

COMMUNITY SAFETY PARTNERSHIP

REPORT

Subject: Barking and Dagenham 5-year Substance Misuse Strategy

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1. Purpose of Presenting the Report and Decisions Required

1.1 The Government 10-years drug strategy, “From harm to hope: a 10-year drugs plan to cut crime and save lives,” which was launched in December 2021. The theme within this strategy to tackle chronic health condition, breaking down stigma, saving lives, and substantially breaking the cycle of crime, these key themes will be included within Barking and Dagenham 5-year drug and alcohol strategy, to ensure that we:

- Delivering world-class treatment and recovery services
- Rebuilding the professional workforce
- Ensuring better integration of services
- Improving access to accommodation alongside treatment
- Improving employment opportunities Increasing referrals into treatment in the criminal justice system
- Keeping prisoners engaged in treatment after release

1.2 The Office for Health and Improvement and Disparities (OHID) has significantly uplifted the baseline budgets in 2023/24 for substance misuse services, which has afforded the opportunity to redesign services to better meet local demand.

1.3 It is evident that the number engaging in treatment services do not reflect the borough, therefore in addition to the needs assessment a cultural competence review will be undertaken which will inform the commissioning strategy. This will ensure that all communities will have access to drug and alcohol services, delivered in ways that have resonance with someone’s cultural background, faith, language, traditions, and respecting differences in families' home lives, to ensure inclusivity in service redesign.

2. Recommendation(s)

2.1 It is recommended that the Community Safety Partnership Board:

- (i) Consider and note the Executive Summary of the Strategic Plan
- (ii) Consider and note the key strategic priorities as set out in the 5-year Strategic Plan
- (iii) Agree that the 5-year Plan and the Cultural Competency Report are brought back to the Community Safety Partnership in May 2023 for discussion.
- (iv) Agree that commissioners use the 5-year Plan and Cultural Competency Report to write the procurement strategy and specifications for the CSP to consider in May 2023

3. Summary of 5-year Barking and Dagenham Substance Misuse Strategy

3.1 The purpose Barking and Dagenham Substance Misuse Strategy of the is to set the strategic direction and vision for substance misuse for the next 5-years, and establish the nature and extent of its impact across Barking & Dagenham with a focus on:

- Access to treatment and outcomes for those with protected characteristics and if there is a suggestion of unmet need for these individuals or those from criminal justice/ mental health background.
- Identifying and assessing efficacy and efficiency of existing service provision.
- Current and future challenges that substance misuse presents to people who misuse substances, their carers, friends and families, the NHS, and Barking & Dagenham Council services.
- Assessing whether services are adequately meeting the needs of individuals affected by substance misuse and those experiencing multiple disadvantages.
- Identifying any cross-cutting themes that emerge during the process.
- Identifying the synergies and interconnections between services to determine if these can be maximised.

3.2 What is substance misuse?

According to World Health Organisation (2018), substance abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. The Chief Medical Officer's (CMO) alcohol guidelines³ state that drinking any level of alcohol comes with health risk for everyone and people should limit their intake to no more than 14 units a week to keep the risk of illness like cancer and liver disease low.

3.3 The Impact of Covid-19 on substance misuse

Like many other services, substance misuse treatment agencies were affected by the need to protect their staff and service users during the Covid-19 pandemic, especially in the early stages. Most services restricted face to face contact which affected the type of interventions that service users received. These interventions included:

- Supervised consumption of opioid substitution prescription (switched to take home doses).
- Fewer service users were able to access community and inpatient detoxification.
- Testing and treatment for blood borne viruses (BBVs) and liver disease greatly reduced

3.4 These restrictions will impact the outcome data recorded for this period and the data analysed in this report, trend data dating back to 2016/17 is included to mitigate this.

3.5 Effect of Covid-19 on alcohol consumption at a national, regional, and local level

Figures based on YouGov surveys show

- 8.1% of adults in England were drinking at “increasing or higher risk” in the three months to the end of October 2021, which equates to 8 million people.
- That is much higher than in February 2020, before the pandemic, when 12.4% or about 6 million people drank at these levels.
- Across London, consumption data suggests that higher risk drinking increased significantly during the pandemic, and alcohol-specific deaths rose by 23% in London in 2020

3.6 **National and Local Drivers**

Summary of the new National 10-year Drug Strategy

In December 2021, the government published a new 10-year drug strategy From harm to hope: A 10-year drugs plan to cut crime and save lives, the first ever drug strategy to commit the whole of government and public services to work together in a new longer-term approach to reverse the worrying upward trajectory of drug use, drug related deaths and drug related crime.

- 3.7 Underpinned by the two whole-system reviews by Dame Carol Black, this joined up approach is one that recognises the complexity and entrenched nature of the issues involved that cannot be addressed by one government department or sector. This new strategy comes with significant new funding, over £3 billion over the next three years, to reduce drug related crime, death, harm, and overall use, alongside a requirement to strengthen national and local accountability.

It sets out three core priorities:

- Break drug supply chains.
- Deliver a world-class treatment and recovery system and
- Achieve a shift in the demand for recreational drugs.

3.8 **What does this mean for Barking & Dagenham?**

Over the next three years Barking & Dagenham Council will receive approximately £9m enhanced funding to contribute towards achieving the outcomes that are described in the new drug strategy and Dame Carol Black's vision for drug treatment and recovery systems, with the aim of both improving the quality and capacity of local drug and alcohol treatment.

As part of the terms of agreement of the funding all local authorities in England are now required to:

- Create a multi-agency Combatting Drug Partnership with a nominated Senior Responsible Officer and Terms of Reference by September 2022.
- Conduct a needs assessment, underpinning a local Drug Strategy delivery plan by December 2022.
- Ensure all partners agree a local performance framework to monitor the implementation and impact of local plans by December 2022.
- Regularly review progress, reflecting on local delivery of the strategy and current issues and priorities from April 2023 then every 12-months thereafter.

4 **Please refer to Executive Summary (attached to papers)**

The executive summary sets out the key findings, strengths and areas for partnership development.

5 **The 6 strategic priorities for this Substance Misuse Strategy, as set out in the Executive Summary are:**

1. Integrated partnership working between services, partners, communities, and service users.

2. Strengthening of a robust multi-agency information sharing and information governance system.
3. A stronger prioritisation of Prevention and early intervention.
4. Commission and deliver effective, evidence-based treatment and recovery services.
5. Target individuals or groups e.g., young people experiencing ACES, homeless and CJS cohort known to be higher risk with tailored interventions.
6. Strong supportive safer communities.

5.1 Proposed key priority developments for the partnership. Further priorities will come from the Cultural Competency consultation, which will be developed with a suite of KPIs and measures to ensure that the professional network and partners, thoughtfully consider access to care and services for all communities and religious groups within Barking and Dagenham.

Priority 1 Integrated partnership working between services, partners communities and service users	
What we will do	Working together with services, partners, communities, and service users
What it will mean	<p>Ensure services and pathways are clearly communicated to partners.</p> <p>Work through the Barking & Dagenham Combating Drugs Partnership to jointly plan and deliver the Strategy and use collective influence to raise the profile of the impact of substance misuse, making it a shared responsibility to address it across the council and wider partners and increase numbers accessing treatment</p> <p>Continue to engage with service users in all service redesign, pathway and service review and ongoing service improvement</p> <p>Formalise processes for engagement of family, friends, and carers of substance misuse service users</p>
Measure	<ul style="list-style-type: none"> • Increase the number (and quality) of referrals to specialist treatment • Reduce unmet need for drug and alcohol cohorts
Lead Agency	TBC

Priority 2 Strengthening of a robust multi-agency information sharing and information governance systems	
What we will do	Develop a multi-agency information sharing agreement using locally agreed data/ information sharing protocols to identify, plan, implement action and review effectiveness to address local drug and alcohol issues.
What it will mean	Close working relationships and routine information sharing fostered between local authority departments, the Police, Probation, the NHS, the Voluntary sector (including the substance misuse treatment services and homelessness support) and community/faith groups.
Measure	<ul style="list-style-type: none">• A multi-agency information sharing agreement
Lead Agency	TBC

Priority 3 A stronger prioritisation of early intervention/ prevention	
What we will do	Increase awareness and understanding of substance misuse among professionals and communities to support those who are most vulnerable to it and address unmet need
What it will mean	<p>Support workforce development that focuses on making drugs and alcohol everybody's business. Roll out training opportunities to frontline staff across local authority departments, CJS, Health and Voluntary sector partners and community/faith groups and parents/carers. Identification and Brief Advice (IBA) Training for alcohol should be embedded within this (IBA definition - enable frontline workers to identify those drinking above lower risk levels, give simple brief advice and make referrals to appropriate services)</p> <p>Ensure full use of Alcohol Licensing powers to manage alcohol availability including managing hot spots of street drinking</p> <p>Ensure funding is maintained/increased for hospital based/in reach model Alcohol Care Team (ACT) identifying inpatients and A&E attenders with alcohol problems and providing specialist care</p> <p>Review the range of evidenced based population-wide and targeted prevention for drug users being utilised in Barking & Dagenham e.g., harm reduction services; needle and syringe programmes and services to test for and treat blood borne viruses and widespread provision of naloxone</p> <p>Work closely with communities to understand and tackle substance misuse and the stigma associated with it, empowering communities to feel part of the solution</p> <p>Apply a targeted approach to identify young people, vulnerable adults, and families most at risk of drug/alcohol use; drug dealing; gang involvement/County lines or (sexual/other) exploitation at an earlier stage</p> <p>Co-design drug and alcohol campaigns and messages that are credible with communities, these should ensure individuals and communities know about the risks associated with drugs and alcohol and where to get help locally</p> <p>Consider reviewing the age at which drug and alcohol awareness is offered to schools to ensure it's not too late and offering an age-appropriate programme to 9–10-year-olds (Year 5-6)</p> <p>Ensure all mainstream schools in the borough offer credible drug and alcohol awareness training to pupils and staff including risk of involvement in drug dealing; gang involvement/County lines or (sexual/other) exploitation</p>
Measure	<ul style="list-style-type: none"> • Increase the number (and quality) of referrals to specialist treatment • Increase the number of community engagement opportunities • Reduce unmet need for drug and alcohol cohorts • Increase the numbers of families impacted by substance misuse accessing structured support • Increase the number of substance misuse awareness training programmes and Identification and Brief Advice (IBA) training rolled out within the borough

Priority 4 Commission and deliver effective, evidence-based treatment and recovery services that are accessible to all who need them	
What we will do	Provide holistic support that is accessible and meets the needs of the community
What it will mean	<p>Ensure structured and unstructured treatment is accessible to all clients in both adults and young people's service to achieve harm reduction, successful completion of treatment and prevent substance related deaths</p> <p>Understand and reduce barriers to accessing treatment (paying special attention to protected characteristics highlighted within this Strategy and the potentially underserved cohorts)</p> <p>Review the logistics and opportunities for co-location of specialist adult and young people's services in alternative community hubs (such as Family hubs) or statutory services (Primary care) or commissioned services</p> <p>Strengthen pathways across the substance misuse system e.g., with primary care and secondary care and mental health partners</p> <p>Improve engagement and treatment of drug and alcohol using offenders who attend the adult treatment service in order to reduced local rates of drug and alcohol related crime and reoffending</p> <p>All partners will play a part in ensuring there is meaningful wrap around support e.g., ETE, accommodation and lifestyle/aftercare services for drug and alcohol users to support them to maintain recovery through strengthened links with local voluntary sector organisations.</p> <p>Improve the mental and physical health of those with substance misuse problems</p>
Measure	<ul style="list-style-type: none"> • Increase the number (and quality) of referrals to specialist treatment • Reduce unmet need for drug and alcohol cohorts • Increase rates of successful completions • Reduce numbers of drug and alcohol related deaths • Increase referrals from the CJS (young person and adult services) • Successful completion of community sentencing interventions for those engaged in criminal justice, for both adults (drug rehabilitation (DRR) and alcohol treatment requirements (ATR)) and young people (youth restorative interventions) • Increase referrals from cohorts with protected characteristics • Increase access to ETE, accommodation and lifestyle/aftercare services • Increase physical health checks, ensure service users have access to GP services and increased engagement/joined up working with mental health services
Lead Agency	TBC

Priority 5 Target individuals or groups e.g., young people experiencing ACES, homeless and CJS cohort known to be higher risk with tailored interventions	
What we will do	Identify those cohorts most likely to be at higher risk of substance misuse, at an earlier stage and offer them evidence-based support before the harm escalates for themselves, their families, or communities.
What it will mean	<p>Consider and strengthen the offer of support to families and carers and young people affected by substance misuse</p> <p>Ensure offenders with substance misuse have clear pathways into treatment</p> <p>Ensure rough sleepers with substance misuse have clear pathways into treatment</p> <p>Strengthen working relationships with mental health services to ensure those with co-occurring mental health and substance issues have clear pathways to treatment and there is 'no wrong door'</p> <p>Ensure there is understanding of the risks of exploitation, gang membership, drug dealing, violence and County lines for young people and their parents/carers</p> <p>Review and increase the 'diversionary activities' for young people identified as at risk of using substances/ dealing drugs</p>
Measure	<ul style="list-style-type: none"> • Increase referrals to specialist substance misuse treatment (and additional services where required) from the following cohorts: • Families and carers and young people affected by substance misuse <ul style="list-style-type: none"> ○ Drug and alcohol using offenders ○ Rough sleepers ○ Those with co-occurring substance misuse and mental health diagnoses ○ Those experiencing multiple ACES and at risk of exploitation • Reduce unmet need for drug and alcohol cohorts • Increase referrals from the CJS (young person and adult services) • Successful completion of community sentencing interventions for those engaged in criminal justice, for both adults (drug rehabilitation and alcohol treatment requirements) and young people (youth restorative interventions) • Increased local diversionary activities/ interventions
Lead Agency	TBC

Priority 6 Strong supportive safer communities	
What we will do	Tackling substance misuse related crime/ASB and the stigma that is attached to substance misuse to build supportive communities that facilitate recovery and feel safe
What it will mean	<p>Maximise every opportunity to address offending behaviour that is driven by the use of drugs and alcohol via use of Police custody drug testing and increased use and completion of Drug Rehabilitation Requirements (DRRs) and Alcohol Treatment Requirements (ATRs)</p> <p>Tackle the stigma that is attached to substance misuse to build supportive communities that facilitate recovery</p> <p>Tackle substance misuse related ASB</p> <p>Disrupt drug markets and reduce the visibility of open drug markets and open drug use</p> <p>Identify at an early-stage vulnerable persons being exploited by substance misusers and drug dealers</p> <p>Improve public confidence through collaborative problem solving and community based multiagency campaigns which address drug paraphernalia, open use of drugs, and drug and alcohol related anti-social behaviour and their knowledge of where specialist support is available</p> <p>Work with criminal justice partners to ensure that responses to young people's drug and alcohol related offending are appropriate to their needs.</p>
Measure	<ul style="list-style-type: none"> • Reduce resident concerns about people using or dealing drugs/about street drinking • Increase the number of people entering and completing treatment through the criminal justice route and through use criminal orders • Reduce drug-related activity in and around local hotpots leading to an increase in residents' perception of safety • Increase in arrests and charges for drug offences and drug • Increases in the amount of Class A and B drugs seized • Reduce drug and alcohol related re-offending rates
Lead Agency	TBC

4. List of Appendices:
 Appendix 1: Executive Summary of the 5-Year Substance Misuse Strategy