

DRUG & ALCOHOL SERVICE UPDATE

To: **Adult Committee**

Meeting Date: **13 October, 2016**

From: **Sarah Ferguson, Service Director: Enhanced and Preventative Services**

Electoral division(s): **All**

Forward Plan ref: **Not applicable** *Key Decision:* **No**

Purpose: **To update the Adult Committee on the work of the Drug and Alcohol Action Team (DAAT), including the strategic partnership and the commissioned countywide specialist services.**

Recommendation: **To note the information provided in this update.**

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1.0 BACKGROUND

- 1.1 The report has been requested to provide an overview of the work undertaken by the Drug and Alcohol Team including the strategic partnership and provision of countywide specialist drug and alcohol treatment services.

2.0 MAIN ISSUES

- 2.1 Reducing drug and alcohol related harm in Cambridgeshire falls under the remit of the Drug and Alcohol Action Team (DAAT) which is a multi-agency partnership working to implement National Drug and Alcohol priorities through local strategic planning. The functions of the DAAT sit under the 'Cambridgeshire Safer Communities Partnership Team' which is hosted within Cambridgeshire County Council (CFA directorate).
- 2.2 The misuse of alcohol and drugs damages lives, families and communities. The impact of substance misuse is wide reaching contributing to poor physical and mental health, homelessness, safeguarding (children and adults), financial problems, violence, offending behaviour. Many of those affected will have experienced difficult life circumstances, and are among the most vulnerable and marginalised in society. The cost of substance misuse to local health, social care and criminal justice systems is significant.
- 2.3 The DAAT partnership leads on strategic development, the commissioning of specialist Drug and Alcohol treatment and associated service provision and early intervention and preventative initiatives. The DAAT partnership includes a range of key partners namely Cambridgeshire Constabulary, Cambridgeshire and Peterborough Clinical Commissioning Group (CCG), Cambridgeshire County Council, Office of the Police and Crime Commissioner (PCC), District Councils, Probation, service user representation and voluntary agencies. Partnership work is central to addressing and responding to substance misuse across Cambridgeshire in a coordinated manner, influencing and initiating a range of work streams that focus upon reducing harms to individuals, families, organisations and communities.
- 2.4 Historically drugs and alcohol work is funded through pooled budgets and shared resourcing from members of the partnership. However the majority of funding comes from the Public Health Grant now held by the local authority with smaller contributions from Adult Social Care (CCC), PCC and Cambridge City Council.
- 2.5 There are three overarching strategic priorities that shape commissioning and partnership initiatives in Cambridgeshire set by the Cambridgeshire DAAT Executive Board (2015-18) namely
1. **Prevention and protection from harm:** Preventing harm to individuals, children, young people and families affected by drug and alcohol misuse
 2. **Recovery:** Delivering effective partnership recovery based approaches to drug and alcohol treatment
 3. **Enforcement:** Protecting communities through robust enforcement to tackle drug supply, drug and alcohol related crime and anti-social behaviour
- 2.6 **Prevention and Protection from Harm**
A programme of population wide and targeted campaigns that provide information

about the harms associated with alcohol and drug misuse are ongoing in Cambridgeshire. These campaigns have included drink driving, workplace focused activity in Fenland (targeting alcohol use in migrant workforce), harms associated with alcohol use and pregnancy, development of alcohol scratch cards (produced in different languages), alcohol and domestic abuse, risks of alcohol use in older age groups, and working closely with community pharmacists on annual alcohol awareness campaigns which include distribution of unit measuring cups and harm reduction literature.

- 2.7 Young people are targeted with specific interventions, vulnerable groups such as those who are 'looked after', or are presenting with signs of drug or alcohol use are a particular priority. Prevention interventions are also provided by CCC Personal, Social and Health Education Service (PHSE) which includes policy and other training or information giving interventions. CCC also undertakes checks for under age sales through its Trading Standards Department.
- 2.8 Concern about the growing misuse and harmful impact of New Psychoactive Substances (NPS), previously referred to as 'legal highs', has led to the partnership developing local harm reduction literature 'Keep Calm and Party Safer' and working closely with Cambridgeshire Constabulary Drugs Experts and Cambridge Business Against Crime (CAMBAC) to target the night time economy to promote harm reduction messages.
- 2.9 Other prevention activities include the roll out of Identification and Brief Advice (IBA) training to a wide range of front line staff including housing support staff, police officers, fire service, nurses, and community pharmacists. This evidence based intervention enables practitioners to develop the skills and knowledge to effectively 'have a conversation about alcohol', identifying risk levels, and providing appropriate intervention and advice to stimulate any necessary behaviour change along with signposting to appropriate support services.
- 2.10 Reducing Drug Related Deaths (DRD's) is a key priority, national rates are significantly high for a number of reasons, increasingly ageing drug using population, fluctuations in drug purity levels, poly drug use and mental health difficulties are all identified as being key factors. Naloxone kits, which reverse the effects of a heroin overdose, are now routinely distributed in Cambridgeshire to users known to be at risk of overdose. Over the last 3 years over 400 kits have been distributed with a 10% appropriate 'use' rate potentially saving the lives of a large number of Cambridgeshire residents. An effective RAG rated Drug Alert system has been instigated across Cambridgeshire and Peterborough disseminating risk information about any substance related incidents to the service user population and professionals in a timely manner. Additionally we are planning to undertake a Drug Related Death audit with the local Coroner's office and Public Health team in the next few months to fully understand local rates and key features which will help inform and prioritise partnership harm reduction activity.
- 2.11 **Specialist Treatment services-Adults**
The DAAT partnership commissions a range of treatment services aimed at groups impacted by drug and alcohol misuse. Inclusion (specialist directorate of South Staffordshire and Shropshire NHS Foundation Trust SSSFT) deliver both the specialist drug and alcohol treatment contracts for adults over 18 years of age across Cambridgeshire. The service is flexible ensuring that staff and resources are located and focused according to need. The treatment service model is recovery focused, overcoming dependence to achieve sustainable recovery

enabling integration back into families, local communities and return to work, employment and education. The specialist countywide treatment service provide the following services across 5 fixed sites (and additional community venues) across Cambridgeshire: Brief advice, information and drugs education, structured treatment programmes (Inc. prescribing substitute medication), counselling, countywide Needle and Syringe Programme (inc community pharmacies), Blood Borne Virus testing/Vaccination Programme, partnership training, specialist team facilitating tier 4 placements. The service works in collaboration with a range of key partners including GP's, probation, IDVA's, social care, mental health services, and homelessness services. The specialist service provides outreach support in both Cambridge City and across rural parts of the county and is open at weekends and evenings to provide flexibility on appointment times for those service users in employment.

- 2.12 The specialist adult treatment services have developed an effective 'Recovery champion' programme which utilises those individuals with 'lived experience' to provide peer support for those at the beginning of their recovery journey. Recovery champions undertake a range of tasks within the services including assisting with assessments, manning the front desks, telephone support, facilitating groups with professionals and workforce training.
- 2.13 Cambridgeshire and Peterborough Foundation Trust (CPFT) deliver 3 inpatient hospital detox beds based at Fulbourn Hospital for people who are unable to undertake a safe detoxification (from drugs and/or alcohol) in the community and require inpatient services. Additionally, the DAAT facilities residential rehab placements for those individuals who meet the eligibility criteria for care. The DAAT partnership also commissions a range of housing related support projects helping offenders and those with chronic alcohol use to gain accommodation and strive towards independent living.
- 2.14 **Young People/Families**
CASUS (Cambridgeshire Adolescent Substance Misuse Service) deliver the combined drugs and alcohol service for young people (12-21 years). It provides a comprehensive treatment service, and capacity allowing, delivers prevention interventions in a number of settings and with different groups. A key concern is the needs of children and young people in vulnerable groups who are at a higher risk of misusing substances for example 'looked after' children and children who live with parents/carers who misuse. There are approximately 2000 adults in specialist treatment services across Cambridgeshire, 850 of which are parents. CASUS deliver a small service to children who have substance misusing parents to increase their self-esteem and resilience. Inclusion adult services will suggest to clients that their children would benefit from a referral to young carers provision at Centre 33. The YOS Substance misuse service delivers treatment interventions to those young offenders who are misusing substances, and also deliver prevention interventions to those on the cusp of misuse and to those vulnerable to misuse.
- 2.15 Within all specialist commissioned services the DAAT partnership has focused to re-engineer the offer to families to ensure the needs/impact of drug and alcohol use on children and family members is assessed and managed effectively. This has resulted in improvements, which includes the design and implementation of a robust data system for recording children's information and a safeguarding manual for all staff. The DAAT partnership is also working closely with Children's Services, including Together for Families, to jointly implement support packages for families.

2.16 **User Engagement**

User engagement is well established across the drug and alcohol system. All the commissioned services have strong service user engagement groups in place which are attended periodically by members of the Partnership and also offer comprehensive support and opportunities to individuals in recovery.

- 2.17 Sun Network is commissioned to provide the independent service user contract. This Service focuses engagement with users independently of the treatment service to gain feedback on local provision and encourage those who are not currently in services to seek specialist support. The service runs regular 'Recovery cafés across the county and provides advocacy work. The Service also provides service user input and feedback to the Drug and Alcohol Commissioning Group assisting in the monitoring and development of local quality services.

- 2.18 The DAAT partnership is always looking at new and innovative opportunities for Recovery. Cambridgeshire was successful in its bid to Public Health England (PHE) to develop a Recovery Hub in Cambridge City. This project will be a community based resource, which will include 'The Edge Café. It will be run for service users by service users and provide 'step down' support for those seeking long term abstinence as a move on from specialist services, encouraging individuals to be less dependent on a range of costly health and social care provision. The Recovery Hub/Café is due to open shortly.

2.19 **Criminal justice**

The service works closely with criminal justice partners to ensure that there are clear pathways into treatment for those offenders identified with drug and alcohol problems. The Partnership recently introduced a specialist prison in-reach post from the drug service to HMP Peterborough. Approximately 100 offenders accessing prison substance misuse services are referred to Cambridgeshire per annum. Previously, on average, only 34% were picked up by services on release, this has now increased to 83% in contrast to a National average of 50%.

2.20 **Performance outcomes**

The performance data of the Drug & Alcohol Treatment Service is obtained from NDTMS (National Drug Treatment Monitoring System) which is monitored by Public Health England (PHE). PHE measures a number of different outcomes and gives local authorities guidance on how their partnership is expected to perform. There are national expectations and local expectations, which are more specific to a local authority or group of local authorities. PHE created Local Comparator Areas which cluster similar local authorities together, this is based specifically on the populations in substance misuse treatment and not on broader similarity between the general populations of local authorities. PHE monitors to ensure that local authorities are performing within a similar range and observes trends over time.

Numbers in Adult Treatment Services (rolling)

	Q1 2015/16
Drug Service	1631
Alcohol Service	815

- 2.21 To understand Cambridgeshire's rankings of successful completions for Opiate treatment in the year 2014/15 the graph below captures the local outcomes in comparison to the National average and the *upper quartile range* for the Local Comparator Areas. Successful completions are defined as "The client exited the treatment system in a planned way at the end of their latest treatment journey".



2.22 Adults Successful Completions (Alcohol)

Local comparator areas do not exist for Alcohol, the DAAT target for Inclusion is to perform similar to, or above, the national average. Successful completions for alcohol treatment in 2014/15 performed below the national average however there were significant improvements over the year and local alcohol outcomes are now in line with National trends.

Successful completions as a proportion of all in treatment

2014/15	Cambridgeshire	Numbers	National Average
Q1	32.60%	220/675	39.79%
Q2	37.00%	263/711	39.53%
Q3	37.70%	293/777	39.49%
Q4	39.30%	334/850	39.21%

2015/16	Cambridgeshire	Numbers	National Average
Q1	40.90%	333/815	39.14%

2.23 Young People

There were 122 young people in CASUS (rolling) and 17 new presentations to service (year to date) in Q1 15/16. All YP receive their first interventions within 3 weeks and receive a care plan within 2 weeks, performance in this area remains consistent.

	Q1 15/16
YP in services (rolling)	122
New presentation (YTD)	17
Waiting Times (received first intervention within 3 weeks)	100%
Care Plan (received a care plan within 2 weeks)	100%

2.24 Investment in Drug and Alcohol work

Current investment in countywide drug and alcohol treatment & associated support services (Including Commissioning team) is £6.5 million. The majority of investment funds front line specialist treatment services (Public Health Grant).

2.25 Joint Strategic Needs Assessment

The Public Health Team have recently undertaken a Drugs and Alcohol Joint Strategic Needs Assessment (JSNA) which was presented to the Health and Wellbeing Board on the 15th September, 2016. This document captures the needs of children, young people, adults and older people in relation to the misuse of both legal and illegal substances providing an overview of the issues and presenting a number of strategic and action based recommendations.

<http://cambridgeshireinsight.org.uk/JSNA/Drugs-and-Alcohol-2015>

3.0 ALIGNMENT WITH CORPORATE PRIORITIES

3.1 Developing the local economy for the benefit of all

- 3.1.1 Recovery based treatment services will enable more people recovering from Drug and alcohol difficulties to access employment and contribute to the local economy.

3.2 Helping people live healthy and independent lives

- 3.2.1 A strong emphasis on prevention and early intervention work to address drug and alcohol difficulties at the earlier opportunity and access to specialist service/interventions will enable people with drug and alcohol problems to lead more healthy and independent lives.

3.3 Supporting and protecting vulnerable people

- 3.3.1 The support available for people with drug and alcohol difficulties as described in the report allows individuals to address a range of issues including homelessness, health difficulties, financial and social/emotional difficulties improving personal resilience and encouraging opportunities for integration into local communities and re-engagement with families.

4.0 SIGNIFICANT IMPLICATIONS

4.1 Resource Implications

- 4.1.1 There are no significant implications within this category.

4.2 Statutory, Legal and Risk Implications

- 4.2.1 Local Drug and Alcohol priorities are aligned with the National Drug and Alcohol strategies and specialist treatment services are working under NICE clinical frameworks and compliant with the Care Act 2014.

4.3 Equality and Diversity Implications

- 4.3.1 The strategic aim is to prevent harm to those individuals affected by substance misuse and that commissioned specialist services are available to all Cambridgeshire residents with drug and/or alcohol problems. There are no specific equality or diversity implications in this report.

4.4 Engagement and Consultation

4.4.1 There are no significant implications within this category.

4.5 Localism and Local Member Involvement

4.5.1 There are no significant implications within this category.

4.6 Public Health

4.6.1 Local authorities' statutory responsibilities for public health services are set out in the *Health and Social Care Act 2012*. Local authorities have, since 1 April 2013, been responsible for improving the health of their local population and for public health services including services aimed at reducing drug and alcohol misuse.

4.6.2 The misuse of drugs and alcohol is associated with poor health outcomes alongside a range of socio-economic factors which create a high cost pressure for a wide range of services including physical and mental health, social care (Adults and Childrens), criminal justice and housing services.

Implications	Officer Clearance
Have the resource implications been cleared by Finance?	Yes Name of Financial Officer: M Wade (CYP)
Has the impact on Statutory, Legal and Risk implications been cleared by LGSS Law?	Yes Name of Legal Officer: Lynne Owen
Are there any Equality and Diversity implications?	Yes Name of Officer: Sarah Ferguson
Have any engagement and communication implications been cleared by Communications?	Yes Name of Officer: Simon Cobby
Are there any Localism and Local Member involvement issues?	Yes Name of Officer: Sarah Ferguson
Have any Public Health implications been cleared by Public Health	Yes Name of Officer: Tess Campbell

Source Documents	Location
None.	