions within the recovery community.</li> <li>Ensure mutual aid representation within the SMPB.</li> <li>To develop a register/directory of Mutual Aid opportunities within Merton.</li> <li>Support Mutual aid organisations access to Council events.</li> </ul>	ATP PH PH Community Engagement t (CE) To be Confirmed	06/2018 06/2017 12/2017 Ongoing	<ul style="list-style-type: none"> <li>Sustained recovery among those exiting services</li> </ul>
To strengthen pathways between substance misuse services and key clinical services such as Drug	<ul style="list-style-type: none"> <li>To formalise pathways between clinical services and the community substance misuse team.</li> </ul>	ATP	06/2018	<ul style="list-style-type: none"> <li>Improved outcomes for those with comorbidity</li> <li>Improved outcomes for children</li> </ul>

<p>and Alcohol Liaison, Maternity, IAPT and Psychiatry liaison.</p>	<ul style="list-style-type: none"> <li>• Ensure clinical services representation on the SMODG</li> <li>• Community substance misuse team to adopt an assertive outreach approach for service users who access alcohol liaison services</li> <li>• Develop, alongside secondary services a frequent attender strategy for A&amp;E.</li> <li>• Review the model for joint working (between mental health/IAPT and SM services) on dual diagnosis</li> </ul>	<p>PH  ATP</p>	<p>07/2017  06/2018</p>	<p>impacted on by parental substance misuse</p> <ul style="list-style-type: none"> <li>• Reduce the impact of substance misuse on A&amp;E and hospital beds.</li> </ul>
<p>To ensure effective links are in place between the substance misuse services and other specialist mental health services to improve outcomes for clients with comorbid mental health and drug and alcohol problems</p>		<p>CCG To be Confirmed</p>	<p>06/2018</p>	<ul style="list-style-type: none"> <li>• Improved outcomes for those with severe and enduring mental ill health</li> </ul>
<p>Develop the role of Primary care to support the delivery of drug and alcohol/drugs prevention &amp; treatment, including the effectiveness of the pathway between Primary care and the Adult Treatment Service</p>	<ul style="list-style-type: none"> <li>• Raise profile of substance misuse services among primary care practitioners by development of a communication plan</li> <li>• Carry out a training needs assessment among primary care practitioners (GPs and Pharmacists) to establish training needs around substance misuse</li> <li>• Support General Practice role through appropriate training</li> <li>• Improve pathway between primary care and the community substance misuse team by ensuring LPC and LMC engagement with the SMPB/SMODG.</li> </ul>	<p>PH  CCG To be Confirmed  CCG To be Confirmed</p>	<p>06/2018  03/2018  Ongoing</p>	<ul style="list-style-type: none"> <li>• Increased competence of primary care in alcohol and drugs</li> <li>• Improved physical health outcomes for those with substance misuse</li> </ul>

	<ul style="list-style-type: none"> <li>• Improve communication between primary care and specialist SM treatment service regarding referrals, case management &amp; recovery</li> <li>• Develop a liaison function between General practice &amp; Adult Treatment Service for effective case management &amp; recovery</li> </ul>	PH/ATP/PC	07/2017	
Understand local trends in alcohol/ drug consumption to inform targeted work.	<ul style="list-style-type: none"> <li>• Analyse NDTMS data on a quarterly basis and report to SMPB.</li> <li>• Review the use of New Psychoactive Substances (NPS) and Image and Performance Enhancing Drugs (IPED) among the Merton population</li> <li>• Consider problems relating over the counter and prescription medication</li> <li>• Develop strategies to respond to emerging threats</li> <li>• Carry out survey of current service users.</li> </ul>	PH PH PH ATP	Ongoing 03/2018 Ongoing 06/2018	<ul style="list-style-type: none"> <li>• More targeted approach to commissioning of drug and alcohol services.</li> <li>• Reduction in health and Crime/ASB harms</li> </ul>
Improved pathways between treatment and internal statutory services such as Adult social Care and CSF.	<ul style="list-style-type: none"> <li>• Ensure that Adult social Care (ASC) and Children, Schools and Families (CSF) have representation on the SMPB and SMODG.</li> <li>• Ensure the provider develops robust working relationship with statutory services.</li> </ul>	PH ATP	06/2017 06/2018	<ul style="list-style-type: none"> <li>• Maximising impact and use of resources</li> <li>• Improve children's and adult safeguarding.</li> <li>• Improve outcomes for Children and families.</li> </ul>

### Theme 4: Families, children and young people

Objectives	Tasks	Who/lead	When completed	Expected outcomes/benefits
<p>Embed 'Think Family' across all aspects of substance misuse strategy and delivery.</p>	<ul style="list-style-type: none"> <li>• Provider to fully engage with the Family Drug and Alcohol Court (FDAC)</li> <li>• Review the alignment of substance misuse delivery against CSF and Teenage pregnancy Board (or future equivalent) activity</li> </ul>	<p>CSF/PH/ATP</p>	<p>06/2018</p>	<ul style="list-style-type: none"> <li>• Improvement in children's and adult safeguarding.</li> <li>• Improve outcomes for Children and families.</li> <li>• Earlier identification of children at risk</li> </ul>
<p>Work with whole families and other agencies to assess and regularly review the family's interrelated strengths, resources, needs and risks using a 'whole family' or holistic approach.</p>	<ul style="list-style-type: none"> <li>• Ensure that family work is integrated into current provision and is specified within future service provision.</li> <li>• Signs of Safety training and/or brief intervention training for providers</li> <li>• Access to MSCB training for providers</li> </ul>	<p>PH/ATP</p>	<p>06/2018</p>	
<p>Increased identification of parental substance misuse and early referrals of children and young people to appropriate support services (Hidden harm).</p>	<ul style="list-style-type: none"> <li>• Increased use of CAF by treatment services</li> <li>• Increased referrals between social services and treatment services</li> <li>• Develop reciprocal in reach between CSF and substance misuses services</li> </ul>	<p>ATP/children, Family Services (CSF) <b>To be Confirmed</b> ATP/CSF</p>	<p>09/2018  09/2018</p>	

	PR/CSF	12/2018		
Identify drug and alcohol misuse among Looked after Children (LAC) and those young people leaving care	CSF	03/2018	<ul style="list-style-type: none"> <li>Ensure that substance misuse during assessment and review of LAC and those leaving Care</li> </ul>	<ul style="list-style-type: none"> <li>Improved outcomes for LAC and those Leaving care.</li> </ul>
To improve pathways between adults and young people services for those in transition (18 – 24).	ATP/RR	06/2018	<ul style="list-style-type: none"> <li>Strengthen the transition between young people and adults services.</li> </ul>	
To improve communication and pathways between Substance misuse, domestic violence and VAWG.	VAWG Coordinator(VC)  ATP/RR/VC	06/2018 07/2017  09/2018	<ul style="list-style-type: none"> <li>Establish pathways between substance misuse, domestic violence and VAWG</li> <li>Ensure domestic violence and VAWG representation on the SMODG</li> <li>Arrange reciprocal training between agencies to ensure shared understanding of the cohort.</li> </ul>	<ul style="list-style-type: none"> <li>Reduction in violent crime among those using drugs and/or alcohol</li> <li>Improved relationships</li> <li>Effective and caring parenting</li> </ul>

### Theme 5: Tackling crime and anti-social behaviour relating to substance misuse

Objectives	Tasks	Who/lead	When completed	Expected outcomes/benefits
To utilise and develop existing CSP and police interventions and resources to reduce alcohol related violence against the person offences.	<ul style="list-style-type: none"> <li>• Police to utilise:               <ul style="list-style-type: none"> <li>○ Closure powers</li> <li>○ Criminal Behaviour orders</li> </ul> </li> <li>• Local authority to utilise:               <ul style="list-style-type: none"> <li>○ Community protection orders (CPO)</li> <li>○ Closure powers</li> <li>○ Injunctions</li> </ul> </li> </ul>	CS/Police (MPS) CS	03/2020  03/2020	<ul style="list-style-type: none"> <li>• Supports the discharge of the Council's statutory functions in relation to Public Safety, Protection and Wellbeing.</li> </ul>
To utilise and develop existing CSP and police interventions and resources to reduce alcohol related Anti Social Behaviour (ASB).	<ul style="list-style-type: none"> <li>• Develop a legal framework to be in a position to implement Public Spaces Protection Orders (PSPO) where necessary</li> </ul>	CS	03/2018	<ul style="list-style-type: none"> <li>• Reduction of Alcohol related violent crime.</li> <li>• Reducing the risk to children and families.</li> </ul>
To continue to make effective use of existing and new licensing and policing powers.	<ul style="list-style-type: none"> <li>• To carry out regular licence reviews</li> <li>• To keep abreast of changing /developing legislation and guidance.</li> </ul>	LI	Ongoing	<ul style="list-style-type: none"> <li>• Reduction in Accident and Emergency presentations</li> </ul>
Continue a rigorous approach to enforcement of licensing legislation.	<ul style="list-style-type: none"> <li>• Strengthen licensing, representations, awareness and partnerships. consider link of business crime radio scheme as a condition of license</li> </ul>	CS/LI CS/LI	Ongoing  03/2018	<ul style="list-style-type: none"> <li>• Reduction in alcohol related hospital admissions</li> </ul>
Improve intelligence by information sharing to manage risk.	<ul style="list-style-type: none"> <li>• Improve intelligence sharing, linked to engagement of substance misuse partnership.</li> </ul>	PH/CS	12/2018	

	<ul style="list-style-type: none"> <li>• Import good practice from the MOPAC Business Crime reduction Partnership (BCRP) such as use of Radio Scheme.</li> </ul>	CS	06/2018		
Improve outcomes for those Merton residents with substance misuse problems released from prison.	<ul style="list-style-type: none"> <li>• Community substance misuse team to attend the Continuity of Care meeting in both the male and female prison establishments.</li> <li>• The community team to adopt the use of peer/volunteer escorts from prison to the community team</li> <li>• The community team to develop pathways with the Community rehabilitation Company (CRC) 'through the gate' service</li> <li>• CRC to attend the SMODG</li> </ul>	PH/ATP	06/2017		<ul style="list-style-type: none"> <li>• Reducing reoffending among Merton residents released from prison.</li> <li>• Reduction in drug related death among this high risk cohort</li> </ul>
		ATP	09/2018		
		ATP	09/2018		
		PH	07/2018		
		IOM	06/2018		<ul style="list-style-type: none"> <li>• Reduction of reoffending</li> </ul>
Improve engagement and outcomes for those subject to Offender management	<ul style="list-style-type: none"> <li>• Community provider, CRC and IOM coordinator to develop pathways for Merton residents subject to Offender management.</li> </ul>	Coordinator (IOM)	06/2018		
	<ul style="list-style-type: none"> <li>• CRC and community provider to consider co-location opportunities or the establishment of a virtual offender management team.</li> </ul>	IOM	06/2018		