

## **6.6 Addictions and Substance Misuse**

Alcohol and drug misuse are significant public health and social issues costing Northern Ireland millions of pounds every year. Alcohol misuse continues to have the biggest impact on the health of the population and accounts for approximately 70% of referrals to treatment services. The impact of alcohol and drug misuse not only affects the individuals concerned but affects families and local communities and is not confined to young people but can affect all ages. Harm associated with alcohol and drug misuse can be addressed by providing a range of preventative, early intervention and treatment services using a tiered model of care approach. The earlier intervention / treatment services are provided to someone who is misusing alcohol or drugs the more likely it becomes that the harm associated with such use can be minimised. These services are provided by a range of Health and Social care Staff and are best addressed within a multi agency service provision framework which takes into account a person's physical, social and psychological wellbeing. The following standards address this broad spectrum of services. They take account of the New Strategic Direction on Alcohol and Drug Misuse and targets in this area set by DHSSPS in this area of policy.

Note - The standards provided within this document reflect only a small proportion of the much wider range of initiatives being developed in the "New Strategic Direction for Alcohol and Drugs" (DHSSPS 2006/2011)

## **Overarching Standard 38: Addictions and substance misuse – assessment and early intervention**

A person with difficulties/concerns about their drug or alcohol misuse should have an initial assessment when first presenting to services in primary care or any acute or community setting and should be encouraged to fully participate in their assessment and onward referral, if necessary. Any person presenting either a risk to themselves or others should be offered and assessed by mental health specialist(s) in a timely manner

### **Rationale**

Given the high levels of alcohol and drug misuse, health and social services can play a key role in assessment and early interventions that can be delivered by a very wide range of agencies and within many different settings. People of all ages who misuse substances in a problematic way are able to access age appropriate harm reduction interventions to minimise the physical, psychological and social harm brought about by lifestyle choices.

### **Evidence**

National Treatment Agency (2006) Models of Care for Alcohol Misusers  
[http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/@dh/@en/documents/digitalasset/dh\\_4136809.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4136809.pdf)

National Treatment Agency (2006) Models of Care for Treatment of Adult Drug Misusers (Update)  
[http://www.nta.nhs.uk/uploads/nta\\_modelsofcare\\_update\\_2006\\_moc3.pdf](http://www.nta.nhs.uk/uploads/nta_modelsofcare_update_2006_moc3.pdf)

DHSSPS (2006) New Strategic Direction for Alcohol and Drugs (2006-2011)  
<http://www.dhsspsni.gov.uk/nsdad-finalversion-may06.pdf>

NICE Guidelines

Every Child Matters  
<http://www.education.gov.uk/childrenandyoungpeople/sen/earllysupport/esinpractice/a0067409/every-child-matters>

DHSSPS (2008) Regional Hidden Harm Action Plan  
[http://www.dhsspsni.gov.uk/regional\\_hidden\\_harm\\_action\\_plan.pdf](http://www.dhsspsni.gov.uk/regional_hidden_harm_action_plan.pdf)

### **Responsibility for delivery/implementation**

HSC Trusts

Primary Care

In partnership with voluntary and community organisations

### **Quality Dimensions**

**Person Centred** – People and what is important to them, their family and friends are central to the assessment and early intervention/treatment process. Options should be explored in regard to what would work best for the person

given their unique context and lifestyle.

**Timely** – Early screening, assessment and brief interventions ensures better outcomes

**Equitable** – Specialist services available throughout NI

**Effective/Efficient** - Appropriate assessment improves the effectiveness and efficiency of care and treatment

**Safe** – Minimises risk to self and others.

<b>Performance Indicator</b>	<b>Data Source</b>	<b>Anticipated Performance Level</b>	<b>Date to be achieved by</b>
Percentage of people presenting offered assessment	User and Carer Feedback	Establish baseline  Performance levels to be determined once baseline established	March 2013
Percentage of people who participated in their assessment and ongoing referral	User and Carer Feedback	Establish baseline  Performance levels to be determined once baseline established	March 2013

## **Overarching Standard 39: Addictions and substance misuse – early intervention, treatment and ongoing care**

A person requiring early intervention, treatment and ongoing care in relation to their substance misuse should have a comprehensive assessment by substance misuse services using a standardised outcome measurement tool, have access to an appropriate range of evidence based treatment and care including residential treatment and specialist medical treatments and services, if required, in line with NICE guidelines.

### **Rationale**

Substance misuse affects the whole family and the needs of the family especially children need to be considered. It is essential that a holistic care plan is prepared that will involve specialist medical services if required as substance misusers have a higher incidence of medical problems that are associated with their addictive behaviours. If residential admission is required this should be brief and goal focused with an effective and robust recovery plan agreed with the service user and all relevant health and social care professionals to ensure continuity of appropriate care.

### **Evidence**

National Treatment Agency (2006) Models of Care for Alcohol Misusers  
[http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/@dh/@en/documents/digitalasset/dh\\_4136809.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4136809.pdf)

National Treatment Agency (2006) Models of Care for Treatment of Adult Drug Misusers (Update)  
[http://www.nta.nhs.uk/uploads/nta\\_modelsofcare\\_update\\_2006\\_moc3.pdf](http://www.nta.nhs.uk/uploads/nta_modelsofcare_update_2006_moc3.pdf)

DHSSPS (2006) New Strategic Direction for Alcohol and Drugs (2006-2011)  
<http://www.dhsspsni.gov.uk/nsdad-finalversion-may06.pdf>

DOH (2007) Drug Misuse and Dependence: UK Guidelines on Clinical Management  
[http://www.nta.nhs.uk/uploads/clinical\\_guidelines\\_2007.pdf](http://www.nta.nhs.uk/uploads/clinical_guidelines_2007.pdf)

Drug and Alcohol National Occupational Standards  
<http://www.skillsforhealth.org.uk/competences/drugs-and-alcohol.aspx>

O'Neill Independent Inquiry 2007

Every Child Matters  
<http://www.education.gov.uk/childrenandyoungpeople/sen/earllysupport/esinpractice/a0067409/every-child-matters>

DHSSPS (2008) Regional Hidden Harm Action Plan  
[http://www.dhsspsni.gov.uk/regional\\_hidden\\_harm\\_action\\_plan.pdf](http://www.dhsspsni.gov.uk/regional_hidden_harm_action_plan.pdf)

<b>Responsibility for delivery/implementation</b>			
HSC Board Public Health Agency HSC Trusts Voluntary and community organisations			
<b>Quality Dimensions</b>			
<p><b>Patient Centred</b> – The agreed care plan should be designed, implemented and reviewed in regard to what is working and what is not working from the perspective of the person, their family, carers and other professionals and changes negotiated on the basis of this.</p> <p><b>Safety</b> – correct and appropriate information is obtained and allows information flow between services</p> <p><b>Equitable</b> – Assessment available across Northern Ireland. All service users accessing addiction treatment services receive the same assessment</p> <p><b>Efficient/Effective</b> – Assessment and implementation of care plan promotes recovery.</p>			
<b>Performance Indicator</b>	<b>Data Source</b>	<b>Anticipated Performance Level</b>	<b>Date to be achieved by</b>
Agree and implement standardised outcome measurement tool	HSC Trust report	Establish baseline  Performance levels to be determined once baseline established	March 2013
Percentage of people being treated where outcomes measurement shows improvement after 12 months	HSC Trust report	Establish baseline  Performance levels to be determined once baseline established	March 2014
Percentage of people being offered a choice of medications and psychological interventions	HSC Trust report	Establish baseline  Performance levels to be determined once baseline established	March 2013
Percentage of people receiving	HSC Trust report	Establish baseline	March 2013

psychological and social interventions		Performance levels to be determined once baseline established	
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