

# Reducing Drug and Alcohol Related Harm in Highland: Core Indicators

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Prepared by: Frances Matthewson, Research and Intelligence Specialist February 2020

#### Introduction

Highland Alcohol & Drugs Partnership (HADP) is the multi-agency partnership responsible for the development of comprehensive, needs led and outcomes based strategy for preventing and reducing drug and alcohol related harm. The current membership includes Highland Council, NHS Highland, Police Scotland, Third Sector, Crown Office, Scottish Prison Service, Scottish Fire and Rescue Service and local drug and alcohol forums.

The role of HADP is to:

- Implement an alcohol and drugs strategy informed by local needs assessment;
- Reduce inequality and harm via activity ranging from prevention through to recovery;
- Deliver quality services that support recovery and involve service users and families;
- Provide a commissioning framework and direct funding towards agreed priorities;
- Regularly report on performance and measure progress against a set of indicators;
- Respond to changing national and local priorities.

### **Core Indicators**

The core indicators provide a framework for reporting the partnership's performance and progress towards reducing alcohol and drug related harm and inequalities. There is a focus on achieving outcomes in the four key delivery areas of the HADP strategy:

- Communities are fairer, healthier and better informed with reduced levels of substance use and related harm
- Children, young people and families are successful, well-protected and have improved life chances
- Individuals supported by families and communities have improved health and wellbeing by recovering from problematic drug and alcohol use
- Communities have reduced availability of drugs and alcohol and are safe from associated offending and anti-social behaviour

These align to the national drug and alcohol outcomes at Scottish Government level (see Appendix 1). Further information is available in the <u>HADP Strategy 2017-20</u> and <u>Local Delivery Plan 2015-18</u>. Further work is being commissioned by the Scottish Government from national organisations such as the <u>Scottish Drugs Forum</u> and <u>Scottish Recovery Consortium</u> to support the delivery of the <u>alcohol and drug</u> treatment strategy and the <u>alcohol framework 2018</u>.

#### Methods and Data Sources

#### National Indicators

The main data source for national indicators are the Alcohol and Drugs Profiles produced by Information Services Division (ISD) and published by the Scottish Public Health Observatory (ScotPHO) using an on-line profiling tool. These contain over 40 indicators collated from a wide range of published statistics relating to drug and alcohol use. Comparative information is available for each NHS Board and ADP area. The profiles draw upon data sources including the National Records of Scotland, Scottish Morbidity Records (SMRs), Scottish Health Survey, Scottish Crime and Justice Surveys, and the Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS). Further information is available from the ScotPHO website and accompanying technical document.<sup>1, 2</sup>

#### Local Indicators

Local indicators are drawn from both published national data and local management reports collated by HADP. National data sources include Police Scotland, the Scottish Prison Service and Children's Social Work Statistics. Local data sources include the Highland Substance Awareness Toolkit monitoring report.

#### Interpretation

There are 50 indicators set out in the accompanying table and these are published at different times throughout the year. The "HADP current value" column shows the latest time period for which information is available as at 29<sup>th</sup> February 2020. The national value has been shown and used for comparison where this is available.

Trend information has been assessed as 'improving', 'maintaining', or 'declining' depending upon the desired direction for improvement. 'No trend' refers to indicators with insufficient data to make an assessment. The 'Target' column shows local improvement targets that have been set based upon statistical analysis of trend data, local knowledge and agreement with partners.

The performance commentary provides a brief summary of progress for each indicator. Where reference is made to statistical significance differences, this means that the 95% confidence intervals calculated for the indicator, do not overlap with those for the comparator. National figures are the main comparator used here but comparisons have also been made for Highland with the previously reported positions. Confidence intervals describe the range of values representing the uncertainty associated with an estimate and mean that there is only a 5% probability (or less than one in twenty) that the results could have occurred within the range by chance. See ScotPHO Technical Report for further information.

<sup>&</sup>lt;sup>1</sup> <u>http://www.scotpho.org.uk/comparative-health/profiles/online-profiles-tool</u>

<sup>&</sup>lt;sup>2</sup> https://www.scotpho.org.uk/media/1649/technical\_report\_drugsalcohol.pdf

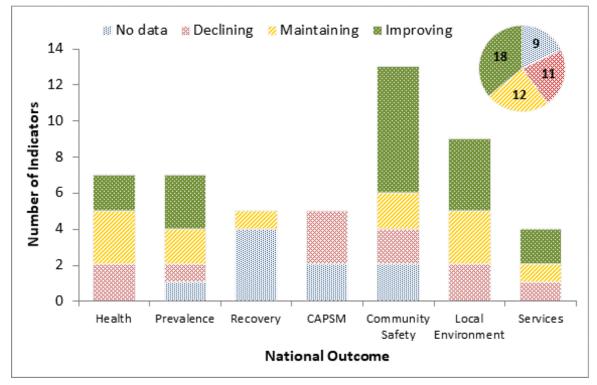
#### **Assessment Summary**

The following chart provides an overall summary of the partnerships performance and progress towards the national and local core indicators for reducing alcohol and drug related harm and inequalities in Highland.

There are 50 indicators in total, reporting progress across the 7 national outcomes:

- 17 indicators show improvement or where the target has been achieved
- 13 indicators show maintaining or no significant change
- 11 indicators show declining or off target
- 9 indicators where there is no data or no comparison is possible

Figure 1: Highland Alcohol and Drugs Partnership Core Indicator Progress as at 29<sup>th</sup> February 2020



73% of core indicators show an improving or maintained position based on those indicators where data or a trend can be reported.

## Highland ADP Performance Framework and Core Outcome Indicators 2018/19

Indicator	HADP Current Value	National Current Value	Performance based on trend	Target	Performance Commentary
National Outcome 1: H					
People are healthier and	d experienc	e fewer risk	s as a result of a	alcohol and dru	ig use
Drug related hospital discharges EASR per 100,000 population	109.5 2015/16- 2017/18	180.5 2015/16- 2017/18	Maintaining	Reduce rate to 80 per 100,000 by 2019/20	Small increase in rate of drug related hospital discharges in Highland from 94.6 in to 109.5 which is an increase of 33 stays. Performance has been statistically significantly better than the national rate for over 10 years.
Alcohol related hospital discharges EASR per 100,000 population	640.4 2 <i>018/19</i>	669.1 2 <i>018/19</i>	Declining	Reduce rate to 590 per 100,000 by 2019/20	Rates of alcohol related hospital stays overall have shown a decreasing trend since 2003. The latest figure shows a statistically significant increase from last year (595.0 in 2017/18) which had been the lowest figure reported for Highland in the time series.
Alcohol related deaths EASR per 100,000 population	20.6 2014- 2018	20.6 2014-2018	Maintaining	Reduce rate below 20.0 per 100,000 by 2020	The current rate represents an average 52 alcohol related deaths in 2014-2018 and is similar to recent reporting positions for Highland. The trend shows no statistically significant difference between Highland and national rates over a sustained period.
Drug related deaths EASR per 100,000 population	11.2 2017	17.8 2017	Declining	Reduce rate to 6.5 per 100,000 by 2020	Drug related death rate of 11.2 in 2017 is statistically significantly lower than Scotland's rate however the number of drug-related deaths in Highland has increased steadily from 19 in 2016 to 24 in 2017 and 36 in 2018.
Hepatitis-C positives among people who inject drugs	34% 2017/18	58% 2017/18	Maintaining	Reduce to 25% by 2019/20	Compared to the national figure, Highland has a lower rate (34%) of Injecting Drug Users testing positive for HCV antibody.
Number of Substance Awareness Toolkit website hits	7471 2018/19	-	Improving	Increase to 20,000 hits by 2020	New toolkit introduced March 2017 accumulated 15,644 hits in 30 months.

Indicator	HADP Current Value	National Current Value	Performance based on trend	Target	Performance Commentary
Schools involved with Rock Challenge	21 2019	-	Improving		In 2019, 21 schools including 11 primary schools and 10 secondary schools participated in the Rock Challenge diversionary initiative.
National Outcome 2: P	revalence				
Fewer adults and children	are drinking	or using dru	<b>Y</b>	r patterns that a	re damaging to themselves or others
Estimated prevalence of problem drug use amongst population	0.95% 2018/19	1.62% 2018/19	No trend available	Decrease	Rate (%) of problem drug use per head of population is statistically significantly lower than the national figure.
aged 15-64					
Proportion of individuals exceeding weekly	25.1%	25.3%	Improving	Reduce to 24% by 2019	A slightly improving trend for Highland although not statistically significantly different from the national
drinking guidelines	2014-17	2014-17			figure across all 4 reporting periods. Data is only available at Health Board level.
Proportion of individuals 'binge' drinking	15.2%	19.2%	Improving	Reduce to 14% by 2019	A slowly improving position on previous reporting periods and statistically significantly below the national
	2014-17	2014-17			figure across all 4 reporting periods. Data is only available at Health Board level.
Proportion of individuals problem drinking	12.3%	17.6%	Improving	Reduce to 11% by 2019	The proportion of individuals with potential problem drinking in NHS Highland is estimated to be 12.3%.
	2014-17	2014-17			This is statistically significantly better than the national prevalence of 17.6%. Indicator is based on score of 8+ AUDIT scale.
Percentage of 15-year old pupils who used illicit	17%	19%	Declining	Reduce to 10% by 2020	In 2018, 17% of 15-year old pupils in Highland reported they had used illicit drugs in the last year, an
drugs in the last year	2018	2018			increase on 13.9% in 2013, but this remains below the national figure of 19%.
Percentage of 15-year old pupils who used illicit	12%	12%	Maintaining	Reduce to 10% by 2020	Highland figure of 12% in 2018 is not significantly different from the previous figure for 2013 or the
drugs in the last month	2018	2018		-	Scotland figure for 2018.
Percentage of 15-year old pupils drinking on a	18.3%	24.2%	Maintaining	Reduce to 15% by 2020	Highland has experienced a slight increase of 2.5% from 2013 to 18.3% compared to a national increase
weekly basis	2018	2018			of 7.5% over the same period.

Indicator	HADP Current Value	National Current Value	Performance based on trend	Target	Performance Commentary
National Outcome 3: R	Recovery				·
Individuals are improving	their health, w	ell-being and	l life chances by r	ecovering from pr	roblematic drug misuse
Drug and alcohol treatment recovery outcomes			No trend available	-	Highland implemented the Recovery Outcomes (RO) tool in April 2017. Initial quality checks have been undertaken on a
Recovery from problematic alcohol and drug use			No trend available	-	sample of the RO data to enable outcomes reporting to be progressed. The implementation of the Drug and Alcohol
Mental health and emotional wellbeing in recovery			No trend available	-	Information System (DAISy) has been delayed wit no confirmed implementation date.
Employability or education outcomes in recovery			No trend available	-	
Number of SMART Recovery mutual aid groups	8 2019	-	Improving	Increase to 10 groups by 2020	This is a local indicator recording the number of active SMART recovery groups across Highland. Co-ordinator post planned to increase access and improve resilience of groups.
National Outcome 4: C					
· · · · · · · · · · · · · · · · · · ·					orted and have improved life-chances
Rate of maternities recording drug misuse during pregnancy (3 year rolling average per 1,000 maternities)	11.1 2016/17- 2018/19	15.3 2016/17- 2018/19	Declining	Reduce to 8.0 per 1,000 by 2020	The rate of maternities with drug use during pregnancy in Highland shows a slightly increasing trend overall with no statistically significant difference from the national rate across the last four positions reported.
Percentage of women drinking 1 or more units of alcohol during pregnancy	1% 2013/14- 2017/18	6.4% 2013/14- 2017/18	No trend	No target - lack of data	The percentage of pregnant women in Highland who reported drinking at least 1 unit of alcohol a week during pregnancy has averaged 1% over the past 5 years compared with 6.4% nationally. These are developmental data to be interpreted with some

Indicator	HADP Current Value	National Current Value	Performance based on trend	Target	Performance Commentary
					caution due to known issues around the self-
					reporting of alcohol consumption during pregnancy.
Percentage of Alcohol	0.0%	2.0%	Declining	Increase to 2%	NHS Highland has seen a reduction in the
Brief Interventions				by 2020	proportion of ABIs delivered in an antenatal setting
delivered in ante-natal	2018/19	2018/19			from 2% in 2012/13 to 0.7% in 2016/17 and 0.0%
settings					(2 ABIs) in 2018/19 compared to 2.0% nationally.
Percentage of 13 or 15	82.4%	80.9%	Declining	Reduce to	Highland's four reported positions have remained
year old pupils allowed	/ -	/ -		70% by 2020	above the national figures since 2006 and show a
to drink at home	2018	2018		_	gradually increasing trend across this time series.
Child protection cases				Decrease	In 2017, the rate of child protection cases with an
with parental drug or	8.1	9.7			indication of parental drug or alcohol concerns was
alcohol use concerns	00/7	00/7	No trend		8.1 compared to 9.7 in 2016. Although the rate is
(per 10,000 population	2017	2017			variable the actual number of cases averages 36
aged under 18)	•.				cases a year.
National Outcome 5: C	-	-			
Communities and individua			n alcohol and drug	g related offending	g and anti-social behaviour
Number of offenders	0.7	1.5	No trend	Increase	There were 12 DTTOs issued in Highland in
given a Drug Treatment	2017/18	2017/18		uptake	2017/18 which has also been the average number
and Testing Order DTTO					issued over last 5 years. Uptake of DTTOs in
(per 10,000 population					Highland is below the national average although
aged 16-70)					not significantly so.
Number of Community	2.5	0.9	No trend	Increase	There were 41 CPO requirements issued for
Payback Orders (CPO)				uptake	alcohol or drug treatment in Highland during
issued where alcohol	2017/18	2017/18			2017/18 compared to 44 in 2016/17. The Highland
and/or drug treatment					rate is just over double the Scotland rate which
required (per 10,000					may reflect variation in local policies and practice.
population aged 16-70)					
Number of attempted	6.4	7.7	Improving	Reduce to 3.0	In 2017/18, there were 6.4 per 10,000 population
murder and serious				per 10,000 by	attempted murder and serious assault offences in
assaults per 10,000	2017/18	2017/18		2018	Highland, compared to 6.6 in 2016/17. Overall
population					rates for Highland have been decreasing over the

Indicator	HADP Current Value	National Current Value	Performance based on trend	Target	Performance Commentary
					past 10 years and are below the national figure for the last 5 years.
Number of common assaults per 10,000 population	90.1 2 <i>017/18</i>	107.5 2017/18	Improving	Reduce to 80 per 10,000 by 2020	There were 2120 cases of common assault in Highland in 2017/18, a rate of 90.1 per 10,000 population. Highland's rate is statistically significantly better than the rate for Scotland and shows an overall improving trend.
Number of cases of vandalism per 10,000 population	71.2 2017/18	89.8 2017/18	Improving	Reduce to 50 per 10,000 by 2020	There were 71.2 cases of vandalism in Highland in 2017/18 per 10,000 population compared with 74.5 in 2016/17. Highland's rate is statistically significantly better than the rate for Scotland and shows a continuing decrease in rates of vandalism.
Number of cases of breach of the peace per 10,000 population	69.7 2017/18	98.0 2017/18	Improving	Reduce to 60 per 10,000 by 2020	Highland shows an overall decrease in breach of the peace rates with on average 69.7 cases per 10,000 population in 2017/18. This breach of the peace rate in Highland is statistically significantly lower than the rate for Scotland and the trend shows these rates have reduced or remained stable over the past 5 years.
Number of Drink Driving Offences per 10,000 population	15.5 2018/19	10.8 2018/19	Maintaining	Reduce to 10 per 10,000 by 2020	There were 15.5 drink driving offences in Highland per 10,000 population in 2018/19 compared with 15.7 in 2017/18. Drink driving rates in Highland and Scotland had decreased steadily between 2006/07 and 2014/15 and have remained fairly stable since then.
Individuals using illegal drugs in the last month while in prison	19% 2017	22% 2017	Maintaining	Reduce to 15% by 2019	In 2017, 19% of prisoners surveyed in HMP Inverness reported using illegal drugs in the last month of their sentence, compared to 17% in 2015.
Individuals receiving help/treatment for drug use while in prison	19% 2017	25% 2017	Declining	Increase to 25% by 2019	In 2017, 19% of prisoners surveyed in HMP Inverness reported receiving help and/or treatment for drug use during their sentence, compared to

Indicator	HADP Current Value	National Current Value	Performance based on trend	Target	Performance Commentary
					24% in 2015.
Individuals drunk at the time of their offence	46%	39%	Declining	Reduce to 40% by 2020	Highland's figure has increased from 41% in 2015 to 46% in 2017 and is above the national figure.
	2017	2017			
Individuals concerned about drug use on	23%	22%	Improving	Reduce to 20% by 2019	In 2017, 23% of prisoners surveyed in HMP Inverness reported being worried that drug taking
release from prison	2017	2017			will be a problem on release, compared to 34% in 2015.
Individuals receiving help/treatment for	29%	25%	Improving	Increase to 35% by 2017	In 2017, 29% of prisoners surveyed in HMP Inverness reported receiving help for alcohol
alcohol use while in prison	2017	2017			problems during their sentence, an increase from 18% in 2015.
Individuals concerned about alcohol use on	20%	19%	Improving	Reduce to 18% by 2019	In HMP Inverness, 20% of prisoners surveyed in 2017 reported they were worried alcohol would be
release from prison	2017	2017			a problem on release which is a reduction from the figure of 28% reported in both 2015 and 2013.
National Outcome 6: E People live in positive, hea		-	nments where ald	cohol and drugs a	re less readily available
Percentage of 15 year old pupils who have ever	33.7%	35.6%	Improving	Reduce to 30% by 2016	The percentage of pupils aged 15 offered drugs has decreased significantly from 45% in 2006 and
been offered drugs	2013	2013			is consistent with the 2013 figure of 34%. This reflects the national trend.
Percentage of people perceiving that drug	7.7%	12.4%	Improving	Reduce to 5% by 2020	Highland's rate of perceived drug misuse has decreased since 2017 albeit this indicator is based
misuse / dealing is very or fairly common	2018	2018		,	on small sample sizes. Highland rates have been statistically significantly better than Scotland over a
in their neighbourhood					sustained period.
Percentage of people perceiving that rowdy	4.4%	11.1%	Improving	Reduce to 4% by 2019	The percentage of people perceiving that rowdy behaviour is common has reduced overall since
behaviour is very or fairly common in their neighbourhood	2018	2018			2007 and Highland rates have been statistically significantly better than rates for Scotland over a sustained period.

Indicator	HADP Current Value	National Current Value	Performance based on trend	Target	Performance Commentary
Rate of Premise licences in force (per 10,000 population aged 18 and over)	65.0 2018/19	37.9 2018/19	Maintaining	Reduce to 60.0 per 10,000 by 2020	The number of premise licenses in force remains stable at 65.0 per 10,000 population aged 18 and over (n=1243). Highland has statistically significantly more premise licenses in force compared to Scotland for the eight years reported.
Number of new Premise License applications refused on grounds of overprovision	0 2018/19	11 2018/19	Improving	No licenses greater than 40 square metres	There were 40 applications received during 2018/19, 26 on sale and 14 off sale only. There were no refusals reported on the grounds of overprovision. Three non-compliant applications were withdrawn in 2017 and one in 2018.
Proportion of people concerned about alcohol abuse in their local area	66% 2018	-	Maintaining	Decrease	In both 2017 and 2018, 66% of Highland residents surveyed reported feeling concerned about alcohol abuse in their local area, which was a decrease from 70% in 2016.
Proportion of people concerned about drug abuse in their local area	66% 2018	-	Declining	Decrease	In 2018, 66% of Highland residents surveyed reported feeling concerned about drug abuse in their local area, compared to 58% in 2015.
Proportion of people concerned about serious organised crime in their local area	48% 2018	-	Declining	Decrease	In 2018, 48% of Highland residents surveyed reported feeling concerned about serious organised crime in their local area, which is the highest proportion since reporting commenced in 2012.
Number of alcohol related house dwelling fires	15 2019	-	Maintaining	Decrease	In Highland, there were 15 alcohol related house dwelling fires in 2019, which remains the same as the previous figure reported 2015.
National Outcome 7: S Alcohol and drugs services treatment into sustained re	s are high qua	ality, continua	ally improving, effi	cient, evidence-	based and responsive, ensuring people move through
Number of screenings (using a validated screening tool) for alcohol use disorders	53,338 2018/19	-	Maintaining	Increase	There were 53,338 alcohol screenings delivered across NHS Highland in 2018/19, a 0.4% increase on the 2014/15 baseline of 53,131 screenings.

Indicator	HADP Current Value	National Current Value	Performance based on trend	Target	Performance Commentary
Percentage of alcohol brief interventions delivered in accordance with HEAT standard guidance	158% 2018/19	132% 2018/19	Improving	Maintain above 100% of HEAT standard	There were 5,831 interventions delivered across NHS Highland in 2018/19, achieving 158% of the HEAT performance standard. Highland has achieved the HEAT standard in each of the last eight years.
Percentage of clients waiting no more than 3 weeks from referral to a specialist drug and alcohol service and starting treatment	86.5% 2018/19	93.6% 2018/19	Declining	Sustain 90% standard from 2019/20	In 2018/19, 86.5% of drug and alcohol clients were commenced treatment within 3 weeks of referral, compared to 83.7% in 2017/18. Highland ADP is in the lower quartile and one of ten ADP areas not meeting the 90% standard.
Number of naloxone kits issued per 1,000 people with problem drug use aged 15-64 include intramuscular and intranasal supplies	122.0 2017/18	136.5 2017/18	Improving	Increase rate above 200 per 1,000 by 2019	The rate for issue of naloxone kits across NHS Highland peaked in 2015/16 at 454 kits and decreased in the following 2 years to 242 in 2017/18. Local data indicates that figures for 2018/19 show an improved position above the performance of the previous 2 years.
Percentage of individuals who have had a near fatal overdose engaged with services	-	-	No trend	No target due to lack of data	Non-fatal overdose alert system restarted September 2016 due to changes in Scottish Ambulance Service IT system. Further changes planned that should improve data quality.

#### CORE OUTCOMES FOR ALCOHOL & DRUG PARTNERSHIPS (ADPs)

1. HEALTH: People are healthier and experience fewer risks as a result of alcohol and drug use: a range of improvements to physical and mental health, as well wider wellbeing, should be experienced by individuals and communities where harmful drug and alcohol use is being reduced, including fewer acute and long-term risks to physical and mental health, and a reduced risk of drug or alcohol-related mortality.

2. PREVALENCE: Fewer adults and children are drinking or using drugs at levels or patterns that are damaging to themselves or others: a reduction in the prevalence of harmful levels of drug and alcohol use as a result of prevention, changing social attitudes, and recovery is a vital intermediate outcome in delivering improved long-term health, social and economic outcomes. Reducing the number of young people misusing alcohol and drugs will also reduce health risks, improve life-chances and may reduce the likelihood of individuals developing problematic use in the future.

3. RECOVERY: Individuals are improving their health, well-being and life-chances by recovering from problematic drug and alcohol use: a range of health, psychological, social and economic improvements in well-being should be experienced by individuals who are recovering from problematic drug and alcohol use, including reduced consumption, fewer co-occurring health issues, improved family relationships and parenting skills, stable housing; participation in education and employment, and involvement in social and community activities.

4. FAMILIES: Children and family members of people misusing alcohol and drugs are safe, well-supported and have improved life-chances: this will include reducing the risks and impact of drug and alcohol misuse on users' children and other family members; supporting the social, educational and economic potential of children and other family members; and helping family members support the recovery of their parents, children and significant others.

5. COMMUNITY SAFETY: Communities and individuals are safe from alcohol and drug related offending and anti-social behaviour: reducing alcohol and drug-related offending, re-offending and anti-social behaviour, including violence, acquisitive crime, drug-dealing and driving while intoxicated, will make a positive contribution in ensuring safer, stronger, happier and more resilient communities.

6. LOCAL ENVIRONMENT: People live in positive, health-promoting local environments where alcohol and drugs are less readily available: alcohol and drug misuse is less likely to develop and recovery from problematic use is more likely to be successful in strong, resilient communities where healthy lifestyles and wider well-being are promoted, where there are opportunities to participate in meaningful activities, and where alcohol and drugs are less readily available. Recovery will not be stigmatised, but supported and championed in the community.

7. SERVICES: Alcohol and drugs prevention, treatment and support services are high quality, continually improving, efficient, evidence-based and responsive, ensuring people move through treatment into sustained recovery: services should offer timely, sensitive and appropriate support, which meets the needs of different local groups (including those with particular needs according to their age, gender, disability, health, race, ethnicity and sexual orientation) and facilitates their recovery. Services should use local data and evidence to make decisions about service improvement and re-design.