

Harm Reduction Strategy

2009/10 – 2011/12

Reference Documents

DoH (2004) Hepatitis C: Action Plan for England DoH: London

DoH (2007) Reducing Drug Related Harm: An Action Plan DoH: London

DoH (2007) Drug Misuse and Dependence: UK Guidelines on Clinical Management DoH: London

Home Office (2008) "Drugs: protecting families and communities" London: Home Office

NTA (2008) Good Practice in Harm Reduction NTA: London

NTA (2006) Models of Care for Treatment of Adult Drug Users: Update 2006 DoH/NTA: London

National Context

“Drugs: protecting families and communities”

The aim of the National Drugs Strategy, is to reduce the harms that drug use can cause to individuals, families and society as a whole.

National Context

Reducing Drug Related Harm: An Action Plan

The aim of the Department of Health Action Plan is to reduce the number of drug misusers dying through drug related deaths and contracting blood borne virus infections

Local Context

Birmingham 2026: Our vision for the future

Working Together for a Better Birmingham

Reduce health inequalities

*Preventing harm to children and young people in
Birmingham*

Improve Birmingham's neighbourhoods

Outcomes

Reduced number of drug related deaths in Birmingham

Reduced number of blood borne virus infections

Reduced harm and risky behaviour to both problematic & recreational drug users

Prevent and reduce drug related harm to Birmingham's communities

Principles

Harm reduction embedded in the treatment system

Prompt and flexible access to harm reduction services

Action to reduce deaths from overdose

Knowledgeable staff

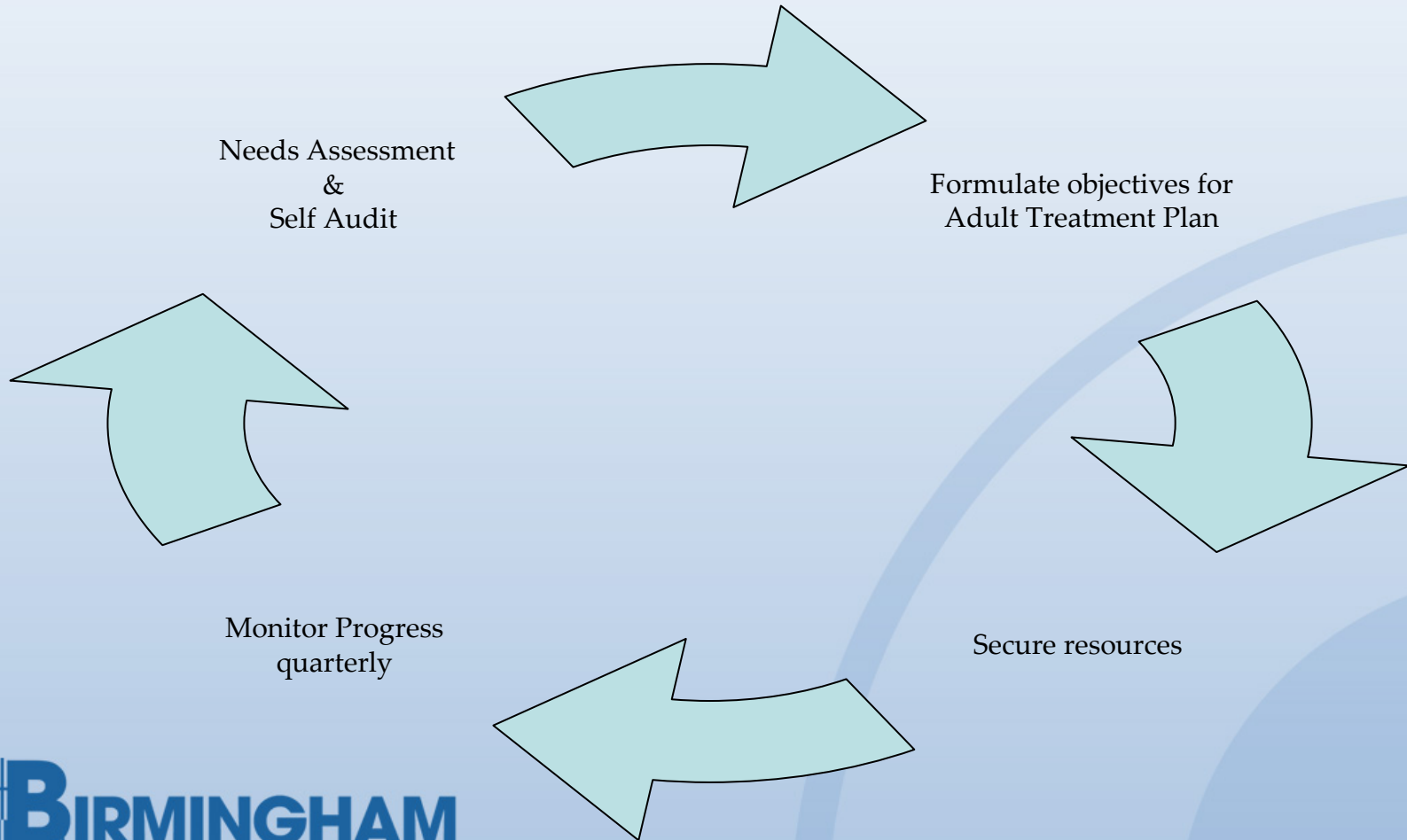
Harm reduction in non-drug treatment settings

Developing peer-led approaches

Working in partnership with local communities

Partnership working to influence commissioning decisions

Annual Strategy Refresh



Objectives 2009/10

- *Develop, implement and monitor a three year BDAAT Harm Reduction Strategy*
- *Operate a Drug Related Death Confidential Inquiry System to monitor, analyse and learn from drug related deaths*
- *Roll out the supply of Naloxone*
- *Provide rolling program of peer led harm reduction interventions*
- *Provide information and advice to carers of opiate misusers including training on avoiding overdose, recognising the signs of overdose and first aid*

- *Prevent and effectively manage drugs overdoses in police custody*
- *Develop and implement police/ambulance protocols to manage involvement in overdose incident requiring ambulance response*
- *Agree and implement a protocol for local information sharing across all agencies with regard to contamination, purity issues/acute risks*
- *Roll out text alert network for drug users with regard to contamination, purity issues/acute risks*
- *Develop and implement a Benzodiazepine prescribing policy including access to detoxification*

- *Offer testing for hepatitis C and vaccination against hepatitis B infection for drug users and their families commencing*
- *Develop care pathways for drug users to access screening and treatment for tuberculosis and screening and immunisation for tetanus*
- *Develop a social marketing campaign to reduce harms relating to “dance drugs”*
- *Develop a social marketing campaign to reduce harms relating to Performance and Image Enhancing Drugs*
- *Prevent and reduce drugs litter in local communities*
- *Signpost service users to smoking cessation services*