

# Cambridgeshire and Peterborough Countywide Community Safety Strategic Board

To: Cambridgeshire and Peterborough Countywide Community Safety Strategic Board  
From: Liz Robin/Laura Hunt  
Date: 11<sup>th</sup> October, 2018  
Title: Drug and Alcohol-Review

## 1. Purpose

1.1 The purpose of this report is to

- To understand the performance of the drug and alcohol strategy and confidence in it.
- To outline to the CCSB the key risks surrounding drug and alcohol misuse and how the Delivery Group is managing this risk in Cambs and P'boro.
- To highlight any current risks / gaps in provision
- Display current performance and highlight risks the Responsible Authorities should be aware of and respond to in line with their responsibilities under the Crime and Disorder Act 1998
- To highlight to Responsible Authorities and the place-based partnerships they sit on (such as CSPs and Living Well Partnerships) what actions are needed from them to improve community resilience to the issues and ensure the most vulnerable have access to support

## 2. Recommendations

2.1 The Board is recommended to note progress, consider the emerging risks regarding County Lines and support the following 3 suggested actions.

- ❖ To ensure that substance misuse training is incorporated across agencies into the workforce training calendar and there are expectations for regular top ups to ensure the workforce remains confident and skilled to respond to individuals and families that are experiencing substance misuse difficulties. For the strategic partnership to assist in creating a dialogue with secondary schools to develop a standardised drugs/alcohol policy response to enable pupils to have early access to specialist treatment services and early intervention is put into effect to help secure their place in mainstream education.
- ❖ To facilitate the distribution of Take Home Naloxone (THN), urging partners to use opportunistic contact with opiate users (and family and friends) to undertake valuable harm reduction interventions and facilitate engagement, Hospital Emergency Departments and custody suites are particular areas of focus.
- ❖ To drive through the identified areas of action following the stakeholder substance misusing offenders pathway review event on the 15<sup>th</sup> October, 2018.

## 3. Background and Context

3.1. The Drug and Alcohol Delivery Board (DAADB) co-ordinates the delivery of the multi-agency response to drug and alcohol misuse across Cambridgeshire and Peterborough by bringing together strategic leads from key agencies with responsibility for addressing different aspects of

substance misuse and its impacts. The board focuses on the multi-agency approach to prevention, treatment of and responses to drug and alcohol misuse.

3.2. The D&A Delivery Board has developed a comprehensive action plan in line with the National Drugs Strategy (2017) encompassing four key themes of reducing demand, restricting supply, building recovery and taking action globally. The actions included in the plan are extensive and will encompass work taking place over a number of years. The following key priorities have been identified through consultation with board members and evidenced in recent needs assessments (drugs and alcohol JSNA, 2016 (updated for re-commissioning 2017) and Offender Needs Assessment-OPCC (2016).

#### Key Priorities

1) Prioritising early help interventions to children, young people and families most at risk of substance misuse
2) Reducing drug related deaths and implementing the recommendations of the drug related deaths review
3) Improving outcomes by <b>addressing barriers</b> in: <ul style="list-style-type: none"> <li>a) Housing and homelessness and substance misuse (including linking in with the local homelessness pathfinder)</li> <li>b) Education, training, volunteering and employment and substance misuse (including embedding the work and health programme and work with Job Centre Plus).</li> <li>c) Mental health pathways and substance misuse</li> <li>d) Criminal justice system (across all relevant criminal justice pathways and interventions).</li> </ul>

3.3 Each priority has a strategic lead responsible for driving through the work streams and ensuring there is integration and alignment across strategic delivery mechanisms.

### 5.0 Activity across key priority areas

#### 5.1 Prioritising early help interventions to children, young people and families most at risk of substance misuse

5.1.1 A working group has been established to drive this work forward across key partners, focusing on 3 key areas namely partnerships, workforce development and intervention and tools.

5.1.2 The Healthy Schools contract (in partnership with PHE and OPCC) due to go live, this provides schools with evidence based tools and interventions to support pupils experiencing problems including substance misuse.

5.1.3 A young person's drug and alcohol needs assessment conducted in spring/summer 2018 (Cambridgeshire) has evidenced the following areas that require strengthening

<https://www.cambridgeshire.gov.uk/news/young-peoples-drug-and-alcohol-support-review/>

- Identification of substance misuse across universal and targeted services is not consistent

- In cases of drug/alcohol related school exclusions, schools rarely contact the treatment services for advice or support for the young person involved (no consistent policies across the county)
- Data collection across some children and YP services in relation to substance misuse requires improvement
- Increase the effectiveness of prevention, early intervention and treatment to high risk groups
- Strengthening identification and responses to children of substance misusing parents.

#### 5.1.4 Areas of particular need

Hospital admissions for alcohol specific conditions for under 18s are similar to England averages but much higher than the rest of the East of England, Cambridge City and Huntingdon are those with significantly higher rates

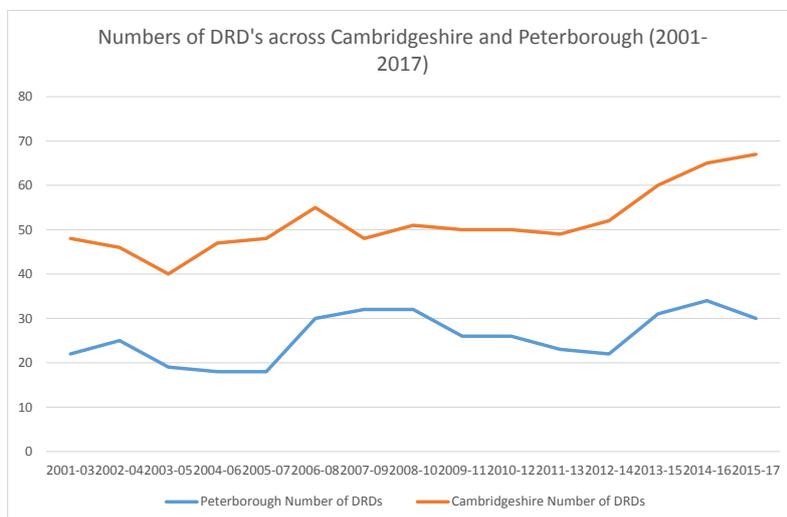
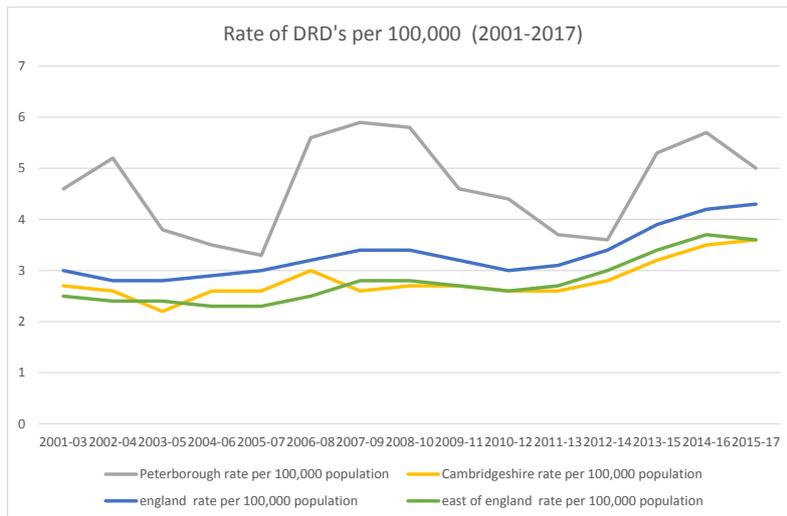
#### 5.1.5 Assistance

To ensure that substance misuse training is incorporated across agencies into the workforce training calendar and there are expectations for regular top ups to ensure the workforce remains confident and skilled to respond to families that are experiencing substance misuse difficulties. For the strategic partnership to assist in creating a dialogue with secondary schools to develop standardised drugs/alcohol policy response to enable pupils to have early access to specialist treatment services and early intervention is put into effect to help secure their place in mainstream education.

## 5.2 Drug Related Deaths

5.2.1 The most recent ONS data indicates that rates per 100,000 have decreased in Peterborough the most recent data release from 34 (2014/15) to 30 (2015/17) and from 5.7 to 5 (rate per 100,000). The rates are still above both national and regional DRD figures.

5.2.2 Cambridgeshire has seen a slight increase, but a flattening in trajectory, in numbers and rates per 100,000, an increase from 65 to 67 and rate per 100,000 from 3.5 to 3.6. Cambridgeshire DRD rates remain below national rates and matching the regional average (3.6).



### 5.2.3 Achievements

- The audit conducted with the Coroner's office in 2017 identified key features in local deaths which has enabled and refocused work.
- Closer alignment with suicide prevention work
- Robust local surveillance processes are in place with the police, coroners, service user network and treatment services.
- The undertaking (where possible) of joint SI's across key statutory partners to facilitate and embed learning from DRD's
- Across Cambridgeshire and Peterborough thousands of take home naloxone (THN) kits have been distributed to opiate users, associated family members/friends and at least 118 have been used appropriately in overdose situations, saving many lives.

### 5.2.4 Challenges

Sustained high levels of heroin purity, increase in complexity and vulnerability of this client group the impact of county lines in regard to increased accessibility and supply of class A drugs means a constant ongoing battle to reduce drug related harms.

- An increase in the number of DRD's involving the misuse of prescription medications is increasing, work is underway with the CCG to start to address this issue.
- Drugs entering the county through county lines routes with different purity rates and contaminants are increasing risk levels.

#### 5.2.5 Assistance

Local research indicates that 60% of DRD's are of people not actively known to local treatment services, partners are being urged to use opportunistic contact with opiate users (and family and friends) across agencies as a mechanism to distribute Take Home Naloxone (THN) and undertake valuable harm reduction interventions and facilitate engagement, hospital Emergency Departments and custody suites are particular areas of focus.

### **5.3 Housing and homelessness and substance misuse (including linking in with the local homelessness pathfinder)**

#### 5.3.1 Current Work being undertaken

- Finalising the offender pathway in relation to housing and homelessness which will be the blueprint for developing the pathway for people affected by substance misuse
- As part of CCC's review of Housing Related Support the needs of clients affected by substance misuse will be included.
- Reviewing optimum future provision of accommodation and housing related support for clients affected by drug and alcohol misuse (housing first)
- A second abstinence house is opening up in Cambridge City for those who are in recovery, who have been through the hostel system and require safe shared accommodation free from drugs and alcohol
- Developing and building upon the positive work of the Trailblazer project. The vision being that all professionals involved in that pathway have an awareness of where there may be a housing or homelessness issue affecting a client, flagging up the issue and involving a housing professional in a problem solving approach with that client.

#### 5.3.2 Current issues

- A. With the increasing threat of County lines, accommodation that Districts use for homeless households are being 'cuckooed'. This is being echoed by other accommodation providers across the county. Districts and housing providers are working closely with the Police to share information. However vulnerable tenants are at risk of being exploited, losing their accommodation and becoming homeless.
- B. Managing transition from hospital and prison discharges, shorter prison sentences and a pressure on hospital beds are increasing risks of homelessness. Planning and communication with community services is key to ensuring that vulnerable individuals are not leaving institutions without accommodation.

#### 5.3.3 Assistance

The request to the wider partnership is that they support early intervention and a multi-agency problem solving approach (trailblazer) with regards to housing. Additionally it is hoped that the housing needs of those with substance misuse issues, and other associated complex needs, are recognised and given due consideration, within the housing related support review to promote stability and reduce risks of future homelessness.

#### **5.4 Education, training, volunteering and employment and substance misuse (including embedding the work and health programme and work with Job Centre Plus).**

##### 5.4.1 Current Work being undertaken

- Work on developing the referral pathway between Substance Misuse Treatment Services and Mental Health Services (Dual Diagnosis/Co-occurring Conditions/ Recovery College) to enable those clients in receipt of Employment and Support Allowance (ESA) to access the new DWP support service provided by the Shaw Trust/Papworth trust.
- Work is being undertaken with Job Centre Plus to provide training for staff around substance misuse and dual diagnosis issues to enable them to better address client needs
- Work is underway with Job Centre Plus and DWP Work and Health Programme local leads to identify pathways that treatment service providers (SM & MH) can use for Education, Training and Employment (ETE) support.
- Development of the new Healthy Schools contract which will provide information regarding use of evidenced based interventions to support schools and colleges to address substance misuse, increasing retention in education.

##### 5.4.2 Assistance

To request support from Responsible Authorities to help drive through the Work and Health programme which includes addressing and supporting substance misusers that have ETE related issues.

#### **5.5 Mental health pathways and substance misuse**

##### 5.5.1 Current Work being undertaken

- Countywide Dual Diagnosis and Co-occurring Conditions Protocol has been developed (awaiting sign off from all key authorities)
- Countywide Dual Diagnosis strategic group and 2 operational groups are identifying and responding to need and strengthening responses through the identification of system failures
- Review undertaken of dual diagnosis training (level 1, 2 & 3) that is currently available across the partnership, currently developing new online training package (CPFT) to make training more accessible to partner agencies.
- The New Cambridgeshire drug and alcohol treatment contract (CGL) starts on the 1<sup>st</sup> October 2018, the model of delivery has a key focus around mental health, an enhanced response and viewed as an integral part of substance misuse treatment. The new service is psychiatry led service, with a key psychologist element, the service will have psychological wellbeing as a priority area.

### 5.5.2 Challenges and assistance

Research shows that mental health problems are experienced by the majority of drug (70%) and alcohol (86%) users in community substance misuse treatment. Individuals with co-occurring conditions have a heightened risk of a range of complex health and social issues including risk of early death.

The co-occurring principles document, developed by the CCG, local authority, OPCC and Public Health outlines the commitment to address unmet need within service provision for those people who have co-occurring mental health and substance/alcohol use conditions. This is based on the recent guidance from Public Health England (2017) "*A guide for commissioners and service providers: Better care for people with co-occurring mental health and alcohol/drug use conditions*". This commitment is strongly supported by Cambridgeshire Constabulary who work in partnership with all named commissioning organisations.

The challenge across the authorities is to ensure that these principles have a raised profile and embedded within commissioning practices, contracts and service delivery in order for change to happen.

## **5.6 Criminal justice system (across all relevant criminal justice pathways and interventions).**

### 5.6.1 Current work being undertaken

- Recent drive by courts to increase the use of out of court disposal options for substance misusing offenders.
- Expansion plans for the Liaison and Diversion service and exploration of opportunities to strengthen links and working practices with the treatment services.
- Partners working closely to address County Lines and to ensure that there are robust and appropriate measures to safeguard young people and vulnerable adults, including enforcement activity.
- Reviewing local police data with a view to pilot DTOA.
- Operation Farmington- targeting frequent and high demand offenders, the two main objectives of Op Farmington are: - Working in partnership to support Rehabilitation, Recovery and Release – Breaking the Cycle of Crime and 'The right care at the right time from the right service'. The Op Farmington Team work in partnership to develop the joint venture working

### 5.6.2 Challenges

5.6.3 There are many changes being made across the criminal justice system that are impacting on substance misusing offenders, quick turnaround in courts, increase in short sentences, potential increase in the use of virtual courts and reconfiguration of Peterborough prison (adult males) are putting pressure on the system particularly in terms of communication between services and preparation work to inform sentencing and safe release.

5.6.4 It is recognised that local pathways for substance misusing offenders across the criminal justice system are complex and this has been heightened by the increased number of local and national

commissioning bodies and provider agencies all with different outcome and performance measures. There are various examples of good working practices and positive outcomes across both adult and YP organisations but there are also gaps within the system which need addressing in a coordinated manner. Key agencies are coming together for an event in October to identify strengths, weakness and identify solutions for the benefit of individuals and professionals navigating the system from the point of arrest, court, probation and ensuring continuity of care between prison and the community.

5.6.5 Alcohol is being recognised as a particular area of challenge by police and partners across both Cambridgeshire and Peterborough with a significant increase in alcohol related crime noted particularly in Peterborough and numerous pressures associated with the night time economy in Cambridge City. Daytime alcohol related crime and ASB is dominated by street drinking and aggressive begging in urban areas. In 2016 both Peterborough and Wisbech were successful in their bids to become a Local Alcohol Action Area. Both Peterborough and Wisbech have action plans and are working multiagency to delivery on the tasks and strands.

#### 5.6.6 Assistance

Changes are being made at individual agency level which has an impact on the bigger criminal justice system. We urge key organisations to communicate change and to consider impacts across the system. Following the stakeholder event it would be beneficial to have key authorities support and commitment to drive through identified areas of action.

### 6.0 Key Risk

In section 5 for each priority area that the D&A Delivery board are addressing, individual risks and assistance have been identified. Board members were consulted with regard to the biggest risk they are collectively struggling with across their organisations. The key risk identified was around County lines and the impact that this issue has across the board including the following;

1. Increase in levels of adult and young people exploitation as county lines dealers are targeting vulnerable individuals to support their 'business arrangements'
2. Increase in crime both drug related offences and violent crime
3. increased community visibility of drug use and discarded drug paraphernalia in streets and open spaces and associated ASB
4. Impact on housing, dealers coming into the area and taking over vulnerable adults and YP accommodation for drug dealing purposes (referred to a Cuckooing)
5. Increased harms and overdoses with new dealers coming into the area supplying drugs with different purity levels and contaminates
6. Potential increase in the use of class A drugs in younger children.
7. Increased levels of presenting complexities, increasing pressure and demand on services

The constabulary have written a comprehensive report around their knowledge of County lines, which includes work being undertaken with partners, enforcement successes and ongoing risks.

### 7.0 Recommendation

The Board is recommended to note progress and consider the areas where it can use its authority to provide added value and coordinated assistance to help drive work streams and manage emerging risks.

<b>Understanding Demand</b>		<b>Managing Demand</b>	
<b>Our goal</b>	To understand current and future Substance Misuse demand for policing and partners in Cambridgeshire to better match human and financial resources to that demand, and, to work in partnership so that workforce planning and business transformation across agencies better meet the needs of the public; notably, those with lived experiences and those touched by them.	<b>Our goal</b>	To respond swiftly and appropriately to our evolving understanding of Substance Misuse demand, working in partnership with other agencies to develop the right capacity and capability to deliver the right services to the right people at the right times to address threat, harm and risk, meeting the needs of local people in an effective, efficient and legitimate way.

<b>In 2017/18, in phase 2, we will:</b>
<ul style="list-style-type: none"> <li>• Partnership and Operational support team to support Supt and CI to strengthen the Cambridgeshire and Peterborough Substance Misuse Delivery Board - through the development of action plans to reduce the harm caused by Substance Misuse (including prescription medication) and develop pathways and in partnership identify service improvements.</li> <li>• With Partners continue to develop the Dual Diagnosis Steering Group and Locality Groups to support pathways and support identification of gaps in services and to inform Commissioning</li> <li>• Continue to develop the model for Integrated Recovery Offender Programme (IROP) in Peterborough working closely with IOM</li> <li>• Evaluate the cost savings and outcomes from the model for Integrated Recovery Offender Programme (IROP) - consider the development of the Recovery model to support Frequent Attendees Countywide (Op Farmington)</li> <li>• Continue to work with CPFT partners and BCH Custody Leads to develop Liaison and Diversion Scheme (LaDS) in Police Custody to support Substance Misuse pathways countywide.</li> <li>• Review and develop Information-Sharing Protocols for sharing information related to Substance Misuse Joint Venture Projects</li> <li>• Developing Partnership Working with DASH Commissioners on the joint Harm Reduction review to identify Offender needs to support Criminal Justice focused intervention countywide within a joint action plan – outcomes of the review to be shared with the Recovery Hub – objectives and outcome of HR initiatives to be recovery focused</li> <li>• Actively support a force governance regime for demand, including involvement with both a Gold Group and a Tactical Delivery Group.</li> <li>• Complete work to understand current and future Substance Misuse demand, and moreover, to work to improve data-quality so as to assist this work and understanding.</li> </ul>

<b>In 2017/18, in phase 3, we will:</b>
<ul style="list-style-type: none"> <li>• Work with our Partners to review Substance Misuse training both internally and externally to ensure up-to-date knowledge, continuous improvement, understanding, capacity and capability of staff.</li> <li>• Support a Digital Strategy through the innovative development of cross-agency IT solutions that deliver efficiencies. ECINS</li> <li>• To support the development the force website to help direct and give guidance on how the public can gain access to Substance Misuse support in Cambridgeshire</li> <li>• In phase 3 continue to develop the model for Integrated Recovery Offender Programme (IROP) in Peterborough – to support recovery and integration back into community, 'Breaking the Cycle' of Substance Misuse and Crime supporting conditional cautions, DTOA and other CJ pathways .</li> <li>• With support from the Superintendent partnership role embed our increased understanding of demand within strategic planning processes</li> <li>• Conduct further analysis and evaluation of Integrated Recovery Offender Programme (IROP)</li> <li>• Explore opportunities for academic collaboration as part of wider work on implementing a 'what works' framework in force.</li> <li>• In phase 3 is to continue to work with CPFT partners and BCH Custody Leads to commence evaluation and monitoring of Liaison and Diversion Scheme (LaDS) in Police Custody to support Substance Misuse pathways countywide</li> <li>• With Partners review Dual Diagnosis Cambridgeshire Strategy and protocol against the NICE guidance within the Countywide Steering Group and Locality Groups to support pathways and development of partners resourcing from identified gaps in services and Commissioning</li> <li>• Continue to develop Partnership Working with DASH Commissioners on the joint Harm Reduction joint action plan supporting prevention, early intervention and recovery focused agenda – supporting the objectives of Op Farmington</li> </ul>