# TITLE OF REPORT: Briefing report: Update on Combatting Drugs Partnership Jan 2024

#### 1. PURPOSE OF BRIEFING:

To provide an update for North East Lincolnshire Council's Senior Leadership Team (SLT) on the Northern Lincolnshire Combatting Drugs Partnership (CDP).

#### 2. UPDATE:

In December 2021, the Government released a 10-year Drugs Strategy 'From Harm to Hope'. <u>Local guidance</u> to support the national strategy requires local areas to establish 'Combatting Drugs Partnerships', based on place, that are to deliver the 3 strategic priorities set out in the strategy:

- breaking drug supply chains
- delivering a world-class treatment and recovery system
- achieving a shift in the demand for drugs

Combating Drugs Partnerships (CDPs) should be multi-agency forums that are accountable for delivering outcomes in local areas. They should provide a single setting for understanding and addressing shared local challenges related to drug and alcohol-related harm.

In July 2022 senior leaders across North and North East Lincolnshire (including elected leaders, local authority chief executives, the chief executive of the ICB, regional probation director and the Director of Public Health) agreed a Northern Lincolnshire footprint for the Combatting Drugs Partnership in North and North East Lincolnshire.

At the same time there was agreement for, the Director of Public Health to be the Senior Responsible Owner for the Partnership, who can represent the partnership nationally, reporting to central government for its performance, and who can offer challenge and support to local partners to drive improvement and unblock issues when necessary.

The key milestones for establishing CDPs, as set out by Government, are in the table below.

Milestone	Deadline	Progress
Partnership geography and SRO to be agreed by all partners	1 <sup>st</sup> August 2022	Complete
Membership, terms of reference and governance agreed	End of September 2022	Complete
Partners carry out joint assessment of local evidence, data and need	End of November 2022	Complete
Delivery plan and performance framework developed across supply, demand, treatment, and recovery	End of December 2022	Complete
Review progress against plan and local outcomes	End of April 2023	Complete
Work with central government support to update and improve	Ongoing	Ongoing

#### Other key events

- The development of the progress review plan in July 2023, <u>Northern Lincolnshire Combating Drugs Partnership (office.com)</u>
- A workshop to develop sub-groups and workstreams took place on 24<sup>th</sup> November 2023 that was well attended and was successful, resulting in not just very useful discussion/challenge/suggestions/guidance but also in organisations agreeing to be members of the seven subgroups:
  - o Drug Harm Prevention
  - Alcohol Harm Prevention
  - Children and Young People
  - Criminal Justice and Community Safety
  - Drug Related Death Reduction and Response
  - Recovery Community
  - o Intelligence

The interrelated system of workstreams and delivery subgroups will be the prime mechanism of delivery of the ongoing aims and objectives of the partnership.

### **Next Steps**

- Development of the sub-groups to deliver the workstreams identified from the needs assessment. Subgroups will be principal means of delivery of the partnership aims and objectives and will report to the CDP.
- A public health led CDP planning meeting will take place in the next few weeks followed by a meeting of the Chairs of each subgroup to decide on how to progress.
- Identify and engage with any required partners who are currently not active participants of the CDP.

## Membership

The local guidance sets out expected members for the partnership. Minimum key organisations and individuals include:

- Elected members
- Local authority officials (including expertise in relevant areas such as substance misuse, housing, employment, education, social care and safeguarding)
- NHS (including strategic and mental health provider representation)
- Jobcentre Plus
- Substance misuse treatment providers
- Police
- PCC
- National Probation Service
- People affected by drug-related harm
- The secure estate, such as prisons, young offender institutions (YOIs)

In addition to these organisations, partnerships are also expected to engage and work with:

• Local schools and other education providers

- Higher education
- Further education
- Housing associations and providers of supported housing and homelessness services
- Youth offending teams
- Voluntary, community and social enterprise (VCSE)
- Coroner's offices
- Fire and rescue authorities
- Office for Health Improvement and Disparities regional team

## Meetings of the partnership

The first meeting of the Northern Lincolnshire Combating Drugs Partnership took place on Friday 21<sup>st</sup> October and there have been four meetings since. The challenge has been to secure full participation from all required partners. Notably there has been no attendance from any NLaG or RDaSH representative. It has also been difficult to engage with partners outside of the meetings, this could be in part due to the lack of an identified responsible organisational lead.

#### Governance

The Governance arrangements are that the Combatting Drugs Partnership report to NLC & NELC respective Health and Wellbeing Boards.

#### **Terms of Reference**

Terms of Reference for the Northern Lincolnshire Combating Drugs Partnership have been developed, it is recognised that these will develop further as the partnership progresses.

#### 3. IMPLICATIONS

- There will be implications for all partners in terms of identifying need and achieving aims.
- The Government has provided increased funding in the form of the Supplementary Substance
  Misuse Treatment and Recovery Grant and grants for residential detox programmes to enable
  the development of local treatment and recovery services to meet the aims of the partnership.
  The continuation of this grant has been recently confirmed for the year 2024/25.
- There is a risk that without full participation from all key members of the CDP, outcomes will not be achieved.

# **Supplementary Substance Misuse Treatment and Recovery Grant:**

## **Utilisation in North East Lincolnshire 2024/25**

The funding for all drug and alcohol treatment and recovery services from the Public Health grant is £2,297,000. This is used to fund in addition the OPCC grant fund the criminal justice team within the provider service (WAWY) £291,000.

NEL have been allocated £1,727,033.00 for 24/25 from the above grant. The following is the breakdown of how the grant will be used as per the Government's prescribed areas of work relating to the 10 Year Drug Strategy:

1. System coordination and commissioning	Partnership capacity	Continuation of funding	CDP Coordinator in partnership with N Lincs Council
2. Enhanced harm reduction	Naloxone	Continuation of funding	Naloxone distribution project - peer expenses
3. Increased treatment capacity	This is covered in sectio	n 10	
4. Increased integration and improved care pathways between the criminal justice settings, and drug treatment	Improved CJS working arrangements	Increase in funding of CJS lived experienced organisation (Wizer) working alongside probation and treatment services as part of the recovery community partnership	Wizer - Navigator Lead post uplift and 1.5 new Navigator posts all lived experience.
5. Enhancing treatment quality	Improved pharmacological interventions	Continuation of funding	Continued use of Buvidal and widening of the current pilot to provide as a standard

			pharmacological treatment option
6. Residential rehabilitation and inpatient detoxification	Increased residential rehabilitation placements	Funding for 8 rehab places @ £1,400 pw for 12 weeks	Funding for 8 rehab places @ £1,400 pw for 12 weeks
7. Better and more integrated responses to physical and mental health issues	Partnership approaches	Provision of an integrated dual diagnosis team	"A formal partnership between the substance use provider and the mental health provider  Specialist Mental Health Advanced Clinical Practitioner x1  Mental Health Recovery Workers x2  Senior Practitioner x1  Recovery Worker x1
7. Better and more integrated responses to physical and mental health issues	ACTs including drugs	Match funding for Alcohol Care Team	Funding for the ACT ends 23/24 - ICB are willing to match fund to ensure this provision continues
8. Enhanced recovery support and lived experience initiatives	Peer-led recovery support and recovery communities' projects	Slight increase in funding	Funding to stabilise the provision of person-centred counselling and for provision of holistic therapies for the recovery community
8. Enhanced recovery support and lived experience initiatives	Peer-led recovery support and recovery communities' projects	Slight increase in funding	With You/Emerge peer worker - This is for targeted substance use work with sex workers in partnership with Emerge who are a lived experience

			organisation working with sex workers - increase is to allow specialist training to be accessed.
9. Other interventions which meet the aims and targets set in the drug strategy	Outside of MOI	Continuation of funding	Estimated annually running costs of separate building for alcohol users and non-opiate users
10. Expanding the competency and size of the workforce	Recruitment and retention	Continuation of funding	Continuation of funding for Team Leaders and Recovery Workers
10. Expanding the competency and size of the workforce	Nurses	Continuation of funding	Continuation of funding for nurses
10. Expanding the competency and size of the workforce	Criminal Justice	Continuation of funding	Continuation of funding for the CJ Team
10. Expanding the competency and size of the workforce	Recruitment and retention	Continuation of funding	Continuation of funding for clinical admin post
10. Expanding the competency and size of the workforce	Peer worker development	Continuation of funding	Continuation of Harm Reduction Lead/Community Engagement Coordinator/
10. Expanding the competency and size of the workforce	Nurses	Funding for Hospital Liaison Nurse	This post was piloted using short term Public Health funds - it has proven to be successful hence

			continuing the post using SSMTRG
10. Expanding the competency and size of the workforce	Recruitment and retention	Further recruitment to increase numbers in treatment at the same time reduce individual caseloads.	Recovery Workers x4 - Admin support x1 and NMP x1
TOTAL			

NB. Due to the numbers in treatment figure for NEL, at the midpoint of the year, being below the original baseline we are a "challenged partnership". This essentially means that we have had to reassess our ambitions in relation to:

- Numbers in treatment (especially for those who use opiates),
- Continuity of care numbers (transfer from prison to community treatment)
- Residential rehabilitation numbers.

as well as provide an improvement plan. This has been done in partnership with regional OHID and the required documentation was submitted in December.