Drug & Alcohol Strategy 2026 -2029 For Neath Port Talbot & Swansea

Vision

To help people, families and communities thrive by reducing harms from drugs and alcohol

We will achieve our vision by developing and implementing an action plan that contains clear, deliverable and measurable goals, which will be overseen by the

Neath Port Talbot & Swansea Drug and Alcohol Leadership Board

Connecting Services, Empowering People, Transforming Lives

Priorities

- To listen and respond to what matters most to people, ensuring services are accessible, tailored, and inclusive for all
- To collaborate with people and partner agencies to deliver effective interventions with a skilled and confident workforce
- To prioritise prevention, early intervention and education to reduce escalation of substance use harms.
- To embed oversight through leadership, governance and accountability – driving improvement and innovation
- To challenge stigma, promote understanding and foster positive cultural shifts

Values

- Open and inclusive culture
- Shared purpose and priorities
- Mutual respect and active listening
- Solution focussed collaboration
- Effective Planning and Delivery

Supporting Documents

1. Background
2. Methodology
3. Implementation & Monitoring
4. Delivery Plan

1. Background

Since 2018, the Neath Port Talbot & Swansea Drug and Alcohol Leadership Board (DALB) (formerly known as Western Bay Area Planning Board (DALB)) has led a range of initiatives following the establishment of a Critical Incident Group (CIG) by the Swansea and Neath Port Talbot Public Services Boards.

The CIG was created in response to rising concerns about drug-related deaths, serious infections among people who inject drugs, and criminal activity linked to County Lines. Its purpose was to strengthen the region's response to critical incidents, improve service delivery, and enhance governance.

The CIG made several recommendations, many of which have been implemented alongside further improvements. Key developments include the following.

Governance and Oversight

- Established revised governance arrangements for the DALB, including a Code of Conduct, Memorandum of Understanding, Financial Governance and Risk Sharing Agreement, and decision-making processes.
- Reviewed and updated Board and sub-group membership.
- Developed a robust performance management framework.
- Established a Clinical Governance Sub-Group.
- Continuously reviewed spending and service performance to ensure effective use of resources.
- Commissioned an independent Drugs Commission to investigate drug-related deaths, with recommendations informing this strategy.

Service Development and Commissioning

- Commissioned a review of services for children, young people, and families, with recommendations progressed through a dedicated Steering Group.
- Initiated a procurement process for improved non-clinical specialist substance use services as part of an integrated public health model.
- Commissioned a suite of new services addressing wider determinants of substance use, such as housing and mental health, using Welsh Government funding.
- Commissioned and embedded a pilot Assertive Outreach service delivered by non-clinical providers.
- Reviewed prescribing services and implemented improvements as a foundation for the new integrated model.
- Reviewed non-clinical service provision to identify areas for improvement.

Harm Reduction and Prevention

- Appointed a Harm Reduction Lead to improve access to interventions such as Needle Exchange, Naloxone, and Blood Borne Virus testing.

- Developed a peer network to support engagement and deliver harm reduction services.
- Developed arrangements for engaging people with lived experience, including a Lived Experience Alliance Forum and peer-to-peer outreach programme.
- Developed locality-based intelligence and mapping to identify areas of greatest risk and harm.

Case Review and Information Sharing

- Appointed a dedicated, full-time Case Review Coordinator and developed an Information Sharing Protocol to streamline processes for reviewing all fatal and non-fatal poisonings, as well as associated service responses.
- Identified key performance and commissioning issues requiring attention.
- Established the Criminal Justice-led Intensive Multi-Agency Panel, providing a collaborative forum for partners to agree on how best to support individuals most at risk of fatal drug poisoning—particularly those who struggle to engage with services and may be involved in drug-related offending.

Children, Young People, and Families

- Established a CYP & Families Steering Group to oversee assurance work and prioritise investment in preventative services.
- Agreed on further assurance requirements for services supporting children and young people.

Communication and Engagement

- Targeted communications and training activities to support future actions.
- Developed a new access route into services for individuals concerned about their own or someone else's substance use, following extensive consultation and evaluation.

Although significant progress has been made, we recognise that more needs to be done to improve outcomes for individuals, families, and communities affected by substance use.

2. Methodology

In 2019 the Board commenced a programme of transformational change. To ensure this work and the strategy is grounded in real-world experience and evidence we used a multi-layered methodology.

Evidence and Data Review

We analysed a wide range of quantitative and qualitative data, including:

- Local and national substance use trends
- Service activity, referral patterns, and performance metrics
- Safeguarding concerns and exclusion data
- Health, housing, and justice system indicators

This helped us identify areas of unmet need, emerging risks, and opportunities for earlier intervention.

Engagement with Lived Experience

Via Peer Networks and the Lived Experience Alliance Forum (LEAF) we actively sought the voices of people with lived and living experience of substance use, including:

- Individuals in recovery
- Families, carers, and affected others
- Community and peer support organisations

Their insights helped us understand what support feels safe, accessible, and effective—and where current systems fall short.

Multi-Agency Collaboration

We worked closely with partners across health, social care, housing, criminal justice, education, and the voluntary sector. This included:

- Focus groups and workshops to explore challenges and solutions
- Joint reviews of service pathways and referral processes
- Shared reflection on trauma-informed and inclusive practice
- The Board and its various subgroups.

This ensured the strategy reflects the complexity of partner agencies and the interconnected nature of support systems.

Strategic and Policy Alignment

We reviewed:

- Previous strategies, evaluations, and inspection findings
- Findings of the Turing the Tide report
- National policy, guidance, and best practice frameworks
- Local delivery plans and improvement programmes

This helped us build on existing work, avoid duplication, and align with wider system priorities.

Iterative Development and Testing

Emerging themes and priorities were tested with stakeholders throughout the process. Feedback was used to refine the strategy, ensuring it is:

- Grounded in lived experience and frontline insight
- Responsive to local context
- Ambitious yet achievable

Implementation

Delivery of the strategy will be coordinated through the DALB and its subgroups, with clear accountability and strong partnership working. Each action within the Delivery Plan has an owner and a linked Subgroup. Although the owner is highlighted as the lead, they will have authority to delegate implementation of the action within their own organisation.

Equality, Inclusion and Language considerations

The Strategy will be implemented in line with relevant equality, human rights and Welsh language requirements, ensuring an inclusive and accessible approach across Western Bay. Equality Impact Assessments and population insight will inform implementation where appropriate, with a focus on reducing inequalities and addressing barriers related to protected characteristics, socio-economic disadvantage, disability, neurodiversity and digital exclusion. The DALB will ensure compliance with Welsh Language Standards and that services and communications are inclusive, culturally competent and informed by lived and living experience, with ongoing monitoring and learning to support continuous improvement.

Monitoring & Accountability

Monitoring will ensure delivery remains effective, evidence-based and responsive to need.

Core Mechanisms

Performance Framework: Regular reporting of progress of actions against indicators covering access, engagement, harm reduction activity, workforce development, prevention reach, equity of access, and system functioning. This will be led by the linked Subgroup and reported to the DALB quarterly.

Review Cycle:

- An annual strategy review
- A full evaluation at the end of the three-year delivery plan
- Learning and Case Review: ensure that recommendations from drug-related death reviews, audits and investigations are tracked, implemented and monitored for impact.

Governance Oversight: Ongoing review of DALB governance, leadership standards and cross-board (Regional Partnership Board, West Glamorgan Safeguarding Board and Safer NPT and Safer Swansea) alignment to ensure accountability and strategic feedback cohesion.

Digital Infrastructure: Ongoing development of the shared dashboards and interoperable systems to support consistent data collection, analysis and reporting.

Continuous Improvement: Feedback from service users, families, staff and partners directly informs service adjustments, and pilot projects and research support innovation. This could take the format of 'You said, we did' feedback.

Assessing Success and Impact: Success and impact will be assessed through measurable outcomes, stakeholder feedback, and continuous review against agreed performance indicators. Quarterly reports will be provided to the DALB from each sub-group on activity undertaken for each action. An overview will be presented at the annual DALB Partnership Day.

WESTERN BAY DRUG & ALCOHOL STRATEGY - 3 YEAR DELIVERY PLAN

This plan sets out a clear vision to enhance service delivery by focusing on what truly matters to individuals and communities. To guarantee ongoing improvement and accountability, the plan will be regularly monitored and reviewed through established performance measures and stakeholder feedback, with a comprehensive evaluation scheduled upon completion to assess impact and guide future developments.

Ref.	Action	By When	Owner	Sub-Group	Outcomes	Measures	Turning the Tide Recs
To listen and respond to what matters most to people, ensuring services are accessible, tailored, and inclusive for all							
1.	Create a comprehensive, integrated treatment system (the Alliance) that ensures support is available when and where needed, including rapid access, regardless of entry point.	31.3.26	Transformation Programme Manager & DALB Lead Officer	Alliance Leadership Team	People can access the right support quickly, regardless of how or where they seek help.	• Average time from first contact to treatment start • Percentage of service users reporting timely access • Number of successful referrals across services • Number of people in service	1, 18, 19, 22, 24
2.	Expand flexible, open access options (including drop-in services) and increase outreach/in-reach provision.	31.3.27	Alliance Manager	Alliance Leadership Team	More people, especially those who experience challenges with accessing services, engage with support services.	• Number of drop-in sessions/outreach sessions held • Attendance figures • Number of people moving into service	8,14,21

3.	Address transport barriers to facilitate access for all service users.	31.3.28	Alliance Manager	Alliance Leadership Team	Fewer people are unable to access services due to transport issues.	• Service user feedback on transport barriers • Uptake of transport support schemes • Reduction in missed appointments due to transport.	17
4.	Develop and deliver a comprehensive stakeholder engagement and communications plan for transparent updates and involvement.	31.3.27	Lived Experience Engagement Officer	Lived Experience Alliance Forum (LEAF)	Stakeholders are informed, involved, and feel ownership of the system's progress.	• Number of engagement activities • Stakeholder satisfaction surveys • Evidence of stakeholder input shaping decisions.	17, 20, 22
5.	Conduct regular engagement sessions with people and communities to identify needs, barriers, and inform service development.	Ongoing	Alliance Manager	Alliance Leadership Team	Services are shaped by the real needs and experiences of people and communities.	• Number of engagement sessions • Documented changes to services based on feedback.	4,11,17
6.	Implement feedback mechanisms (surveys, forums, suggestion boxes, anonymous channels) and regularly review feedback to co-develop action plans.	Ongoing	Alliance Manager	Alliance Leadership Team	Service improvements are co-produced with people who use them.	• Volume and diversity of feedback received • Number of action plans co-developed • Evidence of changes made in response to feedback.	4,11,17

7.	Review and adapt service delivery to ensure parity, equal access and inclusivity for all groups, including neurodiverse individuals, carers and young carers, people with protected characteristics, and Welsh language speakers.	Ongoing	Alliance Manager	Alliance Leadership Team	All groups, including those with additional needs, can access and benefit from services that reflects their unique circumstances and identities.	• Demographic data • Accessibility audits • Number of tailored interventions delivered • Feedback and satisfaction surveys.	3,7,8,15,16,22
8.	Ensure staff are trained to foster welcoming, inclusive, and psychologically safe spaces.	Ongoing	Alliance Manager	Alliance Leadership Team	People feel safe, respected, and included when accessing services.	• Staff training completion rates • Feedback on environment • Incidents of exclusion.	3, 15, 23
9.	Promote digital inclusion through device access, literacy support, and user-friendly platforms.	31.3.27	Alliance Manager	Alliance Leadership Team	Digital barriers do not prevent anyone from accessing support.	• Number of devices distributed • Feedback on digital platforms.	17, 22, 11
10.	Provide support for different generations within affected families and help families (including Children) affected by	Ongoing	Alliance Manager	Alliance Leadership Team	Families receive holistic support, and children remain safely with their families where possible.	• Number of family-based interventions • Number of child specific interventions. • Family satisfaction surveys	6,7

	parental substance use remain together.					• Number of family reunification or preservation. • Number of children removed.	
11.	Collaborate with Children's Services to strengthen safeguarding pathways for Children and Young People including those who are moving between children and adult services (16-25)	Ongoing	Alliance Manager	Alliance Leadership Team	Joined-up safeguarding pathways ensure children and young people are consistently protected and supported.	• Number and appropriateness of safeguarding referrals made by substance use services to Children's Services • Proportion of substance use cases where parental substance use / Hidden Harm risks are identified and documented • Percentage of CYP (and adults with parental responsibility) receiving a recorded safeguarding risk assessment at substance use service entry • Audit evidence that substance use services are following agreed multi-agency	6,7

						safeguarding pathways • Percentage of young people aged 16–25 with a planned transition between CYP and adult substance use services • Proportion of substance use staff trained in safeguarding, Hidden Harm, and transitional safeguarding	
12.	Identify and address underlying causes of substance use.	Ongoing	Alliance Manager	Alliance Leadership Team	People receive support for the root causes of their substance use, not just the symptoms.	• Assessment completion rates for underlying needs • Referrals to relevant support (e.g., mental health, housing, domestic abuse, poverty, employment etc.) • Outcomes of holistic care plans.	7,13
13.	Expand access to Naloxone and overdose prevention training, and maximize harm	Ongoing	Harm Reduction Lead	Harm Reduction Sub-Group	Fewer drug-related deaths and harms in the community.	• Number of Naloxone kits distributed • Overdose reversals reported	4,5

	reduction interventions (including Needle Exchange, BBV testing).					• Uptake of harm reduction services (BBV testing and needle exchange) • Number of people receiving BBV treatment.	
14.	Encourage and enable reporting of public drug use and associated litter.	Ongoing	Harm Reduction Lead	Harm Reduction Sub- Group	Communities are safer and cleaner, with reduced public drug use and litter.	• Number of reports received • Response times;	15,16
15.	Target and restrict the supply of illicit drugs.	Ongoing	Head of Community Safety and Partnerships, South Wales Police	Harm Reduction Sub-Group	Reduced availability of illicit drugs in the community.	• Number of enforcement actions • Quantity of drugs seized • Community perceptions of drug availability via feedback.	13,21
To collaborate with people and partner agencies to deliver effective interventions with a skilled and confident work force							
16.	Form multi-agency working groups to lead on responding to issues and emerging trends, with members to including health, social care, justice, housing, and community partners.	Ongoing	DALB Lead Officer	DALB	Multi-agency collaboration leads to more coordinated and effective interventions for people.	• Number of active multi-agency groups • Frequency of meetings • Documented joint initiatives or interventions.	2,9,10,12, 13,17,24

17.	Explore and implement co-location opportunities to improve collaboration and accessibility.	31.3.27	Alliance Manager	Alliance Leadership Team	Co-located services provide easier access and more seamless support for individuals.	• Number of co-located sites established • Feedback on accessibility • Increase in cross-referrals between agencies.	3, 22, 17
18.	Develop robust information sharing arrangements between all relevant parties.	31.12.26	Alliance Manager	Alliance Leadership Team	Timely and accurate information sharing improves decision-making and continuity of care.	• Existence of formal information-sharing agreements • Number of shared cases • Staff feedback on information flow.	4, 11, 17
19.	Improve and maintain local information networks to monitor and respond to emerging trends.	Ongoing	Harm Reduction Lead	Harm Reduction Sub-Group	The partnership is able to identify and respond quickly to new challenges or trends in substance use.	• Frequency of network updates • Number of emerging issues identified and addressed • Stakeholder feedback on network effectiveness.	10,11,17
20.	Co-produce intervention strategies and joint initiatives with people who have lived and living experience. To include people from a wide variety of groups including	Ongoing	Lived Experience Engagement Officer	Lived Experience Alliance Forum (LEAF)	Interventions are more relevant and effective because they are shaped by lived experience.	• Number of co-produced strategies or initiatives • Evidence of involvement of people with lived experience • Feedback on relevance.	3,7,8,15,16,22

	carers and young carers and those affected by neurodiversity.						
21.	Collaborate across sectors to strengthen pathways for individuals with complex needs (e.g., co-occurring physical/mental health, housing/benefits etc. issues).	Ongoing	Alliance Manager	Alliance Leadership Team	Individuals with complex needs experience smoother transitions and better outcomes.	• Number of cross-sector referrals • Reduction in service gaps • Referral closure reasons.	2,11,12,13,17,24
22.	Share resources and best practices across sectors to enhance intervention effectiveness.	Ongoing	Alliance Manager	Alliance Leadership Team	Shared learning and resources lead to improved service quality and innovation.	• Number of shared resources or best practice events • Staff feedback on usefulness • Examples of practice changes resulting from shared learning.	11,17,24
23.	Develop and deliver joint training and awareness programs, including trauma-informed and culturally competent practice, for all partners.	Ongoing	Alliance Manager	Alliance Leadership Team	Staff across agencies are better equipped to deliver trauma-informed and culturally competent care.	• Number of joint training sessions delivered • Staff training completion rates • Pre- and post-training confidence or competence assessments.	3,17,23
24.	Regularly update DALB and linked	Ongoing	DALB Lead Officer	DALB	Governance bodies are well-informed	• Frequency of updates	10, 23, 2

	boards with partnership progress and outcomes.				and able to provide effective oversight and support.	• Board member feedback on usefulness • Actions taken as a result of updates.	
25.	Establish staff support networks and partner with subject experts to enhance training quality.	Ongoing	Alliance Manager	Alliance Leadership Team	Staff feel supported and have access to high-quality, expert-led training.	• Number of staff support network meeting • Staff satisfaction surveys • Number of training sessions delivered with expert input.	19
26.	Develop a structured, tiered training program for all staff, informed by a needs assessment and co-designed with lived experience contributors and subject experts.	31.3.27	Alliance Manager	Alliance Leadership Team	The workforce is skilled, confident, and equipped to deliver high-quality, evidence-based interventions.	• Number of staff trained • Completion rates of training modules • Results of pre- and post-training confidence or competence assessments. • Staff feedback on training relevance • Involvement of lived experience contributors in training design	3,23
27.	Develop initiatives to support staff wellbeing, including peer support networks, regular	31.3.27	Alliance Manager	Alliance Leadership Team	Staff feel supported, valued, and are more likely to remain in their roles.	• Staff well-being and satisfaction surveys • Retention rates	19

	supervision, and recognition/reward mechanisms to boost morale and retention.					• Participation in peer support and supervision sessions.	
28.	Ensure access to professional development resources and clear career pathways.	31.3.27	Alliance Manager	Alliance Leadership Team	Staff have opportunities for career progression and continuous professional growth.	• Uptake of professional development resources • Number of staff progressing along career pathways • Staff feedback on development opportunities.	19
29.	Create paid roles for individuals with lived/living experience to contribute to service design, delivery, and staff training.	31.3.27	Alliance Manager	Alliance Leadership Team	Services and training are enriched by the perspectives of people with lived experience.	• Number of paid roles created and filled • Involvement of lived experience staff in service design and delivery • Feedback from staff and service users.	4, 8, 11
To prioritise prevention, early intervention and education to reduce escalation of substance use harms.							
30.	Launch targeted prevention campaigns in schools, workplaces, and communities, including tailored pathways for home-schooled and excluded children.	31.3.27	Harm Reduction Lead	Harm Reduction Sub-Group CYP & Families Sub-Group	Increased awareness and prevention of substance use across diverse groups.	• Number of campaigns delivered • Reach and engagement statistics • Feedback from target audiences.	8,13

31.	Develop and coordinate a whole system evidence-based prevention approach clarifying the contribution of primary, secondary and tertiary prevention across the DALB partnership	31.03.27	Public Health Team	Harm Reduction Sub-Group	A coherent evidence-based prevention system across western Bay with clear alignment between primary, secondary and tertiary prevention enabling partners to target action more effectively.	• A clearly defined prevention framework is in place endorsed by the DALB • The DALB receives regular Public Health insights on prevention trends inequalities and risks to inform strategic decision making. • Evidence of learning and refinement of prevention approaches over time, informed by data, evaluation and stakeholder feedback	
32.	Identify at-risk individuals early through screening and referral pathways.	Ongoing	Alliance Manager	Alliance Leadership Team	At-risk individuals are identified and supported before problems escalate.	• Number of screenings conducted • Number of referrals made • Outcomes for individuals identified as at-risk.	8,13
To embed oversight through leadership, governance and accountability - driving improvement and innovation							
33.	Establish a process for long-term review and monitoring of the	31.3.26	DALB Lead Officer	DALB	The DALB Strategy and Action Plan remain relevant,	• Frequency of long-term reviews	5,10,23,24

	DALB Strategy and Action Plan.				effective, and aligned with emerging needs.	• Documented updates to the strategy • Stakeholder feedback on the review process.	
34.	Develop and implement a comprehensive monitoring framework to track outputs, outcomes, and feedback.	30.9.26	Commissioning & Development Officer	Alliance Leadership Team	The partnership systematically tracks progress, identifies gaps, and drives continuous improvement.	• Existence and use of a monitoring framework • Frequency of data collection and reporting • Number of improvements made based on monitoring data.	5,10,11,23
35.	Establish systems to ensure that the learning and recommendations from case reviews and audits (including drug-related deaths and non-fatal overdoses) are making a difference.	30.6.26	Case Review Coordinator	Learning & Recommendations Sub Group	Lessons from reviews and audits lead to tangible service improvements and reduced harm.	• Number of recommendations implemented • Evidence of changes in practice • Reduction in repeat incidents or similar cases.	5,10,23
36.	Routinely review and update policies to reflect best practice and community needs.	Ongoing	Alliance Manager	Alliance Leadership Team	Policies are current, effective, and responsive to changing needs and best practice.	• Frequency of policy reviews • Number of policy updates • Evidence of stakeholder	23,10

						engagement in policy development.	
37.	Encourage collaborative research and pilot new approaches.	Ongoing	DALB Lead Officer Commissioning & Development Officer	Alliance Leadership Team	The partnership creates and tests new solutions to challenges, ensuring services are flexible, responsive, and shaped by real-life experience	• Number of projects initiated • Outcomes and learning from pilots • Dissemination of findings.	23,24
38.	Implement integrated digital infrastructure (e.g. shared dashboards, interoperable systems).	30.9.26	DALB Lead Officer Data Analyst	DALB	Partners have timely access to shared data, supporting coordinated and effective interventions.	• Number of partners using shared digital systems • User satisfaction with digital infrastructure • Examples of improved coordination.	5,10,23
39.	Leverage technology and social media for engagement, education, and prevention campaigns.	Ongoing	Alliance Manager	Alliance Leadership Team	More people are reached and engaged through digital channels, increasing awareness and access to support.	• Reach and engagement statistics for digital campaigns • Feedback from target audiences • Number of people accessing services via digital routes.	12, 17
To challenge stigma, promote understanding and foster positive cultural shifts							
40.	Co-design and implement leadership standards and measures to	30.9.26	DALB Lead Officer	DALB	Leadership is consistent and accountable, driving effective	• Existence and adoption of leadership standards	9,10

	ensure effective partnership and accountability.				partnership working by fostering a culture of innovation, transparency, and shared responsibility across all partners	• Regular leadership reviews • Evidence of improved partnership outcomes linked to leadership measures. • Staff and partner perception surveys on leadership effectiveness. • Number of leadership development activities completed.	
41.	Conduct regular reviews of DALB governance, roles, and links with other boards to strengthen strategic alignment.	Ongoing	DALB Lead Officer	DALB	Governance structures are clear, effective, and strategically aligned across sectors, with regular reviews leading to actionable improvements and increased stakeholder confidence	• Frequency of governance reviews • Documented changes to roles or structures • Stakeholder feedback on governance effectiveness. • Number of governance recommendations implemented • Stakeholder confidence ratings post-review.	2,10, 23
42.	Maintain active links with strategic planning initiatives across sectors.	Ongoing	DALB Lead Officer	DALB	DALB activities are strategically aligned with broader priorities,	• Number of joint planning meetings or initiatives.	9,10,17,24

					maximizing impact and resource use through cross-sector collaboration, joint initiatives, and shared allocation of resources.	• Evidence of cross-sector alignment in plans • Feedback from partner agencies. • Resources leveraged through partnerships.	
43.	Deliver anti-stigma campaigns within organisations and the wider community.	Ongoing	Harm Reduction Lead Alliance Manager	Harm Reduction Sub-Group	Reduced stigma and increased understanding of substance use issues lead to service users feeling less stigmatised and more willing to seek help	• Number of campaigns delivered • Reach and engagement statistics • Pre- and post-campaign surveys on attitudes and stigma. • Increase in self-referrals post-campaign.	15,16
44.	Implement gender-sensitive and inclusive policies for substance use services.	31.3.27	Alliance Manager	Alliance Leadership Team	Services are accessible, inclusive, and responsive to the needs of all genders and backgrounds, with policy updates leading to measurable improvements in access and satisfaction among	• Frequency of policy reviews and updates • Demographic data • Feedback from diverse groups. • Uptake of services by gender and minority groups • Satisfaction scores disaggregated by demographic.	3,7,15,16

					underrepresented groups.		
45.	Provide training to staff and partners on stigma, discrimination, and cultural competence.	Ongoing	Alliance Manager	Alliance Leadership Team	Staff and partners demonstrate increased awareness and competence in addressing stigma and discrimination, resulting in observable changes in practice and improved experiences for service users	• Number of training sessions delivered • Staff and partner feedback • Observed changes in practice or lived experience.	3,15,23
46.	Develop mechanisms to celebrate positive stories and achievements to foster constructive cultural shifts.	Ongoing	DALB Lead Officer	DALB	Amplifying positive narratives about recovery and partnership supports cultural change, leading to increased community engagement and more peer-led initiatives.	• Number of stories/achievements shared • Number of peer-led events or initiatives inspired by shared stories. • Engagement with positive messaging • Feedback from staff, partners, and people.	15,16
47.	Engage community leaders and champions to promote understanding and inclusion.	Annual	DALB Lead Officer Alliance Manager	DALB	Community leaders actively support and promote inclusive, stigma-free approaches.	• Number of leaders/champions engaged • Participation in events or campaigns	11,15,16

						• Evidence of community-led initiatives.	
48.	Create and implement a multi-agency communications plan to raise awareness of services and access routes.	31.3.27	Alliance Manager	Alliance Leadership Team	People are better informed about available services and how to access them.	• Existence and implementation of a communications plan • Reach and engagement statistics • Feedback on awareness.	17, 22
49.	Use geo-targeted digital ads, social media, community events, and explainer videos to promote services and keep online tools up to date.	Ongoing	Alliance Manager	Alliance Leadership Team	Increased reach and engagement with key messages and services through digital and community channels.	• Analytics on digital campaigns (impressions, clicks, engagement) • Number of community events held • Feedback on usefulness and accessibility of online tools.	17