

TELFORD & WREKIN COUNCIL

HEALTH & WELLBEING BOARD – 9 DECEMBER 2015

COMMUNITY SAFETY PARTNERSHIP UPDATE

REPORT OF: HELEN ONIONS: CONSULTANT IN PUBLIC HEALTH, PAUL FENN: COHESION LOCALITY MANAGER

COMMUNITY SAFETY PARTNERSHIP BOARD CHAIR – SUPT JAMES TOZER

PART A) – SUMMARY REPORT

1. SUMMARY OF MAIN PROPOSALS

This report provides an update on reducing the misuse of alcohol and drugs priority and gives the wider context and statutory requirements and governance arrangements through the Community Safety Partnership (CSP).

2. RECOMMENDATIONS

The Health & Wellbeing Board is requested to acknowledge:

- The progress across the Community Safety Partnership organisations made towards reducing the misuse of drugs and alcohol priority in the second year of strategy implementation, in particular the:
 - Successful re-commissioning of substance misuse treatment services and development of pathways to support people recover and reduce harm
 - Further development of the mutual aid and peer support offer delivered by Telford Aftercare Team (TACT)
 - Enhanced prevention work in schools and wider public awareness raising across the Borough
- The challenges in improving outcomes, which requires embedding of transformation change to comprehensively deliver a more recovery-orientated approach, with flexibility and innovation needed given the reducing budgets and the changing pattern of substance misuse.
- That the CSP under its statutory responsibilities, is required to develop and refresh a Partnership Strategic Plan and develop key priorities which also support the Police and Crime Commissioner objectives. These support the statutory requirements within Section 17 of the Crime and Disorder Act 1998 which outlines the actions to be taken by partners on collectively working together to reduce crime and disorder and anti-social behaviour (ASB) across Telford & Wrekin.
- Ongoing financial support from the Office of the Police and Crime Commissioner (OPCC)

3. IMPACT OF ACTION

- Drug and alcohol misuse and addiction in our communities impacts directly on health and more broadly on wellbeing in our communities through crime, antisocial behaviour and homelessness.
- Liver disease is the only cause of death which has been increasing both nationally and in Telford & Wrekin. Our rates of early death under 75 years from liver disease contribute to reduced life expectancy in both men and women.
- The vision, aims and objectives set out in the Drug and Alcohol Strategy form a comprehensive plan to reduce the harm caused substance misuse in Telford and Wrekin, as part of our Health and Wellbeing Board and Community Safety Partnership priorities.
- Ongoing use of intelligence and information, utilising a wide range of partner data sets, supported by softer data and information collection from A & E via Linxs and the weekly reports provided by the Street Pastors supporting our partnership approach in managing the night time economy for both adults and young people.

4. SUMMARY IMPACT ASSESSMENT

COMMUNITY IMPACT	Do these proposals contribute to specific Co-operative Council priorities?	
	Yes	<ul style="list-style-type: none"> • Improve the health and wellbeing of our communities and address health inequalities • Ensure that neighbourhoods are safe, clean and well maintained • Protect and support our vulnerable children and adults • Put our children and young people first
	Will the proposals impact on specific groups of people?	
	Yes	<p>The Telford & Wrekin Drug and Alcohol Strategy aims to reduce the risk and demand and restrict the supply of alcohol and drugs across the Borough. There are also objectives aimed at improving treatment, building recovery and reducing harm amongst specific groups of people i.e. those with addiction and dependency problems and also the hidden harm substance misuse causes in families.</p> <p>Community Safety Partnership Board priorities for 2015/16 are:</p> <ul style="list-style-type: none"> ➤ To reduce re-offending ➤ To reduce the impact ASB and

		<p>Environmental Crime has on people, places and communities</p> <ul style="list-style-type: none"> ➤ To reduce crime and increase confidence in reporting ➤ To reduce the misuse of drugs and alcohol
TARGET COMPLETION/ DELIVERY DATE		<ul style="list-style-type: none"> • The Drug and Alcohol Action Team (DAAT) Board monitors the implementation and the impact of the strategy, reporting to the Community Safety Partnership on a quarterly basis. • Contracts were awarded and new services commenced in July and August 2015.
FINANCIAL/VALUE FOR MONEY IMPACT	Yes	<p>The Council's budget available in 2015/16 to support the drug and alcohol strategy is £2.6m, including the Drug Intervention Project, the remaining funding arises from the Council's Public Health grant. The Council has experienced an in year cut in its Public Health Grant in 2015/16 of £773k which has resulted in the budget available being reduced by 27k. It is not yet known what level of grant will be received in 2016/17 but any reduction is likely to impact on the level of funding available for the implementation of the substance misuse and alcohol strategy.</p> <p>The overall budget for Community Safety in T&W for 2015/16 is £0.681m, which includes funding from the Office of the Police & Crime Commissioner (OPCC) of £0.333m. This funding, working to the CSP priorities, supports a wide range of projects and initiatives which include, CCTV, White Ribbon campaign, Taxi Marshalling, Neighbourhood Delivery groups, Crucial Crew and Street Pastors. This funding also supports our approach to tackling business, rural and cyber crime. We've also received £0.095m OPCC funding which is being used to support further Council wide projects, including Drug Intervention Project. A further allocation of £0.032m is due from the OPCC to support additional CCTV & Night time economy projects in 2015/16 financial year.</p>
LEGAL ISSUES	Yes	<p>The Strategy referred to in this report contributes towards the Council meeting its duties to the improvement of public health as set out at section 2B of the National Health Service Act 2006 (as amended).</p> <p>However, when the Strategy is implemented it also needs to be compliant with the relevant</p>

		<p>statutory requirements. For example: The Statement of Licensing Policy is subject to the provisions, regulations and guidance from the Licensing Act 2003. It is expected that the review of the Statement of Licensing Policy will commence early next year.</p> <p>The Misuse of Drugs Act 1971 (as amended) is the main legislation which makes the production and supply of controlled drugs unlawful.</p> <p>The Misuse of Drugs Regulations 2001 (as amended) deals with exemptions for legitimate purposes</p> <p>The Public Health Outcomes Framework 2013-16 was published under section 73B(1) of the NHS Act 2006 (inserted by section 31 of the Health and Social Care Act 2012) as a document that local authorities must have regard to in the exercise of the public health functions for which they became responsible on 1 April 2013 under the 2012 Act.</p> <p>Statutory requirements in relation to crime and disorder are set out in the main body of this report.</p> <p>MC & HD 18/11/2015</p>
OTHER IMPACTS, RISKS & OPPORTUNITIES	Yes	<ul style="list-style-type: none"> • Working within the statutory constraints of the Crime and Disorder Act 1998. • Drug Intervention Project is currently part funded through the OPCC. • The Police and Crime Commissioner is formulating a new commissioning and performance framework that will allow a focus on providing funding through a clear evidenced based approach. • There is a requirement to develop, implement and refresh a CSP Plan, failure may result in funding not being provided by the OPCC.
IMPACT ON SPECIFIC WARDS	No	<p>However, drug and alcohol misuse are most prevalent in our most deprived communities which complements the local super output areas regarding Anti Social Behaviour and Crime.</p>

PART B) – ADDITIONAL INFORMATION

1. INFORMATION

1.1. Community Safety Partnership Overview and Priorities

1.1.1. Background

Telford and Wrekin Community Safety Partnership has been in situ prior to the legal requirement from the Crime and Disorder Act 1998 to establish a Community Safety Partnership (CSP) (Annex 1). Section 17 of this Act places a duty on the responsible authorities, Police, Fire and Rescue, Probation, Health and Local Authority to; work together to prevent crime and disorder, prevent the misuse of drugs, alcohol and other substances and prevent re-offending in this area.

The following are specific requirements imposed upon the CSP:

- Set up a strategic group to direct the work of the partnership. The current chair of the CSP board is Supt Jim Tozer, vice Chair is Laura Johnston.
- Engage and consult with local communities regarding concerns, community tensions and taking the appropriate action(s)
- Develop protocols and systems for sharing information
- Analyse a wide range of partnership data sets to include recorded crime levels and patterns, in order to identify priorities through an annual refresh of the CSP plan and influence the annual strategic assessment which is currently being developed by the OPCC
- Produce a strategy to reduce offending and reoffending
- Commission domestic violence homicide reviews.

The CSP delivery framework is established by statute at section 6 of The Crime & Disorder Act 1998 (as amended). The Partnership also must have due regard for the Police and Crime Commissioner role as a co-operative working duty (set out at section 10 of The Police Reform and Social Responsibility Act 2011).

1.1.2. CSP Priorities and Governance

The local CSP priorities have also been referenced against the Police and Crime Commissioners (PCC) objectives to ensure that our local approach reflects the West Mercia approach as defined by the West Mercia Police and Crime Plan.

The CSP has the responsibility to ensure that all of the statutory partners are working together to put in place measures to reduce crime and ASB to include substance misuse and re-offending. CSPs are also required to take appropriate action to prevent violent extremism and influence social and economic change as a way of preventing, tackling and reducing crime and disorder.

Community Safety Partnership Board priorities for 2015/16 are:

➤ **To reduce re-offending**

To ensure the delivery of co-ordinated multi-agency approach in managing offenders and their offending behaviour.

➤ **To reduce the impact Anti Social Behaviour and Environmental Crime has on people, places and communities**

To understand the harm and impact that ASB has on people, places and communities and to develop robust action plans to demonstrate positive community involvement and partnership action.

➤ **To reduce crime and increase confidence in reporting**

To increase community confidence in reporting and to understand and develop actions to support victims including domestic abuse, Child Sexual Exploitation, Hate Crime and those most vulnerable.

➤ **To reduce the misuse of drugs and alcohol**

To reduce the harm caused by drugs and/or alcohol misuse and make Telford & Wrekin a safer and healthier place.

Each priority is supported by an operational delivery plan. A performance Management Group has been developed to ensure that we have supporting commentary against each data set which ensures we are evidenced based in our approach. The CSP strategy and plan are fluid and will be refreshed on an annual basis to ensure we are proactive in meeting local need. The overall responsibility for the CSP strategy sits with the Community Safety Partnership Board; the Community Safety Team oversees the delivery of the priorities and the action plans, working with partners and the operational delivery groups across the Partnership. The CSP Board is held to account of progress and at each quarterly meeting receives updates regarding the strategy, plan and performance.

1.2. Reducing the Misuse of Drugs and Alcohol Priority Update

1.2.1. Governance and Reporting

The Drug and Alcohol Action Team (DAAT) Board, which reports to the CSP, provides strategic and commissioning oversight as part of the drive to reduce substance misuse across HWB and CSP partner organisations. The group includes representatives from: the Police, National Probation Service and Community Rehabilitation Company, Department of Work and Pensions, Wrekin Housing Trust, Shropshire Fire and Rescue Service and the Council's public health, family and cohesion and public protection teams. The DAAT steers the implementation of the Telford & Wrekin Drug and Alcohol Strategy, monitoring outcomes and providing governance, including assurance of clinical governance for treatment services.

1.2.2. Commissioning Update

The Council's procurement process for substance misuse services, which took place during January-June 2015, was very well supported by our strategic partners. Local commissioning processes continue to be shaped by extensive service user involvement facilitated by Telford Aftercare Team (TACT), this includes work with young people as appropriate.

The remodelled substance misuse services have been mobilised, beginning in Summer 2015, through the Council contracts for the:

- DARS clinical treatment service (awarded to Inclusion - South Staffordshire and Shropshire Healthcare NHS Foundation Trust).
- STARS (awarded Aquarius - alcohol counselling service, day care services and peer mentoring).

Grants to the probation services for Drug Rehabilitation Requirements and to TACT, for the recovery and aftercare service have continued in 2015/16.

1.2.3. Key highlights and progress

The Strategy was approved by the CSP and HWB in March 2014, and during 2015 our second year of implementation, work has continued at pace with strategic partners and providers to deliver our objectives under the strategy framework pillars of: reducing risk and demand, restricting supply and building recovery and reducing harm. Key progress highlights include the following:

- At a commissioning level new data requirements in the contracts with providers will improve the use of intelligence. Clinical governance arrangements have been developed to ensure quality and safety in treatment services and a training programme across professional groups has been implemented.

- Alcohol awareness (November) and Dry January campaigns have been delivered and enhanced in 2015 to use social media and therefore extending the reach of the messages across the community.
- Expanded schools work with the scheduling of Year 9 roadshows in eight schools, a new Year 8 alcohol awareness Theatre in Education session in eight schools. The awareness session regarding New Psychoactive Substances - Legal Highs (in partnership with Charlotte Delo) is offered within the Year 9 roadshow and is booked for TCAT. Another successful Crucial Crew event concluded with a record breaking 2,016 year 6 students taking part.
- Delivery of a successful GP and practice nurse alcohol education event in May 2015 and the development of wider liver disease treatment and care pathways for primary care.
- In-sourcing of children and young people's substance misuse service into the Council's Family and Cohesion Team, strengthening the connection with the Early Help offer.
- Refined approach in the collective management of the night time economy for both adults and young people attending organised under 18 events. This partnership approach consists of a strong emphasis on prevention and engagement consisting of collaborative work between local businesses, police, Taxi Marshalls, Street Pastors and various service areas within Telford and Wrekin to include community Safety, Detached youth Teams and Night time Economy Officers the Council, the Police, licensed premises and Street Pastors.
- Stronger connections with the criminal justice system, through Integrated Offender Management, the Drug Intervention Programme and the Arrest Referral Team. Through the newly refreshed Reducing and Re-offending strategic group, a new strategy and focused action plan is currently being formulated to ensure there are clear links and relationships in place between this group, DAAT and the over arching Community Safety Partnership Board. This will ensure that we have a coordinated approach to supporting through the gate services.
- Continued to transform our drug and alcohol treatment services to improve outcomes through the award of new contracts with evidence-based service specifications and the development of referral and treatment pathways.
- Continued growth of mutual aid to support sustained recovery through the development of Telford Aftercare Team (TACT). This includes winning the 2015 LGC Public Health award for the strong connect between the strategy and TACT peer support success on the ground.

- The second annual Celebrating Recovery Event, hosted by TACT at The Place Oakengates in September, was once again inspirational and received impressive support and acknowledgement.
- Further work on prevention and harm reduction has taken place, including much improved Naloxone¹ distribution to those at risk, work with the Coroner on drug related deaths and development of the Hepatitis C referral and testing pathway.
- Development of services for people with a dual diagnosis (both addiction problems and mental health issues), through the Council's appointment of a Team Leader for Dual Diagnosis and closer working with the CCG and South Staffordshire and Shropshire Mental Health NHS Foundation Trust. This is in line with our strategy objectives and also responds to concerns raised by the Council's Scrutiny Committee in 2014.

1.2.4. Improving Performance and Outcomes

The Drug and Alcohol Strategy performance and outcome framework is being updated for presentation at the end of November DAAT Board. Key headlines for performance are:

- The early death rate (under 75 years) from liver disease which is considered preventable fell slightly during 2012-2014 compared to in 2011-13.
- 69.2% of our problematic drug users are now in contact with treatment services, which is significantly better than the national average of 52.5%.
- Successful treatment completion rates for opiate clients remain slow to improve (8.2% completing treatment compared to 7.4% nationally), but completion rates for non-opiate clients have improved (40.4% completing treatment in Q1 2015/2016 compared to 34.9% in 2014/15).
- Telford & Wrekin have been highlighted as one of the best areas in the West Midlands for clients in treatment in employment when they exited treatment (at end of March 2015). Supporting clients into employment is a key priority for the Drug & Alcohol Recovery Service, TACT and partners and this improvement will need to be sustained.

¹ Naloxone is a drug which reverses opiate overdose and therefore can save lives

1.2.5. Challenges and Priorities

The Telford & Wrekin Drug and Alcohol Strategy ambitiously requires transformational change of our substance misuse treatment services. This reflects the national push away from maintenance of clients in treatment towards a more recovery-orientated approach. Our service users fully support this direction and TACT staff and volunteers are critical to the building recovery agenda. We have re-commissioned two of the local treatment services and are now putting in new pathways so are part way on our journey to this transformation. However, change takes time and new ways of working will continue to embed across all the local providers and begin to impact on outcomes in a more sustained way. Supporting the recovery of long term opiate users is a key challenge given the group of individuals who have been in treatment for many years.

We have also faced reducing budgets for substance misuse treatment services year-on-year, required as part of the Public Health Grant savings. This means that innovative, more efficient and cost effective ways of working and flexibility are needed. The Community Safety Partnership continues to be reliant on funding from the OPCC in order to deliver against its four priorities. However we recognise that funding may be reduced in line with national police funding reductions, which impact on our local delivery plan.

The patterns of substance misuse in the population are also changing. The numbers of people seeking support for alcohol misuse is increasing and awareness raising work on prevention is important for children and young people and adults alike. New Psychoactive Substances (NPS – so called legal highs) are causing significant risks and also addiction issues and therefore understanding this new picture of drug misuse and developing an appropriate response is crucial.

It is acknowledged that our commissioned alcohol and drug treatment and recovery services are working for some individuals. However, CSP partners experience is that there is an increase in the misuse of illegal and legal substances in the Borough. Awareness raising and prevention work and targeted programmes to engage those with new and emerging substance misuse problems into treatment is also a challenge.

From a criminal justice perspective, apart from the potential funding reductions, we have recognised that we are facing an increase in offenders being accommodated within Telford and Wrekin which increase the risk associated with offending. The Reducing Reoffending strategic group, through the CRC have commissioned Nacro to provide a Housing Coordination post. This post will work with partners, private landlords and third sector organisations to understand current service provision, to develop a single allocation pathway into suitable accommodation and identify the relevant support that will be required.

2. IMPACT ASSESSMENT – ADDITIONAL INFORMATION

None

3. PREVIOUS MINUTES

Health and Wellbeing Board, 11th December 2014, Community Safety Partnership Update Report

Health and Wellbeing Board, 12th March 2014 - Telford and Wrekin Drug and Alcohol Strategy 2014/15 – 2016/17

4. BACKGROUND PAPERS

Report prepared by:

Paul Fenn, Cohesion Locality Manager, Telford & Wrekin Council
Helen Onions, Consultant in Public Health, Telford & Wrekin Council