

Draft

Alcohol and Substance Misuse Joint Strategic Needs Assessment Structure

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Introduction

Background & Context

To include information on the National Drugs Strategy 'From Harm to Hope' and the National Alcohol Strategy 2012 (*noting the absence of an update national strategy*).

Parameters and definitions of the needs assessment.

National evidence (activity & need)

Trafford needs assessment

Alcohol

Impact on population and protected groups.

Life course issues, maternity and foetal alcohol spectrum disorder, children, young people and families, living well, ageing well.

Services activity

- a. Primary care activity
- b. Achieve treatment provider (Adults)
- c. Achieve treatment provider (Children, Young People & Families)
- d. Tier 4 – Detox and residential rehab.
- e. Accident & emergency

Substance Misuse

Impact on population and protected groups.

Life course issues, maternity and foetal alcohol spectrum disorder, children, young people and families, living well, ageing well.

Services activity

- a. Primary care activity
- b. Achieve treatment provider (Adults)
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- d. Tier 4 – Detox and residential rehab.
- e. Accident & emergency

Alcohol & Substance Misuse

Recommendations around needs of the population

Parameters, Acronyms & Definitions

Parameters

The JSNA will aim to include any adult, child or family living in Trafford, attending a Trafford school or registered with a Trafford GP between 2018 to 2023.

Acronyms

BBV – Blood-borne Viruses.
CYP – Children & Young People.
FASD – Foetal Alcohol Spectrum Disorders.
GP – General Practitioner.
GMMH – Greater Manchester Mental Health.
IMD – Index of Multiple Deprivation.
LDIS – Local Drug Information System.
NDTMS – National Drug Treatment & Monitoring System.
NWAS – Northwest Ambulance Service.
OST – Opioid Substitution Therapy.
PWID – Person/People Who Inject Drugs.
TASMP – Trafford Alcohol & Substance Misuse Partnership.
YJS – Youth Justice Service.

Definitions

Drug - Drug is used to describe a psychoactive substance (other than alcohol) used illicitly or illegally, except in the term 'controlled drug' where it refers to a substance defined by and controlled under the Misuse of Drugs Act.

Alcohol – For the purpose of this needs assessment, we will be referring to an alcohol beverage which is any drink that contains ethanol/ethyl alcohol above 0.5% ABV in line with the department of health and social care descriptor.

Substance - This is used to describe the wider range of drugs, solvents (volatile substances), and alcohol, that could be harmful to oneself or others.

Brief Interventions – This includes a short session of structured brief advice with an aim to help someone reduce their drug or alcohol consumption (sometimes even to abstain) and can be carried out by non-specialists.

Extended Brief Interventions – This a longer, more motivationally-based session from a brief intervention and can take the form of motivational-enhancement therapy or motivational interviewing. The aim is to motivate people to change their behaviour by exploring with them why they behave the way they do and identifying positive reasons for making change.

Structure Treatment - Structured treatment consists of a comprehensive package of concurrent or sequential specialist substance misuse-focused interventions. Structured treatment requires a comprehensive assessment of need, and is delivered according to a recovery care plan, which is regularly reviewed with the client. The plan sets out clear goals which include change to substance use, and how other client needs will be addressed in one or more of the following domains: physical health; psychological health; social well-being; and, when appropriate, criminal involvement and offending. All interventions must be delivered by competent staff, within appropriate supervision and clinical governance structures.

Psychosocial interventions – Structured psychological or social interventions used to address substance-related problems. They can be used at different stages of drug treatment to identify the problem, treat it, and assist with social reintegration.

Pharmacological interventions – Medications that are used in the treatment of drug and alcohol dependence to manage withdrawal during detoxification, stabilisation, and substitution as well as relapse prevention, in addition to the symptomatic management or treatment of co-occurring conditions.

National Drug Treatment Monitoring System (NDTMS) – A dataset which helps drug and alcohol treatment demonstrate the outcomes it achieves for the people it treats. NDTMS is a national standard and is applicable to young people and adults within community and secure, setting-based treatment providers.

Substance Categories - Individuals presenting to adult alcohol and drug treatment services are categorised by the substances they cite as problematic at the start of treatment. They are categorised by the following hierarchical criteria:

Opiate - Any mention of opiate use would result in the person being categorised as opiate irrespective of what other substances are cited.

Non-Opiate Only – People who present with non-opiate substances without opiates or alcohol.

Alcohol Only – People who present with alcohol and no other substances.

Non-Opiate & Alcohol – People who present with a non-opiate substance and alcohol use.

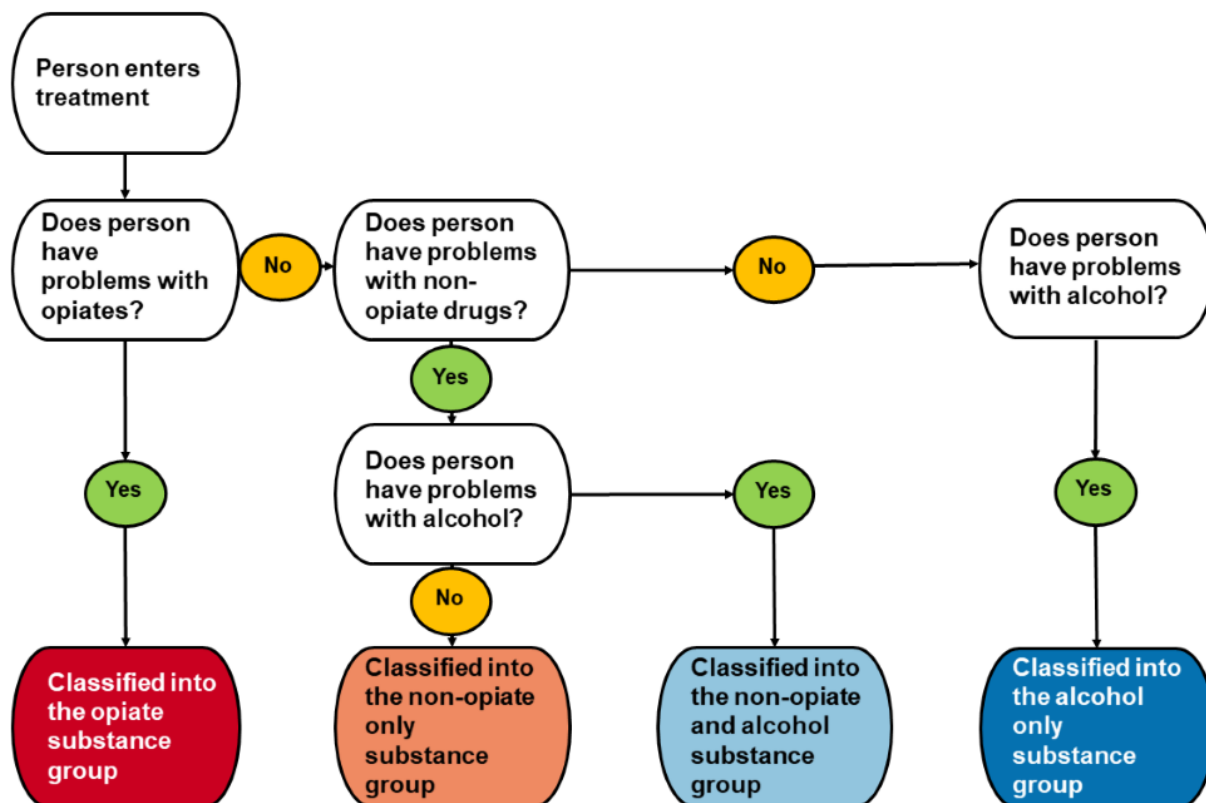


Figure 1: How people are classified into substance reporting groups.

Unit—In the UK, alcoholic drinks are measured in units. Each unit corresponds to approximately 8g to 10ml of ethanol. The same volume of similar types of alcohol (for example, 2 pint of lager) can compromise a different number of units depending on the drink's strength (that is, its percentage concentration of alcohol)

Low Risk Drinking—To keep the risk of harm from alcohol low, the UK Chief Medical Officer advises that men and women should not regularly exceed 14 units of alcohol. It is also recommended that if the alcohol consumption is as much as 14 units per week, it should be spread evenly over 3 or more days .

Harmful Drinking (Increasing Risk Drinking)—Regularly drinking more than the low risk guidelines of over 14 units per week and up to 35 units for women and 50 units for men.

Hazardous Drinking (Higher Risk Drinking) — This is a pattern of alcohol consumption that increases someone's risk of harm. Hazardous drinking for women is regularly drinking more than 35 units per week and for men over 50 units per week.

Binge Drinking—Binge drinking refers to drinking enough on a single occasion to get drunk, in a short period of time. The technical definition is drinking more than 6 units for women, and 8 units for men on a single occasion.

Intoxicated — Being under the influence of drugs or alcohol.

Polydrug use — mixing drugs or taking one drug when under the influence of another drug.

Dependence - A state in which an organism only functions normally in the presence of a substance, experiencing physical disturbance when the substance is removed. A person can be dependent on a substance without being addicted, but dependence sometimes leads to addiction.

Addiction – Defined as not having control over doing, taking, or using something to the point where it could be harmful to you.

Recovery – Recovery from problematic drug or alcohol use is defined as a process in which the difficulties associated with substance misuse are eliminated or significantly reduced, and the resulting personal improvement becomes sustainable.

Abstinence – Refraining from drug or alcohol use.

Relapse – Where an individual has taken drugs or alcohol after a period of abstinence.

Opioid - Opioid is used in line with the WHO definition to refer to the whole group of natural, semi-synthetic and synthetic compounds that act on opioid receptors.

Opiate - Opiate is also used at times for substances derived from the poppy plant and for the semi-synthetic drug diamorphine (heroin).

Opioid substitution therapy (OST) – A treatment for opioid dependence. This involves prescribing a drug that has a similar action to the opioid that the person is addicted to. This prevents withdrawal symptoms and craving and reduces the likelihood of injecting drugs.

Methadone – An opioid substitution therapy that is used to help manage opioid dependence and addiction in adults for example heroin addiction.

Buprenorphine - An opioid substitution therapy that is used to help manage opioid dependence and addiction in adults for example heroin addiction.

Naloxone – Naloxone is a medicine that rapidly reverses an opioid overdose. It is an opioid antagonist. This means that it attaches to opioid receptors and reverses and blocks the effect of other opioids. Naloxone can quickly restore normal breathing to a person if their breathing has slowed or stopped because of an opioid overdose. However, naloxone has no effect on someone who does not have opioids in their system, and it is not a treatment for opioid use disorder.

Alcohol use disorders identification test consumption (AUDIT C) – A brief alcohol screening instrument that helps to identify harmful and hazardous drinkers. The AUDIT-C is a modified version of the 10 question AUDIT instrument.

Foetal Alcohol Syndrome Disorder (FASD) – A neurodevelopmental condition with lifelong cognitive, emotional, and behavioural challenges. FASD results when prenatal alcohol exposure affects the developing brain and body. FASD is a spectrum and each person with FASD is affected differently.

Local Drug Information System – A local drug information system is an agreed communication system that has consistent and efficient processes for sharing and assessment information around substances. This can include issuing warnings where needed, and can help ensure high-quality, effective information rapidly reaches the right people.

Drug Related Deaths – The coroners define drug related deaths as drug poisoning including accidents and suicides involving drug poisoning, as well as deaths from drug abuse and drug dependence. Data around drug related deaths will include those identified from the coroner and by individuals who have died whilst in structured treatment, or recent structured treatment with a drug or alcohol treatment provider.

Transition – This refers to the transition from young people’s service to adult services. Under the current treatment model, all service users aged under-21 will be considered young people. In exception circumstances, the young people’s service will work with young adults up to the age of 24, at the discretion of the case management team.

Gambling – Gambling encompasses a broad range of activities, ranging from the National Lottery to casino games, slot machines, and online betting

Alcohol related dementia – Alcohol-related dementia is a type of alcohol-related brain damage, caused by regularly drinking too much alcohol over many years. If a person has alcohol-related dementia they will struggle with day-to-day tasks. The person may have memory loss and difficulty thinking things through. They may have problems with more complex tasks, such as managing their finances.

Needle exchange – Sharing needles can increase an individual’s chances of contracting blood-borne viruses. Needle exchange is in place in selected pharmacies where needle/syringe users can swap used needles, for a clean and sterile injecting equipment pack. This provides a safe and confidential route for disposal of used needles and a provision of clean equipment.

Detoxification – Often referred to as ‘detox’ is the removal of a toxic substance, such as drugs or alcohol from the body. Detox can be achieved through medical treatment either in the community or at a residential facility. Detox can also help in preparing an individual for residential rehabilitation.

Residential Rehabilitation – Often referred to as residential ‘rehab’ offers onsite, around-the-clock addiction treatment. People participating in residential programmes live at the treatment facility and will have access to medical care and support when needed.

Co-occurring Conditions – An individual who has a co-existing mental health and alcohol or drug difficulties.