

Substance Misuse Delivery Plan 2019-2022



Llywodraeth Cymru
Welsh Government



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Substance Misuse Delivery Plan 2019-2022

“Improving Lives for People and Communities Affected By Substance Misuse”

Ministerial Foreword

Following an extensive engagement and consultation process, I am pleased to launch the new Substance Misuse Delivery Plan 2019-22 which outlines our priorities for the next 3 years. Tackling substance misuse continues to be a priority for the Welsh Government and a significant area to focus upon if we are to meet our ambitions in *“A Healthier Wales: our Plan for Health and Social Care”*. Substance misuse is a major health issue which affects individuals, families and communities. This plan sets out the priority areas we will focus on with our partners to achieve our ambition of reducing the harms associated with substance misuse.

This plan builds on the good progress made in the lifetime of the previous 2008-18 strategy, *‘Working Together to Reduce Harm’*. The evaluation of our previous strategy, together with an independent Health Inspectorate Review (HIW) of services, both recognised that whilst progress has been made, particularly in the improvements in waiting times for treatment, more needs to be done if we are to reach those that are most vulnerable and often furthest away from services. It’s clear from the evaluation, however, that by working with our partners in the third sector, local government and the NHS we have achieved a lot against a challenging backdrop of tight resources and the ever changing nature of substance misuse. I am fully committed to continuing to support this agenda.

Our overall aim in this delivery plan continues to be to ensure that people in Wales are aware of the dangers and the impact of substance misuse and to know where they can seek information, help and support if they need it. I provided extra funding to support substance misuse when I announced an extra £2.4m funding in 2019/20 for the 7 Area Planning Boards who are responsible for commissioning local, front line services. This is an increase in funding of over 10%. This additional funding has been provided at a time of unprecedented budgetary constraints and means we are now able to support our partners with extra money to meet future challenges. This increased investment takes our annual funding for substance misuse to almost £53m which demonstrates this government’s commitment to supporting some of the most vulnerable people in our society. The plan contains a number of actions to ensure we reach those people most in need of support, including people with co-occurring conditions, homeless and older people. As we support more people to access our substance misuse treatment services we will need to ensure that we maintain the good performance we have seen on waiting times.

Tackling substance misuse needs commitment from across government and our partners delivering frontline services to ensure we reach and support everyone who is in need so that they get the right level of support, at the right time and in the right place. Our harm reduction approach has been widely applauded but we know more needs to be done supporting people and helping them to access the services they need. Tackling the causes and effects of substance misuse is challenging and complex. This plan demonstrates that

we will continue to work closely with partners at a national and local level to ensure we are taking a preventative, integrated and long term approach to improve outcomes for this group.

Vaughan Gething AC/AM

Minister for Health and Social Services

1. Strategic Context

Our Programme for Government, *'Taking Wales Forward'*, outlines the commitments to drive improvement and make the biggest difference to the lives of everyone in Wales. *'Prosperity for All: the national strategy'* takes those commitments, places them in a long-term context, and sets out how they will be delivered by bringing together the efforts of the whole Welsh public sector.

By taking significant steps to shift our approach from treatment to prevention and focusing on improving the health and well-being of individuals and families, we are supporting the delivery of the Government's well-being objectives in *'Prosperity for All: the national strategy'*. Our cross Government approach will also see a contribution to the Government's priority areas, such as Early Years, Housing and Better Mental Health helping us to achieve our ambition of prosperity for all.

In June 2018, the Welsh Government published "*A Healthier Wales: our Plan for Health and Social Care*"¹. The plan sets out the vision for health and social care services and ten national design principles. The vision and principles apply to the substance misuse sector as much as any other area. Our substance misuse agenda requires the Health and Social Care sector to work together, alongside other partners, to give the most appropriate help to an individual, based on their needs and circumstances. This plan covers services for both drug and alcohol misuse. Our substance misuse services in Wales are citizen centred, adopting a strengths based public health approach with an emphasis on harm reduction, prevention and treatment, ensuring that an individual stays well, reduces the harms associated with substance misuse and sustains recovery.

'A Healthier Wales' sets out a whole system approach to health and social care, outlining a 'wellness' system, which aims to support and anticipate health needs, to prevent illness, and reduce the impact of poor health and inequality. There is a recognition that primary care, as the first point of contact for the majority of citizens accessing health services, has a key role in maximising the opportunities for prevention and self-management, including around substance misuse and medicines management.

To achieve this ambitious aim it is important that we continue to adopt an approach to services and support that recognises the need to meet the needs of the whole person. We will work to ensure services continue to improve and are more integrated to meet individual needs seamlessly. Our Vision, which is aligned to "*A Healthier Wales*" is set out below:

¹ <https://gweddiill.gov.wales/topics/health/publications/healthier-wales/?lang=en>

“Our vision is that everyone in Wales should have longer healthier lives, free from the potential harms of substance misuse, building personal resilience so they can be active and contribute positively to their communities”.

People have a healthy life free from harms

People are treated with respect, regardless of circumstances and background

People have choices in their recovery

preventing harm

support for individuals – to improve their health and aid and maintain recovery

supporting and protecting families

tackling availability and protecting individuals and communities

stronger partnerships, workforce development and Service User Involvement

People are able to make informed choices in order to prevent and reduce the harm associated with substance misuse

Substance Misuse issues are identified and tackled early

The physical and mental health and well-being of people with substance misuse issues are improved and related health inequalities are minimised

Individuals and communities are effectively engaged in the planning and delivery of their local substance misuse services..

People with substance misuse issues have the skills, resilience and opportunities to gain and maintain economic independence and the negative impact of substance misuse on the Welsh economy is minimised

People with substance misuse issues participate in culturally and socially diverse activities including the arts, sport and recreation.

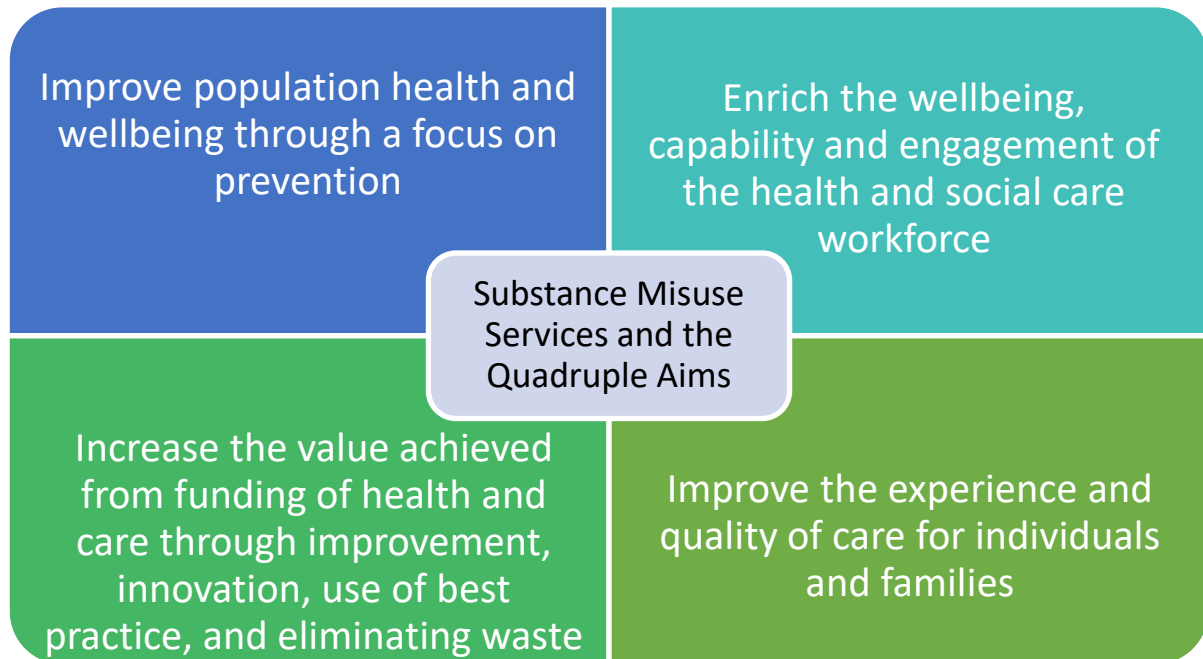
Everyone affected by substance misuse issues are treated with dignity, fairness and respect

Social Exclusion and isolation as a result of substance misuse is minimised
The Harms of substance misuse are reduced for children and families
Outcomes for Children on the edge or in care are improved

People are/feel safer in relation to crime
Welsh speakers and their families are able to receive support for substance misuse issues through their own language

Area Planning Boards are fit for the future
The substance misuse workforce is skilled and informed
Service User involvement is embedded into delivery and planning of services

Our work on substance misuse will be undertaken under the themes and outcomes set out above. This Delivery Plan also explains how reducing substance misuse aligns to the Quadruple Aims contained in “*A Healthier Wales*”. The Quadruple Aims are set out below:



2. Reducing the harms associated with Substance Misuse

The Welsh Government’s overarching aim is to reduce the harms caused by substance misuse to the individual and wider society. Prevention and early intervention is key and we will therefore ensure that people are aware of the dangers and the impact of substance misuse, to enable them to make informed choices and to know where they can get help and support if they need it.

Harm Reduction

A harm reduction approach is to reduce the relative risks associated with drug and alcohol use/misuse. This is carried out by a range of measures such as reducing the sharing of injecting equipment, providing support for stopping injecting, interventions to reduce drug related death and providing a range of both pharmacological and psychosocial treatments for both drugs and alcohol. Recovery and abstinence also form part of the harm reduction journey, they are not mutually exclusive.

To create a successful treatment system, it is essential that those who deliver and manage services recognise and fully embrace being part of a ‘bigger picture’. It is the treatment system as a whole that can best meet the needs of a diverse group of people at different stages of their journey. It is likely that no single service will be able to

provide all the support needed by an individual. Specialist services and specific philosophical approaches can maintain their individuality while still embedding the principles of both harm reduction and recovery focused practices into the ways in which they deliver their services.

Wellbeing of Future Generation Act 2015

The substance misuse delivery plan aligns to five ways of working in the Well-being of Future Generations Act 2015 and we have ensured that the substance misuse outcomes that we are seeking to achieve during the lifetime of this plan are clear in the contribution they make to the Wellbeing of Future Generation Act goals. Throughout the priorities and commitments set out in this plan there is a focus on having a **long-term** impact on individuals and families and the **prevention** of substance misuse is a focus in much of the work to be undertaken. Key aim 1 in the table of actions specifically focuses on prevention, but many of the actions contained in the other aims through the document also have a preventative element. In order to ensure the work is undertaken in the most effective way, **collaboration, involvement, and integration** will be vital. Service user involvement has been instrumental in the development of this plan and we are clear that continued involvement will be key to successful delivery of actions within this plan.

The Welsh Government has defined prevention as working in partnership to co-produce the best outcomes possible, utilising the strengths and assets people and places have to contribute. Breaking down into the four levels (below), each level can reduce demand for the next and the actions in this Plan cover all levels of prevention:

- **Primary prevention (PP)** Building resilience creating the conditions in which problems do not arise in the future. A universal approach.
- **Secondary prevention (SP)** Targeting action towards areas where there is a high risk of a problem occurring. A targeted approach, which cements the principles of progressive universalism.
- **Tertiary prevention (TP)** Intervening once there is a problem, to stop it getting worse and prevent it reoccurring in the future. An intervention approach.
- **Acute spending (AS)** Spending, which acts to manage the impact of a strongly negative situation but does little or nothing to prevent problems occurring in the future. A remedial approach.

Adverse Childhood Experiences

The Welsh Government is committed to ensuring that our services provide early intervention and prevention so that longer-term harms are prevented, before they occur. This includes preventing exposure to Adverse Childhood Experiences² (ACEs). There is an increasing body of international evidence about the negative long-term impact on health and well-being outcomes which can result from exposure to childhood trauma before the age of 18. The evidence also links exposure to ACEs to an increased risk of adopting health harming behaviours in adolescence, including substance misuse. So substance misuse is both an issue and risk factor. Children of those affected by ACEs are at increased risk of exposing their own children to ACEs, creating a cycle of harm, which early intervention needs to focus on breaking.

Our underpinning principle is that substance misuse is a health and social care issue that affects the whole population of Wales, be it directly or indirectly. Substance misuse impacts on the economy and on services, health, social and justice for both individuals and communities. Whilst being able to prevent substance misuse in the first place is a top priority, the Welsh Government recognises the importance of also taking action to reduce the negative impact of substance misuse and improve the positive outcomes for all those affected. This can only be achieved by tackling the underlying causes of substance misuse and by providing the knowledge, skills and opportunities necessary for people to make informed choices. The aim is to ensure that resources are directed to equitable, effective and cost-effective services and through integration of wider economic and social policies by working across government and the wider public sector. Services should be designed to meet the needs of individuals and the communities they serve and ensure they are accessible to all regardless of background or circumstances.

Substance misuse can cause a multitude of harms, both to the individual and to those who have direct or indirect contact with the person who is using substances, such as family members or society as a whole. These harms may consist of the deterioration of physical and mental health and consequent premature death, lack of employment, excessive gambling, loss of housing, the breakdown of family relationships, and adverse consequences on the wider community concerning criminal activity and anti-social behaviour. We know that the effect of people supplying drugs has a significant impact on those who they supply and the wider community, not least given the violence so often associated with gangs.

The Welsh Government is clear that we must continue to place harm reduction at the centre of our approach. A harm reduction approach aims to reduce the relative risks associated with substance misuse. Over the lifetime of the 2008-18 strategy we worked

² ACEs include child maltreatment (such as physical, sexual and verbal abuse) and wider experiences of household dysfunction (such as growing up in a household affected by domestic violence, parental separation, substance misuse, mental illness or criminal behaviour).

closely with stakeholders to initiate and deliver a range of harm reduction initiatives. Harm reduction programmes provide a range of services for those who use, or are affected by, the misuse of substances and can be viewed as a point of engagement to encourage and enable individuals to access treatment where necessary.

3. Recent Developments

A contribution analysis (evaluation) of the 2008-18 Strategy³, undertaken by Figure 8 Consultants, was published in April 2018. Following extensive fieldwork and consultation with a range of stakeholders, the evaluation stated that whichever direction new policies took in the future they should be focused on continued support for harm reduction and useful accountability of activity. The report also highlighted that it is important that any future approaches to dealing with the harms associated with the misuse of substances, continue to develop the significant improvements that were seen during the 2008-18 strategy in partnership working.

The report stressed the importance of building on the platform of an increasing role for service users across all aspects of policy and practice implementation. The evaluation confirmed that the Key Aims of preventing harm; support for individuals – to improve their health and aid and maintain recovery; supporting and protecting families; and tackling availability and protecting individuals and communities via enforcement activity that underpinned the previous strategy remain relevant. Therefore, whilst this delivery plan sets out new priorities and actions for the 2019-22 period designed to combat today's challenges it does so with the context and a continuation of the key themes of the previous 10 year strategy.

Another influence on future priorities and actions in this delivery plan has been the Health Inspectorate Wales (HIW) review of Substance Misuse Services in Wales (published in July 2018). This highlighted that people received good quality and effective care, but made recommendations for further improvements. Our key priorities highlighted in this plan are a response to many of the issues raised in that report, as well as input from service users and stakeholders.

4. The Scale of the Problem and Trends in Treatment Data and Statistics

We know that more needs to be done to support people and help them to access the services they need in order to improve outcomes for those whose lives are affected by substance misuse in Wales. For example, in relation to drug related deaths there was an increase in deaths from 2017 to 2018 (185 to 208), 208 is too many people dying needlessly in our communities. There is a particular concern about the regional

³ <https://gov.wales/evaluation-implementation-substance-misuse-strategy-wales-0>

variances that exist in relation to drug related mortality and we are clear that we must, working with our partners, focus significant effort on this in future.

Alcohol consumption, above guidelines, in Wales has dropped slightly, but 18% of adults still drink above weekly guidelines, with those between 35-74 most likely to be drinking over the guidelines. The most recent data in relation to alcohol specific deaths shows an increase from 388 in 2016 to 419 in 2017. In addition, the number of individuals admitted to hospital for alcohol-specific conditions are 2.4 times higher than admissions for illicit drug use. In relation to deprivation, whilst levels of drinking are higher in the least deprived areas, the proportion of all patients admitted for alcohol-specific conditions living in the most deprived areas was 3.3 times higher than those from the least deprived areas.

Hospital admissions for alcohol-specific conditions and illicit drugs places significant pressure on the NHS with statistics showing there were over 20,000 hospital admissions related to drugs and alcohol in 2017-18.

We are, however, seeing continuing positive improvements in waiting times to treatment. For example, in 2018/19 91.5% of people starting treatment were seen within 20 working days, compared to 73% in 2009/10. Outcomes of those in treatment have improved with 86.5% of people reporting a reduction in their substance misuse following treatment in 2017-18, compared to 85.9% in 2013-14. While these improvements are welcome, this is an area we want to be more ambitious in by looking at driving out any variations in access times through improving access to services and by actions such as increasing outreach services or extending service opening times thereby seeing an increase in the numbers of people accessing services, particularly given recent statistics on drug related deaths and alcohol specific deaths.

The actions in this delivery plan therefore respond to what we have been told through the evaluation of the previous strategy and the HIW Review. It also takes into consideration the feedback received from the extensive engagement process, with both providers and service users, including young people, we have undertaken on the key priorities for substance misuse.

5. Delivery & Funding for Substance Misuse Services

Across Wales the seven Area Planning Boards (APBs) are responsible, within their regions, for the assessment of need, commissioning and monitoring of delivery of substance misuse services, using the funding allocated by the Welsh Government. To ensure the actions set out in the delivery plan are achievable, we will continue our work in supporting substance misuse services through our APBs and Local Health Boards (LHBs). APBs have been the key vehicle for supporting the delivery of substance misuse services and this will continue to be the case. We have increased our funding to

support Area Planning Boards by over 10% in 2019/20 to help them undertake this work. In 2019/20, we are investing almost £53 million annually to deliver our commitments on this agenda. We therefore expect that all APBs review their services to ensure they are appropriately resourced, meet current population needs and recommission where necessary.

Our work with APBs will ensure they continue to provide services that meet the needs of the population and that the key performance indicators continue to be met and improved upon. To achieve this we will continue to ensure our interventions are 'joined up' across government, recognising the needs of individuals go beyond their substance use, by developing a whole person approach to support them.

6. A Cross Government Approach

Over its duration, this delivery plan will provide a focus for ensuring that substance misuse is embedded across other policy areas in the Welsh Government, particularly as we focus more on prevention. For example, close joint work will continue with Education, Children and Families, Employability, Housing, Social Services, Tackling Poverty and Crime and Justice to strengthen links with these areas so that fewer people are drawn into substance misuse in the first place and for those that are we provide integrated and easily accessible treatment leading to recovery. Specific actions are set out in this plan, which highlight the important contribution other government departments, including non-devolved areas, can make to improve substance misuse outcomes for individuals through their policies and programmes. Whilst health services are designed to respond to the needs of individuals who suffer from substance misuse, there are other levers outside of health, which are critical in improving an individual's health and well-being.

There are many initiatives in place - or planned - across Welsh Government that will support the substance misuse agenda with significant investment being made in terms of resources. One of the areas where this is demonstrated, particularly on the preventative side, is through the investment being made to take forward a new **whole school approach** to mental health and wellbeing for children and young people in Wales. As part of the '*whole school approach*', all schools will support the broader mental health and wellbeing of learners, which in turn will help to prevent other issues from developing or escalating, including substance misuse issues.

7. Partnership Working

Good partnership working is critical if the best possible support is to be provided to individuals and communities. Given recent developments in the local and regional partnership landscape, such as the establishment of Regional Partnership Boards, we

will review the partnership relationships and consider how we can support APBs to operate well within this. We recognise that a key element of delivering substance misuse services is that APBs work closely with other partnerships and structures, such as Regional Partnership Boards, Public Service Boards and other structures, in order to provide the best support possible to the individual and wider community.

At a national level, we will ensure that targeted campaigns are undertaken on key issues in response to intelligence on both Drug Related and Alcohol Related Death data that we receive from Public Health Wales, the Office for National Statistics and other sources. As part of our harm reduction focus, we will also continue the roll out of Naloxone (a drug which temporarily reverses the effects of opiate overdose) and work with a range of partners to ensure that it is available in as many appropriate locations as possible.

8. The Delivery Plan 2019-22

The detailed commitments that make up the new delivery plan are set out below. The plan is structured under the four key aims of the previous strategy given the confirmation from the evaluation that these remain relevant as we aim to prevent, and tackle harms associated with, substance misuse use. This was tested at engagement events before the plan was issued for formal consultation and then through the formal consultation. Throughout these processes, the general feedback was that the four main key aims where the Welsh Government and its partners have undertaken work to tackle and reduce the harms associated with substance misuse in Wales, were still very appropriate in terms of the future. These were:

- preventing harm;
- support for individuals – to improve their health and aid and maintain recovery;
- supporting and protecting families; and
- tackling availability and protecting individuals and communities via enforcement activity.

Also, the fifth key aim around partnership working was also seen as being crucial and a success of the previous strategy. This is something which will underpin the future work set out in this plan. We will also look at options for further supporting the development of our substance misuse workforce and service user engagement and this has been reflected in this key aim.

As highlighted earlier in this document, “*A Healthier Wales*” sets out the vision for health and social care services going forward and has ten national design principles, the vision and principles apply to the substance misuse sector as much as any other area.

The actions in this delivery plan are set out under the key outcomes the Welsh Government wants to achieve in tackling substance misuse. The table below shows how each substance misuse outcome aligns with the Quadruple aims in “*A Healthier Wales*”. These are:

- QUADRUPLE AIM 1: Improve population health and wellbeing through a focus on prevention
- QUADRUPLE AIM 2: Increase the value achieved from funding of health and care through improvement, innovation, use of best practice, and eliminating waste
- QUADRUPLE AIM 3: Enrich the wellbeing, capability and engagement of the health and social care workforce
- QUADRUPLE AIM 4: Improve the experience and quality of care for individuals and families.

9. Key Priorities for Substance Misuse Services 2019-22

The actions we and our partners will undertake in this delivery plan are a response to what we have been told through the engagement and consultation process, along with the findings from the evaluation of the 2008-18 strategy and the findings of the HIW Review. There are a few priority actions where we consider further work needs to be done to make continued progress for those affected by substance misuse. This will include working across Government and with our partners, particularly APBs and our third sector providers who are key in delivering the front-line support to individuals.

A strong theme in both the HIW Review and contribution analysis, as well as our own engagement process, was the issue of “stigma” faced by individuals affected by drug and alcohol use. The Welsh Government is committed to the rights and dignity of individuals accessing **all** services whatever their circumstances, and we will work to ensure this is maintained at all times. Discrimination and lack of respect, both for individuals and their families is likely to reduce people accessing and engaging with services and prove a barrier to improving outcomes.

The proposed priority areas for action include:

- Responding to **co-occurring mental health problems** which are common in substance misuse. Guidelines exist, through the Mental Health & Substance Misuse Co-occurring Substance Misuse Treatment Framework, for the treatment of these problems and, in general, the coexistence of a substance misuse problem should not be a reason for denying a service user access to the recommended treatment usually provided by mental health services. Improvement needs to be made on this so that individuals with co-occurring mental and substance misuse

issues, as well as other addictions such as gambling and smoking, receive appropriate and timely support. We will ensure that the Treatment Framework is delivered, with the aim of improving joint working with mental health services and to better support those with co-occurring problems. We will also undertake a detailed piece of work to better understand the barriers to, and opportunities for, progress in this area.

- **Ensuring strong partnership working with housing and homelessness services** to further develop the multi- disciplinary approach needed to support those who are homeless or at risk of homelessness. The aim of the Welsh Government is to work across all sectors in order to prevent homelessness and where it cannot be prevented ensure it is rare, brief and non-recurrent. This requires health services, social services, housing, the third sector and, where appropriate, justice agencies to work with service users and their families and carers to improve the outcomes achieved through service interventions. A key intervention in supporting those at the most acute end of the homelessness spectrum, and with the most complex needs, is Housing First. It has an established evidence base internationally and will provide an opportunity to test ways in which services can be delivered alongside the provision of accommodation in order to support someone's journey to sobriety. In addition many rough sleepers will use substances to help them cope with life on the streets. Services that provide emergency support must also be able to swiftly help before a temporary use of substances turns into a downward spiral with people's lives becoming a chaotic cycle that can take much longer to break. Housing, Substance Misuse and Mental Health are areas that intrinsically interact and are dependant in terms of improving outcomes for individuals affected by these issues. Co-occurring issues / dual diagnosis is frequently identified as an issue and can also be a significant factor in serious and untoward incidents (SUI). For dual diagnosis to be managed effectively key actions have been included within both the Together for Mental Health and Substance Misuse Delivery Plans for 2019-22.
- Ensuring that all prisons in Wales (and HMP Eastwood Park, women's prison) have a coordinated, transparent and consistent service for those with **substance misuse problems in prison**, based on best practice. We will work closely with the prison service, local health boards and other stakeholders to achieve this. Our overall objective is to produce a standardised clinical pathway for the management of substance misuse in prisons in Wales, as well as discharge plans to ensure continuity of care. This has been identified as a key priority in the Partnership Agreement for Prison Health in Wales which aims to drive improvements in the health and wellbeing of those in Welsh prisons. The Health, Social Care and

Sport Committee is currently undertaking an inquiry into the provision of health and social care in the prison estate – and full consideration will be given to its findings and associated recommendations.

- Providing further **support for families and carers of people who misuse substances**. Where family support is available, carers reported the benefits of sharing experiences in peer support groups, gaining a greater understanding of addiction and how to support their loved one. People also said this had helped improve relationships with family members as they better understood their problems. However, it was felt there were not enough family support services and people may not be aware of those that exist. In particular we know through the work on ACEs, as indicated above, that children who are raised in homes where substance misuse is an issue are, potentially, more likely to have adverse outcomes in later life. We will also focus efforts on ensuring services are joined up and effective for families who are “on the edge of care”.
- **Ensuring that appropriate and responsive alcohol misuse services are in place** before the Public Health (Minimum Price for Alcohol) (Wales) Act 2018 is implemented. Concerns have been raised about the potential impact of minimum unit pricing on dependent drinkers and there is a need to ensure that services are in place for those who may seek support. Some stakeholders also highlighted the risk that some could potentially switch to illegal drugs or psychoactive substances, following an increase in the minimum price of alcohol. While this risk is considered low, this is something we intend to monitor closely – and have commissioned specific research to look at the issue, which will report ahead of implementation.
- **Improving access to services and ensuring people get the support and treatment when they need it**, is critical to ensuring we reach as many people as possible. Waiting times for treatment have consistently reduced, with over 90% in 2017-18 starting treatment within 20 days, an improvement on the previous year of over 4 percentage points. We will work with APBs to ensure access to substance misuse services is increased, with particular attention to providing outreach to vulnerable groups and improving links with primary care services, in particular GPs. We know that access for those who live in our rural communities can be a challenge and will work with relevant APBs to focus efforts in rural areas to improve this, in particular through outreach, integration with primary care and the use of digital technologies. We will therefore expect to see the numbers of people accessing services increase year on year.
- As people are presenting with more complex issues, many affecting their ability to maintain treatment and recover, we will work to ensure we adopt

a whole person approach, based on strengths and trauma informed practice. **We will strengthen our multiagency working and care planning to ensure peoples' needs are met.** Once people are in treatment it is important that they get the right treatment, at the right time and have choices. They should also be able to access treatment services for any other co-existing harms. We will continue to focus on our harm reduction approach but it is also important to note that for some people their choice may be abstinence and we will ensure this is available. For most people treatment in their community is the choice they prefer to make but we also recognise that for some residential treatment is required particularly for those with more complex problems, we will continue to ensure that for those who require this, it is available, with minimal waiting and as far as possible where they want it.

- **Tackling dependence on prescription only medicines (POM) and over the counter medicines (OTC).** The potential for dependency and withdrawal issues in relation to these medicines- which can be exacerbated by poor prescribing practices - is acknowledged. Our policy in Wales is to take an evidence based approach to the prescribing and administration of all medicines. To provide assurance that organisations adhere to this evidence based approach we routinely measure performance in key areas through national prescribing indicators, including a number relating to opioids use. In March 2019 the National Assembly for Wales' Petitions Committee report "*Prescription drug dependence and withdrawal – recognition and support*" was published, summarising the evidence considered in relation to a petition concerning dependence upon prescription medication. Full consideration will be given to the report from the Petitions Committee as our priorities for Substance Misuse are taken forward. The Welsh Government recognises it is important we distinguish between substance misuse, as the harmful use of substances such as drugs and alcohol; and dependence arising from the therapeutic use of medicines whether they are prescribed or purchased. In responding to the Petitions Committee report the Minister for Health and Social Services has given his commitment to this distinction.

Key Aim 1 – Preventing Harm

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>Outcome 1. People are able to make informed choices in order to prevent and reduce the harm associated with substance misuse</p> <p><i>Contributes to:</i></p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 1: Improve population health and wellbeing through a focus on prevention</i> ➤ <i>Quadruple Aim 4: Improve the experience and quality of care for individuals and families</i> 		
<p>i) WG to ensure that use of the DAN 24/7 site is maximised so that the needs of all individuals, families, carers and organisations are met through making the best use of technology in accessing services. The site will be revised to ensure that it is fully mobile optimised, the video content and search functions are improved and systems are put in place to help take pressure off call centre and reduce any possible dropped call numbers [April 2021]</p> <p>ii) In terms of awareness of substance misuse services, the WG will work with APBs and the DAN 24/7 service to ensure that services across Wales are mapped so individuals, families and carers are aware of where they can get up to date information on where to get help and support [April 2021]</p> <p>iii) Continue to raise awareness of various aspects of substance misuse across the population, particularly as specific issues arise. In particular, there will be continued focus on raising awareness of the public health aims and benefits of introducing Minimum Unit Pricing for Alcohol. [Ongoing]</p>	<p>Number of telephone calls to DAN 24/7 Number of Website hits to DAN 24/7.org SOURCE : Welsh Government</p> <p>Prevalence estimate of problem (EMCDDA definition) drug use SOURCE: Public Health Wales (PHW)</p> <p>% reported drinking above the UK Chief Medical Officers’ Low Risk Drinking Guidelines 2016 on a weekly basis. (moderate, hazardous and harmful drinkers).</p>	<p>WG, DAN 24/7, APBs</p> <p>WG, DAN 24/7, APBs</p> <p>WG</p>

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>iv) WG will continue to work with PHW to maintain the programme on Image and Performance Enhancing Drugs [IPEDs]. This includes harm reduction information, advice and training being provided to ensure individuals both using and at risk of using IPEDs are fully aware of the risks and harms. As part of the work, we will work closely with PHW to ensure that the community and elite sport sectors are fully aware of this information too. [Ongoing]</p> <p>v) WG to work with partners on considering the recommendations from the review of the All Wales Schools Liaison Core Programme (AWSLCP) and, in particular how the Programme will complement the work undertaken on curriculum reform [December 2019].</p> <p>vi) WG to work with partners on considering the recommendations from the review of the AWSLCP and how it can complement and add value to work underway, through the Joint Ministerial Task and Finish Group on a Whole School Approach, to improve emotional and mental wellbeing in learners [Ongoing]</p> <p>vii) Conduct an evidence review to establish the links between substance misuse, alcohol consumption and gambling. [December 2020]</p> <p>viii) WG, working with partners, to raise awareness, with health professionals and the public, of harms associated with risky levels of alcohol consumption as well as providing clear advice on managing alcohol intake [Ongoing]</p>	<p>% reported drinking at moderate, hazardous and harmful levels. % reported drinking above the UK Chief Medical Officers' Low Risk Drinking Guidelines 2016 which state, for both men and women, 'to keep health risks from alcohol to a low level it is safest not to drink more than 14 units a week on a regular basis.' % reported drinking at moderate, hazardous and harmful levels. SOURCE: National Survey for Wales, Welsh Government</p>	<p>WG, PHW</p> <p>WG, Police</p> <p>WG, Police</p> <p>WG</p> <p>WG, PHW & other partners</p>

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>Outcome 2. Substance misuse issues are identified and tackled early.</p> <p><i>Contributes to:</i></p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 1: Improve population health and wellbeing through a focus on prevention</i> ➤ <i>Quadruple Aim 2: Increase the value achieved from funding of health and care through improvement, innovation, use of best practice, and eliminating waste</i> ➤ <i>Quadruple Aim 4: Improve the experience and quality of care for individuals and families</i> 		
<p>i) WG will work with GPs and representative bodies to increase knowledge and understanding around substance misuse and substance misuse services. WG will continue to work with the Royal College General Practitioners (RCGP) to encourage GPs (and other primary care professionals) to undertake the RCGP substance misuse certificates Part 1 and 2 and to specialise in substance misuse [Ongoing]</p> <p>ii) WG will work to ensure all primary care settings have direct referral routes to substance misuse assessment services [March 2021]</p> <p>iii) APBs to work with Primary Care to develop care pathways with substance misuse providers to ensure GPs are aware of services available [Ongoing]</p> <p>iv) All APBS should consider how proactive outreach work is undertaken in their areas in order to target hard to reach</p>	<p>Number of new assessments to substance misuse services by the three most frequently reported substances. SOURCE : WNDSM</p> <p>Number of new individuals in contact with substance misuse services SOURCE : WNDSM</p> <p>Number of GPs with special interest in substance misuse registered and trained to RCGP level 2 SOURCE: RCGP Wales</p> <p>Number of professionals trained and using 'brief interventions' SOURCE: PHW</p>	<p>WG, RCGP</p> <p>WG</p> <p>APBs</p> <p>APBs</p>

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>groups who may not be accessing substance misuse services [March 2020]</p> <p>v) Work with PHW to publish the Alcohol Related Brain Damage SMTF and then implement the findings with the aim of ensuring timely diagnosis, referral, through clear care pathways, to specialist assessment, treatment and rehabilitation services with the support of an identified lead ARBD clinician within each LHB area in Wales. [March 2020]</p>		<p>WG, PHW</p>

Key Aim 2: Support for substance misusers to improve their health and aid and maintain recovery

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>Outcome 3. The physical and mental health and well-being of people with substance misuse issues are improved and related health inequalities are minimised.</p> <p><i>Contributes to:</i></p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 1: Improve population health and wellbeing through a focus on prevention</i> ➤ <i>Quadruple Aim 2: Increase the value achieved from funding of health and care through improvement, innovation, use of best practice, and eliminating waste</i> ➤ <i>Quadruple Aim 4: Improve the experience and quality of care for individuals and families</i> 		
<p>i) Ensure the Mental Health & Substance Misuse Co-occurring Substance Misuse Treatment Framework is delivered, with the aim of improving joint working with mental health services and to better support those with co-occurring problems. In addition to this WG will undertake a detailed analysis on the pathways for an individual with a co-occurring problem and this will involve looking at the barriers and good practice on work in this area. We will involve practitioners and clinicians to help drive this agenda forward [February 2020]</p>	<p>Number of deaths from drug misuse – involving only illegal drugs. SOURCE: Office for National Statistics (ONS)</p> <p>Number of deaths from drug related poisonings – involving both legal and illegal drugs SOURCE: ONS</p>	<p>WG, LHBs, APBs</p>
<p>ii) Ensure services commissioned to support co-occurring cases are aligned and working in partnership with housing and homelessness services [February 2021]</p>	<p>Number of hospital admissions due to primary named illicit drugs SOURCE: NWIS (PEDW)</p>	<p>WG</p>

Actions	How we will know – Population & Performance Measures	Who is responsible?
iii) Welsh Government to work with APBs to ensure that services are accessible to all people with protected characteristics [Ongoing]	Number of people with protected characteristics accessing services.	WG, APBs
iv) Welsh Government will seek evidence of appropriate transitional services for young people reaching the eligibility threshold for services (March 2020)	Number of take home naloxone kits issued to: <ul style="list-style-type: none"> • New individuals • Resupplied following use 	WG, APBs
v) Seek to co-locate services with local authority homelessness teams where appropriate, in order to provide a more person-centred service to those who are either homeless or at threat of homelessness [Ongoing]	SOURCE: Harm Reduction Database	LAs
vi) In order to adopt a preventative approach, develop protocols with social housing and private sector landlords to help identify tenants who may be in need of substance misuse services [March 2021]	Number of alcohol specific deaths SOURCE: ONS	CHC, WLGA
vii) The WG will work closely with the prison service, APBs, local health boards and other stakeholders to undertake work that will aim to ensure that all Prisons in Wales (to also include Eastwood Park) have a coordinated, transparent and consistent service for those with substance misuse issues, based on best practice. The aim is to produce a standardised clinical pathway for the management of substance misuse in prisons in Wales – as well as ensure continuity of care in the community [June 2020]	Number of hospital admissions with primary and any mention of alcohol specific disease SOURCE: NWIS (PEDW) Number of hospital admissions with alcohol attributable conditions (broad and narrow definition) SOURCE: NWIS (PEDW) Prevalence estimate of Hepatitis C, Hepatitis B infection and HIV amongst people who inject drugs in	WG, HMPPS, LHBs

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>viii) Area Planning Boards and Health Boards to conduct local needs analyses in relation to dependence or misuse of prescribed analgesics to ensure that appropriate support is provided through clinicians and wider service provision if required [Ongoing]</p>	<p>contact with specialist services SOURCE: Unlinked</p>	<p>APBs, LHBs</p>
<p>ix) WG, APBs and other partners through the National Implementation Board for Drug Poisoning Prevention to implement the recommendations of the PHW Review (further to the Drug Consensus Seminars) with a view of reducing fatal and non-fatal drug poisonings [April 2020]</p>		<p>WG, APBs, PHW</p>
<p>x) WG to work with partners to develop a national information sharing protocol in line with Wales Accord on the Sharing of Personal Information (WASPI) [December 2020]</p>		<p>WG</p>
<p>xi) WG will continue to support the distribution of Naloxone and develop this within the community to ensure maximum distribution and coverage. PHW will continue to monitor and report on take-home naloxone provision across Wales [Ongoing and annual reporting]</p>		<p>WG, PHW, APBs</p>
<p>xii) WG to work with partners to establish the need for Nyxoid (nasal naloxone). Where need is identified, work with areas to implement Nyxoid with carers and services on the periphery of substance misuse (such as police officers) [Ongoing]</p>		<p>WG, PHW, APBs</p>

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>xiii) APBs to continue to develop, support and monitor needle and syringe provision and to ensure ample coverage and ease of access, with appropriate levels of harm reduction advice [Ongoing]</p>		APBs
<p>xiv) WG will implement the Public Health (Minimum Price for Alcohol) (Wales) Act 2018 with the aim of addressing some of the long-standing and specific health concerns around the effects of excess alcohol consumption in Wales [Ongoing]</p>		WG
<p>xv) WG will carry out a review of the level of the MUP of alcohol, two years after implementation. WG has commissioned an evaluation of the Public Health (Minimum Price for Alcohol) (Wales) Act 2018, which will include a focus on the impacts of MUP on retailers, as well as moderate, hazardous and harmful drinkers. Baseline reports for the evaluation will inform the review of the level of the MUP [tbc once implementation has begun]</p>		WG
<p>xvi) WG will work closely with APBs to identify and manage any potential impact of MUP on services. WG will also work across a range of policy areas to identify opportunities to mitigate the potential unintended consequences of introducing minimum unit pricing for alcohol, which have been highlighted by stakeholders [Ongoing]</p>		WG, APBs

Actions	How we will know – Population & Performance Measures	Who is responsible?
xvii) WG and APBs to consider expanding Alcohol Liaison Nurse services and consider the evidence for developing alcohol assertive outreach services in Wales [April 2020]		WG, APBs, PHW
xviii) WG to work with APBs to implement routine opt-out testing (dry blood spot testing and venepuncture) for blood borne viruses (hepatitis B, hepatitis C and HIV) and hepatitis B vaccination for all those in contact with substance misuse services including low threshold services and community pharmacy providers and prisons [March 2020]		WG, APBs, PHW
xix) From 2019 we will be introducing a key performance measure for BBV testing to support the Welsh Government commitment to the WHO elimination target, this work is supported by a national task and finish group of practitioners and clinicians [December 2019]		WG, Gambleaware
xx) We will work with Gambleaware to ensure close links between substance misuse services and support for problem gamblers [Ongoing]		WG, Gambleaware

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>Outcome 4. People with substance misuse issues have the skills, resilience and opportunities to gain and maintain economic independence and the negative impact of substance misuse on the Welsh economy is minimised</p> <p><i>Contributes to:</i></p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 2: Increase the value achieved from funding of health and care through improvement, innovation, use of best practice, and eliminating waste</i> ➤ <i>Quadruple Aim 4: Improve the experience and quality of care for individuals and families</i> 		
<p>i) We will seek to secure additional ESF Funding to extend the Out of Work Peer Mentoring Service until August 2022 and support a further 5,000 people [August 2022]</p> <p>ii) We will publish the results of an independent evaluation of the service in order to help inform future decisions about support in this area [April 2020]</p> <p>iii) We will work with the Working Wales advice service to ensure close links between substance misuse services and employment support [Ongoing]</p> <p>iv) We will work with Job Centre Plus to ensure people who require treatment before they can begin looking for work are referred appropriately. [Ongoing]</p> <p>v) Attach volunteering opportunities in sheltered environments (to permit participation for those earliest in their SM journey who may be able only to dip in and out of projects at this early point [Ongoing]</p>	<p>Number of people enrolling in the Out of Work Peer Mentoring Service SOURCE: Welsh Government</p> <p>Number of people gaining a qualification or work relevant certification upon leaving SOURCE: Welsh Government</p> <p>Number of people entering employment including self-employment upon leaving SOURCE: Welsh Government</p> <p>Number of people engaged in job search upon leaving SOURCE: Welsh Government</p>	<p>WG</p> <p>WG</p> <p>WG, Working Wales</p> <p>WG, JCP</p> <p>WG</p>

Actions	How we will know – Population & Performance Measures	Who is responsible?
	<p>Number of people increasing employability through completing work experience placement or volunteering opportunity SOURCE: Welsh Government</p> <p>Number of people in employment six months after leaving SOURCE: Welsh Government</p> <p>Number of people returning to work after a period of sickness absence SOURCE: Welsh Government</p>	

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>Outcome 5. People with substance misuse issues participate in culturally and socially diverse activities including the arts, sport and recreation.</p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 3: Enrich the wellbeing, capability and engagement of the health and social care workforce</i> ➤ <i>Quadruple Aim 4: Improve the experience and quality of care for individuals and families</i> 		
<p>i) All APBs to consider how links and access to community projects, diversionary activities and sporting activities can play a part in the health and well-being of those with substance misuse issues. As part of this, APBs to consider how they can engage with the sports sector. [Ongoing]</p>		APBs
<p>Outcome 6. Everyone affected by substance misuse issues are treated with dignity, fairness and respect.</p> <p><i>Contributes to:</i></p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 3: Enrich the wellbeing, capability and engagement of the health and social care workforce</i> ➤ <i>Quadruple Aim 4: Improve the experience and quality of care for individuals and families</i> 		
<p>i) APBs to work with community groups and the local media to support people with lived experience of recovery to raise awareness of recovery, in order to diminish the negative perceptions of people with substance misuse issues. [Ongoing]</p> <p>ii) APBs and Welsh Government to work with Armed Forces Liaison offices and military charity organisations to ensure services are accessible to and meet the needs of veterans, including those with co-occurring conditions [March 2021]</p>	<p>Number veterans accessing services</p>	<p>APBs</p> <p>WG, APBs</p>

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>Outcome 7. Everyone affected by substance misuse issue can access timely, evidence based, safe and effective quality services.</p> <p><i>Contributes to:</i></p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 2: Increase the value achieved from funding of health and care through improvement, innovation, use of best practice, and eliminating waste</i> ➤ <i>Quadruple Aim 4: Improve the experience and quality of care for individuals and families</i> 		
<p>i) As part of reviewing the commissioning of services, APBs should ensure services work more flexibly including outside of normal working hours and consider weekend provision [Ongoing]</p> <p>ii) WG will work closely with APBs to ensure that their services are responsive to trends in data, particularly around drug and alcohol fatal and non-fatal poisonings, to ensure that the appropriate services are in place [Ongoing]</p> <p>iii) Work with APBs to ensure alignment of services and access to services to the areas where Housing First Trailblazer projects are operating. This should take the form of multi-disciplinary teams so that substance misuse support for rough sleepers can support the aims and principles of Housing First and help individuals to tackle their addictions in a person-centred and trauma informed manner [December 2019]</p>	<p>Percentage increase in numbers of people accessing services Source: NWIS</p> <p>Achieve a waiting time of within 20 working days between referral and treatment. (KPI) SOURCE: WNDSM</p>	<p>APBs</p> <p>WG, APBs</p> <p>WG, APBs</p>

Actions	How we will know – Population & Performance Measures	Who is responsible?
iv) Ensure a range of Opiate Substitution Therapy (OST) provision is available based on the needs of the individual and best practice as set out both by NICE and in the Orange Book [March 2021]		WG, APBs
v) We will work to develop pilots for rapid OST prescribing services in areas of greatest need based on best practice [March 2021]		WG, APBs
vi) We will review our target for waiting times to ensure it is appropriate and leads to improved outcomes and monitor progress against this [April 2020]		WG, APBs
vii) To ensure services meet the needs of older people in relation to reducing harm surrounding both drug and alcohol use (including Prescription Only Medicines) [Ongoing]		APBs
viii) APBs to work with service providers to ensure the physical health needs of the substance misuse population (particularly with an ageing population) are assessed and individuals referred to appropriate services where necessary [Ongoing]		APBs
ix) Welsh Government will work with “Drink Wise, Age Well” on their Charter for Change which identified a number of areas that could be improved in relation to older people’s substance misuse services in Wales [Ongoing]		WG , Drink Wise Age Well
x) We will replace the current Residential Treatment Framework and ensure the availability of a range of residential treatments are available and that access is improved [December 2019]		WG, LAs

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>xi) Develop referral pathways between rough sleeping outreach teams and local authority homelessness teams to residential rehabilitation units. This should include referral pathways from Housing First projects [March 2021]</p> <p>xii) Work to develop ‘move on’ processes for those due to leave residential rehabilitation units, or prisons in particular with local authorities, social housing landlords and Housing Support services [March 2021]</p>		<p>WG</p> <p>WG</p>

Key Aim 3: Supporting and protecting families

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>Outcome 8. Social exclusion and isolation as a result of substance misuse is minimised.</p> <p><i>Contributes to:</i></p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 1: Improve population health and wellbeing through a focus on prevention</i> ➤ <i>Quadruple Aim 2: Increase the value achieved from funding of health and care through improvement, innovation, use of best practice, and eliminating waste</i> ➤ <i>Quadruple Aim 4: Improve the experience and quality of care for individuals and families</i> 		
<p>i) APBs to work with partners to ensure services are accessible for all and that outreach services are available to those who are isolated due to their substance misuse issues, particularly older people [Ongoing]</p>		APBs
<p>Outcome 9. The harms of substance misuse are reduced for Children and Families</p> <p><i>Contributes to:</i></p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 1: Improve population health and wellbeing through a focus on prevention</i> 		
<p>i) APBs to work with other programmes and community based groups who provide early invention and prevention services, e.g. Flying start, Families First. The aim here is that timely and appropriate referrals are made to substance misuse services and that</p>		APBs

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>awareness of the harms associated with substance misuse and where to access sources of support is provided [Ongoing]</p> <p>ii) APBs to ensure that specialist services are available to children and families to provide support [December 2020]</p> <p>iii) APBs to ensure that services are developed with an awareness of ACEs and that staff are trained in this [September 2020]</p> <p>iv) APBs to ensure that there are transition services in place for young people and their families who have substance misuse issues, including co-occurring [September 2020]</p>		<p>APBs</p> <p>APBs</p> <p>APBs</p>
<p>Outcome 10. Outcomes for Children and families on the edge or in care are improved.</p> <p><i>Contributes to:</i></p> <p>➤ <i>Quadruple Aim 1: Improve population health and wellbeing through a focus on prevention</i></p>		
<p>i) Ensure there are joint systems in place for the early identification and preventative action to help reduce the numbers of children taken into care as a result of substance misuse [March 2021]</p> <p>ii) Provide accessible, timely services to parents with substance misuse problems so they are helped to keep the family unit together by managing risk [Ongoing]</p> <p>iii) Jointly ensure that services are easily accessible to support children and young people in care or on the edge of care whose lives are affected by substance misuse [Ongoing]</p>		<p>APBs/RPBs</p> <p>APBs</p> <p>APBs, LAs</p>

Key Aim 4: Tackling Availability and protecting individuals and communities via enforcement activity

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>Outcome 11. People are / feel safer in relation to crime.</p> <p><i>Contributes to:</i></p> <p>➤ <i>Quadruple Aim 1: Improve population health and wellbeing through a focus on prevention</i></p>		
<p>i) WG and APBs to work with PCCs and the Police to set out key objectives in reducing the availability of illegal drugs and NPS and publicise successful outcomes, particularly in relation to work on County Lines [December 2020]</p> <p>ii) Support landlords in Wales to identify and support activity to tackle behaviours associated with gang-related/county lines activity. In particular, working with the four Welsh police forces to ensure services are fully aware of trends in terms of activities and best practice in terms of prevention and interventions [Ongoing]</p> <p>iii) WG to work with alcohol industry, and other partners to ensure safe drinking messages are promoted in licenced premises and at retail outlets. [Ongoing]</p> <p>iv) APBs to work with Community Alcohol Partnerships to develop local initiatives to tackle underage drinking and anti-social behaviour [Ongoing]</p>	<p>Number of drug offences recorded by Welsh Police Force. SOURCE : ONS</p> <p>Number of alcohol related offences recorded by Welsh Police Forces SOURCE: ONS</p>	<p>WG, APBs, PCCs</p> <p>WG, PCCs, LAs, CHC</p> <p>WG, Alcohol Industry</p> <p>WG</p>

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>v) APBs and LHBs to learn from good practice such as alcohol action areas and treatment centres to help target pockets of harmful drinking and practice. [Ongoing]</p> <p>vi) APBs and WG to learn and share good practice on reducing drug related litter and work with relevant stakeholders to tackle localised hot spots [March 2020]</p>		<p>APBs, LHBs</p> <p>APBs, WG</p>
<p>Outcome 12. Welsh speakers and their families are able to receive support for substance misuse issues through their own language.</p> <p><i>Contributes to:</i></p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 1: Improve population health and wellbeing through a focus on prevention</i> ➤ <i>Quadruple Aim 2: Increase the value achieved from funding of health and care through improvement, innovation, use of best practice, and eliminating waste</i> ➤ <i>Quadruple Aim 3: Enrich the wellbeing, capability and engagement of the health and social care workforce</i> ➤ <i>Quadruple Aim 4: Improve the experience and quality of care for individuals and families</i> 		
<p>i) Raise staff awareness about the need to make the ‘Active Offer’ (providing a Welsh language service without service users having to ask for it) and encourage providers to actively encourage their workforce to develop capacity to use welsh in the workplace. This will include encouraging staff to register and complete the online WorkWelsh learning courses for the health and care sector provided by the National Centre for Learning Welsh [Ongoing]</p>	<p>Numbers registering and completing WorkWelsh learning courses</p> <p>SOURCE: National Centre for Learning Welsh</p>	<p>WG, APBs</p>

Actions	How we will know – Population & Performance Measures	Who is responsible?
ii) WG to work with NWIS to add fields to the Welsh National Database for Substance Misuse (WNDSM) to capture Welsh Language requirements. [March 2020]		WG, NWIS

Key Aim 5 – Partnerships, Workforce and Service User Involvement

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>Outcome 13. Area Planning Boards are fit for the future</p> <p><i>Contributes to:</i></p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 2: Increase the value achieved from funding of health and care through improvement, innovation, use of best practice, and eliminating waste</i> ➤ <i>Quadruple Aim 3: Enrich the wellbeing, capability and engagement of the health and social care workforce</i> 		
<p>i) WG and APBs to review the partnership structures and relationships ensuring these are well aligned with Regional Partnership Boards, Public Service Boards and Community Safety structures [March 2020]</p> <p>ii) WG and APBs to ensure data sharing agreements are in place to support effective joint working, particularly in relation to early intervention and harm reduction through information sharing of fatal and non-fatal drug poisonings [December 2020]</p> <p>iii) All APBs to review clinical governance arrangements to ensure these are robust and support the delivery of effective services. [March 2020]</p> <p>iv) APBs to ensure strong governance and monitoring around safeguarding within services and formalise relationships with safeguarding boards [March 2020]</p>		<p>WG, APBs</p> <p>WG</p> <p>APBs</p> <p>APBs</p>

Actions	How we will know – Population & Performance Measures	Who is responsible?
<p>v) WG and APBs to explore the development of a substance misuse outcomes framework [July 2020]</p> <p>vi) Welsh Government to review the status of the National Core Standards for Substance Misuse in light of other health and social care legislation and standards. [December 2020]</p> <p>vii) WG and APBs to ensure that the implementation of the Welsh Community Care Information System (WCCIS) progresses for substance misuse services nationally [March 2022]</p> <p>viii) WG to consider options to support the status of APBs within the local and regional partnership landscape [December 2020]</p> <p>ix) All APBs to ensure that they have strong service user representation on their board. [December 2020]</p>		<p>APBs</p> <p>WG</p> <p>WG, APBs</p> <p>WG</p> <p>APBs</p>
<p>Outcome 14. The substance misuse workforce is skilled and informed</p> <p>Contributes to:</p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 2: Increase the value achieved from funding of health and care through improvement, innovation, use of best practice, and eliminating waste</i> ➤ <i>Quadruple Aim 3: Enrich the wellbeing, capability and engagement of the health and social care workforce</i> 		
<p>i) WG and APBs to review the workforce development needs of the substance misuse workforce. [July 2021]</p>		<p>WG, APBs</p>

Actions	How we will know – Population & Performance Measures	Who is responsible?
ii) Prepare a workforce development plan ensuring it is aligned to relevant standards [March 2021] iii) WG and APBs to support professionals within substance misuse services to cope with the emotional and clinical challenges of end of life care, loss and bereavement. [July 2021]		WG WG, APBs
<p>Outcome 15. Service User involvement is embedded into delivery and planning of services.</p> <p>Contributes to:</p> <ul style="list-style-type: none"> ➤ <i>Quadruple Aim 2: Increase the value achieved from funding of health and care through improvement, innovation, use of best practice, and eliminating waste</i> ➤ <i>Quadruple Aim 3: Enrich the wellbeing, capability and engagement of the health and social care workforce</i> 		
i) WG will work with APBs to ensure they involve people in the design and delivery of services [Ongoing] ii) We will further support the development of the All Wales Service User Movement to ensure service users are represented appropriately at a national level [Ongoing]		WG, APBs WG, AWSUM

