Scoping Study of Interventions for Offenders with Alcohol Problems in Community Justice Settings

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Shirley McCoard, Kate Skellington Orr, Jacqueline McKellar, Christopher Paterson, Gordon Scott; MVA Consultancy
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Research Advisory Group Members
Andrew McAuley, NHS Health Scotland
Iain MacAllister, Scottish Government
Sharon Grant, Scottish Government
Lesley Graham, ISD, National Services Scotland
Executive Summary

Background
This report presents the findings of a scoping study of alcohol problems among offenders in the community justice setting. It is one of three studies that make up the portfolio of the Alcohol and Offenders Criminal Justice Research Programme which is led by NHS Health Scotland and funded by the Scottish Government.

The overarching aim of the portfolio is to understand better the extent and nature of alcohol problems in offenders, and which effective interventions can address them, recognising that the criminal justice setting is an opportunity to detect and intervene in an often ‘hard to reach’ population.

This research sought specifically to inform policy and practice by mapping plans, arrangements and procedures in place within local areas throughout Scotland to identify and intervene with offenders with alcohol problems, as part of the criminal justice process or otherwise, in community settings, including identifying emerging good practice. It also sought to establish what is known about the effectiveness of interventions for this group.

Methods
The research adopted a two-stage, mixed method approach, including a brief review of the evidence from both published literature and routine data and primary research interviews with Community Justice Authority (CJA) Chief Officers and local partners.

The review of evidence focussed on both published articles and grey literature covering prevalence, trends, screening and interventions for alcohol problems in offenders in the community justice setting. The review concentrated on the community justice setting and, although research was uncovered from the prison, primary care and other settings which may have contained transferable messages, coverage of this material was not in scope of the current study.

For the primary research, CJA Chief Officers were interviewed in the first instance and provided the contact details for relevant partner organisations who they felt would be able to provide more in-depth information and local knowledge. Follow-up depth interviews (by phone and face-to-face) and electronic evidence gathering with core CJA partners was then undertaken to explore in more detail some of the information provided by CJA Chief Officers which was considered by the researchers to be of greatest relevance to the research scope.

Review of Evidence
The review of evidence revealed that there is a limited amount of routine data relating to the prevalence of alcohol problems in offenders and associated offending.
Information on the contribution of an offender’s alcohol consumption to the offence is not routinely collected as part of police reporting or recording procedures. Alcohol-related offending can only be estimated through alcohol-related offences which are 100% attributable to alcohol (e.g. drunkenness / drink-driving) or in official criminal justice statistics where alcohol has been identified as a significant contributory factor in the offence, as determined by the court e.g. homicide. Further, such statistics are often influenced by local police initiatives which take place at given points in time, and so it is difficult to interpret if a change in statistics reflect changes in prevalence of alcohol-related offending, or differing enforcement and identification of perpetrators.

Criminal Justice Social Work Statistics provide an indicator of the proportion of community based disposals by area including those with alcohol treatment/education conditions attached. Data from 2009/10 show that, at the national level, the number of conditions of alcohol treatment/education attached to Probation Orders was 1208, representing 11% of all conditions awarded.

Data from the Scottish Prison Service Prisoner Survey 2009 show that around half of those in receipt of a custodial sentence or on remand in a Scottish Prison report being drunk at the time of their offence. Data relating specifically to young offenders showed that more than three quarters (77%) of young offenders reported being drunk at the time of their offence. The recently published results of the Scottish Crime and Justice Survey (SCJS) 2009/2010 reported that a large proportion of victims (62%) perceived the offender to be under the influence of alcohol at the time of the offence for violent crimes.

NHS Quality Improvement Scotland undertook the Scottish Emergency Department Alcohol Audit in 2006 which provided an indicator of alcohol-related assaults and violence, based on attendances in Emergency Departments. The national audit, covering 16 Emergency Departments in Scotland, showed that at least 70% of all assaults may be alcohol-related. With an estimated 110 assaults presenting to Emergency Departments each day in Scotland, this means that there may be at least 77 alcohol-related assaults presenting each day.

Although survey and other data highlight positive associations between alcohol and offending, there is relatively little published research on interventions which engage with offender groups to identify, screen and intervene with those who have alcohol problems.

Among the research that has been undertaken, there are some examples of the application of the Alcohol Use Disorders Identification Test (AUDIT) for screening in police custody and probation settings, which show varying levels of operational success in identifying offenders with alcohol problems.

Whilst there is a considerable body of evidence that supports the effectiveness of Alcohol Brief Interventions (ABIs) delivered in the primary care setting, there is limited evidence, to date, that specifically explores the suitability or effectiveness of using ABIs in the criminal justice setting. Indeed, there is limited evidence that explores the suitability or effectiveness of alcohol interventions or treatment of any kind with this group. Indeed, much of the evidence in this population relates
to drugs or combined drug and alcohol interventions, rather than alcohol interventions per se.

One effective intervention that is evident from the published literature is Arrest Referral, a scheme which has proven to be effective at targeting offenders with both alcohol and drug misuse problems early in their criminal justice journey, i.e. at the point of initial police detention. Research in Scotland has shown that AR can be successful in the outcomes of identifying individuals with significant drug and alcohol problems and offending behaviour linked to substance misuse, and linking arrestees into appropriate services. There is, however, limited evidence to date which shows that AR improves the outcomes of reducing alcohol consumption and/or harm.

Evidence of effective interventions for offenders post sentence or post-release is also limited. The absence of research literature does not, of course, necessarily mean the absence of practice, rather that work that is being done may not be systematically recorded or documented, or if it is recorded, it is not readily identifiable in the literature.

**Local Practice**

Interviews and evidence gathering at the CJA level revealed a strong awareness among partners for a need to focus more on tackling alcohol problems in offenders in Scotland and this is reflected in Local Area Plans.

The research revealed a multitude of generic and specialist drug and alcohol services around the country, many of which will engage with offenders as part of their role, but which do not actively target this client group or tailor their services to offenders’ needs. The number of interventions, services and future plans to engage specifically with offenders with alcohol problems is far more restricted, especially when focussing specifically on community justice clients.

The research has shown considerable support across Scotland for Arrest Referral, and it seems that this method might usefully be applied more widely to identify and refer those at risk. The research has also shown that there is already awareness among interviewees of how ABIs can be incorporated into the criminal justice process. Several Local Authorities appear to have already undertaken training of staff to deliver ABIs for community justice clients although this is being applied differently in local jurisdictions.

It does seem apparent that there is little proactive identification of offenders with alcohol problems outwith routine Criminal Justice Social Work risk assessments and SERs. Most interventions appear to occur post-sentence, although there are some interventions which occur earlier in the process, for example, at police arrest and detention stage.

Across all CJA areas, two groups emerge as ‘priority groups’ for action, these being young people and women offenders. There are numerous examples of specifically tailored services into which women and young people can be referred (both mainstream and some specifically for offenders), but again there is little
evidence of early intervention work for women or screening at early points in the criminal justice system for either group.

The scoping study has not identified many practical uses of care pathways for offenders with alcohol problems between statutory and other support and treatment organisations. There is also a limited availability of offender specific services as many of the interventions and treatments that are available to tackle the alcohol problems of offenders are delivered by generic ‘substance misuse’ programmes or services. It has therefore been difficult to extrapolate specific referral routes or interventions for offenders with alcohol problems independently.

There appears to be considerable variation both between and within CJAs, with regards to the level and nature of engagement with Alcohol and Drug Partnerships (ADPs), Health Boards and Community Health and Care Partnerships (CHCPs). The research interviews suggested that there is some scope for ensuring that local strategic plans and priorities are more greatly aligned between criminal justice and health partners. In areas where there is closer joint working between CJAs and ADPs, these partnerships appear to be working well.

Several examples of good practice were identified which may provide reference for the development of future initiatives elsewhere. Despite this, there seems to be less evidence-based development of services (especially evidence to inform the continuation of existing services) and little routine monitoring or evaluation of services and interventions that are introduced.

**Conclusions**

The scoping study has shown that there is significant evidence pointing to the extent and nature of alcohol problems in offenders. It has also shown that there is little in the published literature about what works in addressing alcohol problems among offenders, although the body of evidence is growing. At present, there appears to be no clear pattern of referral activity or standard practice locally across Scotland with regard to plans, arrangements and procedures in place to identify and intervene with offenders with alcohol problems.

Having said this, there are numerous examples of good practice locally, both with regard to partnership working, and to effective screening and interventions, although the absence of formal monitoring and evaluation data makes it difficult to substantiate. Most interventions available for offenders with alcohol problems were developed locally, with several of these interventions being cited as examples of good practice by local partners. The positive comments made regarding these services provides a good opportunity to share examples of best practice outwith the local area, something that has already been undertaken among a number of CJAs, and could be further extended.

Encouragingly, what the research has shown is that the need to focus on alcohol and offending is well recognised by health and criminal justice partners alike, and
there is a willingness to move forward to meet future needs in line with national priorities.
1. Introduction

1.1 Background
The links between alcohol consumption and offending are well established, with research evidencing strong associations between alcohol, violence and other serious offences (Hamlyn and Brown, 2007; MacLeod, et. al., 2009; Scottish Government, 2008 and 2010). Recent surveys have shown that, in Scotland, around 50% of those in receipt of a custodial sentence or on remand in a Scottish Prison, reported being drunk at the time of their offence (Scottish Prison Service, 2009), with an even greater proportion of young offenders (77%) reporting drinking at the time that their offence was committed (Scottish Prison Service, 2010).

Criminologists and aligned professionals have long acknowledged a need to tackle alcohol misuse in addressing offending and re-offending, especially among young people. The challenge exists to tackle the wider harm that is caused to individuals, their families and to society, with the estimated cost of alcohol-related crime being around £700 million per year (Scottish Government, 2010).

With an increasing focus on alcohol and the personal and social harms associated with its misuse in the national political agenda, it seems timely that research be undertaken to establish what is known about alcohol problems among offenders in Scotland, as well as plans and arrangements already in place which seek to address these problems.

This report presents the findings of a scoping study of alcohol problems of offenders in the community justice setting. It is one of three studies that make up the portfolio of the Alcohol and Offenders Criminal Justice Research Programme which is led by NHS Health Scotland and funded by the Scottish Government. The overarching aim of the portfolio is to understand better the extent and nature of alcohol problems in offenders, and which effective interventions can address them, recognising that the criminal justice setting is an opportunity to detect and intervene in an often 'hard to reach' population. Reducing alcohol problems in offenders has the potential for wider outcomes such as a reduction in re-offending and health inequalities.

1.2 Policy Context
In 2006, the then Scottish Executive published the National Strategy for the Management of Offenders which had as its core aim the reduction of re-offending. It set out a common set of objectives to give a shared focus to reduce re-offending to all those working with offenders. Under the Strategy, agencies involved in the management of offenders are working to enhance services to offenders to achieve positive outcomes such as improved physical health and

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1 NHS Health Scotland (2010)
wellbeing, as well as increased education and employability. The Strategy included a vision to achieve ‘sustained or improved physical and mental wellbeing’ and ‘reduced or stabilised substance misuse’ as some of the core outcomes for offenders.

The outcomes identified in the Strategy were further supported by Recommendation 18 of Scotland’s Choice, Report of the Scottish Prisons Commission (2008), which recommends that the Government promote recognition across all Government departments, all public services, all sectors and all communities of a duty to reintegrate both those who have paid back in the community and those who have served their time in prison. This requires a continuity of care for individuals both prior to, during and post involvement with the criminal justice system. The Scottish Government is taking these recommendations forward as part of the reducing re-offending programme outlined in the strategy document Protecting Scotland’s Communities: Fair, Fast and Flexible Justice (Scottish Government, 2008).

In December 2007, the Action Plan for Better Health, Better Care was published which also outlined the need to concentrate efforts on tackling alcohol and drug misuse and improve mental health and wellbeing across Scotland. The Action Plan acknowledged the need to improve community safety, health services in Scottish prisons and tackling drug and alcohol misuse (Scottish Government, 2007).

The following year, the Scottish Government and the Convention of Scottish Local Authorities (COSLA) published Equally Well, report of the ministerial task force on health inequalities (Scottish Government, 2008). Importantly, the report set out a clear agenda to improve health and wellbeing across Scotland and identified offenders as one of a number of particular groups in need of targeted interventions to address alcohol misuse. Key themes supporting the Equally Well recommendations reflect many of those identified in the Management of Offenders Strategy, including education, information and engagement for young people, mental health and well being, employment, alcohol, drugs and violence prevention, joining up drug treatment, and domestic violence, amongst others.

The focus on young people was seen in the publication of the Youth Justice Framework for Scotland, Preventing Offending by Young People: A Framework for Action (Scottish Government, 2008), which highlighted the need to develop evidence-based interventions for young people whose offending is linked to substance misuse, building on actions in the Scottish Government’s drugs and alcohol strategies.

Most recently, Changing Scotland’s Relationship with Alcohol: A Framework for Action (Scottish Government, 2009) sets out the Scottish Government’s long term strategic approach to tackling alcohol misuse. Supported by a record investment in preventative and treatment services, the Framework set out over 40 initiatives aimed at addressing Scotland’s drinking culture. One of these commitments was to conduct a review of current plans and practice for the
identification and treatment of offenders with alcohol problems in criminal justice settings and the identification of good practice. These developments are set within a policy and practice context which acknowledges alcohol problems in the population and increasingly so the alcohol problem in offenders, along with the importance of applying a person-centred, recovery orientated approach underpinned by the NHS commitment to quality of services. Collectively, these policy documents highlight the main issues and future priorities for alcohol and offender policy and plans in Scotland.

1.3 Local and National Structures

1.3.1 Community Justice Authorities
Community Justice Authorities (CJAs) were established to drive forward much of the policy set out in the National Strategy for the Management of Offenders (2006), and were legislated for under the Management of Offenders (Scotland) Act 2005. The Act placed a statutory duty on the CJAs, Local Authorities and the Scottish Prison Service to work together which is defined as a “duty to cooperate”.

The primary purpose of CJAs is to bring together a broad range of agencies, with the jointly agreed task of reducing re-offending, to achieve a more co-ordinated approach to delivering quality services for offenders, their families, victims and the community at a local level. It is a partnership arrangement in recognition that this is a complex landscape and that no single agency can manage a reduction in re-offending alone.

Established in 2007, CJAs produced initial Area Plans and associated action plans for the period 2007-2010. At the time that this research was undertaken, all CJAs were in the process of finalising their new Area Plans for 2011-2014.

CJAs allocate Section 27 funding to constituent Local Authorities for the delivery of Criminal Justice Social Work (CJSW) Services. Under Section 27 of the Social Work (Scotland) Act (1968) Scottish Ministers may pay to a Community Justice Authority such amounts incurred by a Local Authority in providing a “relevant service”. The definition of “relevant service” includes:

- submitting reports to Courts and Parole Board as required;
- supervising offenders placed on community orders or released from custody on supervision; and
- a service enabling a Local Authority to comply with the Area Plan.

The Management of Offenders (Scotland) Act 2005 provides that the CJA Area Plan is for the purpose of “reducing re-offending by relevant persons”. A relevant person is an individual under supervision or a person in custody. Funding is therefore restricted to resourcing services which are provided directly to offenders.
Relevant criminal justice services offered by voluntary organisations are also funded via the CJA, and those which receive in excess of £100,000 per year are deemed “statutory partners” of the CJA.

CJAs contribute to the Scottish Government’s Purpose of creating a more successful country, with opportunities for all to flourish through increasing sustainable economic growth, as set out in the National Performance Framework, *Scotland Performs (Scottish Government, 2007)*. This describes the desired national outcomes and associated progress with regard to five key strategic objectives – healthier, safer and stronger, wealthier and fairer, smarter and greener.

Progress is tracked by seven Purpose Targets which are supported by 15 National Outcomes and 45 associated National Indicators. Of the 15 National Outcomes detailed in ‘Scotland Performs’ those most relevant to the work of CJAs are:

- National Outcome 9 – We live our lives safe from crime, disorder and danger
- National Outcome 11 – We have strong, resilient and supportive communities where people take responsibility for their own actions and how they affect others
- National Outcome 15 – Our public services are high quality, continually improving, efficient and responsive to local people’s needs

Crime, offending and public safety are closely linked to other social and economic factors, which are also reflected in the following national outcomes:

- National Outcome 2 – We realise our full economic potential with more and better employment opportunities for our people
- National Outcome 3 – We are better educated, more skilled and more successful, renowned for our research and innovation
- National Outcome 6 – We live longer, healthier lives
- National Outcome 7 – We have tackled the significant inequalities in Scottish society
- National Outcome 8 – We have improved the life chances of children and young people and families at risk

These outcomes are delivered locally through the Concordat with Local Government and the Single Outcome Agreement (SOA) with local Community Planning Partnerships (CPPs).

1.3.2 Local Authorities

Each of Scotland’s Local Authorities is funded to provide Criminal Justice Social Work services. Staff in these services, organised through teams, have a responsibility to work with offenders, victims and the wider community to reduce re-offending and to improve community safety. Social work staff also provide reports locally to courts to assist with sentencing decisions.
In the community, CJSW is responsible on behalf of Scottish Courts for supervising those offenders who have been subject to a community disposal as well as providing statutory supervision (Throughcare) for certain offenders on release from prison. The Throughcare Addictions Service (TAS) is operated in conjunction with the SPS (through its contract with Phoenix Futures) and Local Authorities. Whilst the TAS was originally predicated on addressing problem drug misuse it also covers alcohol. Funding of around £2m per annum is provided to Local Authorities to deliver the community aspect of this referral service and there are around 1500 referrals each year. Although not specifically a service for offenders given a community disposal, the remit of TAS to provide support for offenders once released back into the community makes it worthy of note for this research.

In addition to providing a supervisory service to offenders directly, CJSW teams will also refer offenders to other Local Authority teams (housing, education, etc) and can refer clients into other mainstream services within their local communities. Specialist services also exist in some areas wherein Criminal Justice Social Workers engage directly with key groups of offenders.

1.3.3 Alcohol and Drug Partnerships
Alcohol and Drug Partnerships (ADPs), which replaced Alcohol and Drug Action Teams (ADATs), were established in 2009 to strengthen the planning and delivery of services to tackle substance misuse. The overarching remit of ADPs is to co-ordinate local effective action to improve outcomes for those affected by problematic alcohol and drug use. ADPs work in partnership with the Crown Office and Procurator Fiscal Services, the National Health Service (NHS), Local Authorities, the Scottish Prison Service, the Police, Fire and Rescue, as well as organisations in the voluntary sector, with partnership arrangements varying between areas. The overall purpose is directed by the Scottish Government, with key responsibilities to develop, drive and secure the delivery of a strategy on drug and alcohol problems, with services being locally tailored in response to an assessment of need. The Partnerships are a result of an agreement between the Scottish Government, Councils and the NHS, signed by Ministers and COSLA.

Collectively, CJAs (at a strategic level), Local Authority CJSW teams and ADPs (at an operational level) are the three main partners who have responsibility for engaging with offenders with alcohol problems in the community justice setting. They operate alongside a number of other partners in the delivery of services, as well as in the identification of clients and onward/inward referral of clients to ensure that individual needs and local targets are met.

1.4 Aims and Objectives of the Research
Against this backdrop, the current research sought to inform policy by mapping plans, arrangements and procedures in place within local areas throughout Scotland to identify and intervene with offenders with alcohol problems, as part of
the criminal justice process, or otherwise, in community settings including identifying emerging good practice. It also sought to establish what is known about the effectiveness of interventions for this group. The specific objectives of the research were:

- to review the relevant literature/documentation on effective interventions for identifying and treating offenders with alcohol problems in community justice settings
- describe, where possible, the nature and scale of alcohol problems of offenders in community justice settings from routinely available data
- to map and describe what plans and arrangements are in place to identify, intervene and direct into treatment offenders with alcohol problems as either (a) part of a Criminal Justice process or (b) as a non Criminal Justice process across Scotland
- to map and describe the interventions that are being delivered and the extent to which they fit with good practice (e.g. are interventions evidence based /accredited)
- to identify and report on gaps in service provision.

1.5 Method and Scope
The research adopted a two-stage, mixed method approach, including a review of evidence, both literature and secondary data; and primary research interviews with CJA Chief Officers and local partners. Given the timescale and scope for the work, it was not possible to engage with all partners in each locality and, for the most part, engagement was with CJA Chairs and their Deputes, with ADP representatives and with Criminal Justice Social Work staff. The police, prisons, Scottish Court Service (SCS) and Crown Office and Procurators Fiscal Service (COPFS) were not contacted directly, nor were any of the prisons in the Scottish Prison Service (SPS) estate. Instead, the research relied upon information regarding the relative inputs of these groups being conveyed by CJA Chief Officers. It was assumed that, as the main funders and strategic leads for community justice, they would be able to provide the level of information required for this study.

1.5.1 Review of Evidence
The objective of the review of evidence was to review the relevant literature/documentation on effective interventions for identifying and treating offenders with alcohol problems in community justice settings. It is important to note at the outset that it was not intended that the scoping study be a full systematic review of the evidence but, rather, would focus on ‘mapping’ relevant literature in the field of interest. This involved examining the extent, range and nature of research activity; summarising the research findings; and identifying gaps in the existing literature.
A list of key search terms was developed for the desktop exercise, and is attached as Appendix A. These words were initially ‘searched’ in relation to Scotland, before widening the search to the rest of the UK and other English speaking countries. The work also concentrated primarily on documents published in the last five years before widening the search to documents published pre-2005.

The search strategy was designed to allow coverage of a range of publications including policy/research reports, books, journals, public media and online resources. The strategy was also designed to access specialist knowledge of effective interventions and treatment options for offenders with alcohol problems in community justice settings. The main document and data sources that were searched are also listed in Appendix A. Other ad hoc publications were identified using the Google search engine. Additional evidence already known to the researchers was also automatically included in the review. The document search ceased when there was considerable overlap in the evidence identified using the key search criteria, with different searches identifying the same references.

The objective of the analysis of routine data was to describe, where possible, the nature and scale of alcohol problems of offenders in community justice settings within each of the CJAs. It was intended that this data analysis would allow the findings around treatments, interventions and future plans to be set in a broader context.

Early on in the desktop exercise, it became apparent that the availability of secondary data was limited. The main data identified for the secondary data analysis were Criminal Justice Social Work statistics which show disposals data for Community Service Orders and Probation Orders and are published routinely alongside statistics to show the proportion of Probation Orders that have alcohol treatment/education conditions attached (Scottish Government, 2010).

1.5.2 Research Interviews

A staged approach to the consultation was adopted, involving an initial letter from the Scottish Government to CJA Chief Officers. This was followed by telephone and email contact with the Chief Officer of each CJA, to explain the background and purpose of the work and to seek the details of the partners represented in the partnership. A meeting was then arranged with each CJA Chief Officer (and in some cases Planning/Information Officer also attended) to collect data relating to partnership plans and arrangements to deliver them; funding; referral pathway(s) (if any); Service Level Agreements; and examples of good practice. CJA Chief Officers then provided the contact details for relevant partner organisations who they felt would be able to provide more in-depth information and local knowledge.

Follow-up depth interviews (by phone and face-to-face) and electronic evidence gathering with core CJA partners was then undertaken to explore in more detail some of the information provided by CJA officers and which was considered by
the researchers to be of greatest relevance to the research at hand. All ADP Co-
ordinators in each of the 30 ADPs were contacted. A response was provided from the majority of ADPs in the form of a face-to-face meeting, a telephone interview, or email contact. In addition, all CJSW Operations Managers/Service Managers were contacted in each of the 32 Local Authority CJSW teams. Again, a response was received from the majority of CJSW teams through face-to-face meeting, telephone contact or email contact. Information was also sought from a small number of additional partners who were made known to the researchers by one of the key partners identified above, for example, Alcohol Development Officers within ADPs. Evidence generated from the consultation activity was indexed and summarised and considered in relation to the findings from the secondary data analysis for each of the eight CJA areas.

1.6 Research Caveats and Other Factors Influencing the Research

It became apparent early on that it would be difficult to provide an objective definition of problematic alcohol use, since the definition of ‘alcohol problems’ varied considerably among consultees. Similarly, the ethos of community justice is that it involves the community in the restorative process for offenders. It is, therefore, a catchall for a number of formal sentencing options and less formal programmes for reintegrating offenders back into their local communities, and to make a positive contribution as citizens. For the research, a decision was made to impose boundaries to ensure that the work remained focussed, and so community justice settings were largely defined in sentencing terms, i.e. to include offenders in receipt of a community disposal (community service orders); probation orders (with and without a requirement for unpaid work), supervised attendance orders; drug treatment and testing orders; community reparation orders, supervised bail orders, and those on parole who were released on licence.

As this work had a national focus, the mapping of service provision was considered across each of the eight CJAs. Although secondary data analysis and consultation work was designed to achieve national coverage, where possible, data is presented at the local level. Given variations at the local level, it was not possible to provide a generic map of accountability and funding arrangements between statutory and other local organisations across the country. Similarly, it was outwith the scope of the current research to explore extensively all of the funding that is allocated to tackling alcohol and offending across the country, although the researchers acknowledge that funding is provided by a number of sources nationwide, and that sources differ by area.

Finally, it is important to note that this scoping study was carried out over a three month period in the summer of 2010. At the time of writing, the interventions, services, plans and arrangements that are reported are up-to-date; however, there will inevitably be change in structures, processes and practices over time. The research is also constrained insofar as it reflects only the knowledge, experience and views of those who took part in the interviews and data gathering, and so some services, plans and arrangements may have been
missed if they were not known among respondents. The research does not, therefore, claim to provide an exhaustive or comprehensive reference document, instead, it must be seen as iterative and only indicative of the current position in relation to what is being done to tackle alcohol and offending in the community justice setting in Scotland.

1.7 Report Structure
The following chapter sets out what is known about the nature and scale of alcohol problems of offenders based on findings of a review of the evidence. The remainder of the report presents findings from the research interviews in each of the CJAs, along with the other qualitative data gathering that took place in each area, describing the current and planned actions to address the alcohol problems of offenders in each area. An overview of the key findings from the work is provided at the end of the report, along with a discussion of their implications.
2. Review of Evidence

The review of evidence sought to provide a platform from which to understand the various ways in which alcohol misuse has (to date) and could (in the future) be tackled in the community justice setting, either as part of the criminal justice process, or outwith. Lessons were sought from other countries to try and ascertain what is already known about ‘what works’ for tackling alcohol problems among community justice disposal recipients, and those who engage with the criminal justice system at different access points.

The review of evidence focussed on research and published articles covering prevalence, trends, screening, and interventions for alcohol problems of offenders in the community justice setting. The review focussed specifically on the community justice setting and, although research was uncovered from the prison, primary care and other settings which may have contained transferable messages, coverage of this material was not in scope of this study.

2.1 Nature and Scale of the Problem

The links between alcohol and crime have traditionally been researched in the context of either alcohol-related offending or alcohol-related victimisation. Whilst it is difficult to measure accurately the impact of alcohol on these two outcomes, a number of perceptual and attitudinal surveys have been undertaken over the years which provide strong evidence for a positive association between alcohol and crime.

Data from the Scottish Prison Service Prisoner Survey 2009 show that 50% of those in receipt of a custodial sentence or on remand in a Scottish Prison report being drunk at the time of their offence (Scottish Prison Service, 2009). This figure has risen in recent years from 40% reported in the equivalent 2005 survey. When asked about alcohol use/dependency inside and outside prison, almost one in four prisoners (24%) reported that drinking affected their ability to hold down a job, and over one third of prisoners (38%) noted that their drinking affected their relationship with their family (Scottish Prison Service, 2009). Data relating specifically to young offenders showed that more than three quarters of young offenders (77%) reported being drunk at the time of their offence, and that one in four (27%) were worried that alcohol would be a problem for them upon release (22% of adult prisoners reported the same concern) (Scottish Prison Service, 2010). The data highlight that, not only is alcohol contributing to offending behaviour, especially among young people, but that it is a relationship that is becoming more prevalent in the perpetration of offences over time.

While the Scottish Prisoner Survey and other studies have shown links between alcohol and generic offending, perhaps the area that is most strongly evidenced in the research literature and statistics is the link between alcohol and violent crime. The recently published results of the Scottish Crime and Justice Survey (SCJS) 2009/2010 showed that a large proportion of victims perceived the offender to be under the influence of alcohol at the time of the offence for violent
crimes (62%), up from 58% in 2008/9 (Scottish Government, 2010). This was
greater than the proportion who perceived the perpetrator to be under the
influence of drugs (26% for violent crimes), and was greater than the proportion
(50%) found in the British Crime Survey (BCS) in England and Wales in 2009/10.
Data from the 2006 Scottish Crime and Victimisation Survey (SCVS) also
indicate a link between partner abuse and alcohol consumption, showing that
almost two-thirds (63%) of men and women who had experienced force said that
the perpetrator had been drinking alcohol on at least one abuse occasion
(Hamlyn and Brown, 2007). Whilst these figures are perceptual only, and
therefore cannot be taken as an accurate measure of the prevalence of alcohol-
related violence, they do indicate that alcohol may feature more frequently than
drugs as a contributory factor towards violent offences, that it features more
clearly in Scotland than in England and Wales, and that the relationship is
increasing over time.

McKinley et al (2009) examined the use of alcohol specifically as it related to
violence offences among male Young Offenders in Scotland. The research
brought together the findings of three surveys of young offenders’ drinking
Findings revealed that alcohol problems amongst young offenders appeared to
have increased over time. The proportion of participants who blamed their
current offence on drinking rose from around 30% in 1979 to 40% in 1996 and to
57% in 2007. Indeed, most of those who took part in the 2007 survey, and all of
those interviewed in 2008, linked their violent offending to alcohol use, viewing
alcohol not only as a cause of violent behaviour but also as increasing the
severity of outcomes related to their offending in terms of the consequences to
their victims (i.e. seriousness of injuries inflicted), themselves (in relations to the
seriousness of the charges involved and length of time spent in custody) and in
terms of wider costs to society. Importantly, alcohol-related problems reported by
participants were identified as existing from a young age representing part of a
wider culture of drinking and violence within their families and local
neighbourhoods. Though a number of participants were identified by the
researchers as demonstrating clear alcohol-related problems, few had received
treatment prior to the study taking place.

The World Health Organisation (WHO) have also published evidence to show
links between alcohol and interpersonal violence, which suggests that alcohol
reduces self-control and the ability to process incoming information which makes
drinkers more likely to resort to violence in confrontations (WHO, 2010). It further
suggests that alcohol reduces ability to recognise warning signs in potentially
violent situations, making people who have been drinking appear easy targets for
perpetrators. It reports that individual and societal beliefs that alcohol causes
aggressive behaviour can lead to the use of alcohol as preparation for
involvement in violence, or as a way of excusing violent acts. WHO report that
few countries routinely measure the involvement of alcohol in violence but, from
the data that are available, it seems that males are more likely than females to be
both perpetrators and victims of alcohol-related violence and that there is a
strong association between alcohol consumption and an individual’s risk of becoming a perpetrator or victim of violence (WHO, 2008).

Indeed, whilst research has most often focussed on alcohol as a contributor to offending behaviour, it has also been studied as a risk factor for victimisation, especially for violent crimes. Again, recent statistics from the Scottish Crime and Justice Survey show that just under one third (30%) of victims of violent crimes said that they had consumed alcohol immediately before the incident, compared to just 1% who reported that they had taken drugs immediately before the incident.

A systematic review carried out by the School of Health and Related Research (ScHARR) at the University of Sheffield showed “a consistent and statistically significant effect of alcohol on violence and injury” even when consumption levels are quite low (ScHARR, 2008). More locally, data published by NHS Quality Improvement Scotland, taken from a national audit of patients presenting to 16 Emergency Departments in Scotland, showed that at least 70% of all assaults presenting to emergency departments in Scotland may be alcohol-related (Scottish Emergency Department Alcohol Audit Group, 2006). With an estimated 110 assaults presenting to emergency departments daily in Scotland, this means that there may be at least 77 alcohol-related assaults presenting each day. In West Lothian, ad hoc work has also been undertaken to analyse data on assaults collected by Lothian and Borders Police and St John’s Hospital, to explore further links between alcohol and violence in the area (Lardner, 2008). The research concludes that hospital presentations occurred mainly at weekends/public holidays whereas police detentions are spread more evenly throughout the week. Further, most assaults were judged to be alcohol-related insofar as either the perpetrator, victim or both were under the influence of alcohol at the time of the assault.

Importantly, while such surveys indicate direct links between alcohol and offending, routine data also show that alcohol misuse per se is also often viewed as problematic in society. Data from the 2009/2010 Scottish Crime and Justice Survey show that 97% of respondents thought that ‘alcohol abuse’ was a problem in Scotland (compared to 96% in 2008/2009), including 74% who thought it was 'a big problem' (compared to 71% in 2008/2009) (Scottish Government, 2010). Such public concern about alcohol adds strength to the rationale for research and action which seeks to address wider problematic alcohol use, not only as a contributor to crime.

2.2 Criminal Justice Statistics
While surveys have been used to collect valuable data on self reported alcohol use at the time of offending, and on alcohol-related victimisation, there remains little objective evidence of the links between alcohol-related offending. Information on the contribution of alcohol consumption of offenders to their offence is not routinely collected as part of police reporting or recording procedures. It can only be estimated through alcohol-related offences which are
100% attributable to alcohol (e.g. drunkenness / drink-driving) or in official criminal justice statistics where alcohol has been identified as a significant contributory factor in the offence, as determined by the court e.g. homicide. Further, such statistics are often influenced by local police initiatives which take place at given points in time, and so it is difficult to know if statistics reflect an increase in prevalence of alcohol-related offending, or better enforcement and identification of perpetrators.

Criminal Justice Social Work Statistics provide an indicator of the areas in Scotland on the proportion of community based disposals including those with alcohol treatment/education conditions attached. The table below shows the number of orders per 10,000 of the population, and the number and proportion of conditions of alcohol treatment/education ascribed to each CJA and for Scotland as a whole.

Table 2.1 Probation Orders with alcohol treatment/education attached

<table>
<thead>
<tr>
<th>Area</th>
<th>Orders per 10,000 population</th>
<th>Number of Conditions</th>
<th>Number of Conditions of Alcohol Treatment/Education</th>
<th>Alcohol as Proportion of all Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fife and Forth Valley</td>
<td>25.9</td>
<td>1579</td>
<td>235</td>
<td>15%</td>
</tr>
<tr>
<td>Glasgow</td>
<td>37.7</td>
<td>1840</td>
<td>293</td>
<td>16%</td>
</tr>
<tr>
<td>Lanarkshire</td>
<td>29.7</td>
<td>1874</td>
<td>151</td>
<td>8%</td>
</tr>
<tr>
<td>Lothian and Borders</td>
<td>14.8</td>
<td>1197</td>
<td>153</td>
<td>13%</td>
</tr>
<tr>
<td>Northern</td>
<td>20.0</td>
<td>1295</td>
<td>25</td>
<td>2%</td>
</tr>
<tr>
<td>North Strathclyde</td>
<td>18.8</td>
<td>878</td>
<td>78</td>
<td>9%</td>
</tr>
<tr>
<td>South West Scotland</td>
<td>28.4</td>
<td>1130</td>
<td>151</td>
<td>13%</td>
</tr>
<tr>
<td>Tayside</td>
<td>21.2</td>
<td>822</td>
<td>122</td>
<td>15%</td>
</tr>
<tr>
<td>Scotland</td>
<td>23.8</td>
<td>10,615</td>
<td>1,208</td>
<td>11%</td>
</tr>
</tbody>
</table>

In 2009/10, the number of conditions of alcohol treatment/education attached to Probation Orders was 1,208, representing 11% of all conditions awarded.
The data show that, at the CJA level, Glasgow CJA has the highest number of Orders per 10,000 of the population, followed by Lanarkshire, South West Scotland and Fife and Forth Valley (all above the national average).

Glasgow CJA also has the highest proportion of alcohol treatment/education conditions awarded followed by Fife and Forth Valley CJA, Tayside CJA and then South West Scotland CJA. Lothian and Borders also has a higher proportion of alcohol treatment/education conditions than the national average.

The difference in distribution of such conditions around the country perhaps reflects wider social and demographic features of the relative populations, with Glasgow City having by far the greatest number of recorded crimes and offences per 10,000 of the population. Interestingly, the number of Orders in areas such as Aberdeen City and Edinburgh City is perhaps relatively low given that they have overall high numbers of crimes per se per head of population. Northern CJA, which encompasses Aberdeen, also has notably low use of alcohol treatment/education conditions attached to Probation Orders.

The introduction of Community Payback Orders (CPOs) in early 2011 will mean changes to the data that is recorded, so that trends in analysis of disposal data over time will be affected. Provisions for Community Payback Orders in Scotland were made in the Criminal Justice and Licensing (Scotland) Act 2010, giving Judges the ability to send offenders into the community to be punished through manual labour. The Order also allows for drug or alcohol interventions to be targeted at the offender (similar to a Probation Order with alcohol treatment/education), and will act as the main measure of community justice disposals for alcohol for future reference.

2.3 Screening

Despite the limitations in the data on the prevalence of offenders with alcohol problems, the rationale for tackling problematic alcohol use among offenders in order to minimise future harm to self and others is clear. The first step towards tackling offenders with alcohol problems is, therefore, ensuring that robust screening procedures are in place to allow these offenders to be identified and further referred for intervention and support.

Raistrick et al (2006) note that there are three main methods of identifying alcohol misuse, these being self report screening questionnaires, biological markers of recent alcohol consumption and clinical indicators identified by clinicians using clinical history or signs at physical examination. The former of these methods is the one that has been most widely adopted outside of primary health care settings.

A wide range of alcohol screening questionnaires have been developed and tested internationally, and are used in a variety of different settings, including the Alcohol Use Disorders Identification Test (AUDIT); the Fast Alcohol Screening Test (FAST); Paddington Alcohol Test (PAT); Michigan Alcoholism Screening Tool (MAST); Cut down Annoyed Guilty Eye-opener (CAGE) and CAGE Plus; T-
ACE (Tolerance/annoyed/cut down/eye opener) and TWEAK (Tolerance/Worried/Eye-opener/Amnesia/Cut down). The appropriateness and reliability of these tools varies greatly depending on the setting in which they are employed and the precise level or nature of problematic drinking that they seek to identify. At a high level, however, the AUDIT tool is often considered superior for the detection of hazardous and harmful drinking, and is the screening instrument of first choice in community settings (Raistrick et al, 2006). AUDIT is a questionnaire that consists of 10 questions about recent alcohol use, alcohol dependence symptoms, and alcohol-related problems. The AUDIT was developed by the World Health Organisation and has been validated for use in a wide range of settings. Importantly, it has also been tested in the criminal justice setting (described below); with research showing that it is effective at identifying offenders with alcohol problems.

Research in the North East of England (Newbury-Birch et al, 2009) compared the application of two methods of identifying alcohol-related need in clients on probation - the AUDIT and the Offender Assessment System (OASYS). While the former is designed to measure individuals’ patterns of alcohol use, the latter is used routinely in England and Wales by Her Majesty’s Prison Service and the National Probation Service to measure the risks and needs of criminal offenders, including questions on drug and/or alcohol misuse. The study reports that the AUDIT tool provides a more accurate measure of alcohol use disorder and concludes that current methods of identifying offenders with alcohol-related problems in probation are flawed, with many people going undetected. It advocates that alcohol assessment procedures need to be improved in the criminal justice setting in order to more accurately identify people with alcohol use disorders.

One study which has been carried out to explore the effectiveness of applying screening and brief interventions (SBI) for offenders held in police custody suites is research undertaken by Barton and Squire (2008). For this study, Devon and Cornwall Police, working in conjunction with the local drug and alcohol action team and support agency employed specialist alcohol workers located in custody suites to make contact with detainees as part of the general custody process. The project made contact with 4721 detainees and had an 82% participation rate. Using the AUDIT tool for screening purposes, around one third of detainees were found to be low risk drinkers, with a further 32% in the hazardous category, 11% harmful and 21% being possibly dependent.

More recently, and adopting the same methodology used by Devon and Cornwall Police, Grampian Police undertook alcohol screening of people held in police custody (Gibbons-Wood et al, 2010). The central aim was to record the prevalence of hazardous and/or harmful drinking amongst those in custody, with the AUDIT tool again being used to screen for excessive drinking. The project screened 207 detainees between March and December 2008, with 16% being classified as low risk, 28% being classified as hazardous or medium risk drinkers, 11% as harmful or high risk drinkers and 45% as possibly dependent. The proportion of higher risk drinkers was, therefore, considerably higher than that
found in the Devon and Cornwall study, and the research further showed that there was a higher level of harmful or dependent drinking amongst younger people in the Scottish sample. Although some of the differences may have arisen due to sampling or other geographical, social and cultural differences, the report again highlights how AUDIT may be applied in the criminal justice context to identify some of the most at risk drinkers.

2.4 Interventions
In the healthcare setting, one of the most effective and cost-effective interventions for alcohol misuse is the Alcohol Brief Intervention (ABI) approach. The NHS in Scotland defines ABIs as “a short, evidence based, structured conversation about alcohol consumption with a patient/service user that seeks in a non-confrontational way to motivate and support the individual to think about and/or plan a change in their drinking behaviour in order to reduce their consumption and/or their risk of harm” (NHS Education for Scotland, 2010). ABIs are delivered opportunistically, and are most effective for hazardous and harmful drinkers who are typically not already seeking help for an alcohol problem. There is a considerable and consistent body of evidence showing ABIs to be effective in reducing alcohol consumption to low-risk levels among hazardous and harmful drinkers in primary care settings (Scottish Intercollegiate Guidelines Network, 2003; Raistrick et al, 2006; Kaner, et al, 2007; NICE, 2010). Whilst this body of evidence supports the effectiveness of ABIs in primary care, there is little evidence to date that specifically explores the suitability or effectiveness of using ABIs in the criminal justice setting.

One example where the ABI has been used with a criminal justice population is the Barton and Squire (2008) research. Here, local workers provided appropriate follow-up interventions ranging from information regarding alcohol consumption for low risk drinkers, more detailed information and counselling for those classified as hazardous and harmful drinkers and direct intervention (onward assessment, referral and treatment) for those with dependencies (less than 1% were referred). The study failed to provide conclusive evidence of impact on offenders subsequent drinking and offending behaviours, and made only conjectural observations about the overall contribution of the project towards local decreases in violent crime and criminal damage in the period following the study. It does, however, provide evidence of the effective application of the AUDIT tool in a criminal justice setting and shows that willingness to participate in SBIs may be high among the detainee population. It also provides further evidence of the distribution and the prevalence of harmful, hazardous and dependent drinking among this group.

Research is currently underway for Scotland exploring the application of ABIs to the community justice setting, and a similar study is also underway in England.
and Wales, both of which are trying to address this gap in the literature. These aside, there is limited evidence that explores the suitability or effectiveness of alcohol interventions or treatment of any kind with this group.

One intervention that is evident across the literature is Arrest Referral (AR), a scheme which has proven to be effective at targeting offenders with both alcohol and drug misuse problems early in their criminal justice journey, i.e. at the point of initial police detention. AR is directed at people who abuse substances and are arrested and detained in police or court custody suites. It provides an opportunity for those individuals with drugs and/or alcohol issues to engage, on a voluntary basis, with drug and alcohol treatment and other appropriate services. The aim is to reduce both substance misuse and the offending behaviour that may be linked to that misuse.

In the Scottish context, an evaluation of the AR pilot schemes (Birch et al, 2006) showed that AR was successful in achieving contact with the main target groups – individuals with significant drug and alcohol problems and offending behaviour linked to substance misuse, and that it was also successful at linking arrestees into services. Participants who took part in the AR scheme reported that the provision of harm reduction information had been beneficial and that service information, in some cases, facilitated future contact with services. The pilot evaluation also indicated relative effectiveness of the scheme in that around three quarters of Edinburgh and Glasgow arrestees referred to agencies had attended at least one appointment and some had sustained contact with services after that initial appointment. This evaluation, and others, does not, however, provide robust evidence that AR reduces alcohol consumption or harm, and the main outcome does appear to be referral into treatment rather than direct intervention, unless this is specifically designed into the scheme.

Research from England on AR (Hopkins and Sparrow, 2006), presents a case study of a scheme that provided both direct intervention and referral into treatment specifically for detainees arrested for alcohol-related incidents. Based in Nottingham, the alcohol Arrest Referral scheme employed three nurses in a custody suite in Nottingham city centre and adopted a proactive approach wherein police screened arrestees to be interviewed. Nurses then interviewed arrestees and provided a brief intervention or onward referral. Arrestees were interviewed whilst still in custody, typically the morning after arrest when they were sober. The scheme encountered a number of problems with both implementation and evaluation, including, in terms of implementation, the scheme was dependent on officers carrying out the initial screening of arrestees and it became apparent during the project that officers were sometimes failing to screen arrestees when detaining them in custody. This meant that some eligible

2 NHS Health Scotland (2010)

Screening and Intervention Programme for Sensible drinking (SIPS) (2010)
http://www.sips.iop.kcl.ac.uk/
participants were not being referred into the pilot and was a problem compounded by officers choosing not to refer overly aggressive detainees into the scheme. Other problems included insufficient nursing staff to cover the custody suite at the busiest times (Friday and Saturday evenings) and some reluctance from arrestees to admit to harmful or hazardous drinking. Problems were also encountered in obtaining an accurate measure of success for the pilot in terms of future offending, with previous offending behaviour and re-arrest data often being unavailable or withheld. Despite this, data were available to suggest that there was a small decrease in re-arrest following engagement with the scheme and some respondents who took part in a follow-up self report exercise did report reducing their levels of drinking.

In Scotland, research was identified which evaluated the effectiveness of the Scottish Prison Service Transitional Care Initiative (MacRae et al, 2006), an initiative which sought to facilitate access to pre-existing community services based on an individual’s assessed needs, including alcohol-related needs, through a series of meetings post release. Monitoring data for the scheme indicated that health (drug and alcohol) needs were common among those attending initial appointments (63%). Despite positive feedback from those who attended the service, the take-up rate of initial appointments was comparatively low, and, over time, there was no noticeable reduction in alcohol consumption among those who engaged with the initiative and those who did not. The evaluation report concludes that, although Transitional Care was reasonably effective at linking clients with services, there were no apparent differences in short-term outcomes among those who attended Transitional Care and those who did not.

Another post-sentence intervention identified in the literature that is specifically targeted at repeat violent offenders whose crimes are alcohol-related is the Control of Violence for Angry Impulsive Drinkers (COVAID), a structured cognitive behavioural treatment programme delivered on either a group or individual basis. COVAID is delivered through a series of meetings between clients and their practitioners which focus on assessment of need, explaining drunken aggression, crime harm reduction, behaviour and attitude change, problem solving and self-evaluation. Pilot research has indicated that COVAID participants improved on psychometric measures of the treatment targets, namely anger, impulsiveness, and alcohol-related aggression, and short-term reconviction data favoured COVAID over a group of non-starters and non-completers (McMurran and Cusens, 2003). Although such studies do suggest that COVAID may assist in reducing alcohol-related violence, evaluation of the COVAID intervention has, to date, been based on relatively small samples and more robust evaluation is required before substantive claims about its effectiveness can be asserted.

3 The Transitional Care Initiative was the forerunner to the Pheonix/Throughcare Addiction Service.
Finally, whilst there is little evidence of effective interventions used for alcohol problems in the criminal justice setting, research has shown a relationship between the effectiveness of alcohol interventions, and those who deliver them in the criminal justice context. One evaluation of motivational interviewing as a method of intervention with clients in a probation setting (Harper and Hardy, 2000) concludes that, irrespective of technique used, all offenders indicated an improvement during their contact with the probation service. The research suggests that improvements in offenders’ wellbeing are especially enhanced where officers in charge are trained in motivational interviewing techniques. This study provides indicative evidence that the method of intervention alone may not be sufficient to guarantee effectiveness, and that effective training is also required to achieve maximum benefits for recipients.

Further, although neither a screening, intervention or treatment option for offenders, it is worth noting ‘designated places’ in the criminal justice context. Introduced in Scotland under Section 5 of the Criminal Justice (Scotland) Act 1980, designated places (or ‘sobering up services’) provide a safe overnight place for people to stay who have been identified by the police in a public place as being drunk or intoxicated, through drink or drugs. Intended to decriminalise public drunkenness, police take suitable persons to these ‘safe places’ to sober up, thus diverting them from custody. A review of international literature around these services (Scottish Government, 2009) showed that, despite a lack of formal evaluation of effectiveness, such services do appear to reduce pressure on the police and provide a safer alternative to custody for users. The review concludes, however, that to achieve maximum effectiveness, such services need to be integrated with longer-term services providing treatment and/or housing support.

2.5 Strategy/Guidance
While national statistics suggest that alcohol and offending remain inextricably linked, the review of literature suggests that there is currently little documented research on interventions which identify, screen or intervene with offenders as part of the criminal justice process. That is not to say that there is lack of awareness that this route exists to tackle alcohol-related offending. Indeed, Working with Alcohol Misusing Offenders, a strategy to reduce re-offending and alcohol-related harm and protect the public in England and Wales (National Probation Service, 2006) sets out some of the key features to be considered in tackling alcohol misuse among offenders. Key elements of the strategy included targeting, screening, referral and assessment, brief interventions, and treatment in terms of probation, including the ‘Models of Care’ approach, offending behaviour programmes, and a new focus on resettlement where social factors such as accommodation, education and employment need to be addressed in conjunction with alcohol misuse for effective outcomes.

Also in England, the NOMS Alcohol Interventions Guidance (2010) includes best practice guidance for probation staff, on the effective commissioning, management and delivery of a range of interventions for alcohol misusing
offenders. This includes updated advice on the implementation of alcohol treatment requirements (ATRs). An ATR can be made as part of a Community Order or a Suspended Sentence Order (SSO) for a minimum of six months and a maximum of three years (2 years for SSOs). An ATR will be made to promote the offender’s rehabilitation. Typical Supervision can involve contact to undertake work to promote personal and behavioural change, increase motivation and provide practical support to increase compliance with other requirements, and form and maintain working alliances to help and support the offender through other requirements in the Order.

The National Probation Service’s work with alcohol-misusing offenders (McSweeney et al, 2009) independently sought to describe and critically appraise the procedures adopted by the National Probation Service (NPS) for identifying and intervening with offenders who have alcohol problems. It suggests that there is currently limited scope for developing empirically informed guidance to instruct senior probation managers and practitioners about the effective targeting of interventions within a criminal justice context, or to identify which ones are likely to be most effective for whom.

2.6 Discussion
In summary, although survey and other data highlight a positive association between alcohol and offending, there is relatively little documented research about what works with offender groups to identify, screen and intervene with those who have alcohol problems. Most of the domain specific literature focuses on the suitability and effectiveness of various screening tools for offender groups, but with limited conclusions about best practice or how such screening informs onward referral into treatment and towards other services.

The absence of research literature does not, of course, necessarily mean the absence of practice, rather that work that is being done may not be systematically recorded or documented, or if it is recorded, it is not readily available in the literature.

Having set out the findings of the literature and data review, the following chapters provide a summary of feedback received from the research interviews including an index of interventions and treatment services that were identified in each of the CJAs. Further descriptions of these services can be found in Appendix B.
3. Fife & Forth Valley CJA

Fife and Forth Valley CJA encompasses the Local Authorities of Fife, Stirling, Falkirk, and Clackmannanshire.

3.1 Roles and Responsibilities

The CJA comprises a Board of four Elected Members from Fife Council, three from Falkirk Council, two from Stirling Council, and one elected member from Clackmannanshire Council who meet quarterly in open meetings. Local Authorities are further represented at CJA meetings by Senior Council Officers representing each Local Authority. Statutory partners of the CJA are:

- Fife Local Authority
- Stirling Local Authority
- Falkirk Local Authority
- Clackmannanshire Local Authority
- Scottish Prison Service
- Central Scotland Police
- Fife Constabulary
- Crown Office and Procurator Fiscal Service
- Scottish Court Service
- NHS Fife
- NHS Forth Valley
- SACRO
- APEX
- Victim Support Scotland

The voluntary organisations mentioned above each currently receive funding in excess of £100,000 per year from Section 27 budgets. In addition, there are affiliated voluntary organisations with which the CJA co-operate but which receive smaller amounts of funding. These organisations include:

- Barnardos
- Drug and Alcohol Project Limited (DAPL) Fife
- Addictions, Support and Counselling (ASC) Forth Valley wide

In addition to the statutory partners and affiliated voluntary organisations, the CJA works closely with the Community Planning and Alcohol and Drug Partnerships. The relationship between Forth Valley ADP and the CJA was
viewed by interviewees as working particularly well, with the Chief Officer sitting on the ADP Board. Fife ADP is currently undergoing restructuring. Subsequent to that, the CJA Chief Officer also hopes to sit on the Fife ADP board. There is regular contact between the CPPs and the CJA; the Chief Officer is a member of one CPP.

Fife ADP is standalone for the area, while Forth Valley ADP comprises Stirling, Falkirk, and Clackmannanshire ADPs, who come together to work under one strategy in the Forth Valley area. The ADPs provide funding and monitor plans and outcomes for each service they fund. In addition, some services have a management board providing their own annual report and monitoring outcomes. Service user involvement is something that the ADPs hope to improve on by involving service users in the design and delivery of new services in the future, as well as asking them to provide suggestions for improvement on current services.

Fife and Forth Valley CJA are currently working within the Scottish Government ‘Scotland Performs’ framework, allowing for a strong focus to be provided on fitting local services and interventions with wider social and economic policy. Fife and Forth Valley CJA work towards the Single Outcome Agreements of Fife, Stirling, Falkirk, and Clackmannanshire Local Authorities, but also have their own performance framework developed locally.

Fife and Forth Valley CJA do not have specific care pathways for offenders with alcohol problems. The CJA’s intention is to ensure offenders with alcohol problems have fair and equitable access to support services that exist in the community.

### 3.2 Local Services

#### 3.2.1 Mainstream Services

Several specialist alcohol services are run by NHS Fife for people with alcohol problems such as NHS Addiction Services Fife who undertake comprehensive assessment in order to determine what treatment is most appropriate for the individual, including psychological therapies, prescribing, and detoxification. Weston Day Hospital Alcohol Support Group provides group work as well as one-to-one counselling to people who have decided to stop using alcohol, while the Specialist Community Midwives Addiction Services provides information and promotes alcohol, drug control, and reduction strategies during and after pregnancy. Similarly, in Forth Valley, a number of services are run by NHS Forth Valley for individuals with alcohol problems such as the Community Alcohol and Drug Service which is staffed by nursing, medical and administration staff, with the service delivered through a network of clinics and on a domiciliary basis. The service offers a specialist assessment of an individuals alcohol use and makes recommendations regarding appropriate treatment, including detoxification.
programmes. The service can also assist those problem drinkers with patterns of 'binge alcohol' use who do not require detoxification.

Other mainstream services are run by voluntary sector organisations such as LADA Links which is used by families and individuals who need help, information and treatment for drug and alcohol-related issues or problems, and Bethany Christian Trust who provide support to vulnerable people with a history of substance misuse problems within their own tenancies. Barnardos provides a variety of different services for young people with addiction problems such as drugs and alcohol, and also provide other support in terms of housing, education and training, and support to family members.

Individuals can be referred into mainstream services through a number or routes, for example, their GP, another service provider, or, in some cases, through self-referral. These services are not targeted specifically at offenders, although offenders can be referred into these services should this be considered necessary by their Criminal Justice Social Worker, or as part of the requirement of an Order.

3.2.2 Offender Specific Services

The following matrix summarises the alcohol services that are specifically available for offenders with alcohol problems in Fife and Forth Valley CJA. It also shows the area coverage provided. More detailed descriptions of these services, and their respective target groups, are provided in Appendix B.

<table>
<thead>
<tr>
<th>Service</th>
<th>Fife</th>
<th>Stirling</th>
<th>Falkirk</th>
<th>Clackmannanshire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Diversion Scheme, Fife</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol Support Service</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barnardos Axis Service Falkirk</td>
<td></td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Connect Services for Young People</td>
<td></td>
<td></td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Meet at the Gate project, Circle</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Progress2Work Link-Up, APEX Scotland/Phoenix Futures</td>
<td>✓</td>
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Locally, Barnardos Axis Service provides substance screening, comprehensive assessments, care planning, intensive intervention, and family support to substance misusing persistent young offenders aged 12-18 years within the Falkirk area. Also in Falkirk Local Authority area is Connect Service for Young People. Run by Falkirk Council's specialist Youth Justice Team, it works with young people between 12-18 years of age who are assessed as being at high risk of re-offending and have associated issues such as alcohol and drug
problems. Connect is a multi-disciplinary team consisting of Social Work, Health and Community Education where referrals are made through The Youth Justice Referral Group. Services include group work looking at issues that affect young people, harm reduction and relapse prevention, medical treatment for addiction, and support to access other services including education, health and youth services.

In Fife and Forth Valley CJA, there are some services in place targeted at offenders in relation to a number of issues such as housing, employment, as well as substance misuse which provide comprehensive assessments, care planning, group-work and individual sessions, and family support. Progress2Work link-up is an example of a service which tackles both alcohol and employment issues of offenders in the community justice setting. The service is aimed at individuals aged 16 and over who have failed to engage with mainstream employability, training or education opportunities because of their backgrounds and lifestyles. It is available in both Fife and Forth Valley and Tayside CJAs.

A scoping exercise was also carried out in February/March 2010 looking at the profile of women offenders in Cornton Vale who come from the Fife and Forth Valley area. It reported that, while drugs misuse was more prevalent among women offenders, alcohol misuse also featured heavily, leading to a service in the area being devoted to women offenders. Fife and Forth Valley CJA, for example, provide a ‘meet and greet’ service for women offenders when they are returning home from prison in conjunction with Lanarkshire, Glasgow and Lothian and Borders CJA, called ‘Meet at the Gate’. This pilot project has a focus on women offenders, either on remand or coming to the end of their sentence, who need support often in relation to childcare or addiction issues on their return to the community. A Circle worker based in Cornton Vale is responsible for identifying women who are eligible for the service, co-ordinating a handover to the Circle worker in the community as well as offering direct support in some cases.

In addition, Criminal Justice Social Work and voluntary agencies run a number of group work programmes covering domestic violence, anger management and road traffic incidents where alcohol features but is not of itself the primary or predominant problem of focus. For example, in 2009, Fife Constabulary and Fife Alcohol Support Services piloted the Alcohol Diversion Scheme in the Kirkcaldy area over a period of six months. The Alcohol Diversion Scheme is based on early intervention and is aimed at addressing binge drinking and associated anti-social behaviour, offering individuals in receipt of a Fixed Penalty Notice an opportunity to participate in an alcohol education session instead of paying a £40 fine. The session offers participants a chance to learn how to control binge drinking, improve personal safety and reduce their chances of offending or becoming a victim of crime. The scheme has been particularly popular with the 18 to 30 age group, with an evaluation of the scheme in Kirkcaldy undertaken in July to December 2009, concluding that the pilot has been successful in its aim to provide an educational brief early intervention to the target population of binge drinkers. Many participants stated that the course informed them how to change
their behaviour and that they would now do so. It was found that the core strengths of the course were the facilitators and premises, the engaging and relevant content material, and the system of removal of the FPN fine as incentive. Since September 2010, the Alcohol Diversion Scheme has been operating Fife wide.

3.3 Gaps and Challenges
Funding for alcohol services for offenders is considered to be a challenge by the CJA. To try to address this, Fife and Forth Valley CJA hope to work closer together with the CPPs and ADPs in the area in order to influence the direction that service providers take with regard to ensuring equal access for offenders with alcohol problems, in addition to maintaining easy access to services for the general public. They also hope to facilitate the ongoing discussion and identification of examples of the transfer of resources between statutory partners.

Another challenge was considered to be the transfer of health care of prisoners from the SPS to the NHS Health Boards in 2011. NHS Forth Valley will shortly assume the responsibility for the provision of health care to prisoners in HMP Glenochil, HMP and YOI Cornton Vale and HM YOI Polmont. This means that NHS Forth Valley will be responsible for the health care needs of approximately 20% of the Scottish prison population which was considered to be potentially problematic due to these extra financial pressures, especially given that the health care needs of women offenders are particularly complex. However, these new arrangements were also perceived by consultees as potentially bringing opportunities such as improving information sharing across prison and community health care sites which can be beneficial in terms of services for offenders in the area. Fife and Forth Valley CJA will support and monitor the transfer of health care from SPS to local health boards and ensure that there is equality of service provision for offenders both in custody and on release.

3.4 Future Plans
Reflected in the number of services available to offenders with drug misuse problems, there has traditionally been a focus on drugs rather than alcohol for several years in Fife and Forth Valley CJA. However, alcohol is increasingly being recognised as playing a part in offending, in particular among young people in the area. Addressing the drug/alcohol balance was considered a challenge to ensure that enough weight is put on developing services for people with alcohol problems.

Alcohol misuse, particularly in relation to young offenders, is a priority of the 2011-2014 CJA Area Plan. This was informed by local research which found that reconviction rates for drugs and alcohol, criminal damage and violent crime were higher among young offenders; in particular, males aged under 21. In 2010, Fife and Forth Valley Community Justice Authority undertook an analysis of the young offender population involved with the adult Criminal Justice Social Work services of Fife, Clackmannanshire, Falkirk and Stirling Local Authorities.
Approximately one third of all Social Enquiry Reports prepared for the courts and one third of offenders subject to Probation or Community Service Orders were young offenders. Of the 162 young offenders who took part in the study, 104 were identified as having a substance misuse problem, of whom, 90% reported regularly using alcohol. There was variation across the four Fife and Forth Valley Local Authority areas: in Clackmannanshire alcohol or drugs was a direct factor in the reported offences for which the offenders were appearing in Court in as many as 93% of cases, while in Falkirk it was a factor in 62% of cases. As the prevalence of alcohol and drugs was a significant issue in the offending behaviour of young offenders, the report recommended that access to support services for substance issues for young offenders should be reviewed to ensure appropriate support is available (Andersen, C., Fife and Forth Valley CJA, 2010).

Forth Valley ADP undertake needs assessments which determine which groups and areas will be prioritised when reconfiguring and evaluating services, as well as when developing new services in the future. Forth Valley Criminal Justice Social Work are also currently giving consideration to the development and delivery of ABIs in the criminal justice setting, although no plans have been formally set out as yet.

Alcohol is also perceived to be an influencing factor in the incidence of domestic abuse. Fife and Forth Valley CJA have obtained funding from the Scottish Government to provide a new accredited group-work programme, the Caledonia System, targeted at men convicted of offences of domestic abuse. The programme, which is due to become operational in April 2011, is designed to challenge perpetrators on their behaviour whilst at the same time supporting the partners and children who are victims of the abuse. The funding for this programme is for Forth Valley only but, if successful, Fife and Forth Valley CJA will seek funds to extend the programme to Fife in the future.

Following consultation with statutory partners, CPPs and ADPs, Fife and Forth Valley CJA identified a number of local priorities to address offending and create safer communities. Fife and Forth Valley CJA currently (and in the future) will work towards the following commitments as set out in their 2011-2014 Area Plan:

- that all offenders are provided with a service that is commensurate with the level of risk of re-offending and/or harm that they present;
- the causes of offending are addressed; and
- that victims are given the priority they deserve.

Fife and Forth Valley CJA aim to strengthen their relationship with CPPs and ADPs to influence the provision of resources to ensure that offenders and prisoners have fair and equal access to both alcohol and drugs services. The 2011-2014 Area Plan outlines how the CJA’s local policy fits within the national policy remit, including a changing focus on the substance misuse problem.
4. **Glasgow CJA**

Glasgow Community Justice Authority is the only CJA covering a single Local Authority area, Glasgow City Council.

4.1 **Roles and Responsibilities**

The GCJA Board comprises elected Councillors from Glasgow City Council who meet four times per year to monitor the CJA’s progress and agree future plans and objectives. The CJA also meets regularly with its partners. The statutory partners of the Glasgow CJA are:

- Glasgow City Council
- Scottish Prison Service
- Scottish Court Service
- Crown Office & Procurator Fiscal Service
- Strathclyde Police
- NHS Greater Glasgow and Clyde
- Victim Support Scotland
- The Wise Group
- CrossReach
- SACRO
- Turning Point Scotland
- Glasgow Community & Safety Services

Partner organisations are well represented at CJA meetings, however, as the Local Authority is large, it is difficult to ensure involvement from all the relevant bodies. This has been overcome by inviting other organisations such as Glasgow Life and Glasgow Works services to the Lead Officers Group. Other organisations the CJA works with are Glasgow Council on Alcohol and Glasgow Addictions Partnership, which is a joint Health Board and Local Authority organisation leading the delivery of services in the area. One of the main aims of working in partnership with these bodies is to improve awareness of offenders’ needs amongst mainstream services. Each organisation has direct responsibility for equality impact assessments and equality monitoring.

The relationship between the CJA and the CPP is evolving, with discussions centred on/including what respective roles and responsibilities should be. Interviewees suggested that, although there may be no requirement for the CPP to attend the Board, they considered it important to be clear about roles and responsibilities in order to facilitate good working relationships. The CJA and the
CPP have been involved in talks about the ‘Safe’ theme agenda; however, as alcohol is more health based, there has been less contact with the CPP with regard to this. The ADP in Glasgow is still developing the structure; however, it is likely that the CJA will sit on the new ADP with the aim of strengthening strategic plans and partnership working.

Glasgow CJA meets with other CJAs to share good practice on a regular basis and is also involved in joint events. For example, Glasgow CJA hosted a joint drugs and alcohol seminar with North Strathclyde CJA in March 2009.

### 4.2 Local Services

#### 4.2.1 Mainstream Services

The main alcohol services in Glasgow are the Community Addiction Teams (CATs) based in each area, which are open to anyone with a substance misuse problem. CATs bring together both Health Addiction Services and Social Work Addiction Services within one team. Services include one-to-one work, group work, prescribing services and referral to residential detoxification and rehabilitation programmes. CATs can be accessed via self referral or referral from another service or agency. Any services targeted specifically at offenders will then endeavour to link them back into local community mainstream services, rather than setting up new offender specific services in order to utilise resources in place as well as ensure that offenders with alcohol problems are treated in the same way as individuals accessing mainstream services.

Other mainstream services include those run by voluntary organisations such as Glasgow Council on Alcohol who provide a number of services across Glasgow for individuals with alcohol problems, including the Community Alcohol Support Services for the East End which provides homelessness and tenancy support services in conjunction with alcohol-related issues. The service provides advice, support, information and, where appropriate, counselling to divert and prevent individuals from becoming homeless while dealing with their alcohol problems. The Mungo Foundation provides Ar Caladh, a project which provides intensive support for young people aged 16–21 years who are homeless or at risk of becoming homeless due to their substance misuse. The project provides 24 hour support and can provide mental health assessments, supervised detox, and assisted withdrawal or stabilisation from illicit substances and group work programmes. The Safer Alcohol Drinking in the East End service provides an information and advice service and signposts individuals to counselling or other sources of help, the Drumchapel Alcohol Support Services delivers training and group work sessions in the local community, and the Greater Easterhouse Alcohol Awareness Project provides an alcohol information, advice and counselling service.

Other voluntary organisations which provide alcohol services, both residential and community services for individuals, include Phoenix Futures Scottish...
Residential Service that offers individually designed programmes for individuals with drug and alcohol dependencies. These include therapeutic group work on self esteem, confidence building, and relapse prevention as well as one-to-one counselling, self-help and peer support. In addition the Glasgow Move On Resettlement Service provides information, advice and support for people with problematic drug and alcohol use in their own communities. Some residential services are also provided by NHS Greater Glasgow and Clyde such as The Kershaw Unit/Eriskay Unit which is a partial hospitalisation service for people with alcohol and drug problems.

Offenders in the criminal justice system who have been given a community based order, for example, a Community Service Order or a Probation Order, will be allocated a Criminal Justice Social Worker case manager who can identify a range of services to support offenders with alcohol issues (including mainstream alcohol services).

4.2.2 Offender Specific Services

The following matrix summarises the alcohol services that are specifically available for offenders with alcohol problems in Glasgow CJA. More detailed descriptions of these services, and their respective target groups, are provided in Appendix B.

<table>
<thead>
<tr>
<th>Service</th>
<th>Glasgow City Council (Co-terminus with CJA)</th>
</tr>
</thead>
<tbody>
<tr>
<td>218 Service for Women Offenders, Glasgow City Council, NHS and Turning Point Scotland</td>
<td>✓</td>
</tr>
<tr>
<td>Alcohol Crime and Education Programme, Glasgow Council on Alcohol</td>
<td>✓</td>
</tr>
<tr>
<td>Arrest Referral, Glasgow Addiction Services and Strathclyde Police</td>
<td>✓</td>
</tr>
<tr>
<td>Custody cards, Glasgow City Centre Alcohol Action Group</td>
<td>✓</td>
</tr>
<tr>
<td>Meet at the Gate project, Circle</td>
<td>✓</td>
</tr>
<tr>
<td>Persistent Offender Project, Glasgow Addiction Services and Strathclyde Police</td>
<td>✓</td>
</tr>
<tr>
<td>Routes Out of Prison Partnership, The Wise Group, SPS and Families Outside</td>
<td>✓</td>
</tr>
<tr>
<td>Throughcare Addictions Service (TAS)</td>
<td>✓</td>
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</table>
Glasgow CJA, Glasgow Addiction Services, the SPS, and Strathclyde Police formed a group to identify a list of interventions available for offenders in Glasgow. This was not an exhaustive list, however, but provided a starting point in order to map gaps in service provision. There is no Glasgow CJA care pathway specifically, however, as part of their scoping exercise, the group developed a flowchart (see Appendix C) to map services and identify pathways for different groups.

Glasgow CJA has a specific focus on women offenders, persistent offenders and young offenders, with an emphasis on early intervention to try to prevent them entering into the adult system and into custody. Services for women offenders include Meet at the Gate (described in Chapter 3) as well as the 218 Service for women (described below).

Examples of good practice were perceived by the interviewees to be the 218 service for women, a joint health and voluntary sector criminal justice service, which has shown good partnership working between the Health Board and the voluntary sector. Anyone who is in contact with women offenders in Glasgow can refer to this service which aims to address the root causes of offending by providing a person centred programme of care, support and development, including addictions input such as alcohol or drug problems. Addictions support is available on site, delivered by Turning Point Scotland and Glasgow Addictions Service. Peer support involvement is also provided in the 218 centre for women where dedicated workers will work with women in Cornton Vale to develop services. The 218 service has been evaluated, and although this analysis did not look directly at the impact on offenders with alcohol problems, evidence suggested a general reduction in re-offending.

In addition, as described above, Arrest Referral identifying people at the point of arrest, aims to link individuals with addiction needs back into Community Addiction Teams (CATs) across Glasgow. If arrestees do not make contact with Addiction Services at the initial stage there is assertive follow-up to encourage arrestees entry into treatment and care services. Evidence from monitoring of the Arrest Referral scheme suggests that people with no history of contact with services are linked in through this route although it is not clear whether this initial link to services is maintained.

Custody Cards, run by the Glasgow City Centre Alcohol Action Group are available in four Police Stations within Glasgow (London Road, Helen Street, Stewart Street and Maryhill Road). This intervention involves the distribution of a pocket-sized information card to arrestees as they leave police custody in order to raise awareness of alcohol use among those who are arrested by the police because of their alcohol-related behaviour. The card contains information about sensible levels of alcohol for men and women; the number of units in common drinks; how alcohol can affect behaviour; safer drinking information; and where to go to get help. It was described by interviewees that the Custody Cards intervention is not monitored or formally evaluated, although this is a low-cost provision and was anecdotally perceived by the interviewees to be working well.
The Alcohol Crime and Education Programme (ACE) is a groupwork programme for offenders with alcohol problems. The programme aims to deliver alcohol education within an interactive groupwork practice and help to prevent the recurrence of offending behaviour by participants. The programme provides a 12 session Cognitive Behavioural Programme for people where alcohol has been the major factor in their offending behaviour. The ACE Team consists of one Team Leader and one Groupwork Development Worker. The team works closely with Glasgow City Council Criminal Justice Social Work team and Glasgow Sheriff Court who provide the main source of referrals. This service was perceived to be a good example of an alcohol service set up directly for offenders with alcohol problems.

Other services targeted at offenders with alcohol problems include the Persistent Offender Project (POP), a partnership service provided by Glasgow Addiction Services and Strathclyde Police. The service aims to identify and focus on the needs of the most persistent offenders within the Glasgow city area whose crimes are committed in order to sustain their dependency on alcohol or drugs, in order to reduce their cycle of offending. Persistent drug/alcohol misusing offenders are identified using police intelligence in order to link them in to sustainable treatment and care within the CATs and encourage them to reduce their offending. POP service users are often difficult to engage and are vulnerable high-risk service users with addiction problems and high levels of criminal activity. POP will pursue service users to encourage them in to treatment and care services and then ensure that service users maintain that link. Referral routes include Police, Glasgow Addictions Service, Criminal Justice Social Work, and Glasgow Community Safety Services. The Persistent Offender Project has been evaluated, with evidence suggesting a reduction in re-offending overall, but with no specific analysis of the impact on offenders with alcohol problems.

A service available to ease the transition from prison to the community for offenders is the Routes out of Prison Partnership run by The Wise Group, SPS and Families Outside and is available in Glasgow CJA, South West Scotland CJA, Lanarkshire CJA, and North Strathclyde CJA. The service is designed to help prepare and support short term prisoners for the transition from prison to life on the outside. Support is made up of a Prison Life Coach who supports the service users for 6 weeks of pre release preparation, and the Community Life Coach who will engage with the service users for an average 13 weeks to ensure access to as many services as possible. Issues explored include alcohol and drug misuse as well as work with employment consultants who work closely with service users and Life Coaches to identify those individuals who would benefit from a direct employment focused intervention. Attention is also paid to issues concerning family mediation, housing, benefit entitlement, and health more generally.

Throughcare Addictions Service (TAS) offers a service to all prisoners with 6 weeks or less left to serve in custody. The service is provided to Glasgow prisoners by Glasgow Addictions Service and includes assessment, short term
intervention and onwards referral to CATs. However, take up of TAS is on a voluntary basis and is relatively low and, again, the extent to which those seeking support with alcohol problems use this service is unclear. The Scottish Government is undertaking a small review of TAS nationally and this may clarify issues on take up.

In addition limited offender-specific funding is available for individuals on community based orders to access mainstream residential rehabilitation services, where the individual’s offending behaviour is clearly linked to substance misuse issues (including alcohol). This funding covers up to 16 weeks of provision, after which Glasgow Addictions Service picks up funding costs. This is accessed through Glasgow City Council Criminal Justice Social Work centre team.

4.3 Gaps and Challenges
A key gap identified by CJA partners, notably the police, is a resource for dealing with those picked up by the police who have not committed a crime per se but who are under the influence of alcohol and who may be a danger to themselves or others. There is an ongoing debate about the use of police custody for those who are intoxicated with models tested in other countries including ‘drunk tanks’ and pick up/drop off services, for which there have been mixed outcomes. It was considered by interviewees that a service which could be adopted in this area is the Designated Place service in Albyn House in Aberdeen, a generic service that may benefit offenders more generally. The police have no option but to charge someone if they have committed a serious enough offence, however Albyn House is an alternative to custody if no charge is likely to be brought. When they are sober again, the individual is given advice on their drinking and is offered a route into a service to deal with their alcohol issues. Although not specifically for offenders or those charged with an offence, it was suggested by a number of interviewees that this intervention would cater for people who have had a criminal conviction in the past, and provides a good opportunity to divert people away from the criminal justice system and into treatment.

Other gaps in service provision are in relation to remand and short term prisoners. There are possible interventions available in this area, however identifying those most appropriate has yet to be explored. When an offender completes their community sentence, mainstream addictions services will continue to engage with them for as long as is required. Specialist services, at the end of a community sentence, will make arrangements for a planned withdrawal, and will hand cases over to CATs as appropriate.

There are some concerns that the focus on illicit drug addiction (particularly opiate addiction) of some specialist services can mean the alcohol problems of offenders are less well addressed. This may be particularly the case where problem alcohol use does not fall into the pattern of chronic dependence. In such instances, it was suggested by interviewees that the use of ABIs and alcohol nurses needed to be considered in relation to how these services can be applied to different settings and different areas.
Interviewees felt increasing attention needs to be paid to the gaps in the services that are already in place and questions asked if the right services are in place. For example, Drug Treatment and Testing Orders have an alcohol education element for offenders with both drug and alcohol problems and it is has been considered whether Glasgow Drug Court could consider cases relating to chronic alcohol problems.

The transfer of prison health care from the SPS to the Health Boards was again seen as a future challenge, however, it was considered important with regard to continuity of care and also ensuring that so that prisoners have the same access to health care and health promotion initiatives as other individuals in the community.

In addition, the current economic climate will impact on budgets and spending in the area which will then have an impact on services including accommodation and support, employment, and addictions services. Glasgow CJA hope to overcome this through joint planning and partnership working with shared priorities, ensuring funding is devoted to services that are shown to work to reduce alcohol and drug misuse as well as re-offending more generally.

### 4.4 Future Plans

It was suggested by interviewees that, previously, alcohol has been considered locally and nationally as the ‘poor relation’, however, this was seen to be changing and drugs policy was viewed as taking a ‘back seat’. This is partly due to the perception by interviewees that alcohol fuelled violence is becoming a bigger issue. Changing patterns of drug use have taken place and it is realised that the level of alcohol fuelled violence is high and interventions will have to be in place in order to change cultural behaviour.

Glasgow’s ADP, currently still in the planning process, is the new vehicle for planning and monitoring alcohol and drugs services across the city, and includes representatives from all key partners. This is likely to be the best conduit for improving services for offenders in the community. The CJA are involved in developing the new ADP strategy, and when in operation, the group will meet once every six weeks.

Plans for the future include a continued commitment to provide equal access to mainstream services for offenders and to improve awareness and understanding of the services available for offenders, families and victims across Glasgow.

In relation to alcohol specifically, although considered a mainstream service, CATs were perceived to be one of the main channels of referrals into treatment for offenders from the criminal justice system. Alcohol support services at CATs are currently being strengthened by the addition of Alcohol Nurses and the possibility of including alcohol nurses in the Glasgow Drug Court team is being explored.

Discussions are underway regarding the new Community Payback Order. Services such as Glasgow Addiction Service and 218 already provide
interventions for offenders on community based orders, however, it is thought that changes introduced through the Criminal Justice and Licensing (Scotland) Act may lead to a large increase in community based orders, and there is concern regarding whether services are going to be able to cope with the increase in demand. This is particularly the case since the CPO can include a condition of alcohol treatment when the offender is considered to have an alcohol dependency. This element of the CPO was thought by interviewees as likely to be used more often than alcohol treatment/education elements in current community based orders. Discussions on the CPO are centred on how provision will be affected when the CPO is introduced, and what procedures should be in place to deal with this new Order.

Together with partners from Greater Glasgow and Clyde NHS, Glasgow Addictions Service, Criminal Justice Social Work and Strathclyde Police, Glasgow CJA has undertaken a small scale review of alcohol support services for offenders in the city and identified a number of areas where improved joint working and interagency training could improve referrals and treatment. The group’s analysis of alcohol support that is currently in place, and described above in Section 4.2, identifies key gaps at the charge and prosecution stage, and post sentence stage. A number of interventions have been suggested in order to fill these gaps. At the charge and prosecution stage, it was thought that ABIs could form part of bail interview activity, there should be an agreed procedure for passing on information/referrals regarding those with alcohol problems, SPS induction staff should be trained to undertake ABI, and options should be considered for referral from remand to CATs. Post sentence, it was recommended that there was scope to improve take up of TAS and consider provision of alcohol support as part of the wider review of Throughcare provision, particularly in relation to those released from short sentences and remand.
5. Lanarkshire CJA

Lanarkshire CJA comprises the Local Authorities of North Lanarkshire and South Lanarkshire.

5.1 Roles and Responsibilities

Membership of the LCJA Board comprises three elected members from each of the North and South Lanarkshire Councils. Meetings are held quarterly with the Board who provide political and strategic oversight for the CJA.

Lanarkshire CJA includes a Chief Officer, Planning and Development Adviser and one member of staff who provides clerical support. Lanarkshire CJA also shares an SPS Liaison Manager with Lothian and Borders CJA and has a dedicated Training and Development Officer for the Lanarkshire area.

Statutory partners of Lanarkshire CJA are:

- North Lanarkshire Council
- South Lanarkshire Council
- Scottish Court Service
- Scottish Prison Service
- Strathclyde Police
- Procurator Fiscal
- NHS Lanarkshire
- SACRO
- APEX
- Phoenix Futures
- Victim Support

It was suggested by interviewees that other statutory partners of the CJA should be the Judiciary, as they are an intrinsic part of the criminal justice process. However, it is also understood that such a partnership would impact on judicial independence. It was also suggested that the ADPs should be statutory partners in addition to NHS as they play an important part in the organisation and delivery of services to people with substance misuse problems involved in offending.

A need was identified by interviewees for stronger links between the CJA and CPPs, as the majority of people who enter the criminal justice system have multiple and complex needs, for example, housing, skills, training and employment, mental and physical health, and substance misuse which could be better met through a more joined up approach. Lanarkshire CJA recognise that
no single agency can address these issues alone, and we will be required to work more closely in partnership with CPPs to provide a joined up and early intervention approach to identify roles and responsibilities for service delivery and identify offender pathways to ensure effective integration.

Criminal Justice Social Work in both North and South Lanarkshire confirmed that, although the Lanarkshire Partnership was already in place before the CJA came into being, the CJA further enhances the partnership working in the area. Lanarkshire CJA evidences effective partnership working through regular meetings with Local Authority partners, the operation of the Literacy, Employability, Accommodation and Finance (LEAF) group, and liaison with the Scottish Prison Service Liaison Officer. A representative from the CJA as well as the SPS Liaison Officer, attend quarterly ADP meetings.

Services are developed based on the needs of the individual. Criminal Justice Social Work in North and South Lanarkshire are the lead agency in developing most services for offenders. Service users are also represented in the planning and development of new services through the Recovery Network based in Lanarkshire.

The voluntary sector organisations that the CJA works most closely with are Circle, Phoenix Futures, SACRO, APEX, and the Wise Group. The bulk of CJA monies (Section 27) go to the Local Authorities who put in place service level agreements with voluntary organisations.

Lanarkshire ADP set out their target groups in their ADP Strategy 2008-11. These were defined as safeguarding and promoting the interests of children, young people and families affected by substance misuse through education/prevention, early intervention/diversion, children and young people affected by parental substance misuse, and young people with problematic substance misuse, as well as reducing the level of alcohol and drug-related harm at a community level, supporting individuals with alcohol and drug problems.

Lanarkshire ADP has Service Level Agreements with all organisations it has contracted to carry out services. All of these organisations provide annual reports, are subject to regular performance review and monitoring, and provide information on HEAT targets, as appropriate. Local Authorities tend to monitor and evaluate the services they fund, based on performance output with some qualitative work also undertaken with participants.

Interviewees stated that they recognised the need to engage with offenders and communities in order to develop effective services to reduce alcohol misuse specifically, but also to reduce re-offending more generally.

With regard to a care pathways approach, Lanarkshire CJA believes this to be more of a health board terminology and so do not have a care pathway in place.

5.2 Local Services
5.2.1 Mainstream Services

Most of the alcohol services available to offenders are not targeted at offenders with alcohol misuse solely. Lanarkshire CJA realises that both offending and addiction, including alcohol, are closely related, but that offending can stem from any number of factors, depending on the individual. Therefore, services are designed to tackle the specific needs of an offender, whether they are alcohol, drugs, housing, aggression related, etc. Mainstream services of this kind include Bridgework who provides respite accommodation, practical support, emotional support, rehabilitation to increase independent living, health promotion, and outreach support to individuals. SOCA Scotland also provide help in accessing services, training, life skills development, and access to health and fitness and training sessions for individuals. South Lanarkshire Structured Day Service also helps individuals with a desire to change their pattern of behaviour to address their lifestyle, health, and social issues. These services are not alcohol or drug specific, but deal with a variety of needs including substance misuse, other health problems or housing needs.

NHS Lanarkshire provides a number of services specifically for individuals with alcohol problems. The Abstinence Based Support Team for Alcohol (ABSTAIN) provide assistance to identify and signpost people with alcohol problems into relevant services, while NHS Lanarkshire’s Youth Counselling Service provides free confidential counselling on alcohol problems to young people in the Lanarkshire area. End Violence and Abuse (EVA) is a service run by NHS Lanarkshire which provides support, counselling and therapy for women who have experienced abuse or violence.

Other services in Lanarkshire that have been set up to deal with substance misuse problems include the Community Day Programme (Alcohol) run by North Lanarkshire Criminal Justice Social Work services which focuses on adults with alcohol problems in North Lanarkshire area and provides an intensive eight week community based support, treatment and rehabilitation programme. The Integrated Addiction Service, a joint partnership between NHS Lanarkshire and North Lanarkshire Council, focuses on adults experiencing alcohol and drug related problems and provides a full suite of addiction services including an intensive eight week community based support, treatment and rehabilitation programme focusing on the social, psychological and physiological impact of drinking and drug misuse. The integration of Local Authority and NHS addiction services in North Lanarkshire arose from recognition that resources could be better employed with a merging of the two separate services across the two areas.

Similarly, in South Lanarkshire, the Lanarkshire Alcohol and Drug Service (LADS) provides harm reduction information, testing and vaccination, pharmacological interventions including community detoxification, and nutritional supplement prescribing. Adult counselling run by the voluntary organisation Liber8 also provides assessment, one to one counselling and advice and information for people with alcohol problems, while CHILL, also run by Liber8, deliver a wide range of programmes including group work, six week support
programmes and one to one intervention for young people. The programme targets those either directly affected by their own consumption or are indirectly affected by a significant others use and consumption.

These services were set up to provide help for individuals with alcohol problems and are not offender specific. However, alcohol/drug treatment or education may be a condition of criminal justice Orders, and in this way, such services may be utilised by Criminal Justice Social Workers seeking to refer offenders into appropriate services to fulfil conditions of their Order.

5.2.2 Offender Specific Services
The following matrix summarises the alcohol services that are specifically available for offenders with alcohol problems in Lanarkshire CJA. It also shows the area coverage provided. More detailed descriptions of these services, and their respective target groups, are provided in Appendix B.

<table>
<thead>
<tr>
<th>Service</th>
<th>North Lanarkshire</th>
<th>South Lanarkshire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Brief Interventions Pilot</td>
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<td>✓</td>
</tr>
<tr>
<td>Arrest Referral Service, SACRO</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Barnardos CHOSI Project</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Circle, Addiewell Prison</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Domestic Abuse Perpetrator Pilot, Social Work/Police</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Intensive Support Project, Lanarkshire Throughcare Team</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Meet at the Gate project, Circle</td>
<td>✓</td>
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<tr>
<td>Mentoring Support Service for Women Offenders, SACRO</td>
<td>✓</td>
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<tr>
<td>NLC Justice Service - Targets for Effective Change</td>
<td>✓</td>
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<tr>
<td>NLC Justice Service – Treatment Process Model</td>
<td>✓</td>
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<tr>
<td>NLC Justice Service (Restorative Justice Team) Drink Related Offender Programme</td>
<td>✓</td>
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<td>NLC Justice Service (Restorative</td>
<td>✓</td>
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</table>
The Arrest Referral service run by SACRO is aimed at offenders over 16 years of age who are using drugs or misusing alcohol. By seeing the offender as soon as they are arrested, the offender is provided with information and a pathway into harm reduction, treatment and rehabilitation services.

An ABI pilot is also running in both North and South Lanarkshire Criminal Justice Service area, as well as in Perth and Kinross. More details of this pilot are provided in Chapter 10.

A number of services are available for offenders on release from prison back into the Lanarkshire area. The Circle service at Addiewell Prison is for male offenders who are fathers, either on remand or coming to the end of sentence. This service prepares the person for the transition from prison into family and community living, providing continuing support after release, assisting with engagement in addiction services, and accessing employment/training. In April 2007, Circle undertook research in Cornton Vale Prison. The research report, ‘What Life after Prison? Voices of Women of Cornton Vale’, reported in August 2007 and, following on from this, Circle began a pilot project in North and South Lanarkshire offering services to women being released from the prison who have children affected by parental drug and alcohol use. This service was then extended to cover Fife and Forth Valley, Glasgow and Lothian and Borders CJAs, and is further described in Chapter 3. The Mentoring Support Service for Women Offenders provided by SACRO provides volunteer mentoring services providing support for addiction issues as well as accessing education and training, help with completing forms, budgeting and housekeeping, and other health issues for women in Lanarkshire. Routes out of Prison Partnership is also provided in the Lanarkshire CJA area. More details of this service are provided in Chapter 4.

Both North and South Lanarkshire Community Safety Partnerships have identified alcohol-related violence and disorder as a priority issue and, in this context, the Domestic Abuse Perpetrators Pilot (DAPP) service was set up in South Lanarkshire, where social workers and police attend police stations and speak to people who have been arrested for crimes of domestic abuse. This service, located in five police stations across South Lanarkshire, has been in place for two years and in this period has engaged with 750 offenders. The service also includes follow up with clients at a later date.
Youth offending is also a priority in the area. A Youth Court pilot is currently running in Hamilton and Airdrie where funding had recently been extended until April 2012. This pilot was set up to ease the transition of young people from the Children’s Hearings System to the adult court. There was also a service set up in Hamilton Sheriff Court where offenders who had shown violent and aggressive behaviour and were struck off their GP list, often thought by interviewees to be a result of alcohol consumption, were able to see a GP while they were in court.

The Barnardos CHOSI project works in partnership with social work services to provide a service for young people who are involved in offending in both North and South Lanarkshire. The project aims to prevent young people aged 15 to 17 progressing into the adult justice system by offering an alternative community based programme via the Children's Hearings System. The project's objectives include reducing the severity and frequency of offending and addressing behaviour which places the young people and others at risk of harm. This is achieved by supporting and encouraging young people to make positive life choices, challenging and addressing the young persons offending, and exploring and modifying behaviour which contributes to this such as poor victim awareness, alcohol or substance misuse, and lack of employment.

North Lanarkshire Council provide a number of services geared towards offenders with alcohol problems, as well as other associated issues. Targets for Effective Change is aimed at offenders who do not require specialist drug or alcohol intervention and consists of a resource pack containing materials and advice. The Treatment Process Model targets alcohol and drug users at various stages in the recovery journey addressing issues such as treatment readiness, early engagement, early recovery and longer term recovery and change. Two programmes are also available in North Lanarkshire which are targeted at offenders who have been caught driving under the influence of alcohol. The Road Traffic Offences Programme and the Drink Related Offender Programme comprise of modular group work programmes aimed at behaviour change to prevent these offenders carrying out similar offences in the future.

Street Base has been working in South Lanarkshire since 2000 and engages with young people aged between 10 and 18 who are described as ‘hard to reach’. While not aimed directly at offenders, one of the aims of Street Base is to reduce the amount of alcohol being consumed by young people on the streets. The monitoring and evaluation carried out by the ADP shows that antisocial behaviour has clear links with alcohol consumption, with Street Base being successful in reducing both alcohol consumption and related antisocial behaviour. During 2006–07, Street Base made over 13,500 engagements with young people in the streets of South Lanarkshire and involved over 500 young people in alternative and diversionary activities. To date, most of Street Base’s work has been carried out in Regeneration Outcome Agreement (ROA) areas, but has recently been expanded to cover a wider area, and is now active in 12 locations across South Lanarkshire. This is being extended to North Lanarkshire where this service will get underway in September 2010.
5.3 Gaps and Challenges

Interviewees suggested that better research into the nature of a person’s drinking and how this relates to offending would be useful to determine how services could be better developed to meet these needs. Interviewees also suggested that there is an existing gap in preventative work which needs to be addressed as in the past it has been difficult to provide any preventative services at early stages in people’s lives.

Albyn House Designated Place in Aberdeen (further described in Chapters 4 and 8) was also thought by interviewees to be a service that could be extended to Lanarkshire. Currently, these people, through being considered drunk and incapable and a danger to themselves or others by the police, would be taken into police custody and subsequently, into the criminal justice system. It was suggested by a number of interviewees that this intervention provides a good opportunity to divert people who are intoxicated but have not committed an offence, away from the criminal justice system and into treatment.

Challenges were described as partnership working where interviewees believed it would be beneficial to encourage more cooperative working, especially between the CJA and NHS, as more effective joined up services would serve to benefit both individuals and offenders with alcohol problems more fully.

Other challenges include trying to change community perceptions of drug and alcohol misusers. Partners stated that they were concerned because often once an offender has been labelled as having an alcohol or drug addiction, this is how they are known in society, making it difficult for them to obtain employment and reintegrate back into the community. This is an area where services which address both alcohol misuse and employment work well together with the aim of meeting the addiction needs of the client as well as helping them integrate back into the community.

It is anticipated that the move of prisoner healthcare from the SPS to the Health Board will encourage cooperation between these organisations and between other services. Prison Health Services are currently provided by a combination of salaried professional SPS Nurses and contracted Doctor, Dental and Ophthalmic services, with further input from a range of other Allied Health Professionals. The transfer of healthcare will require sensitive negotiations with all staff groups, and careful consideration as to how a model of care will be delivered in Lanarkshire. Although Shotts Prison will be the focus for the area, consideration will also be given to prisoners returning to Lanarkshire from other SPS establishments such as Addiewell.

5.4 Future Plans

The CJA Area Plan 2011-14 has recently been developed. In the past, while addiction was mentioned, alcohol was not considered separately from drugs. However, as national policy began to focus increasingly on tackling the escalating scale of alcohol-related harm in Scotland, the CJA Area Plan also increased the focus on alcohol misuse in their Area Plan. The strategy links in
with the SOA, the Local Authority’s strategy, and with sections of the ADP plan. Lanarkshire CJA emphasise that partnership working should be at the forefront of thinking when it comes to reducing re-offending.

There was a perception that future services should concentrate on a package of care so that other issues such as accommodation problems, relationship problems, employment problems, etc can also be addressed. Lanarkshire’s Pathways to Work helps people with a health condition or disability remain and progress in employment. A key priority of the ADP and its partners going forward is to establish better links with Routes 2 Work and other organisations providing employability programmes for individuals with substance misuse problems.

There are also plans to address the new CPO which are now at the implementation stage, with interviewees concentrating on what will be practical, achievable and available when the new legislation is implemented.
6. Lothian & Borders CJA

Lothian and Borders CJA covers five Local Authority areas (City of Edinburgh, East Lothian, Midlothian, West Lothian, and the Scottish Borders).

6.1 Roles and Responsibilities
In addition to the elected members from the five constituent Local Authorities who are represented on the CJA, other statutory partners of the Lothian and Borders CJA are:

- Scottish Prison Service
- Scottish Courts Service
- Crown Office and Procurators Fiscal Service
- Lothian and Borders Police
- Area Procurator Fiscal
- NHS Lothian
- NHS Borders
- Victim Support Scotland

Historically, with a large criminal justice population and with several headquarters being based in City of Edinburgh, Lothian and Borders has also had the opportunity to develop positive relationships with the voluntary sector. This is not necessarily something that has come out of the CJA in isolation but the CJA has picked up and benefited from established relationships in the area. These organisations include:

- APEX Scotland
- Turning Point
- Includem
- SACRO
- Action for Children (NCH)
- Venture Trust
- Circle

The Partnership also has representation from the Convention of Scottish Local Authorities (COSLA) and the Risk Management Authority. The CJA is establishing relationships and has engagement with the five Local Authorities and the two health boards to ensure that they have integrated strategic planning between the CJA, the Community Planning Partnerships (of which there are five), Health Boards and the Community Health (and Care) Partnerships (CHCPs), and
ADPs. The Authority aims to ensure that CHCPs are consulted in addition to Health Boards, thus providing a locality input to their planning.

There is varying representation by the CJA at ADP meetings in Lothian and Borders, with regular representation in Mid and East Lothian and Scottish Borders, occasional representation invited to City of Edinburgh ADP and no representation in West Lothian. There appears to be room for more direct relations between the CJA and ADPs and this has been described as "new and developing".

There is a Lothian-wide multi-partner drug and alcohol strategic programme board that meets quarterly and sets the strategic priorities, as well as a delivery group that sits underneath this that examines allocations of funding and resources and issues across the Lothian region. These local ADPs include Mid and East Lothian (MELD), Scottish Borders ADP, City of Edinburgh ADP, and West Lothian ADP.

Although the interviewees suggested that there was no apparent need for new partners, the feedback does suggest that the extent of involvement of some partners could be developed further. Interviewees also indicated that some core partners may not have sufficient staff to allow them to work in close partnership as well as deliver their own core tasks and individual strategic priorities and targets, which may be hindering closer working relations (i.e. lack of availability attend meetings, etc). Partnership working between the NHS, ADPs and the CJA was considered to have improved over time, with the CJA represented on the NHS Lothian Board and some of the ADP committees.

The original Area Plan contained within it a priority to improve health and wellbeing. Under this umbrella, a Health and Wellbeing Outcome Group was established, chaired by a senior public health specialist within NHS Lothian who works together with other health colleagues and agencies to specifically address health related targets in the Plan. To maintain a link- between health and criminal justice colleagues, this group reports quarterly to the CJA.

6.2 Local Services

6.2.1 Mainstream Services

Most services in Lothian and Borders are provided for individuals with alcohol problems, rather than solely directed at offenders with alcohol problems. Referral into these services can come from a wide range of sources, with referrals including offenders with alcohol problems. For example, the voluntary organisation Edinburgh and Lothian Council on Alcohol, which provides advice, information, one-to-one counselling and support, and drop in sessions, accepts referrals from GPs, the voluntary sector, other health professionals/NHS services as well as Criminal Justice Social Work. The Alcohol Liaison Nursing Service run by NHS Lothian offers advice, education and information to both inpatients and outpatients who have issues with their drinking. Referrals are made though the
local hospitals with follow-up support with other agencies also provided. The Alcohol Problems Service, also run by NHS Lothian, provides an assessment and treatment service for people with alcohol problems, including those with accompanying drug misuse problems and mental health difficulties. Detoxification programmes and clinical psychology services are offered as well as occupational therapy services. Referrals are accepted from GPs, Criminal Justice Social Work, voluntary sector and other health professional/NHS services.

In addition to this, there are also services provided at the Local Authority level for individuals with alcohol problems. Most of these services will accept referrals from individuals with alcohol problems such as from a G.P or a self-referral as well as referrals from Criminal Justice Social Work services. For example, in Edinburgh, the Community Addiction Recovery Service offers a structured two day programme for men and women aged 16 years and over and mainly accepts referrals from offenders on a court order with a condition of alcohol treatment/education. In East Lothian, East Lothian Substance Misuse Service provides support to individuals over the age of 18 who are identified as having drug or alcohol misuse problems. Although a mainstream substance misuse service, referrals can come from the courts or Criminal Justice Social Work into the agency who works with offenders in a variety of settings including clinics, social work departments and at an individual’s home. In West Lothian, the Social Work Addictions Team aims to provide an accessible and responsive service for those wishing to take action to address problematic drug and/or alcohol use. Mid and East Lothian Drugs Services include one-to-one work, family support, locality clinics, needle exchange, and acupuncture for individuals with drug and alcohol problems in Midlothian and East Lothian. In the Borders, Addaction provide specialist alcohol support, advice and information for individuals over the age of 18 years who are concerned about their alcohol use. Addaction receive a small number of referrals from the prison service directly, via Phoenix Futures, or via Criminal Justice Social Work services. Addaction take initial telephone referrals and arrange to see clients within 1-2 days of their meeting with their Criminal Justice Social Worker, or from their release from prison.

6.2.2 Offender Specific Services

The following matrix summarises the alcohol services that are specifically available for offenders with alcohol problems in Lothian and Borders CJA. It also shows the area coverage provided. More detailed descriptions of these services, and their respective target groups, are provided in Appendix B.
A specific target within the health and wellbeing priority is to ‘Create alternative treatment models for alcohol-related offending/not just advice based’ (Key Measure 2.1.3). To date, a preliminary literature review on the applicability of ABIs for Community Justice Authority clients has been completed. The evidence review was led by an NHS Lothian representative who sits on the CJA Board and undertaken by the Partnerships for Access to Health (PATH) Project. The aim of PATH is to explore how health, social care, community justice and voluntary sector partners in local Community Health Partnerships can work together to improve access to services. The target remains in the 2011-14 Area Plan and associated action plans, and in 2010-2011 it is hoped that the review will be augmented by a review of residential and peer supported detox services. Again, progress will be monitored quarterly against this target.

The CJA strives to ensure that its services are redesigned and prioritised around six core offender groups, less serious/first time offenders; offenders with mental health problem; offenders with substance misuse problems; persistent offenders, including young offenders coming through the youth system; prisoners needing resettlement and rehabilitation services violent, serious and sex offenders; and women offenders. For example, SACRO, the biggest offender-specific voluntary sector alcohol treatment service provider represented in the CJA, has been piloting a model of service called the Community Links Centre (CLC) since September 2005, which assists in the support and management of short-term
prisoners returning to the community from the three main prisons serving the Edinburgh area, namely HMP Edinburgh, HMP YOI Polmont and HMP Cornton Vale. Lothian and Borders wide, the Meet at the Gate service, as described in Chapter 3, is also available for women offenders returning to the community.

Action on Alcohol and Drugs Edinburgh (AADE) is an integrated team of the City of Edinburgh Council, NHS Lothian, HMP Edinburgh, Lothian and Borders Police, the Procurators Fiscal Office and the voluntary sector. It works locally to allocate funding to agencies offering alcohol and drug treatment rehabilitation in line with the national and local priorities. The group facilitates short term immediate action groups for issues requiring a rapid response and facilitates regular meetings of drug and alcohol agency managers in Edinburgh.

In Midlothian and City of Edinburgh, the Alcohol Education Probation Service run by SACRO, assists people to understand and control their alcohol problems and behaviour. The service provides a programme for offenders which explores the links between alcohol use and offending. Offenders are referred into this service by their Criminal Justice Social Worker. A completion report based upon the probationer’s participation is provided for the supervising social worker and sentencer on completion of the programme.

Arrest Referral, run by SACRO, is available in Edinburgh and Midlothian which aims to refer those in custody in Edinburgh Sheriff Court into treatment, support and rehabilitation services to help reduce drug and/or alcohol use. The service can also make referrals into other agencies to help deal with any other problems or issues that arise. The SACRO worker will offer an interview to those in custody in the court cells and will follow this up with another interview at SACRO’s Community Link Centre. If the individual is remanded, SACRO will write to them in prison asking the offender to make contact when they are released. A SACRO worker can also visit an offender in prison if this is requested and considered appropriate.

Borders Alcohol Project for Offenders (BAPFO) service is targeted at individuals whose offending was linked to the use of alcohol. BAPFO is a structured six week programme for individuals, giving them the opportunity to explore their relationship with alcohol and its links to their offending behaviour and to develop skills and tools that help support a change in their drinking. This service is not one which individuals can either self-refer or ask for referral into, but where referral is based on the needs assessment undertaken by the Criminal Justice Social Work case manager.

In West Lothian, priority groups are considered to be male perpetrators of domestic abuse and young offenders. Operation Floorwalk is a multi agency scheme to curtail underage drinking and tackle anti social behaviour linked to the excessive consumption of alcohol. The initiative involves detention of young people caught carrying out acts of nuisance or anti-social behaviour where alcohol is perceived to be a contributor, with information and advice given in police stations to both the young people and their parents at the point of collection. This service was recently evaluated and identified reduced drinking
behaviour among the target group. Work is ongoing to consider the risks associated with this approach, especially for young people living in violent households, and this is perceived as a potential challenge to the service. This intervention continues to run in the West Lothian area.

6.3 Gaps and Challenges
A key challenge identified by the CJA is the need for greater understanding of the respective offender profiles in each of the five authority areas. It is acknowledged that better use could be made of local information and intelligence regarding offender needs in order to allow evidence led planning for the future.

Locally, West Lothian considered there to be a gap in service provision in terms of tackling alcohol problems in prison, before an offender is released into the community. This has in part been addressed for women offenders by the Meet at the Gate Project run by Circle where, as described in Chapter 3, a Circle worker based in Cornton Vale is responsible for identifying women who are eligible for the service. The worker will provide direct support and then co-ordinate a handover to the Circle worker in the community who will support women with regard to a number of problems, including tackling alcohol or drug abuse.

West Lothian also considered there was a gap regarding offenders with alcohol problems which did not quite merit referral to an alcohol-related service. As a result, ABI training has been piloted by practitioners in the public and voluntary sectors. Following some changes to the initial model, this multi agency approach will be rolled out in the coming months to include police officers, Criminal Justice Social Workers, and those who work in the housing sector. A process and impact evaluation is planned once the intervention is underway.

6.4 Future Plans
As with the other CJAs, Area Plans have already been developed for 2011-2014. The Lothian & Borders CJA plan has five core priorities, including improving joint working practices with key partners, improving information sharing, and seamless delivery of statutory outcomes. Also considered important was improving community integration, as research shows the majority of people who end up in the criminal justice system have experienced multiple disadvantages in their early years such as poor housing, limited access to training and employment, as well as mental and physical health and substance misuse problems within their families and communities.

The Lothian and Borders CJA Area Plan aligns many of its objectives with national targets and outcomes. The Government seek to deliver these outcomes locally through the Concordat and the Single Outcome Agreement with local Community Planning Partnerships. The CJA then see it as critical that the Community Justice Authority continues to develop relationships with the local Community Planning Partnerships and contribute at a strategic level to the Single Outcome Agreement process, in order to be involved in the delivery of these
outcomes. The CJA Area Plan states that they will do this by communicating effectively with national and local government and ensure that available resources are aligned to Government policy and priorities, at a local level.

The draft Area Plan, within the remit to create 'Communities of Prevention', continues its commitment to 'Develop approaches that capture and build on the relationship between the need to reduce health inequalities and reduce re-offending'. This is coupled with a focus on shifting resources to community based services to complement provision in custody. Aligned to this is the need for future service provision to demonstrate best value for money, and not be based on historical growth of services.

The Area Plan identifies three main areas of challenge for the future of the Authority, these being:

- developing mechanisms for community consultation through Community Planning Partnerships and in so doing increase public confidence
- developing an integrated reporting system between Community Planning Partnerships and the Community Justice Authority which evidences planning towards national outcomes and local priorities
- demonstrating how Community Health (and Care) Partnerships are actively involved in integrated planning.

The area is experiencing growing engagement from NHS partners, although this is said to vary considerably between the regions. Achieving clearly defined partnership working between the CJA and NHS partners remains a key challenge in this area.
7. North Strathclyde CJA

North Strathclyde comprises the constituent Local Authority areas of Argyll and Bute, East Dunbartonshire, East Renfrewshire, Inverclyde, Renfrewshire, and West Dunbartonshire.

7.1 Roles and Responsibilities

Local Authority councillors represent Local Authorities on the North Strathclyde CJA, with one elected member and a substitute from each of the Local Authority areas. North Strathclyde CJA partners attend meetings and contribute to the planning, monitoring and delivery of services. The North Strathclyde CJA meets four times a year and these meetings are open to the public.

Statutory partners of North Strathclyde CJA include the constituent Local Authorities as well as:

- Strathclyde Police
- Scottish Prison Service
- Scottish Court Service
- Crown Office and Procurator Fiscal
- NHS Greater Glasgow and Clyde
- NHS Highland
- Action for Children
- SACRO
- Turning Point Scotland
- APEX Scotland
- Victim Support Scotland
- Job Centre Plus

Partnership working between the statutory partners in the area and the CJA was described by interviewees as generally working well. Relationships with other agencies, however, were not described to be operating as effectively such as those with ADPs and CPPs. It was felt by interviewees that it may be of value for the ADPs and CPPs to become statutory partners to help to formalise links with these bodies and require them to participate in joint planning. They also felt that it may be useful for the Health Board to sit on the CJA Board in order to better integrate health into the agenda.

In North Strathclyde CJA, responsibility for strategic arrangements in relation to alcohol misuse is mostly undertaken by both the CJA and the ADPs. There is no single body which takes overall responsibility for services.
In terms of joint-working, North Strathclyde also works closely with Glasgow CJA with regard to issues of mental health. The two CJAs have also recently combined for an alcohol seminar (June 2010). The Turnaround Residential service in Paisley and the community based programmes in Greenock and Dumbarton are shared ventures with South West Scotland CJA and close working was reported between these two CJAs.

7.2 Local Services

7.2.1 Mainstream Services
CJA wide, the Red Tower Project run by the Mungo Foundation, based in Helensburgh, and Ronachan House run by CrossReach, based in Tarbet, offer residential rehabilitation programmes for people who are seeking recovery from substance misuse or respite care. Referrals are mainly made through health authorities or Social Work departments, catering for both individuals and offenders with alcohol problems.

In Argyll and Bute, the Argyll and Bute Addiction Team is a NHS and Local Authority integrated team. The Team work with adults who are experiencing problems in their lives due to their use of alcohol and/or drugs, providing services such as psychological support, planning lifestyle changes, detoxification, and working towards abstinence or controlled drinking.

In East Dunbartonshire, the Addiction Recovery Centre supports people with alcohol, drug and gambling addictions into recovery and supports all family members (including children and teenagers) affected by addiction. The East Dunbartonshire Community Addiction Team as well as the Community Addiction Team in West Dunbartonshire, a partnership between NHS Greater Glasgow and Clyde and East and West Dunbartonshire Council respectively, is the most widely used alcohol service in Dunbartonshire. The Community Addiction Teams provide comprehensive assessment, advice and information, individual counselling, groupwork programmes, access to work/training programmes, alcohol detoxification, harm reduction, service, and liaison/joint working with other agencies. In West Dunbartonshire, the Lomond Alcohol Service run by NHS Greater Glasgow and Clyde provides a service to patients attending the Vale of Leven District General Hospital and links directly to all local alcohol agencies in the community. It provides specialist support to staff working in the hospital and has set up a hospital wide network of Link Nurses to assist in improving the care of those with alcohol problems.

In Renfrewshire, Renfrew Council on Alcohol voluntary organisation provides alcohol advice, employee counselling service, one to one counselling, and group work to individuals in the Renfrewshire area. The service also offers an offender referral scheme where offenders on a Probation Order can be referred in for education or treatment for their alcohol problem. The Alcohol Problems Clinic, also in Renfrewshire, provides day services for individuals with problematic
alcohol use including detoxification facilities, individual counselling, and group work.

In East Renfrewshire, the Substance Misuse Team is comprised of Social Work and Health staff working together to provide a range of services to problematic drug and alcohol users. This service is not targeted at offenders with alcohol problems specifically, although this service can be accessed by any individual whether in the community, in their home, in hospital, or in prison.

Integrated Alcohol Services in Inverclyde represents a joining of Gryffe day services, Community Alcohol Nurses, Liaison Nurses and Inverclyde Alcohol Services. It is a Social Work Agency which provides a service to those experiencing difficulties from their, or someone else’s, consumption of alcohol. It provides assessment and counselling services for clients with alcohol problems, counselling for families of problem drinkers, alcohol counselling and education, social needs assessments, provision of reports for local district and sheriff courts, and an alcohol education programme for offenders. The Alcohol Liaison Nurse Service provides in-depth assessment, appropriate intervention and onward referral to other professions/agencies for individuals with identified or suspected alcohol problems. The Community Alcohol Nurse Service supports individuals with alcohol problems within their community.

Offenders coming through the criminal justice system in the Local Authorities in North Strathclyde CJA will generally be referred into these mainstream services if they require treatment for an alcohol problem. In this way, although these services are regarded as mainstream health services, referral mechanisms into these services are in place should offenders have specific addiction problems that need addressed.

7.2.2 Offender Specific Services

The following matrix summarises the alcohol services that are specifically available for offenders with alcohol problems in North Strathclyde CJA. It also shows the area coverage provided. More detailed descriptions of these services, and their respective target groups, are provided in Appendix B.
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<th>Service</th>
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<td>Arrest Referral</td>
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<td>CATCUS Project, Turning Point</td>
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<tr>
<td>Circle, Addiewell Prison</td>
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<tr>
<td>Drink Driving Rehabilitation Services, RCA Trust</td>
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<tr>
<td>Fairbridge Venture Trust</td>
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<tr>
<td>Moving On, The Robertson Trust</td>
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<tr>
<td>Offenders Programme, RCA Trust</td>
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<tr>
<td>Routes Out of Prison Partnership, The Wise Group, SPS and Families Outside</td>
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<tr>
<td>Throughcare Addiction Service (TAS)</td>
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<tr>
<td>Turnaround (residential unit), Turning Point Scotland (TPS), APEX Scotland and the Venture Trust</td>
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<tr>
<td>Turnaround (Community Bases), Turning Point Scotland (TPS), APEX Scotland and the Venture Trust</td>
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According to the CJA Strategic Assessment (March 2010), the Local Authority areas of Renfrewshire, Inverclyde and West Dunbartonshire are in the top 10 areas of the number of alcohol-related deaths in Scotland for 2008. Interviewees stated that in addition to this there is a strong evidence based relationship between alcohol misuse and crime, for example, when looking at the self-reported Scottish Prison Survey report. Therefore, while these areas are not targeted specifically, there are generally more services concentrated in these areas compared to the other Local Authority areas within the CJA.

Services have been set up targeting young offenders in the area. For example, Turnaround was developed by Turning Point Scotland for young men aged 18-30 with an involvement in the criminal justice system and a complex need.
Turnaround is based on the model piloted in the 218 women's service in Glasgow city, where a holistic, person centred and needs led approach is taken to help service users consider their offending, its causes, the impact on victims and communities, and strategies for moving forward. The service covers two CJA areas – North Strathclyde and South West Scotland – with a residential service and four community bases in Kilmarnock, Irvine, Inverclyde, and West Dunbartonshire. Alcohol issues are addressed in the Turnaround service, along with other issues seen to contribute to a person’s offending. Turning Point Scotland’s Turnaround service is being evaluated by Glasgow Caledonian University and will provide a basis for decisions about continuation of the service. Offenders in the North Strathclyde CJA area can also access the Routes out of Prison Partnership service, as described in Chapter 4.

In addition, Action for Children’s Moving On service is targeted at young offenders aged 16-21 leaving Polmont, which was described by consultees as an example of good practice. Provided by Action for Children, young offenders released from Polmont are provided with help and support. The aim of the project is to identify gaps within current service provision for imprisoned young offenders, with the primary goal of making a lasting difference to those who engage and, as a result, reduce re-offending. This service is not specifically for offenders with alcohol problems, and those with substance misuse problems will be referred onto other appropriate services. This type of targeted Throughcare service is otherwise unavailable to young people released to Renfrewshire. This service was recently evaluated with the results showing that the service had a high rate of engagement from offenders as well as a low return rate to prison for those who engaged with the scheme. The continuity of service offered was one of the key reasons why the project had been able to achieve a high rate of engagement post-prison. The evaluation also reported that the vast majority of clients changed their drinking habits during their time with the project and agreed that this was linked to their engagement with the project (Nugent, 2010).

To reduce offending behaviour through addressing the causes and providing opportunities for change, Fairbridge Venture Trust run a programme targeted at offenders aged 16 to 25 years whom it is thought would benefit from a short course. This programme is used in association with Probation Orders and may be accessed by courts as a specific condition of Probation. Courts can request suitability reports at the same time it calls for a Social Enquiry Report (SER) or after it has considered a SER; alternatively, the social worker providing a SER could initiate such an assessment as part of the overall report. The residential programme of 20 days provides a combination of outdoor activities and structured support and counselling, with both group work and individual elements addressing issues such as alcohol or drug problems and housing.

Creating Alternatives To Custody Through Understanding and Support (CATCUS) is a service provided by Turning Point Scotland which provides day support services to drug misusers aged 16 years and older who are currently engaged with the criminal justice system. The project offers a structured programme for substance misuse and offending with referrals mainly coming
from the Criminal Justice Social Work department in Renfrewshire, East Renfrewshire and Inverclyde.

The Offenders Programme, run by the RCA Trust in Renfrewshire, East Renfrewshire and Inverclyde, works with offenders who are normally referred via deferred sentencing, probation or as part of a prison aftercare service. The service will liaise closely with referring agencies and also with other specialist services where appropriate to offer an integrated range of assessment, education and counselling services to modify clients’ knowledge and attitudes towards alcohol and related behaviours, with an emphasis on offending.

Drink Driving Rehabilitation Services, also run by the RCA Trust, works with drivers in Renfrewshire, East Renfrewshire and Inverclyde who have been convicted of a drink driving offence referred by an appropriate court. The courts have the power to make an order where the offender is disqualified for 12 months or more. The main aim of the course is to reduce the risk of drink-drivers re-offending. The programme is designed to educate drink-drive offenders in relation to alcohol and its effects in general but also with particular reference to drink-driving. An evaluation is carried out at end of each course.

In addition to the mainstream service provided by Integrated Alcohol Services, there is also an Arrest Referral scheme, working directly with the Criminal Justice Social Work team, the Sheriff and Justice of the Peace Courts to provide services for offenders in addition to the services they provide for individuals with alcohol problems. Circle, also described in Chapter 5, is available for male offenders who are fathers, either on remand or coming to the end of sentence at Addiewell prison and is available in both North Strathclyde and Lanarkshire.

The Throughcare Addiction Service (TAS) is the provision of a range of social work and associated services by community or prison-based social work staff for offenders from the point of sentence or remand, during the period of imprisonment and following release into the community. TAS forms part of the voluntary aftercare service and is delivered by CJSW or by a contracted service provider who will encourage the offender to engage with services and attend appointments to deal with issues such as alcohol and drug addiction, health, housing and benefits.

7.3 Gaps and Challenges
Some interviewees felt that there was some overlap between services provided in the area and that better co-ordination and streamlining between services is needed in order for these services to work more efficiently. However, the transfer of prisoner’s health care from the SPS to the Health Board may provide a continuous link of healthcare for prisoners when they are released. Interviewees stated that this will facilitate the smooth transfer of healthcare when offenders return to the community, allowing them to access appropriate services immediately upon release.
Interviewees stated that there is currently limited partnership working between the ADPs, CPPs and CJAs and stressed that there needs to be greater link up between services in order to share resources and costs, especially as funding may come under pressure in the future.

Geography is mostly an issue in areas such as Argyll and Bute where services are required to be different in scope and structure compared to more urban areas, due to problems with transport links and accessibility to centrally based services.

Locally, there were also perceived gaps in catering for offenders who have poly drug use, with considerable inconsistency in provision and practice across the CJA in this regard. Similarly, services for women offenders with drug and alcohol problems and those facing mental health challenges were seen as scarce. Although there are some services provided for women, service provision is not consistent across the CJA area.

7.4 Future Plans

Local Criminal Justice Social Work plans refer to the CJA Area plan, and vice versa. The CJA’s Area Plan also links into SOAs where appropriate. The Scottish Government seeks to deliver their national outcomes locally through the Concordat with Local Government and the SOA with local CPPs. The CJA therefore see it as critical that North Strathclyde CJA continue to develop their relationship with the six local CPPs and contribute at a strategic level to the SOA process.

In the past, there was a significant imbalance of policy initiatives based on tackling drugs, for example, the DTTO service far exceeds any monies available for alcohol services. Additionally, of each of the Local Authority’s SOAs, the only one that mentions a link between alcohol and offending is Inverclyde. However, this is an issue which is perceived by interviewees to be changing gradually over time. Future plans may also have to look at people who are poly drug users as many offenders in the criminal justice setting have both drug and alcohol problems. In the future, it was felt that there was a need for services to be concentrated on both these issues instead of addressing problems in isolation.

During the planning process for the 2011-14 Area Plan, local strategic aims and objectives were identified whilst ensuring that they linked back to the national priorities. Priority groups were defined as serious sexual and violent offenders (including perpetrators of domestic violence), persistent offenders, Throughcare for prisoner release arrangements (including substance misuse; health; literacy and employability and accommodation), young offenders, women offenders, the new community payback order, and victims of crime.

These areas were defined as priorities based on a strategic assessment which was compiled for the North Strathclyde CJA area. This outlined types of offending and re-offending patterns alongside imprisonment rates as well as demographic information across the area. In relation to alcohol, it showed that
there was a correlation between alcohol and offending nationally, and in particular, a growing number of young people and women involved in the criminal justice system who have substance misuse problems or who relate their offending to alcohol consumption.

North Strathclyde CJA hopes to work closely with Glasgow CJA to learn more about the services provided to prisoners returning to the community. It is anticipated that models can be adopted from other areas and applied to the new prison HMP Lowmoss, located within North Strathclyde CJA in Bishopbriggs. Planning is currently underway to provide a service in this new prison in conjunction with Glasgow CJA as it is thought the new prison will also take prisoners from the Glasgow area.

Discussions regarding the new Community Payback Order have begun, with each Local Authority looking at the partners and services available in the area that the CPO can utilise when it comes into being. Any issues and risks will have to be determined beforehand, as implementation and services available will be different in each area.

Future plans include greater continuity and partnership working between services and partner organisations at different stages in the criminal justice process. Improved interaction between agencies would entail a review of existing processes for information sharing forming recommendations to streamline and improve processes and develop future services.
8. Northern CJA

The Northern CJA covers the Local Authority areas of Aberdeen City Council, Aberdeenshire Council, Comhairle nan Eilean Siar Highland Council, Moray Council, Orkney Islands Council, and Shetland Islands Council.

8.1 Roles and Responsibilities
Each Local Authority is represented on the Northern CJA by one Councillor and one substitute Councillor. In addition to the Local Authorities listed above, other statutory partners are:

- Scottish Prison Service
- SACRO
- Grampian Police
- Northern Constabulary
- APEX
- Barnardos
- Venture Trust
- Victim Support Scotland
- NHS Grampian
- NHS Highland
- NHS Eilean Siar
- NHS Orkney
- NHS Shetland
- COPFS
- Scottish Courts Service
- Scottish Government
- Turning Point Scotland

The Northern CJA Chief Officer is also a member of the Grampian Local Criminal Justice Board and the Highland and Islands Local Criminal Justice Board.

The CJA did not consider that any other partners should be represented at the CJA level. It was felt, however, that the CJA’s interface with the seven CPPs presented a number of challenges. The CJA actively encouraged its Local Authority Criminal Justice Social Work (CJSW) partners to represent the CJA within their respective CPPs as it is recognised that there is room for improvement in this area. The CJA has provided contributions to each Local Authority in respect of their Single Outcome Agreements (SOAs) and receives a mention in the majority indicating the engagement at a strategic level. Other
organisations such as Job Centre Plus and Skills Development Scotland have been invited to work with the CJA in the past and this is done on a needs basis.

The CJA plans are developed through consultation with partners. Statutory partners are encouraged to make reference to CJA Area and Action Plans in their own strategies. There are also some links with ADP strategies. The issue of substance misuse has been identified throughout the planning process as being highly significant. The links between substance misuse, re-offending and anti-social behaviour are well recognised. The Northern CJA also recognises the social cost of substance misuse to the community, offenders and their families.

Interviewees stated that the relationships between the CJA and ADPs are mixed. There are good relationships with Aberdeen City, Aberdeenshire and Moray ADPs, while contact with Orkney is not as frequent and there has been lesser contact with Highland, Western Isles, and Shetland. While the CJA and ADPs who are in contact will share information and keep up to speed with processes in the area, this occurs on an ad hoc basis. Interviewees commented that the use of video conferencing to foster relationships and share information was suggested, however, this has not been undertaken to date.

The CJA is striving to have strategic alliances with CPPs, who are also expected to take a lead on alcohol strategy. A network of named contacts within each of the seven CPPs has been established by the CJA in order that information can be exchanged at an appropriate level. Relationships with CPPs and the CJA vary across the area and range from limited contact to good/growing contact. For example, contact with CPPs is considered to be good in Aberdeenshire and Orkney, to be adequate in Aberdeen City and Shetland, and needing to be worked on in Moray, Highland, and the Western Isles.

The SOAs are generally not tied in particular to the CJAs. However, Orkney CPP stated in its SOA that it supports the Northern CJA in its efforts to ensure that nationally approved offending behaviour programmes designed for use in the community take account of the specific needs of rural and island areas and that, although Orkney has one of the lowest drug misuse rate in Scotland, excessive alcohol consumption is a significant factor in criminal convictions. The report cited tackling alcohol misuse as a priority for the area. There have been 50 recorded alcohol-related deaths in the last five years, and the proportion of the population hospitalised for alcohol-related and attributable causes is significantly higher than the Scottish average. The Orkney Drug, Alcohol and Smoking Action Team have a particular focus on changing cultures, prevention and education. These SOAs relate back to the National Outcomes for Scotland.

The Aberdeenshire Alcohol and other Drugs Strategy 2009-12 makes a commitment to break the recurrent cycle of problematic alcohol or other drug use leading to community harm and subsequent custodial consequences by strengthening and integrating the assessment, treatment and support available to offenders in custody and on liberation in the community. Plans and practices are reviewed in accordance with standard CJ orders and licences. The work of the teams and partner agencies is reviewed and updated at the ADP and through
submission of returns to the NHS and the Scottish Government. In the past, voluntary organisations have submitted an annual report to the funding body. Aberdeenshire ADP is also in the process of implementing an outcomes monitoring process where both voluntary and statutory services will have to participate in this process.

At the CJA level, there is not a specific plan with regard to alcohol policy as this is determined at the Local Authority or Health Board level. It is perceived by the CJA that in the east of the Northern CJA, drug misuse is the main issue, and while alcohol is less of an issue, it is still a problem. Similarly, in the west of the CJA, alcohol misuse is prevalent, while drug misuse if less of an issue. In order to work more closely with three ADPs in Grampian and HMP Aberdeen, Cornton Vale and Polmont, a Grampian working group has been convened to pursue this agenda on a regional basis. This work is still ongoing.

In Aberdeenshire, the CJSW service user group is made up of people on licence or a Court Order, or those who are eligible for a Throughcare Addiction Service who have been serving short sentences. Assessments and regular reviews are built into individual service user work, with Service User Feedback Forms used to gain information from service users on performance and areas potentially requiring training. In terms of future commissions from the ADP, a service user is now going to be a part of the selection panel throughout the process.

In the Northern CJA, Local Authority Criminal Justice Social Work provide services for offenders in the community, while the SPS provides services for offenders in prison, and ADPs provide services for individuals with alcohol problems, both offenders and non-offenders. There is, therefore, a shared responsibility for the delivery of services in the area with a little distinction between offender specific services and mainstream services due to the fact that offenders with alcohol problems can be referred into either service. The CJA are an overall strategic body, and therefore it is primarily the Local Authority or the ADP who would commission services.

Results are monitored through annual reports from the Addictions team, through the throughput of numbers, and through evidence of partnership working.

With regard to care pathways, there are a variety of local arrangements depending on the agencies involved. Local arrangements vary across Local Authorities and within the CJA, with some arrangements more joined up than others. Northern CJA and Aberdeenshire ADP developed a draft chart detailing 'interception opportunities' at each stage of the criminal justice process (see Appendix D). There is no Northern CJA wide care pathway.

8.2 Local Services
8.2.1 Mainstream Services

There are no Northern CJA wide services available for individuals with alcohol problems. Most services are available on a local basis, with only Aberdeenshire and Aberdeen City providing joint services in some instances. For example, Aberdeen Foyer provides supported accommodation for young people aged 16-25 with alcohol and drug problems, while The Alexander Clinic provides a specialised treatment programme designed to meet the needs of those who suffer from alcohol, drug and gambling dependence. This includes residential drugs and alcohol detoxification, residential rehabilitation, counselling and aftercare for individuals in Aberdeenshire and Aberdeen City.

Locally, The Community Alcohol Services Aberdeenshire (CASA) provides advice and information via a telephone helpline. Services include in-depth assessment of the needs of each service user, short term support and advice to people who are drinking above safe limits, ongoing counselling when appropriate, support from a CASA buddy, and joint working and referral to other services when appropriate. Moray Council on Addiction provides advice and information, counselling, cognitive behavioural therapy, outreach clinics, and talks/training to people with both drug and alcohol problems. Orkney Alcohol Counselling and Advisory Service (OACAS) provides a one-to-one counselling service aimed at those who wish to address and overcome their own or another's problems connected with inappropriate consumption of alcohol and/or the misuse of drugs. The Alcohol Advice Centre in Shetland provides one-to-one counselling service for individuals who misuse alcohol as well as advice, support and counselling to families, friends and partners. In the Highlands, the Alcohol Counselling Service offers a range of services in four areas across the Highlands helping individuals deal with alcohol problems. In the Western isles, the Alcohol and Mental Health Liaison Nurse delivers medical and mental health assessments for substance misusers with short-term support and guidance.

The NHS also provides a number of services in each Local Authority area of the Northern CJA. For example, the Integrated Alcohol Service run by NHS Grampian provides specialist assessment and treatment interventions for drugs and alcohol, including harm minimisation and relapse prevention work for individuals in Aberdeen and Aberdeenshire. Operation Avon is a multi-agency approach to tackling substance misuse in Moray. The initiative combines the resources of Grampian Police, NHS Grampian and Moray Council in a bid to reach young people in the community who are drinking alcohol or becoming involved in anti-social behaviour. Shetland Alcohol Support Services, run by NHS Shetland, provides informal chat, one-to-one support, counselling groups, and dedicated outreach services for individuals with alcohol problems in the Shetland area.

In addition, there have been a small number of initiatives and awareness campaigns run in the Northern area targeting those with problematic alcohol problems. For example, there was an awareness campaign run by the police and social work services regarding drink driving and childcare among the Eastern European population in Aberdeenshire and Aberdeen City where prevalence of
drink driving and looking after children while under the influence was high. However, funding for this service was only available for a short period of time and it has now been discontinued.

Mainstream services cater for offenders with alcohol problems as well as individuals with alcohol problems. Often, offenders subject to statutory orders, for example, Probation Orders with a requirement to undergo alcohol treatment, are referred to the Criminal Justice Addictions Team where they undergo an assessment of needs and referral into the appropriate services, whether they are Mainstream or offender specific. Services will include counselling and programmatic work, with referral to services carried out in conjunction with the identified needs.

8.2.2 Offender Specific Services

The following matrix summarises the alcohol services that are specifically available for offenders with alcohol problems in Northern CJA. It also shows the area coverage provided. More detailed descriptions of these services, and their respective target groups, are provided in Appendix B.

<table>
<thead>
<tr>
<th>Service</th>
<th>Aberdeen City</th>
<th>Aberdeen-shire</th>
<th>Eilean Siar</th>
<th>Highland</th>
<th>Moray</th>
<th>Orkney Islands</th>
<th>Shetland Islands</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Education Initiative, SACRO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>🟢</td>
<td></td>
<td></td>
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<tr>
<td>Alcohol Education Programme, Social Care &amp; Alcohol Advice Centre</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>Alcohol Re-offending Service, SACRO</td>
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<td>🟢</td>
<td></td>
</tr>
<tr>
<td>Caladh Trust Community Café and Drop In</td>
<td></td>
<td></td>
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<td>🟢</td>
<td></td>
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<tr>
<td>Community Integration Unit (CIU)</td>
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<td>🟢</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>COVAID - Control of Violence for Angry Impulsive Drinkers</td>
<td>🟢</td>
<td>🟢</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Criminal Justice Social Work addictions specialist</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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</tbody>
</table>
Local Authorities within the Northern CJA were given the opportunity in 2008 to bid for additional service development funding from the Scottish Government. The Northern CJA chose to develop services around substance misuse. All seven authorities were successful in bidding for a total of £165,000 per year for three years. The funding provided and the Local Authority spending is outlined in the table below.
### Table 8.1 Northern CJA Funding

<table>
<thead>
<tr>
<th>Authority</th>
<th>Funding</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aberdeen City</td>
<td>£20,000</td>
<td>Enhancing adult literacy's and employability programmes</td>
</tr>
<tr>
<td>Aberdeenshire</td>
<td>£20,000</td>
<td>Provision of an adult literacy's worker</td>
</tr>
<tr>
<td>Eilean Siar</td>
<td>£27,683</td>
<td>Specialist substance misuse social work assistant</td>
</tr>
<tr>
<td>Highland</td>
<td>£45,000</td>
<td>Specialist workers to tackle alcohol misusing offenders</td>
</tr>
<tr>
<td>Moray</td>
<td>£26,317</td>
<td>Provision of an additional drug and alcohol support worker</td>
</tr>
<tr>
<td>Orkney Islands</td>
<td>£13,000</td>
<td>To commission the provision of additional substance misuse services</td>
</tr>
<tr>
<td>Shetland Islands</td>
<td>£13,000</td>
<td>Substance misuse services (programme work and support) from SACRO</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Additional social work hours to enhance services for substance misusers</td>
</tr>
</tbody>
</table>

In Aberdeenshire, there are a number of groups within the Criminal Justice Social Work service such as a life skills group, an alcohol group, and a women's group for female offenders with substance misuse issues. Only the alcohol group is strictly for offenders with alcohol problems, but at present there is a high prevalence of alcohol-related offending, and the focus of the other groups is increasingly concentrating on offenders with alcohol problems. These services evolved out of local need and tracked changes in the nature of those offenders sentenced to community based Orders and those released on Licence. Some of this work is run by voluntary sector partners where Criminal Justice Social Work will refer clients in, some is jointly worked between Criminal Justice Social Workers and Turning Point and some is in-house within the Criminal Justice Social Workers department. There is also a pilot Criminal Justice Social Work Addictions Specialist based in the local courts in the Aberdeenshire and Fraserburgh area. The role is to engage with people who have been given a discharge or a community sentence for offences relating to their alcohol use within the court. This pilot is 18 months in and has the potential to be funded for a third year.

In relation to partnership working, Opportunity to Reduce Criminal Activity (ORCA) was perceived to be a good example of multi agency partnership working. ORCA is a joint initiative between Grampian Police, Aberdeenshire Council Housing and Social Work, Criminal Justice Social Work and Turning Point Scotland (Northern Horizons Service). ORCA is aimed at offering low tariff/high volume offenders from the local community who have a drug or alcohol problem the opportunity to access structured support to address their offending, tackle their substance-misuse and associated behaviours and reduce the harm inflicted on communities by these individuals. The service is a three year pilot in Peterhead and Fraserburgh which began in January 2010 with the local police.
already reporting a reduction in offending as a result of the intervention. Turning Point Scotland has also produced an annual report, and will conduct a thorough evaluation prior to the project coming to an end. Aberdeenshire ADP has not made plans to undertake an independent evaluation.

In Aberdeen City, the Drink Drive Rehabilitation Scheme is aimed at people who have been charged with an offence related to alcohol and driving. It aims to provide an opportunity for participants to examine the circumstances that led to the drink drive offence and acquire new skills to reduce the risk of re-offending. The Source, run by Barnardos, offers support, information and advice on alcohol and/or drugs and carries out a full assessment on how this is impacting on the young person’s life and offending. Grampian Police, Aberdeen City Council and SACRO are working together to identify persistent young offenders and to put interventions in place to stop their offending behaviour. Known as the ‘Tilly Youth Project’, this intervention focuses on reducing re-offending tackling issues such as alcohol and drug use.

There are some interventions which run in both Aberdeenshire and Aberdeen City. The Control of Violence for Angry Impulsive Drinkers (COVAID) is an individual or group cognitive behavioural therapy treatment programme, the ultimate aim being to reduce violence, through tackling the mediators of anger, impulsivity and drinking. New Direction run by Barnardos aims to reduce the offending behaviour of young people by offering an intensive intervention programme by liaising closely with other services such as alcohol and drug treatment services, Grampian Police, Social Work, and NHS Grampian.

An Alcohol Education Initiative is available in Orkney. This is offered on a voluntary basis where the worker will work with offenders referred from custody and offer support and education in relation to alcohol. Funding is currently in place until March 2011 when the service will be reviewed. Also in Orkney, since August 2008, there has been a Criminal Justice Worker who provides a programme of work and practical support where substance misusing offenders are identified and referred by Orkney Islands Council’s Criminal Justice Service. The Alcohol Re-offending Service run by SACRO in Orkney aims to explore the process of becoming intoxicated and increase understanding of the influences of alcohol in relation to offending. Referrals to the programme can be made through the court system or on a voluntary basis. In addition, the Literacy and Employment run by SACRO is a signposting service for offenders with literacy and employment problems and substance misuse problems. Funding for this service is currently in place until March 2011 when it will be reviewed.

In Shetland, the Alcohol Awareness Course Education Programme is a service for individuals convicted of a drink driving offence as well as other alcohol-related offences. The Diversion from Prosecution Scheme offers supervision to people of all ages who have been charged with possession of drugs or with a minor offence where alcohol has been involved, thus avoiding a criminal record.
The Moray Youth Justice Team works with young offenders aged 8-18 years with issues such as alcohol and drugs to reduce youth offending, particularly persistent offending and so reduce the impact on communities in Moray.

The CJA targets women offenders, who often have drug and mental health problems as well as young offenders more generally. Targeted interventions for women include, for example, in the Western Isles, The Caladh Trust Community Café and Drop In which aims to improve the lives of substance misusers and those struggling with other life issues, and in particular, holds a women’s group to encourage more women to access facilities. This service was set up after research undertaken in Cornton Vale showing an increase of women in prison, most of whom have substance misuse problems. Therefore, although not considered an offender specific service, the Caladh Trust Community Café and Drop In caters for both women with alcohol problems as well as women offenders released from prison. In Aberdeen City and Aberdeenshire, the Community Integration Unit (CIU) service was set up in May 2010 where women released from prison would be housed in a facility in Craiginches prison where they would be allowed to ‘come and go’ and in doing so engage with local addiction services to tackle their drug and alcohol problems.

8.3 Gaps and Challenges
In general, it was perceived that there is a gap when considering violent offenders with alcohol problems. There is the perception by some partners that some violent offenders may be overlooked with regard to services as trying to engage with them is considered to be difficult. Across the two police force areas, Northern Constabulary and Grampian Police, during 2007/08, 1,300 serious violent crimes, 11,500 petty assaults and 15,000 breaches of the peace were recorded. Of those detected, it was estimated in just over 50% of offences, that alcohol was a factor. Therefore, it was considered that more services relating directly to tackling offenders with alcohol misuse problems were needed.

Geographic boundaries are also an issue in the Northern CJA, especially in Highland which has some of the most rural and remote communities in the country. Practical efforts to achieve meaningful engagement are ongoing issues. In addition, because of the rural environment of Aberdeenshire, and lower levels of prevalence of alcohol and drug misuse than other areas of Scotland, it is difficult to have fixed agencies in particular locations.

There was previously a programme run by SACRO in Orkney called the Care and Respect Programme. People convicted of an alcohol-related driving offence were referred by the Sheriff Court as part of a deferred sentence, given in order for the individual to complete a proactive educational programme. The intervention was aimed at increasing community safety by reducing levels of alcohol-related driving offences while receiving an interim driving ban. This service was replaced when a national initiative was introduced allowing drink drivers who appear in court an option to pay to attend a drink drivers’ rehabilitation course. However, as a consequence, fewer drink drivers have
taken up rehabilitation courses because they have to pay for it themselves and because the nearest area where they can attend the course in Inverness, representing a challenge for recruitment to this service.

Locally, there was also a perceived gap in service provision for those on short sentences of under 31 days when released back into the community as they are given no statutory treatment for their addiction on release. It was thought that greater integration would help to avoid these short sentences, in particular with regard to drug and alcohol services.

Future plans and services will be required to operate within tight budgetary constraints. This will present challenges in terms of maintaining existing levels of service whilst seeking efficiency savings. In addition, there are currently capacity issues with services funded by ADPs, with challenging decisions being addressed with regard to targeting new clients despite the fact that this would increase waiting lists.

8.4 Future Plans
Local objectives are described in the 2011-14 Area Plan. The five work streams are: young people who offend, pre disposal, effective community disposals, custodial sentence management, and community re-integration. The 2011-14 Area Plan describes that one of the main aims of the CJA was to promote early intervention/preventative work with young people who offend and ensure a seamless transition between youth justice and adult criminal justice services. In addition, the Northern CJA will endeavour to identify any offenders unable to access appropriate health services following release from prison, including prescribing services and engage NHS partners to resolve such problems where local arrangements have not been effective following the change in health care of prisoners from the SPS to the Health Boards.

Each Local Authority Criminal Justice Social Work services have an Action Plan which is tied to the CJA’s Action Plan. Strategic plans are also developed at an ADP level as well as at a Criminal Justice Social Work level.

In Aberdeenshire, new services are based on the Government’s agenda that, although treatment is important to support recovery, a multi-faceted approach that takes into account other factors such as people’s relationships with others, housing and employability are also important in the recovery process. New work has looked at trying to create new social networks for people with alcohol problems. New services in the tendering process are a volunteer buddy scheme, where volunteers will ‘buddy up’ with people with alcohol problems to provide help and support. The idea for this service came from a similar programme in Wales.

Aberdeenshire ADP are considering development of a service based on a model that is running in West Lothian called Operation Floorsweep/Floorwalk (described in Chapter 6) which is a multi agency scheme to curtail underage drinking. These services will generally work in the same way as other mainstream
services, where referrals can be made from Criminal Justice Addictions teams into these services as well as referrals from non-criminal justice agencies.

A new development in 2010 is the Community Integration Units (CIU) in HMP Aberdeen and HMP Inverness which began in May 2010. Women offenders nearing the end of their prison sentences and risk assessed as suitable for going into communities unsupervised are housed in a dedicated facilities. They engage with a range of services in the community and within the Units including engaging with local addiction services to tackle their drug and alcohol problems. Women offenders from Aberdeen and Aberdeenshire occupy the HMP Aberdeen Unit and women from Highland and Moray occupy the Inverness Unit.

Turning Point Scotland custody referral scheme is currently being extended in Aberdeenshire to include staff in two police stations in Inverurie and Fraserburgh in Aberdeenshire who are there to talk to arrestees if they wish to speak to someone regarding their alcohol problems. The staff will also provide ABIs where needed as well as other help and support for their alcohol problems.

In Moray, NHS Grampian in conjunction with Grampian Police plan to implement a pilot study basing nurses within a custody suite. Final negotiations are being progressed and it is likely the scheme will commence in early 2011. The custody nurses scheme will involve Nurse Practitioners being present within the Elgin Custody Suite between 2200 and 0400 on Friday and Saturday nights. This will be run initially as a pilot project over ten weeks. The nurse’s role includes assisting the Custody Sergeant in assessing the suitability of those brought in to be retained in a cell, liaison between the custody suite and A&E, treating minor injuries, administering pain relief, and delivering screening and ABIs where appropriate. An evaluation of the scheme will then take place on completion. The scheme will be assessed on its suitability for effectively delivering ABIs and its ability to free up both NHS and police resources which would have otherwise been engaged in escorting and treating individuals at A&E.

The Criminal Justice and Licensing (Scotland) Act 2010 introduced Community Payback Orders (CPOs) which will come into effect across Scotland from 1 February 2011. There are likely to be several challenges in the development of CPOs, which will be more complex than current orders, delivered over a shorter period, and will require improved management of compliance. Discussions are currently underway regarding the implementation of the new CPO. Future plans also consider the development of a gender appropriate CPO for women offenders, however those plans are currently in the early discussion stage.
9. South West Scotland CJA

South West Scotland Community Justice Authority covers the Local Authority areas of Dumfries and Galloway, East Ayrshire, North Ayrshire and South Ayrshire.

9.1 Roles and Responsibilities
The CJA consists of four Elected Members, one from each Local Authority area, who provide political and strategic oversight and accountability for the CJA.

Statutory partners of the CJA are the Local Authorities listed above as well as:
- COPFS
- Dumfries and Galloway Constabulary
- Strathclyde Police
- NHS Ayrshire and Arran
- NHS Dumfries and Galloway
- Scottish Court Service
- Scottish Prison Service
- APEX Scotland
- SACRO
- Turning Point Scotland
- Victim Support

A number of additional partners work closely with the CJA including Adult Literacy Networks, ADPs, CPPs, Families Outside, Lighthouse Foundation, local colleges, Routes Out of Prison, Barnados, Serco, Learning and Teaching Scotland, The Wise Group, Venture Trust, Jobcentre Plus, Skills Development Scotland, Dyslexia Scotland and Violence Against Women Forums.

ADPs are not represented on the CJA Board; however, there is a crossover of membership between ADPs and the CJA. The CJA representative attends East Ayrshire ADP and Dumfries and Galloway ADP quarterly, South Ayrshire ADP bi-monthly and North Ayrshire ADP six-weekly. One of the aims of the 2008-11 Area Plan was to integrate more with the ADPs. The three areas of North, East and South Ayrshire also join under one ‘Ayrshire’ umbrella. The four ADPs in the area generally take the lead with regard to the strategic/operational arrangements of alcohol services in each area, with Criminal Justice Social Work Services in each of the four areas also taking a lead on criminal justice specific interventions such as using materials from ‘Targets for Effective Change', as well
as sessions from the Alcohol-related Offending (ARO) Programme on a 1-2-1 basis. In addition, there is an Ayrshire Criminal Justice Partnership which oversees Criminal Justice Social Work services (including specific partnership services) across the three Local Authority areas. Both police forces (Dumfries and Galloway Constabulary and Strathclyde Police) also have a role in the operation of services, for example, in alcohol-related bail conditions in domestic abuse.

With regard to care pathways, Dumfries and Galloway are in the process of developing a substance abuse pathway, led by HMP Dumfries. Discussions in Ayrshire will follow in early 2011 when the CJA Chief Officer meets with the Ayrshire ADP Coordinators. Currently, there is no care pathway for the South West Scotland CJA area.

9.2 Local Services

9.2.1 Mainstream Services
In Ayrshire, mainstream alcohol services are often developed which encompass the Local Authority areas of North, South and East Ayrshire. Examples of these services include Addaction Community Alcohol Rehabilitation Service which provides information, counselling and advice, as well as looking at self-esteem, relationships and general wellbeing. Ayrshire Council on Alcohol provides individual counselling, group activities, telephone counselling, family and carer support, access to agencies, and information and training. Some services such as South and East Ayrshire Treatment and Rehabilitation Service (SEASTAR), funded by South and East Ayrshire Local Authorities and NHS Ayrshire and Arran, are available in both South and East Ayrshire. The service provides individual needs and goals-based interventions for people with a range of substance-misuse issues. Service users may be leaving residential rehabilitation, day services, home detoxification or other specialist care and have a need for continuing support.

In addition, NHS Ayrshire and Arran Addiction Services provide services in a Community Addiction Team and Primary Care Addiction Team in each local area. They provide a comprehensive Ayrshire community based specialist drug and alcohol recovery service to individuals experiencing issues with alcohol and or a drug related problem. In Dumfries and Galloway, the NHS Drug and Alcohol Service provide a similar service for people with complex alcohol and/or drug problems.

Generic services which provide support and treatment to people with alcohol problems can be accessed by offenders with alcohol problems either via self-referral or by referral from a Criminal Justice Social Worker. Services which will have referrals for offenders with alcohol problems include all NHS addiction support services and other specialist services such as Addaction and SEASTAR.
9.2.2 Offender Specific Services

The following matrix summarises the alcohol services that are specifically available for offenders with alcohol problems in South West Scotland CJA. More detailed descriptions of these services, and their respective target groups, are provided in Appendix B.

<table>
<thead>
<tr>
<th>Service</th>
<th>Dumfries and Galloway</th>
<th>East Ayrshire</th>
<th>North Ayrshire</th>
<th>South Ayrshire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arrest Referral Scheme, APEX – D&amp;G; SACRO – Ayrshire</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Ayrshire Council on Alcohol</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Routes Out of Prison Partnership, The Wise Group, Scottish Prison Service and Families Outside</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Structured Deferred Sentence Alcohol-related Offending Programme (ARO)</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Turnaround, Turning Point Scotland (TPS), APEX Scotland and the Venture Trust</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Women in Focus, Barnardos’ Scotland</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

Services currently provided to offenders with alcohol problems include Arrest Referral (AR). At a CJA meeting, Ayrshire Criminal Justice Partnership came into contact with colleagues in Dumfries and Galloway where their AR scheme was already up and running. They took this perceived example of best practice and placed it in a local context to develop the Ayrshire AR service. In Dumfries and Galloway it is operated by APEX and in Ayrshire it is run by SACRO and monitored by the ADP. It is possible that there will be an evaluation in Dumfries and Galloway in the coming months although discussions on the format of this evaluation are not yet underway. The Ayrshire service provided by SACRO has now ended due to funding coming to an end. The Dumfries and Galloway service will continue until the end of March 2011. Future funding for both has not yet been secured.

Ayrshire Council on Alcohol receives specific funding to provide a service for offenders in East Ayrshire, as well as provision for offenders in North and South
Ayrshire within its generic service. The Structured Deferred Sentence Alcohol-related Offending Programme (ARO) is a 10 session programme on safer alcohol use and reducing risk of re-offending, available in North, East and South Ayrshire.

Turnaround, as described in Chapter 4, was developed by Turning Point Scotland for young men aged 18-30 with an involvement in the criminal justice system and a complex need. When Turning Point Scotland set up their Turnaround service, they undertook a mapping exercise in order to determine where the services should be located. This exercise established that there was greatest need for services in the North Strathclyde areas, as well as North Ayrshire and East Ayrshire, as there is a larger offending population there than in other Local Authorities in the area, as well as more deprived communities. Alcohol issues are addressed in the Turnaround service, along with other issues seen to contribute to a person’s offending. Turnaround is available to South West Scotland as a whole (as with North Strathclyde) although the community bases are in Ayrshire. The residential service is used by all four Local Authorities.

The Women in Focus project was born out of evidence that suggested that there was a need to address issues for women offenders as a stand alone group. The service works with women offenders to reduce their levels of re-offending and reconviction, reduce the levels of breached Community Based Orders, and help them make a positive contribution to their local community. It targets women with alcohol and drug problems as well as housing and employment or training needs. Women were seen as a group that were under-provided for and this service seeks to operate equitably across the CJA, with interviewees stating that it is now one of the main services providing support for women offenders with a range of needs, most notably drug and alcohol problems. The Women in Focus project is currently subject to external evaluation by Stirling University.

Routes out of Prison Partnership, as described in Chapter 4, was designed to help prepare and support short term prisoners for the transition from Prison to life on the outside. It is available in Glasgow CJA, South West Scotland CJA, Lanarkshire CJA, and North Strathclyde CJA.

9.3 Gaps and Challenges
Geography is a key issue in the South West CJA, more so in Dumfries and Galloway than in the Local Authorities in Ayrshire, as it covers a large geographic area which means it can be challenging to provide an equitable service across the area.

Many of the non-core services are delivered directly by the Local Authorities individually or on a partnership basis with voluntary sector organisations. However, funding is still a challenge in South West Scotland CJA. For example, the Ayrshire Arrest Referral scheme is currently only funded until September 2010 and has an uncertain future unless more monies are secured.
Interviewees stated that the transfer of health care from SPS to NHS will pose an issue with regard to transfer of care and make a key difference operationally. This is a concern which is currently being discussed internally between the CJA and their partners. The opportunities and challenges of the prison healthcare transfer affect all prisons, including HMP Dumfries and Kilmarnock private prison in the South West Scotland CJA area.

9.4 Future Plans
Future developments on alcohol and offending in South West Scotland will be informed by the CJA Area Plan 2011-14. In particular the following Local Outcomes will drive forward work on alcohol and offending:

- The Criminal Justice and Licensing (Scotland) Act is implemented effectively across South West Scotland CJA (Local Outcome 1): For example, partners are preparing for the introduction of the Community Payback Order in February 2011, to ensure that the new alcohol and drug requirements can be effectively implemented. Criminal Justice Social Work managers have been liaising with health colleagues and Alcohol and Drugs Partnerships (ADPs) to oversee this process.

- Community integration for offenders is improved (Local Outcome 3): The CJA is leading the development of a number of Community Integration Pathways, which are inter-agency protocols to ensure a smooth transition between community and custody, and between custody and the community. These will learn from the Tayside protocols published in 2010, and will include a pathway focusing on substance misuse.

- Re-offending is reduced at the earliest opportunity through early intervention and diversion (Local Outcome 4): Evaluation results will be examined from the two different alcohol-related arrest referral schemes operating in South West Scotland, to inform future developments in this area. ABIs will continue to be rolled out across criminal justice settings. For example Criminal Justice Social Work teams are planning to set up a database to monitor offenders coming through and the number of ABIs delivered, including at follow-up appointments. Early intervention and diversion schemes will also continue to be a priority, in particular to reduce the number of young people entering the criminal justice system – this will build on existing partnership working with the Crown Office and Procurator Fiscal Service (COPFS), police and youth justice teams.

- Wider partnership working contributes to reducing re-offending (Local Outcome 6): The CJA will continue to work closely with the four local Alcohol and Drug Partnerships (ADPs) as their own strategic plans are finalised, to ensure that offenders’ needs are recognised within both mainstream and specialist services. Similarly the CJA will continue to be an active participant on the four local Community Planning Partnerships (CPPs). This recognises
In September 2010, the CJA Board held a problem-solving workshop focusing on alcohol and offending, to develop a better understanding of the relationship between these issues. The workshop identified strong partnership support for action on alcohol to reduce re-offending, in particular focusing on pricing, availability and the need for cross-party unity. The Board has acknowledged Scotland has a deep-rooted cultural problem in relation to alcohol, and that it has a responsibility to challenge and change this culture. A ‘SWSCJA Statement on Alcohol and Offending’ has been drafted as a focus for discussion and engagement with ADPs and licensing boards. This will continue to be a priority area of work for South West Scotland CJA into the future.
10. Tayside CJA

Tayside CJA comprises the Local Authorities of Angus, Dundee City, and Perth and Kinross.

10.1 Roles and Responsibilities

Two elected members from each Local Authority sit on the CJA Board which meets quarterly. Senior Council Officers further represent their respective Local Authority at CJA meetings. These meetings, also held quarterly, are attended by the CJA’s statutory partners. These include the Local Authorities above as well as:

- The Scottish Prison Service
- Tayside Police
- NHS Tayside
- Scottish Court Services
- Victim Support Scotland
- APEX Scotland
- Action For Children

Other non-statutory partners that the CJA interacts with include the CPPs, Community Safety Partnerships, ADPs, a Violence Against Women Partnership, and Youth Justice Partnerships. The CJA liaises with these bodies on a routine basis, so while they are not statutory partners, if there is a particular issue of importance, a representative from these agencies will attend a CJA meeting.

The ADPs are the key leads in terms of delivery of services for substance misuse, commissioning and monitoring many of the mainstream services for people with substance misuse needs, with CJSW running or having access to their own Local Authority Addiction Teams. The CJA is represented on each of the three ADPs in Tayside. There is also a Tayside wide ADP co-ordinating group comprising of the CJA Chief Officer, the Chairs of the ADPs, a senior ranking police officer, and representation from NHS Tayside. This group meets to discuss a more joined up approach of planning services for substance misuse. There is also currently joint planning in identifying gaps for services with offenders.

Each of the Local Authority SOAs in Tayside recognise alcohol as a problem that should be addressed, but do not refer specifically to alcohol in relation to offending.
Criminal Justice Social Work plans are based on Service Level Agreements (SLA) with the service providers and the funding bodies. These are reviewed regularly with targets set for services in some instances. If Criminal Justice Social Work buy in services from voluntary organisations they will generally have an SLA with these organisations. Regular monitoring of drug and alcohol services in Dundee ADP takes place through the Dundee SOA Delivery Framework, as well as through the collation and reporting of information in respect of HEAT Targets A11 (access to services) and H4 (ABIs).

The level of service user involvement varies across Tayside. In Angus, the ADP is planning to establish a service users’ sub group which will seek their views on service delivery and other issues. Dundee and Perth and Kinross have similar groups and make attempts to include service users’ views where possible.

There appears to be effective partnership working in Tayside CJA, especially between CJA and NHS Tayside with interviewees stating that other CJA areas have recognised it as good practice.

There is a care pathway for Tayside prisoners (short term prisoners) in the area of substance misuse which includes those with alcohol problems. Tayside CJA was the first in Scotland to implement a care pathway of this kind\(^4\). There is not a care pathway in Tayside CJA, as such, for offenders with alcohol problems serving community sentences. However, any offenders serving community based sentences, who do have alcohol problems, are referred to relevant intervention services by the criminal justice social workers.

10.2 Local Services

10.2.1 Mainstream Services

There are a number of services set up for individuals with alcohol problems in Tayside, including the NHS run Tayside Alcohol Problems Service (TAPS) which provides counselling and support services for anyone within the Tayside region who feels they require advice or help with an alcohol problem. Tayside Council on Alcohol is a voluntary organisation providing support, education and information to those experiencing problems arising from alcohol misuse, and promoting healthy approaches to alcohol. In addition, a number of services for individuals with alcohol problems are available in each Local Authority. These include in Dundee City; Counselling Support Service run by CairScotland which provides drop in, advice and information, assessment and intervention, and referral; and Key to Change, also run by CairScotland, which provides assessment, treatment and intervention to young people with problematic alcohol and drug use living within Dundee City. Perth Connect in Perth and Kinross, and

\(^4\) http://www.taysidecja.org.uk/Publications/Tayside%20pathways%20master.pdf
Angus Connect in Angus which, both run by Tayside Council on Alcohol, provide one-to-one and group programmes supporting young people to make and sustain positive lifestyle choices where there may be related alcohol problems.

A significant number of Criminal Justice Social Work service clients in Tayside have alcohol and drug problems. Work is generally undertaken with clients on a one-to-one basis where Criminal Justice Social Work staff carries out initial assessments of alcohol misuse as well as misuse of other substances, and are able to provide basic information and guidance to address offence-related needs. Clients with significant alcohol misuse problem may be referred by the Supervising Officer to a range of other, more specialist agencies, for in depth assessment and treatment. There are few specific services available to offenders but offenders are referred into a range of mainstream services that can also be accessed by the general community. These include Tayside Council on Alcohol and TAPS (described above) as well as Eclips which runs a programme where individuals with substance misuse problems are assigned a key worker to develop and review realistic Personal Development Plans, focussing on work-based skills and training needs, and the Dundee Home Finder Service which offers support, advice, advocacy and outreach for people with substance misuse problems who are homeless or threatened with homelessness.

Additionally, other examples of good working practice were cited by interviewees in Tayside. These examples were not offender focused as such but did cater for offenders when they were referred through the Criminal Justice Social Work process. For example, Angus ADP funds Focus on Alcohol Angus, an approach to bring together partners to ensure that alcohol issues are more fully considered in service and strategic planning. This approach has been evaluated positively, with Dundee and Perth and Kinross ADPs considering roll out of this service in their Local Authority area.

10.2.2 Offender Specific Services

The following matrix summarises the alcohol services that are specifically available for offenders with alcohol problems in Tayside CJA. It also shows the area coverage provided. More detailed descriptions of these services, and their respective target groups, are provided in Appendix B.

<table>
<thead>
<tr>
<th>Service</th>
<th>Dundee City</th>
<th>Perth and Kinross</th>
<th>Angus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Action for Children Intensive probation project, Action for Children</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol Brief Interventions Pilot</td>
<td></td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Arrest Referral</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>
The Perth Drink Driving Project (PDDP) is designed for offenders who have two or more drink driving convictions, or first time drink driving offenders whose reading over the legal limit was particularly high. PDDP aims to enable offenders who would benefit from examining and changing their behaviour to become more aware of their drinking habits, to accept responsibility for their actions and to change their behaviour thereby reducing the likelihood of further offending. This project is funded directly by the CJA. There is management and monitoring of this service so that it is running in line with its aims and objectives, however, it has not been formally evaluated as yet.

As part of the NHS Health Scotland Alcohol and Offenders Criminal Justice Research Programme, an ABI pilot is running in Perth and Kinross between September 2009 and March 2011. Set in the community justice settings of probation and community service, it seeks to determine the feasibility and effectiveness of delivering screening and ABIs in these settings. Three areas were selected to host the study, the primary area was Perth and Kinross Criminal Justice Services, with North and South Lanarkshire Criminal Justice Services also invited to participate to strengthen the evidence on outcomes and effectiveness. The evaluation is due to report in 2011.

Delivery of the Tayside Arrest Referral Service is undertaken by Action for Children. It provides assessment and information for both young people and adults in custody, signposting them into support and treatment services if appropriate.

The Custody Nurses Pilot is a 24/7 ‘nurse led’ service that provides cover at all three custody suites in Tayside, at Arbroath, Dundee and Perth. The service started in January 2009 and is a three year pilot between Tayside Police, the

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Status 1</th>
<th>Status 2</th>
<th>Status 3</th>
</tr>
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<tbody>
<tr>
<td>Custody Nurses, NHS Tayside and Tayside Police</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Includem</td>
<td>✔️</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Perth Drink Driving Project (PDDP)</td>
<td></td>
<td>✔️</td>
<td></td>
</tr>
<tr>
<td>Progress2Work link-up, APEX Scotland</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Tayside Short Term Prisoner Protocol for Substance Misuse</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Women Offenders (Right Track 16-21), Tayside Council on Alcohol</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Young Offenders (Right Track 16-21), Tayside Council on Alcohol</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
</tbody>
</table>
University of Dundee Department of Forensic Medicine, and NHS Tayside. The relationship is a partnership whereby the police provide the NHS with access to those ‘hard to reach, hard to hear’ people that often find themselves in police custody. The aims of the custody nursing service include improving physical and mental well-being for offenders, helping to access and sustain suitable accommodation, reducing or stabilising substance misuse, increasing employability prospects, and improving relationships with families, peers and community. According to interviewees, so far this initiative is meeting and exceeding expectations in both Tayside Police and NHS Tayside in terms of improved confidence in custody staff, referrals to other NHS services, support for Arrest Referral workers, and enhanced Throughcare from police custody to prison. There has also been considerable interest from other parts of the country in the service which, as described by interviewees, was shown to be a catalyst for other information sharing initiatives between the NHS and the police. It is thought that this service may be evaluated in the future with evaluation being supported by the University of Dundee, the School of Nursing and Midwifery and the Police Research Project, with efforts currently being made to identify funding for this evaluation work.

Launched in June 2010, the Tayside Short Term Prisoner Protocol for Substance Misuse aims to ensure that short term prisoners on release are referred to other services for their substance misuse needs. The Short-Term Prison Protocols have been agreed by the three Tayside Local Authorities, Tayside Community Justice Authority, NHS Tayside, the Scottish Prison Service and Perth Prison. The initiative was led by Perth and Kinross Council whereby short-term prisoners attend ‘surgeries’ when they are six to eight weeks away from release. Local Authority drug and alcohol teams and health workers provide help and support to prisoners to ensure they have the best chance possible of getting on with their lives after release. It is hoped that as these are factors which divert people away from crime, thus preventing a return to prison.

Perceived examples of good practice cited by local partners included a number of services which aim to tackle an offender’s offending behaviour, but which are not specifically alcohol focused such as Right Track 16-21 and Progress2Work link-up. Local partners were keen to stress that a number of services were available to tackle an offender’s needs, but that these services would cover issues such as housing, education and employment, as well as substance misuse problems.

Progress2Work link-up, described in Chapter 3, provides services for offenders in relation to a number of issues such as housing, employment, and substance misuse. Progress2Work link-up is an example of a service which tackles both alcohol and employment issues of offenders in the community justice setting and is available in both Fife and Forth Valley and Tayside CJAs.

As noted above, Right Track 16-21 addresses different behaviours that are associated with an individual’s offending, but as it is facilitated by Tayside Council on Alcohol; offenders with alcohol problems are catered for. The service is a support and mentoring service for young offenders. The Right Track
initiative is targeted at young offenders aged 16-21, Tayside wide, assessed as having high welfare needs/risks or where there is an immediate risk of custody, either prior to or after a community sentence. It responds to the difficulties faced by this age group of offenders in meeting the structured requirements of Probation/Community Service Orders, by providing a period of intensive assessment, awareness raising, support, education and treatment. In addition, Women Offenders (Right Track 16-21) is a Tayside wide service targeted at young female offenders aged 16-21 and is due to begin in October 2010. An internal monitoring and evaluation framework for the Women Offenders Right Track Service will be developed when the project is underway.

Other services targeted at young offenders include The Action for Children Intensive probation project which provides services across Dundee City for young offenders aged 16 to 25 at risk of receiving a custodial sentence. Service users will have been made subject to a specific condition of a Probation Order to attend the project. The service provides one-to-one and group work programmes that focus on the criminogenic needs of service users, tackles alcohol or drug problems, and enables them to challenge their offending behaviour and its consequences. Includem, also available in Dundee City, is a voluntary service for the 21 and under age group. It provides intensive support and supervision to meet the needs of vulnerable young offenders, looking at a variety of problems, including drug and alcohol misuse.

While geographic regions are not targeted specifically in the CJA, Tayside police have funded community task forces which go into a particular community or town in an attempt to tackle offending behaviour. The specific project will target areas where there are high rates of offending which are generally also areas where there is high deprivation and significant alcohol problems. This project is not specifically related to alcohol and is more concerned with general offending, although there is an acknowledgement that alcohol-related offending is one of the issues tackled most often by the community task force.

10.3 Gaps and Challenges
The main challenge cited was local government cuts which may lead to tighter control of finances and potentially impact on the funding available for services. The CJA hope to overcome these challenges by closer partnership working with their partners, and to target resources and define priorities more clearly. The priority given to different services decided upon by each Local Authority in the Tayside CJA area.

Another challenge cited by interviewees is the geographically and demographically diverse area which makes up Tayside CJA, meaning that services constantly have to be tailored depending on the area they serve.

Across Tayside, the three ADPs are trying to progress the recovery agenda and look at how they embed the ethos of recovery in services. Future needs assessment work will better identify any gaps.
10.4 Future Plans
Target groups within the Tayside area are generally women and young offenders. One of the CJA’s priorities in the 2011-14 Area Plan is to prevent offending and re-offending behaviour through tackling associated factors of inequality in relation to substance misuse, employability, housing, health, and gender. Another objective is to manage young offenders effectively in order to prevent their transition into the adult criminal justice system.

Tayside CJA have not historically worked with other CJAs, however, they have begun working with Fife and Forth Valley CJA with regard to housing and homelessness of offenders in the criminal justice field. In addition, the Chief Officer and Planning officer will meet with their counterparts for regular meetings. They would also be in touch on an ad hoc basis if they were scoping out a project which is currently running in another CJA area.

There are also plans to address the alcohol treatment requirement for the Community Payback Order (CPO). Offenders will obtain a specific substance misuse element on their CPO and it will be the responsibility of the CJA and its partners to ensure that is addressed. The CJA and partner organisations will therefore need to ensure that they can provide for this, and discussions in this area are at a very early stage. Opportunities and challenges presented by the imminent introduction of Community Payback Orders are under active consideration.

There are few new services in the pipeline, with the exception of the Right Track service for women offenders which was due to begin in October 2010. Decisions about further service developments were pending at the time that the work was carried out.
11. Discussion

11.1 Review of Evidence

The review of evidence suggests that there is a clear link between alcohol and offending in Scotland. A significant number of offenders, particularly young offenders, report being drunk at the time of their offence, and around one in ten conditions that are attached to Probation Orders stipulate alcohol treatment/education as a requirement. This shows that alcohol use is prevalent among both those receiving custodial sentences, as well as those given community based disposals.

Survey data also suggests that alcohol may be a contributory factor to offending, with victims often perceiving that offenders are under the influence of alcohol at the time that crimes are committed. This is especially true for violent crimes. Emergency Department attendance data also show that alcohol is a contributory factor in assaults.

Despite these indicators, the actual number of offenders who have alcohol problems, and the proportion of offences that are alcohol-related, is unknown, and may well be under-represented in the statistics that are routinely collected for community justice disposals and from self-report surveys. Indeed, one of the main findings from this research has been that the lack of objective, reliable and systematically collected data available to accurately describe the nature and scale of alcohol problems among offenders.

The review of published literature has also shown that there is limited evidence on what is effective in identifying and addressing alcohol problems among offenders. Among the research that was identified there are some examples of the application of the Alcohol Use Disorders Tool (AUDIT) for screening in the police custody and probation settings, which show varying levels of success. Whilst there is a substantial body of evidence that supports the effectiveness of ABIs in primary care, there is limited evidence that specifically explores the suitability or effectiveness of using ABIs in the criminal justice setting.

The literature does show that Arrest Referral is one of the few evidence based interventions available to use in this setting, and it is frequently employed for this group. The literature on Arrest Referral suggests that it is effective with offenders at detecting and signposting into treatment, but there is less evidence that it works as a mechanism for delivery of direct interventions, unless this is specifically designed into the scheme.

Whilst Arrest Referral appears to be the main intervention used for arrestees with alcohol problems, there appears to be little evidence of effective interventions for offenders post sentence or post-release. The absence of research literature does not, of course, necessarily mean the absence of practice, rather that work that is being done may not be being systematically recorded or documented, or that documented work is not readily accessible. In summary, both routine data and published literature do not, to date, provide any clear messages about ‘what works’ in terms of screening and effective interventions.
11.2 Local Practice
Interviews and evidence gathering at the CJA level revealed a strong awareness among partners for a need to focus more on tackling the alcohol problems of offenders in Scotland and this is reflected in local CJA Area Plans. Despite some considerable variation between CJAs in terms of specific service provision, some common themes do emerge.

11.2.1 Mainstream Services
The research identified a multitude of generic and specialist drug and alcohol services around the country, many of which will engage with offenders as part of their natural client group, but which do not actively target this group or tailor their services to offenders’ needs.

The majority of interventions and services appear to be offered by Local Authorities, Health Boards, and/or local private and voluntary organisations, with considerable variation at the local level in terms of the level and nature of service provision. Furthermore, many of the local services are dependent on short-term funding and are somewhat fragile in terms of longevity meaning that local capacity to deal with alcohol problems is subject to change over time. Generally, local partners in the criminal justice field stated that they will continue to utilise mainstream services as this is an efficient use of resources and provides equivalence of access and service provision.

Health service interventions do not appear prevalent explicitly in the community justice setting, although it is recognised that there was limited direct contact with all NHS partners as part of this study. All NHS Boards, however, do provide mainstream services to which Criminal Justice Social Workers routinely refer their clients for advice and treatment, showing joint working between these partners. There is also a willingness by NHS partners to engage although there is perhaps the opportunity to strengthen joint working between them, CJAs, Local Authorities, ADPs and their health colleagues.

11.2.2 Services for Offenders with Alcohol Problems
The number of interventions, services and future plans to engage specifically with offenders with alcohol problems is more limited, especially when focusing on community justice clients. Interventions in place generally seem to be for offender groups more widely, including Arrest Referral, which tackles both drug and alcohol use, and appears to be the most frequently cited effective intervention for persons engaging with the early stages of the criminal justice process. The research has shown considerable support across Scotland for Arrest Referral, and use in some areas, and it seems that it might be applied more widely to identify and refer those at risk. There may, however, be a need
for more formal evaluation of this scheme specifically as it relates to alcohol and, in particular, reducing consumption and/or harm.

The research has shown that there is already reasonable awareness of how ABIs can potentially be incorporated into the criminal justice process. There is currently an ABI pilot underway in three Local Authority areas (with a formal evaluation currently being undertaken, due to report in 2011), and several Local Authorities also appear to have trained staff in the delivery of ABIs for community justice clients although this is being applied differently in different jurisdictions. What this practice shows is that partners are already trying to use best practice from other settings (i.e. ABIs have a proven track record of success in health settings) to try and tackle alcohol and offending locally.

It does seem apparent that there is little proactive identification of offenders with alcohol problems outwith routine CJSW risk assessments and SERs, and those attending support services are purposefully not labelled by their offending status. Many interviewees expressed a view that offenders should be treated in the same way as any other client would and be offered equivalence of care. While offenders who are identified as having alcohol problems are most often referred into mainstream services, in line with the principles set out in ‘Equally Well’, this may be because of a lack of available offender specific alcohol services more generally. This is an area where there is an opportunity for more joined up working between mainstream health services and criminal justice colleagues.

Responsibility for referral to intervention and treatment at the community justice stage seems to sit mainly with Local Authorities and the voluntary sector once the court process is complete. This can be seen with a number of services where the client's Criminal Justice Social Worker will refer them into the appropriate service to deal with their alcohol problems. Health Boards, the courts, procurators fiscal and other criminal justice professionals are less visible in existing intervention practices, although custody nurses do provide an example of where joint health and community justice partnerships can be seen to be working in tackling alcohol issues.

The emphasis on offenders post sentence does, perhaps, place the burden on Local Authorities to identify or fund services to provide alcohol interventions as part of the requirements of Court Orders. Such services might cease at the end of the Order, highlighting where crossover between criminal justice and mainstream health services could be enhanced, in order to provide continued access to alcohol services which might provide an effective means of addressing the needs of offenders with alcohol problems after completion of a sentence.
11.2.3 Target Groups
Across all areas, two groups are cited by interviewees as ‘priority groups’ for action by CJA partners, these being young people and women offenders. There are a number of examples of specifically tailored services into which women and young people can be referred (both mainstream and some specifically for offenders). Interventions for these groups are predominantly post sentence, with fewer evidence of early intervention work or screening at early points in the criminal justice system for either group.

Gaps in service provision are often noted for prisoners serving short term sentences (as they are not subject to statutory supervision on release), and there is, perhaps, a perception that some of these people are being 'lost' in the system, making it difficult for them to receive help for a drug or alcohol problem. It is anticipated by interviewees that the transfer of healthcare from the SPS to the NHS will close this gap significantly, and will provide a succinct and smooth transition of care from prison back into the community. In addition, new services cited above such as Meet at the Gate and Routes Out of Prison, have gone some way in bridging this gap for short term prisoners when released into the community.

11.2.4 Care Pathways
The scoping study has not identified many practical uses of care pathways between statutory and other support and treatment organisations for offenders. Indeed while no CJA had developed a specific care pathway for offenders with alcohol problems, two CJAs, Glasgow and Northern, had developed a flowchart of processes and interventions for offenders with alcohol and/or drug problems in their local area. These flowcharts were designed to internally map out services available in the area and where gaps may be present, but were not designed to be a pathway for practitioners in the field to use. The development of Integrated Alcohol Care Pathways between prison, community justice settings and other service providers may help clients’ needs be better met. They may, for example, provide greater continuity of care, consistency in access to services and clearly set out Throughcare protocols.

Many of the interventions and treatments that are available to tackle the alcohol problems of offenders are delivered by generic ‘substance misuse’ programmes or services, and so it has been difficult to extrapolate specific referral routes or interventions for alcohol problems independently.

11.2.5 Partnership Working
There appears to be considerable variation both between and within CJAs with regards to the level and nature of engagement with ADPs, Health Boards and CHCPs. It was clear from the research interviews that there are several examples of good practice; however, there is also some scope for ensuring that
local strategic plans and priorities are more greatly aligned between criminal justice and health partners.

CJAs do not play an operational role in service delivery but are key to the planning of future provision and strategic direction in their respective areas. ADPs and Local Authority Criminal Justice Social Work Services are the two main agencies who take a lead with alcohol services and interventions at the local level. These organisations generally seem to be linking well with other local service providers in the voluntary and statutory sectors in terms of commissioning and funding services and are working together to provide services jointly, although it seems essential that more consistency is achieved in the level of engagement between ADPs and CJAs in the future to meet the needs of offenders with alcohol problems.

There are some examples of good practice of this partnership approach which could perhaps be used and applied in other areas around the country. For example, a number of CJAs have Local Authorities and ADPs that are working together to provide joint services or have joint strategies, both formally and informally. For example, in Tayside, there is a Tayside wide co-ordinating group comprising of the CJA Chief Officer, the Chairs of the ADPs, a senior ranking police officer, and representation from NHS Tayside. This group meets to discuss a more joined up approach of planning services for substance misuse and identifies gaps for services with offenders. Also, in Grampian, a working group was set up in 2009 in order for the CJA to work more closely with the three ADPs in Grampian and HMP Aberdeen, Cornton Vale and Polmont. Again, these perhaps provide examples of good practice that might assist in better congruence of services elsewhere.

The police, Criminal Justice Social Work teams and local service providers were also perceived to be working well together, especially in areas where Arrest Referral is offered.

The area where roles and responsibilities were least well defined was at the pre-sentence and sentence stage of the criminal justice process where there was little mention of direct engagement by the CJA, ADPs, CPPs or CSPs with the Judiciary or Courts. Relationships appear to be better post-sentence i.e. between Local Authority Criminal Justice Social Work staff and prisons.

11.2.6 Funding

While CJAs hold the majority of funding that underpins many of the services and interventions described in this report, there remains considerable discretion in the identification and funding of individual services within CJAs through Criminal Justice Social Work Services, primarily.

ADPs also fund services within each Local Authority; however, as the ADP is generally more health than criminal justice focused, these tend to be mainstream alcohol and drugs services. Offenders can be referred into these services from agencies such as Criminal Justice Social Work or as part of a Court Order.
Despite large investments in generic alcohol services, it is evident that, in many areas, local partners feel that there is a need for more resources (money and staff) to allow them to develop existing services further, or to introduce new services. However, there was some evidence of more strategic approaches being employed for better partnership working to ensure that better use is made of existing funding and the services that are already available, albeit this evidence was limited.

11.3 Examples of Good Practice

Partners interviewed as part of this research were asked to describe services they perceived to be examples of good practice and to state the reasoning behind these views. Some examples of good practice were put forth across Scotland which might provide models for adoption more widely, depending on partners adopting a more strategic or joined up approach to the use of funding that is available. These examples, noted in each CJA Chapter, were unable to be validated by the researchers, and represent the views of those consulted only.

Some CJAs work together and meet up to share best practice. For example, North Strathclyde works closely with Glasgow CJA with regard to issues of mental health, and the two have recently combined for an alcohol seminar in June 2010. It is hoped that models can be adopted from other areas and applied to the new prison HMP Lowmoss, located within North Strathclyde CJA in Bishopbriggs. Planning is currently underway to provide a service in this new prison in conjunction with Glasgow CJA as it is thought the new prison will also take prisoners from the Glasgow area.

In addition, the Turnaround services in Paisley, and the community based programmes in Greenock and Dumbarton, are shared between North Strathclyde and South West Scotland CJAs, and close working was reported between these two CJAs. The Turnaround Service is based on the model piloted in the 218 women’s service in Glasgow city, where a holistic, person centred and needs led approach is taken to help service users, many with alcohol problems, to consider their offending. In this way, the Turnaround project has both built on good practice in another CJA area, as well as building partnerships between new areas. An evaluation of the Turnaround service is currently being undertaken, with initial anecdotal positive comments coming from local partners.

Also cited as a perceived example of good practice was the Tayside Short Term Prisoner Protocol for Substance Misuse, launched in June 2010, which ensures that short term prisoners on release are referred to other services for their substance misuse needs and addresses other needs such as housing, employment and training. It is hoped that by addressing these issues, these short term prisoners would be diverted away from crime, thus preventing a return to prison.

Alcohol services which have been evaluated and found to be examples of best practice include the Alcohol Diversion Scheme available in Fife and Forth Valley CJA. The scheme was piloted in Kirkcaldy in 2009, and following an evaluation
showing that the pilot was successful in its aim to provide an educational brief early intervention to the target population of binge drinkers, it was then rolled out across the rest of Fife. Action for Children’s Moving On service in North Strathclyde was also recently evaluated with the results showing that the service had a high rate of engagement from offenders as well as a low return rate to prison for those who engaged with the scheme and a change of drinking habits among the majority of clients.

A number of evaluations are also currently underway including the Community Justice ABIs Pilot taking place in Perth and Kinross, North Lanarkshire, and South Lanarkshire; The Women in Focus project in South West Scotland which is currently subject to external evaluation by Stirling University; and the Turnaround evaluation mentioned above.

Additionally, evaluations are planned for services which have recently been set up or are scheduled to start soon. These include a process and impact evaluation of an ABIs pilot in West Lothian and the Custody Nurses Pilots in Moray, and Arbroath, Dundee and Perth, both of which plan to report on completion of the projects. The Opportunity to Reduce Criminal Activity (ORCA) service, where an annual report is currently produced, will be followed by an evaluation prior to the project coming to an end. ORCA is a joint initiative between Grampian Police, Aberdeenshire Council Housing and Social Work, Criminal Justice Social Work and Turning Point Scotland. The service is a three year pilot which began in January 2010, and hopes to build on multi agency working practices in its service delivery.

The police are core partners in each area, and there were some cited examples of perceived good practice of police-led work to tackle alcohol and offending problems. For example, the Fife Constabulary and Fife Alcohol Support Services jointly run an Alcohol Diversion Scheme which was held up by consultees as an example of good practice of partnership working in the area. The ‘Floorsweep/Floorwalk’ project, and the recent training of police staff in West Lothian to deliver ABIs, also provides examples of police attempts to tackle alcohol and offending problems. Moreover, Custody Nurses in Tayside are a partnership between Tayside Police, the University of Dundee Department of Forensic Medicine, and NHS Tayside, an example of good working practices between the police and the Health Board. The Persistent Offender Project (POP) is a partnership service provided by Glasgow Addiction Services and Strathclyde Police. Persistent drug/alcohol misusing offenders are identified using Police Intelligence in order to link them into sustainable treatment and care within the CATs and encourage them to reduce their offending. POP will pursue service users to encourage them in to treatment and care services and then ensure that service users maintain that link.

Finally, other services cited as perceived examples of good practice by local partners included a number of services which aimed to tackle an offender’s offending behaviour, but which were not alcohol focused. Local partners were keen to stress that a number of services were available to tackle an offender’s needs, but that these services would cover issues such as housing, education
and employment, in addition to substance misuse problems, for example services such as Meet at the Gate and Routes Out of Prison Partnership.

11.4 Gaps and Challenges

Although the scoping study has revealed several examples of local evidence gathering used to inform local practice, there does seem to be a general lack of evidence led development of services (especially evidence to inform the continuation of existing services) and a lack of robust monitoring or evaluation of services and interventions that are introduced. Information gathering exercises such as these may, in some cases, be perceived as simply supporting the in-house intelligence held by service provider organisations, but they do, nonetheless, provide an accessible and firm measure which might be used for benchmarking, and potentially attracting continued funding.

One of the concerns that is apparent from the consultation is that there may be a need for funding to be based more on evidenced success in the future, rather than being historically based (and automatically continued), however, the measurement criteria for success are difficult to define. There appears to be a paradox in that services are required to be evidence based, with a need for robust monitoring and evaluation of performance, yet local partners reported that funding is limited to undertake formal evaluation work. As a consequence, many services forgo formal evaluation in favour of anecdotal ‘verbal’ evaluation from service users and staff running the schemes, as this can be undertaken at no cost. Whilst the value of service users’ and staff voices is acknowledged, the limitations of this approach are clear with questions over what decisions regarding services are based on if a formal evaluation is not undertaken.

Another gap, which is also perceived as an opportunity by some local partners, includes working more with violent offenders who are also deemed to have an alcohol problem. The review of literature has identified a link between violent crime and alcohol use, showing a need to develop interventions targeted at this group. An example of where this is already in place includes COVAID in Northern CJA which is an individual or group cognitive behavioural therapy treatment programme, the ultimate aim being to reduce violence, through tackling the mediators of anger, impulsivity and drinking. There is also a service in Hamilton Sheriff Court in Lanarkshire CJA where offenders who had shown violent and aggressive behaviour, and were subsequently struck off their GP list, are able to see a GP while they were in court. These are examples of services targeted at violent offenders which appear to be lacking in other CJAs, and examples of services that could be adapted locally to fill these gaps.

Finally, one of the immediate challenges faced by all CJAs and partners is accommodating the new Community Payback Order; this may influence the nature and volume of demand for alcohol services across the board, thus necessitating change. The CPO may also, however, provide an opportunity to intervene with offenders with alcohol problems directly as it allows for drug or alcohol interventions to be targeted at the offender, and will act as the main
measure of community justice disposals in the future. There are likely to be opportunities to tackle the alcohol problems of offenders in the development of CPOs, which will be more complex than current orders, delivered over a shorter period, and will require improved management of compliance.

11.5 Conclusions
The scoping study sought to map plans, arrangements and procedures in place within local areas throughout Scotland to identify and intervene with offenders with alcohol problems in the community justice setting. It also sought to consider the effectiveness of interventions for this group and determined where there are significant gaps in local service provision, and where best practice in one area can be applied to another CJA.

What the research has shown is that, at present, there appears to be no standard practice locally across Scotland for tackling alcohol problems among offenders in the community justice setting. While the practical application of formal care pathways was limited, local partners agreed that there may be scope for greater clarity around potential referral routes into mainstream and offender specific services. The use of care pathways could be a way of formally achieving this.

It seems that more consideration may be needed to address alcohol problems at access points earlier in the criminal justice process, for example, through the police and procurator fiscal, to ensure diversion into mainstream services at an earlier stage.

In terms of effectiveness, the research has identified that there is little in the published literature about what works in addressing alcohol problems among offenders. Despite some examples of good practice and considerable anecdotal evidence locally with regards to effective screening and interventions, the absence of formal monitoring and evaluation data or documents makes it difficult to substantiate.

Encouragingly, what the study has shown is that while mechanisms for the identification and treatment of offenders with alcohol problem are not routinely in place in community justice, the need for change is well recognised by health and criminal justice partners alike, and there is a willingness to move forward to meet future needs in line with national priorities.
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Appendix A

A list of key search terms included:

- alcohol interventions
- alcohol treatment
- alcohol and offenders
- treatment and offenders
- offending/offences and alcohol
- crime and alcohol
- alcohol problems and offenders
- arrestees and alcohol
- substance misuse and offenders
- criminal justice and effective interventions alcohol
- criminal justice and treatment options alcohol
- offending and early interventions alcohol
- targeted alcohol interventions
- violence and alcohol
- probation and alcohol treatment
- community service and alcohol treatment

The main document and data sources that were searched included:

- references provided in NHS Scotland’s research brief;
- papers identified by the research advisory group;
- papers identified in NHS Health Scotland Library;
- Scottish Government and Scottish Parliament WebPages;
- journals, for example, Drug and Alcohol Review, Journal of Substance Abuse, and Alcohol and Alcoholism;
- Scottish Centre for Crime and Justice Research;
- Offender Health Research Network;
- Alcohol Information Scotland website;
- websites for ADAT, Alcohol Focus Scotland, Apex Scotland, Drug Scope, Drug Misuse Information Scotland, Association of Alcohol and Drug Action Teams in Scotland; and
- A thorough online search.
## Appendix B

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Organisation</th>
<th>Target Group</th>
<th>Description</th>
<th>Area</th>
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</thead>
<tbody>
<tr>
<td>218 Service for Women Offenders</td>
<td>Glasgow City Council in partnership with NHS and Turning Point Scotland</td>
<td>218 is for women living in or offending in Glasgow who are caught up in the criminal justice system</td>
<td>218 is a joint health and voluntary sector criminal justice service commissioned by Glasgow City Council to work with women offenders. 218 aims to address the root causes of offending by providing a person centred programme of care, support and development, including addictions input. Support can be accessed on a residential or day basis. The service offers on-going assessment, counselling and support, group work, residential detox/stabilisation provision and longer rehabilitation. Referral routes are through the court, police, social work, other service/agency and self referral.</td>
<td>Glasgow</td>
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<tr>
<td>Action for Children Intensive probation project</td>
<td>Action for Children</td>
<td>Young offenders aged 16-25</td>
<td>Provides services across Dundee for young offenders aged 16-25 at risk of receiving a custodial sentence. Service users will have been made subject to a specific condition of a Probation Order to attend the project. The service provides one to one and group work programmes that focus on the criminogenic needs of service users, tackle alcohol or drug problems, and enable them to challenge their offending behaviour and its consequences.</td>
<td>Dundee City</td>
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<tr>
<td>Alcohol Brief</td>
<td>NHS Health</td>
<td>Those with an alcohol</td>
<td>A pilot study was designed to run between</td>
<td>Perth and</td>
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<td>Intervention</td>
<td>Organisation</td>
<td>Target Group</td>
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<tr>
<td>Interventions Pilot</td>
<td>Scotland/North Lanarkshire Council/South Lanarkshire Council</td>
<td>problem who are given a community sentence</td>
<td>September 2009 and March 2011 in the community justice settings of probation and community service to determine the feasibility and effectiveness of delivering screening and ABIs as opposed to screening and a leaflet only (the control group). Three areas were selected for the study, the primary area was Perth and Kinross Criminal Justice Services, with North and South Lanarkshire Criminal Justice Services also selected and invited to participate to strengthen the evidence on outcomes and effectiveness. The evaluation is due to report in March 2011.</td>
<td>Kinross and North and South Lanarkshire</td>
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<tr>
<td>Alcohol Crime and Education Programme</td>
<td>Glasgow Council on Alcohol</td>
<td>Offenders with alcohol related problems</td>
<td>The Alcohol Crime and Education Programme (ACE) is a group work programme for offenders with alcohol related problems. The programme aims to deliver alcohol education within an interactive group work practice and help to prevent the recurrence of offending behaviour by participants. The programme provides a 12 session Cognitive Behavioural Programme for people where alcohol has been the major factor in their drinking behaviour. The ACE Team consists of one Team Leader and one Groupwork Development Worker. The team works closely with Glasgow City Council Social Work Criminal Justice Team and Glasgow Sheriff Court who provide the main source of referrals.</td>
<td>Glasgow</td>
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<td>Intervention</td>
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<tr>
<td>Alcohol Diversion Scheme</td>
<td>Fife Alcohol Support Service</td>
<td>Individuals in receipt of a Fixed Penalty Notice</td>
<td>The Alcohol Diversion Scheme is based around early intervention and is aimed at addressing binge drinking and associated anti-social behaviour. Fife Alcohol Support Services runs the scheme in close co-operation with Fife Constabulary and offers individuals in receipt of a Fixed Penalty Notice an opportunity to participate in an alcohol education session instead of paying a £40 fine. The session offers participants a chance to learn how to control binge drinking, improve personal safety and reduce their chances of offending or even becoming a victim of crime.</td>
<td>Fife</td>
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<tr>
<td>Alcohol Education Initiative</td>
<td>SACRO</td>
<td>People recovering from alcohol problems</td>
<td>Part-time worker to operate an alcohol education initiative. Offered on a voluntary basis where the worker will work with offenders referred from custody and offers support and education in relation to alcohol. Funding is currently in place until March 2011.</td>
<td>Orkney Islands</td>
</tr>
<tr>
<td>Alcohol Education Probation Service</td>
<td>SACRO</td>
<td>Offenders with alcohol problems</td>
<td>SACRO’s Alcohol Education Probation Service assists people to understand and control their alcohol related behaviour. The service provides a programme for offenders which explores the links between alcohol use and offending. Regular liaison with supervising social workers and the court service enhances and complements probation work. A completion report based upon the probationer’s participation is provided for supervising social workers and</td>
<td>Midlothian and City of Edinburgh</td>
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<td>Intervention</td>
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<tr>
<td>Alcohol Education Programme</td>
<td>Social Care and Alcohol Advice Centre</td>
<td>Individuals convicted of a drink driving offence</td>
<td>Alcohol Awareness Course for individuals convicted of a drink driving offence as well as other alcohol related offences.</td>
<td>Shetland</td>
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<tr>
<td>Alcohol Re-offending Service</td>
<td>SACRO</td>
<td>Offenders with alcohol problems</td>
<td>The main aims of the programme are to look at the process of becoming intoxicated, realisation of the health implications caused by excessive drinking, understand the influences of alcohol in a person’s lifestyle that can lead to offending, and take effective steps towards sensible drinking. Referrals to the programme can be made through the criminal court system or on a voluntary basis. Confidentiality is foremost although reports will be required if it is a referral from the court or part of a probation order.</td>
<td>Orkney Islands</td>
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<tr>
<td>Arrest Referral</td>
<td>Various</td>
<td>Drug and alcohol related offenders at the point of arrest</td>
<td>The Arrest Referral Service engages with people at the point of arrest whose offending is linked to drug or alcohol misuse. Offenders are given the opportunity to engage with treatment services; thus reducing the risk of them re-offending due to substance misuse. Engagement is voluntary and not a formal part of the criminal justice process. Currently in place in: Glasgow: Stewart Street; London Road; Maryhill Road and Helen Street; Tayside;</td>
<td>Various</td>
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<td>Intervention</td>
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<tr>
<td>Ayrshire Council on Alcohol</td>
<td>Ayrshire Council on Alcohol</td>
<td>Offenders with alcohol problems</td>
<td>Ayrshire Council on Alcohol receives additional funding to provide a specific service for offenders in North and East Ayrshire, as well as provision for South Ayrshire within its generic service.</td>
<td>North and East Ayrshire</td>
</tr>
<tr>
<td>Barnardos Axis Service Falkirk</td>
<td>Barnardos</td>
<td>Young offenders aged 12-18 years</td>
<td>To provide substance screening, comprehensive assessments, care planning, group work, individual sessions, intensive intervention, and family support to substance using/misusing persistent young offenders aged 12-18 years within the Falkirk area.</td>
<td>Falkirk</td>
</tr>
<tr>
<td>Barnardos CHOSI Project</td>
<td>Barnardos</td>
<td>Young people who are involved in offending</td>
<td>The Barnardos CHOSI project works in partnership with social work services to provide a service for young people who are involved in offending. The project aims to prevent young people aged 15 to 17 progressing into the adult justice system by offering an alternative community based programme via the children's hearing system. The project's objectives include reducing the severity and frequency of offending and addressing behaviour which places the young people and others at risk of harm. This is achieved by supporting and encouraging young people to make positive life choices, challenging and addressing the young persons offending.</td>
<td>Lanarkshire</td>
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<td>Intervention</td>
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<tr>
<td>Borders Alcohol Project for Offenders (BAPFO) service</td>
<td>Scottish Borders Criminal Justice Social Work</td>
<td>Offenders with alcohol problems</td>
<td>BAPFO is a structured six week programme delivered on behalf of Criminal Justice. Individuals whose offending was linked to the use of alcohol attend the programme and have the opportunity to explore their relationship with alcohol and its links to their offending behaviour, and to develop skills and tools that help support a change in their drinking.</td>
<td>Scottish Borders</td>
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<tr>
<td>The Caladh Trust</td>
<td></td>
<td>Individuals and or carers / family members with addiction related problems</td>
<td>Support groups include road to recovery, drop-in venue, one-to-one support, homemaker packs, home visits, and a café. The Caladh Trust Community Café and Drop in aims to improve the lives of substance misusers and those struggling with other life issues, and in particular holds a women’s group to encourage more women to access facilities.</td>
<td>Western Isles</td>
</tr>
<tr>
<td>CATCUS Project</td>
<td>Turning Point</td>
<td>Male and female offenders 16 and over with drug/alcohol issues</td>
<td>Creating alternatives to custody through understanding and support (CATCUS) provides day support services to drug misusers aged 16 plus who have a live connection with the criminal justice system in Renfrewshire. The project offers a structured programme for substance misuse and offending.</td>
<td>Renfrewshire, East Renfrewshire and Inverclyde</td>
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<td>Intervention</td>
<td>Organisation</td>
<td>Target Group</td>
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<tr>
<td>Circle throughcare for male offenders</td>
<td>Throughcare for male offenders</td>
<td>This service is for male offenders who are fathers, either on remand or coming to the end of sentence at Addiewell Prison. This service prepares the person for the transition from prison into family and community living, providing continuing support after release, assist engagement in addiction services, access employment/training.</td>
<td>North and South Lanarkshire</td>
<td></td>
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<tr>
<td>Community Integration Unit (CIU)</td>
<td>Women released from prison</td>
<td>In May 2010, the Community Integration Unit (CIU) service began where women released from prison would be housed in a facility in Craiginches prison where they would be allowed to 'come and go' and in doing so engage with local addiction services to tackle their drug and alcohol problems.</td>
<td>Aberdeen City and Aberdeenshire</td>
<td></td>
</tr>
<tr>
<td>Community Links Centre (CLC)</td>
<td>SACRO</td>
<td>Prisoners returning to the community</td>
<td>Assists in the support and management of short-term prisoners returning to the community from the three main prisons serving the Edinburgh area, namely HMP Edinburgh, HMP YOI Polmont and HMP Cornton Vale.</td>
<td>City of Edinburgh</td>
</tr>
<tr>
<td>Connect Services for Young People</td>
<td>Falkirk Council Youth Justice Team</td>
<td>Young offenders aged 12-18 years</td>
<td>Connect Service is Falkirk Council's specialist Youth Justice Team who work with young people between 12-18 years of age who are assessed as being at high risk of re-offending. The substance misuse service is offered to young people ostensibly on offending issues but who have substance misuse concerns.</td>
<td>Falkirk Local Authority Area</td>
</tr>
<tr>
<td>Intervention</td>
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<tr>
<td>Control of Violence for Angry Impulsive Drinkers (COVAID)</td>
<td>Aberdeen City Council Criminal Justice Social Work in conjunction with Aberdeenshire Criminal Justice Addictions Team</td>
<td>Repeat offenders</td>
<td>Repeat offenders whose crimes are alcohol related. Participants will have a record or self report of at least 3 incidents of alcohol related aggression or violence in the past 2 years, including violent crimes and incidents not recorded as crimes. COVAID is a 10 x 2 hour individual or group, cognitive behavioural therapy treatment programme. The ultimate aim being to reduce violence, through tackling the mediators of anger, impulsivity and drinking.</td>
<td>Aberdeen City and Aberdeenshire</td>
</tr>
<tr>
<td>Criminal Justice Social Work Addictions Specialist</td>
<td>Aberdeen City and Aberdeenshire Criminal Justice Social Work</td>
<td>People in court with alcohol problems</td>
<td>A pilot Criminal Justice Social Work Addictions Specialist post based in the local courts in the Aberdeenshire and Fraserburgh areas. The role is to engage with people who have been given a discharge or a community sentence for offences relating to their alcohol use within the court. This pilot is 18 months in and has the potential to be funded for a third year.</td>
<td>Courts in the Aberdeenshire area</td>
</tr>
<tr>
<td>Criminal Justice Worker</td>
<td>Orkney Islands Criminal Justice Social Work</td>
<td>Substance misusing offenders</td>
<td>Provides a programme of work and practical support where substance misusing offenders are identified and referred by Orkney Islands Council's Criminal Justice Service. The worker has been in place and accepting referrals since August 2008. They ensure that offenders with substance misuse problems (including alcohol) in the Orkney Islands have a range of suitable resources to address these issues including access to appropriate support in improving employability and literacy.</td>
<td>Orkney Islands</td>
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<td>Intervention</td>
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<tr>
<td>Custody Cards</td>
<td>Glasgow City Centre Alcohol Action Group</td>
<td>Arrestee as they leave police custody</td>
<td>Distribution of a pocket-sized information card to arrestee as they leave police custody. The Alcohol Custody Card has 3 main aims: to raise awareness of alcohol use, to target those who are arrested by the police because of their alcohol related behaviour and to target weekend drinkers and party goers. The card contains information about safe levels of alcohol for men and women; the number of units in common drinks; how alcohol can affect behaviour; safer drinking information; and where to go to get help.</td>
<td>4 Police Offices within Glasgow (London Road, Helen Street, Stewart Street and Maryhill Road)</td>
</tr>
<tr>
<td>Custody Nurses</td>
<td>NHS Tayside and Tayside Police</td>
<td>People in custody</td>
<td>The custody service is ‘nurse led’ and, on a 24/7 basis. An establishment of ten nurses provide cover at all three custody suites in Tayside; at Arbroath, Dundee and Perth. The service started in January 2009 and is a three year pilot of a partnership between Tayside Police, the University of Dundee Department of Forensic Medicine, and NHS Tayside, to provide services for those in custody with alcohol problems.</td>
<td>Arbroath, Dundee and Perth</td>
</tr>
<tr>
<td>Diversion from Prosecution Scheme</td>
<td></td>
<td>People who have been involved in a minor offence where alcohol has also been involved</td>
<td>Offers supervision to people of all ages including young people who have been charged with possession of drugs, or with a minor offence where alcohol has been involved, thus avoiding a criminal record.</td>
<td>Shetland</td>
</tr>
<tr>
<td>Domestic Abuse Perpetrator Pilot</td>
<td>South Lanarkshire Criminal Justice</td>
<td>Those accused of domestic abuse</td>
<td>Joint Social Work/Police visits to domestic abuse perpetrators (many of whom have alcohol</td>
<td>South Lanarkshire</td>
</tr>
<tr>
<td>Intervention</td>
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<tr>
<td>Social Work</td>
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<td>Interviews are undertaken by one Social Worker and one Police Officer, with another Police Officer also available to ensure appropriate risk measures are in place. Also includes Sunday visits to perpetrators whilst in custody within all South Lanarkshire Police cells.</td>
<td></td>
</tr>
<tr>
<td>Drink Drive Rehabilitation Scheme</td>
<td>Alcohol Support Ltd</td>
<td>People charged with an offence related to alcohol and driving</td>
<td>The scheme is aimed at people who have been charged with an offence related to alcohol and driving. It aims to provide an opportunity for participants to examine the circumstances that led to the drink drive offence and acquire new skills to reduce the risk of re-offending.</td>
<td>Aberdeen City</td>
</tr>
<tr>
<td>Drink Driving Rehabilitation Services</td>
<td>RCA Trust</td>
<td>Drivers who have been convicted of a drink driving offence and referred by an appropriate court</td>
<td>The main aim of the course is to reduce the risk of drink-drivers re-offending. The programme is designed to educate drink-drive offenders in relation to alcohol and its effects in general but also with particular reference to drink-driving. An evaluation is carried out at end of each course.</td>
<td>East Renfrewshire, Inverclyde and Renfrewshire</td>
</tr>
<tr>
<td>Drink Related Offender Programme</td>
<td>North Lanarkshire Council Justice Service (Restorative Justice Team)</td>
<td>Alcohol users not requiring specialist intervention</td>
<td>Modular group work programme aimed at thinking and behaviour change.</td>
<td>North Lanarkshire</td>
</tr>
<tr>
<td>Fairbridge Venture Trust</td>
<td>Fairbridge Venture Trust</td>
<td>Offenders aged 16 to 25 years whom it is thought would benefit</td>
<td>To reduce offending behaviour through addressing the causes and providing opportunities for change. This programme is used in association with Probation Orders and</td>
<td>North Strathclyde CJA</td>
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<tr>
<td>Includem</td>
<td>Voluntary service for 21 and under age group. Provide intensive support and supervision to meet the needs of vulnerable young offenders. Looks at a variety of problems, including drug and alcohol misuse.</td>
<td>Vulnerable young offenders</td>
<td>Voluntary service for 21 and under age group. Provide intensive support and supervision to meet the needs of vulnerable young offenders. Looks at a variety of problems, including drug and alcohol misuse.</td>
<td>Dundee</td>
</tr>
<tr>
<td>Intensive Support Project</td>
<td>Lanarkshire Throughcare Team</td>
<td>Women offenders moving from prison to the community</td>
<td>An intensive support project for women with intense needs making the transition from prison to the community. Provides intensive individual support targeted at women offenders who have identified support needs such as alcohol or drug problems, and also contributes to the community re-integration, integrated supervision and monitoring of such offenders.</td>
<td>Lanarkshire</td>
</tr>
<tr>
<td>Literacy and Employment</td>
<td>SACRO</td>
<td>People recovering from alcohol problems</td>
<td>Signposting service for offenders with literacy and employment problems and substance misuse problems. Funding is currently in place</td>
<td>Orkney Islands</td>
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<tr>
<td>Meet at the Gate project</td>
<td>Circle</td>
<td>Women offenders, either on remand or coming to the end of their sentence</td>
<td>A pilot project offering services to women being released from the prison who have children affected by parental drug and alcohol use, using existing Harbour Project service in Edinburgh as well as services in West Lothian and North and South Lanarkshire. The project will also support a number of women returning to Glasgow East. The project aims to develop parenting capacity and minimise the risk to children through parental drug and alcohol use and imprisonment. A Circle worker based in Cornton Vale is responsible for identifying women who are eligible for the service and will co-ordinate a handover to the Circle worker in the community as well as offer direct support in some cases. Supported by The Robertson Trust.</td>
<td>HMP Cornton Vale and HMP Greenock</td>
</tr>
<tr>
<td>Mentoring Support Service for Women Offenders</td>
<td>SACRO</td>
<td>Women who are involved in the criminal justice system</td>
<td>Volunteer mentoring service providing support to access education and training, help with completing forms, budgeting and housekeeping, as well as accessing housing, addiction and health issues.</td>
<td>North and South Lanarkshire</td>
</tr>
<tr>
<td>Moray Youth Justice Team</td>
<td>Moray Council</td>
<td>Young offenders aged 8-18 years</td>
<td>The Moray Youth Justice Team works with young offenders aged 8-18 years. The work is heavily prescribed by the requirements of the Scottish Executive Youth Justice Improvement Programme. The key objectives are to reduce youth offending, particularly persistent offending and so reduce the impact on communities in</td>
<td>Lossiemouth</td>
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<tr>
<td>Moving On</td>
<td>Action for Children / The Robertson Trust</td>
<td>Male young offenders released from custody</td>
<td>The five year pilot project offers support to male young offenders on release from custody through a partnership of service providers in Renfrewshire. 'Action for Children' acts as the lead partner, joined by Fairbridge, the Prince's Trust, and the Scottish Prison Service, with cooperation from Renfrewshire Council, YouthLink, and the North Strathclyde Community Justice Authority. The partnership identifies eligible young people as soon as possible after they enter custody, and then takes a 'youth work' approach to supporting them and linking them with services both during and after custody. This type of comprehensive Throughcare service is otherwise unavailable to young people released to Renfrewshire.</td>
<td>Renfrewshire</td>
</tr>
<tr>
<td>New Direction</td>
<td>Barnardos</td>
<td>Young people involved in persistent and serious offending behaviour and anti-social behaviour</td>
<td>The service aims to reduce/end the offending behaviour of young people by offering an intensive intervention programme. They liaise closely with other services such as alcohol and drug treatment services and acknowledge that the effectiveness of the work they undertake with young people is enhanced by a multi-agency approach working with partners in Grampian Police, Social Work, Education, NHS</td>
<td>Aberdeen City and Aberdeenshire</td>
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<tr>
<td>Offenders Programme</td>
<td>RCA Trust</td>
<td>Offenders in trouble because of their drinking or have alcohol related problems</td>
<td>Offenders are normally referred via deferred sentencing, probation or as part of a prison aftercare service. Liaise closely with referring agents and also with other specialist services where appropriate. They aim to offer an integrated range of assessment, education and counselling services to modify clients' knowledge and attitudes towards alcohol and related behaviours, with an emphasis in relation to offending.</td>
<td>East Renfrewshire, Inverclyde and Renfrewshire</td>
</tr>
<tr>
<td>Opportunity to Reduce Criminal Activity (ORCA)</td>
<td>Joint initiative between Grampian Police, Aberdeenshire Council Housing and Social Work, Criminal Justice Social Work and Turning Point Scotland (Northern Horizons Service)</td>
<td>People with substance misuse problems who offend</td>
<td>ORCA is aimed at offering a particular cohort of individuals the opportunity to access structured support to address their offending, tackle their substance misuse and associated behaviours and reduce the harm inflicted onto communities by these individuals. The service will aim to provide an intensive support service to that cohort of persistent substance misusing offenders whose crimes are low tariff/high volume, most notably acquisitive or anti social in nature. The service is a three year pilot which began in January 2010.</td>
<td>Peterhead and Fraserburgh</td>
</tr>
<tr>
<td>Persistent Offender Project (POP)</td>
<td>Glasgow Addiction Services and Strathclyde Police</td>
<td>Persistent drug/alcohol misusing offenders</td>
<td>The Persistent Offender Project (POP) is a partnership service provided by Glasgow Addiction Services and Strathclyde Police. Persistent drug/alcohol misusing offenders are identified using Police Intelligence in order to link them in to sustainable treatment and care within</td>
<td>Glasgow</td>
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<tr>
<td>Perth Drink Driving Project (PDDP)</td>
<td>Offenders who have two or more drink driving convictions</td>
<td>PDDP aims to enable offenders who would benefit from examining and changing their behaviour (who have two or more drink driving convictions, or first time drink driving offenders whose reading over the legal limit was particularly high), to become more aware of their drinking habits, to accept responsibility for their actions and to change their behaviour thereby reducing the likelihood of further offending</td>
<td>Perth and Kinross</td>
<td></td>
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<tr>
<td>Progress2Work Link-Up</td>
<td>Ex-prisoners, the homeless and people experiencing problems due to alcohol misuse</td>
<td>Progress2Work link-up targets people who are homeless, have an offending background or a problem with alcohol. This service is aimed at individuals aged 16+ who have failed to engage with mainstream employability, training or education opportunities because of their disadvantaged backgrounds and chaotic lifestyles.</td>
<td>Fife and Forth Valley CJA and Tayside CJA</td>
<td></td>
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<tr>
<td>Road Traffic North Lanarkshire</td>
<td>Alcohol and drug users</td>
<td>Justice specific modular groupwork programme</td>
<td>North</td>
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<tr>
<td>Offences Programme</td>
<td>Council Justice Service (Restorative Justice Team)</td>
<td></td>
<td>aimed at thinking and behaviour change. Targeted at alcohol and drug users who have a road traffic offence including driving under the influence of drugs and alcohol.</td>
<td>Lanarkshire</td>
</tr>
<tr>
<td>Routes Out of Prison Partnership</td>
<td>The Wise Group, SPS and Families Outside</td>
<td>Short term prisoners pre-release</td>
<td>This service is designed to help prepare and support short term prisoners for the transition from Prison to life on the outside. Support is given by the team which is made up of a Prison Life Coach who supports the service users for 6 weeks of pre release preparation, the Community Life Coach who will engage with the service users for an average 13 weeks to ensure access to as many services as possible, and employment consultants who work closely with service users and Life Coaches to identify those individuals who would benefit from a direct employment focused intervention.</td>
<td>Glasgow CJA, South West Scotland CJA, Lanarkshire CJA, North Strathclyde CJA</td>
</tr>
<tr>
<td>Structured Deferred Sentence Alcohol Related Offending Programme (ARO)</td>
<td>Criminal Justice Social Work</td>
<td>Offenders with alcohol problems</td>
<td>The Structured Deferred Sentence Alcohol Related Offending Programme (ARO) is a 10 session programme on safer alcohol use and reducing risk of re-offending, available in North, East and South Ayrshire.</td>
<td>North, East and South Ayrshire</td>
</tr>
<tr>
<td>Substance Misuse Development Worker</td>
<td>Substance Misuse Development Worker in Highland to help offenders access services in the area.</td>
<td>Offenders with alcohol problems</td>
<td>Substance Misuse Development Worker in Highland to help offenders access services in the area.</td>
<td>Highland</td>
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<tr>
<td>Support Worker</td>
<td></td>
<td>Offenders with alcohol problems</td>
<td>Support worker with alcohol working with the criminal justice team in the Western Isles.</td>
<td>Western Isles</td>
</tr>
<tr>
<td>Targets for Effective Change</td>
<td>North Lanarkshire Council Justice Service</td>
<td>Alcohol and drug users who do not require specialist intervention.</td>
<td>Resource pack containing materials directly relevant to criminogenic need, problem solving approach, motivational to improve engagement and participation in specialist treatment.</td>
<td>North Lanarkshire</td>
</tr>
<tr>
<td>Tayside Short Term Prisoner Protocol for Substance Misuse</td>
<td>Various</td>
<td>Offenders on release from prison</td>
<td>Launched in June 2010, a protocol for ensuring that short term prisoners on release are referred to other services for their substance misuse needs. The Short-Tem Prison Protocols have been agreed by the three Tayside Local Authorities, Tayside Community Justice Authority, NHS Tayside, the Scottish Prison Service and Perth Prison. The initiative was led by Perth and Kinross Council and sees short-term prisoners attend ‘surgeries’ when they are six to eight weeks away from release. Staff from Local Authority housing departments and Shelter, Local Authority drug and alcohol teams, health workers, and staff from employment and training agencies such as Jobcentre Plus and Perth College provide help and support to prisoners to ensure they have the best chance possible of getting on with their lives after release.</td>
<td>Tayside</td>
</tr>
<tr>
<td>The Source</td>
<td>Barnardos</td>
<td>Young people for whom drug and alcohol use is contributing to/or</td>
<td>The service offers support, information and advice on alcohol and/or drugs and carries out a full assessment on how this is impacting on the</td>
<td>Aberdeen City</td>
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<tr>
<td>Throughcare</td>
<td>Various</td>
<td>Offenders and their families during and after a prison sentence</td>
<td>Throughcare applies to the range of prison and community based services provided to offenders and their families during and after a prison sentence. In addition, there are criminal justice officers to provide a service both within the prison and following release for offenders with alcohol related offending problems. Staff have a base both in the prison and in the community. The intention for service delivery was to complement the current addiction social worker in the prison, and enable a service to be offered from the point of incarceration well beyond release, and until appropriate support networks have been established in the community.</td>
<td>Various</td>
</tr>
<tr>
<td>Tilly Youth Project</td>
<td>Grampian Police, Aberdeen City Council and SACRO</td>
<td>Persistent offenders young</td>
<td>In Aberdeen, Grampian Police, Aberdeen City Council and SACRO are working together to identify persistent young offenders and to put interventions in place to stop their offending behaviour. Known as the ‘Tilly Youth Project’ it is focused on reducing re-offending tackling issues such as alcohol and drug use.</td>
<td>Aberdeen City</td>
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<tr>
<td>Treatment Process Model</td>
<td>North Lanarkshire Council Justice Service</td>
<td>Alcohol and drug users</td>
<td>Targeted at alcohol and drug users at various stages in the recovery journey: treatment readiness, early engagement, early recovery and longer term recovery and change. Involves manuals focusing on psycho-social elements to assist in the development of human and social capital with regard to alcohol and drug use. Training and manuals (as part of ADP Recovery Strategy) to be provided to justice workers.</td>
<td>North Lanarkshire</td>
</tr>
<tr>
<td>Turnaround</td>
<td>Turning Point Scotland, APEX Scotland and the Venture Trust</td>
<td>Male offenders aged 18-30 years with substance misuse issues</td>
<td>The Turnaround community programme will seek to offer service users with substance misuse issues the opportunity to stabilise/move toward abstinence. It offers interventions aimed at addressing substance misuse which causes offending behaviour. It also link in with partners in ‘skilling up’ young males to allow them to maintain and develop themselves in the community and to access opportunities for employability learning and development, confidence building, and life skills.</td>
<td>Bases in Greenock, Dumbarton, Kilmarnock and Irvine</td>
</tr>
<tr>
<td>Turnaround (residential unit)</td>
<td>Turning Point Scotland, APEX Scotland and the Venture Trust</td>
<td>Male offenders aged 18-30 years with substance misuse issues</td>
<td>Turnaround service will focus on young men aged 18-30 years whose offending is persistent, high volume, low tariff and who are failing in other community-based alternatives, or who have had multiple remand or short-term prison sentences, with priority to those individuals who may be vulnerable due to substance misuse, mental health issues, homelessness, lack of coping/social skills etc. Turnaround will work</td>
<td>North Strathclyde CJA and South West Scotland CJA</td>
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<tr>
<td>Women in Focus</td>
<td>Barnardos</td>
<td>Women on community service and probation orders in order to support them not to breach their orders</td>
<td>The service works with young women from East, North and South Ayrshire and Dumfries and Galloway who are currently serving Community Based Orders and deals with wide ranging problems, including alcohol problems. The service was commissioned by South West Scotland CJA after results from an earlier pilot, run in Ayrshire, proved highly successful. Early indicators for Women in Focus show that the service is already showing similar significant improvements in all of its target areas.</td>
<td>South West Scotland CJA</td>
</tr>
<tr>
<td>Young Offenders / Women Offenders (Right Track 16-21)</td>
<td>Tayside Council on Alcohol</td>
<td>Young female offenders aged 16-21</td>
<td>The Right Track initiative is targeted at young offenders/women offenders aged 16-21, assessed as having high welfare needs/risks, drug or alcohol problems, or where there is an immediate risk of custody. It provides a period of intensive assessment, awareness raising, support, education and treatment.</td>
<td>Tayside</td>
</tr>
<tr>
<td>Youth Court</td>
<td>Scottish Court Service</td>
<td>Young offenders in Hamilton and Airdrie</td>
<td>There are currently Youth Courts located in Airdrie, Hamilton and Lanark Sheriff Courts. These courts deal with 16-17 year olds, a significant percentage of whom may be categorised as persistent young offenders with alcohol and drug problems. Youth courts can be regarded as transitional courts between the Children’s Hearings system and the full adult criminal justice system and combine fast track</td>
<td>Hamilton, Airdrie, and Lanark</td>
</tr>
<tr>
<td>Intervention</td>
<td>Organisation</td>
<td>Target Group</td>
<td>Description</td>
<td></td>
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<td>arrangements with a wider range of community based support interventions for those who receive a community disposal. An evaluation took place in 2006, where funding was extended until 2012.</td>
<td></td>
</tr>
</tbody>
</table>
Appendix C

Key
Symbols
Rounded box: criminal justice system processes, colour indicates agency/organisation responsible:
- Crown Office/Procurator Fiscal Service
- Scottish Prison Service
- Criminal Justice Social Work
- Police
- SERCO

Boxes with dotted line border indicate optional elements of the process
Arrow pointing right: mainstream intervention
Arrow pointing left: specialist service
Circle: brief intervention service available

Stages
Stage 1: offence to charge
Stage 2: prosecution to conviction
Stage 3: sentencing
Stage 4: sentence/order
Stage 5: end of criminal justice process

Mainstream services – specific alcohol input
Community Addiction Teams; professional or self referral
Residential detoxification and rehabilitation services: professional referral, some offender specific funding (self referral for privately funded places)
Alcoholics Anonymous (AA): professional or self referral

Other services offenders may access
Homelessness services
Welfare rights (benefits advice and information)

Offender specific services – specific alcohol input
Persistent offenders project (POP): 16-24, 6 or more offences in past year
Professional referral
218 Centre (218): women offenders, high support needs. Professional, court or self referral
Glasgow Council on Alcohol (GCA 1-2-1 or ACE): Professional or self referral
Drug Treatment and Testing Order (DTTO) Drug Court SDS: court ordered

1. Offence to charge
   - OFFENCE
   - ARREST
   - CHARGE
   - REMAND
   - BAIL
   - PROSECUTION
   - CONVICTION

2. Charge and prosecution
   - CAT
   - BI
   - Standard Bail
   - Supervised Bail
   - Diversion
   - 218
   - POP
   - GCA 1-2-1 or ACE

3. Sentencing
   - CAT (Bail only)
   - BI
   - Pre sentence reports
   - SER
   - Special assessments
   - Deferred sentence
   - Standard/Structured DTTO
   - Custody
   - Residential deto/ /rain
   - Community
   - FINE
   - Court order – DTTO, SPO, Community Service, Probation
   - Statutory input could include:
     - Input as condition of order (CAT/218/GCA)
     - DTTO or Drug Court Structured Deferred Sentence
   - Voluntary input could include:
     - Voluntary attendance at CAT/218/GCA
   - Home Detention Cut-Off (tag)
   - Statutory Through-care
   - Voluntary Through-care
   - END OF PROCESS

END OF PROCESS

GCA 1-2-1 or ACE

218

AA

BI
Appendix D: Northern CJ Alcohol and Drug Intervention Opportunities

1. Community Sentences with substance misuse package.
2. DTTO.

Disposal
- Prison
- Community Sentence
- Acquittal

First Court Appearance
- Remand

Custody
- Arrest

Police Diversion

Community

Mainstream services
ORCA outreach
Diversionary activities

Court ABI’s (in some areas)

SPS providers
Prison Based Social Work

Phoenix Futures
NHS
Prison Healthcare

Community Integration Unit

1. Mainstream Services
2. CJSW
3. Throughcare Addictions Service