

**Calderdale MBC**

**Wards Affected      All**

**Cabinet                      10 October 2022**



## **Implementation of the National Drug Strategy in Calderdale**

### **Report of**

#### **1. Purpose of Report**

- 1.1 Calderdale's Vision 2024 is to be a place where everyone can live a larger life. The refreshed Wellbeing Strategy sets 4 priority outcomes across each stage of the life course that will enable Calderdale's people and communities to be well enough to live that Larger Life aspired to in our Vision. We know however that drug use is preventing too many people in Calderdale from living that larger life; and that trauma, mental health problems, drug use and disadvantage combine to lead to further ill health, premature death, housing insecurity and offending, in an already vulnerable population.
- 1.2 The Independent Review of Drugs and subsequent From Harm to Hope National Drug Strategy place responsibilities on local authorities and our partners to work together to tackle drug related harm, improve drug treatment and improve outcomes for drug users; supported by ring fenced investment for drug treatment.
- 1.3 This paper summarises the plans in place locally to improve outcomes and treatment and identified considerations for the Council and our partners in meeting our responsibilities.

#### **2. Need for a decision**

- 2.1 A decision is required for Calderdale Council to receive additional grant funding of 800,000 over 2 years to invest in drug treatment services and programmes, with the potential to bid for additional grant investment of up to £700,000 in 2024-25. This level of investment is a key decision and lies outside officer's delegation.
- 2.2 A decision is required about the multi-agency governance arrangements to be put in place to provide strategic oversight and co-ordination of the investment of additional resources and the delivery of transformation activity to improve drug related outcomes in Calderdale

### **3. Recommendation**

Cabinet is asked to:

- 3.1 Approve receipt of Supplemental Substance misuse treatment and recovery grant funding of £800,000 over 2 years to invest in drug treatment, with the potential to bid for further grant investment of up to £700,000 in 2024-25
- 3.2 Approve the establishment of a new multi-agency Calderdale Strategic Drugs Partnership, reporting to Calderdale Health and Wellbeing Board to provide governance of local programmes of work to reduce drug related harm in Calderdale
- 3.3 Delegate approval of investment of additional grant funding to the Director of Public Health in consultation with the Cabinet Member for Engagement, Towns and Public Health and the new Calderdale Strategic Drugs Partnership
- 3.4 Note that the Senior Responsible Officer for the local implementation of the National Drug Strategy will be the Director of Public Health

#### **4. Background and/or details**

- 4.1 An independent review of drugs undertaken by Dame Carol Black was published in 2021. It identified addiction to drugs as a chronic health issue, requiring long term support and follow up in the same way as long-term physical health conditions. The review called for co-ordinated multiagency action nationally and locally to improve outcomes for drug user. It calls for additional investment in drug treatment following decade of funding cuts; as every £1 spent on drug treatment will save £4 from reduced demands on the NHS, social care, prison, law enforcement and emergency services. Appendix 1 sets out the recommendations of the independent review.
- 4.2 In response to the review, the Government published From Harm to Hope: a National Drug Strategy. <https://www.gov.uk/government/publications/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives>
- 4.3 This includes national drug treatment targets that place-based substance misuse partnerships must contribute to the achievement of:
- 54,500 new high-quality treatment places, including: 21,000 new places for opiate and crack users; a treatment place for every offender with an addiction; 30,000 new treatment places for non-opiate users and alcohol users; a further 5,000 more young people in treatment
  - 24,000 more people in long-term recovery from substance dependence
  - 800 more medical, mental health and other professionals
  - 950 additional drug and alcohol and criminal justice workers
  - Sufficient commissioning and co-ordinator capacity in every local council
- 4.4 The strategy includes investment in the form of the Supplemental Substance Misuse Treatment and Recovery Grant provided to local authorities. The investment must be additional to existing spending on drug treatment through the Public Health Grant and must be used in line with the aims of the treatment and recovery section of the drug strategy to contribute to its targets.
- 4.5 A menu of interventions has been developed to inform local plans for investment in the drug treatment system.

#### **Drug Related Harm in Calderdale**

- 4.6 In her review, Dame Carol Black was critical of the way that the performance of drug service is measured, with indicators focusing on successful completion of treatment, rather outcomes of sustainable change such as recovery, wellbeing, secure housing and employment.

4.7 An overview of routinely collected substance misuse related data from the Public Health Outcomes Framework tells us:

- Completion of treatment of opiate users in Calderdale is similar to the national average and better than statistical neighbours.
- Completion of treatment of non-opiate users is similar to the national average and worse than statistical neighbours.
- Completion of alcohol treatment is better than the national average and statistical neighbours
- Deaths from drug misuse is significantly worse than both the national average and statistical neighbours
- Alcohol related admissions to hospital in men are increasing and significantly higher than the national average and statistical neighbours

4.8 It is clear that too many Calderdale people who use drugs have died as a result of their drug use in recent years. Between 2018 and 2020, there were 46 drug related deaths in Calderdale residents, a rate of 7.6 per 100,000 compared to a national average of 5. Calderdale had the 7<sup>th</sup> highest drug related death rate of our 16 statistical neighbours. Local intelligence indicates that the true number of drug related deaths in Calderdale is higher than published data, and that deaths are not always caused by fatal overdose but also by sepsis linked to injecting, long term conditions (e.g. COPD) and suicide.

4.9 Five men who lived street-based lives in Halifax died in a four-month period during winter 2018/19; three of whom died in the same week. This led Calderdale Safeguarding Adults Board to produce the Burnt Bridges report of a thematic review of the circumstances leading to their deaths to learn lessons about how street deaths can be prevented. Four of the men were drug users. Learning from the review has led to a number of developments to enable partners to better meet the needs of adults experiencing complex and multiple disadvantage. These include:

- Embedding trauma informed approaches, reflecting the fact that adversity earlier in people's lives is a significant contributor to drug and alcohol use
- Integrating a wide range of economic, social and health support provision into drug and alcohol services
- Development of a multi-disciplinary team (MDT) approach to identify and provide co-ordinated support to those at greatest risk and to deploy resources using increased outreach capacity, in partnership with other agencies.
- The establishment of a housing support project providing accommodation for current drug users/drinkers with complex lives

- Piloting a Fatality Review process to monitor the deaths of those living Street based lives, which includes those not in treatment and those that find it difficult to help stay in treatment
- Establishment of an on-site project in an area where a significant cohort of drug users at risk live. This brings together a wide range of partners to reduce deaths, prevent harm and improve the health and wellbeing of residents, using strengths-based approaches.
- Challenging stigma of drug related deaths through a local campaign, launched earlier this year at a multi faith memorial service at Halifax Minster.

4.10 These developments have led to some success. However, a number of challenges remain if we are to have an impact on drug related deaths, deliver effective harm reduction in Calderdale and enable drug users and those recovering from drug use to live the larger life in our vision, and achieve the wellbeing strategy outcomes set for the borough.

4.11 The increased investment in treatment services though the Supplementary Substance Misuse Treatment and Recovery Grant can help address these challenges. To have an impact on a sustainable basis, additional investment in treatment and recovery will need to be integrated with action from across health, care, wellbeing and community safety partners in Calderdale and in West Yorkshire.

### **Existing drug and alcohol services in Calderdale**

4.12 Responsibility for planning, commissioning and oversight of drug treatment services passed to Calderdale Council when Public Health transferred in 2013. Capacity dedicated to preventing and treating addiction to drugs has reduced in that time, reflecting reductions in the public health grant.

4.13 A Public Health Manager currently oversees our work on drugs and alcohol, within a wider portfolio focused on adults experiencing complex and multiple disadvantage, linking to social care, community safety, criminal justice, housing, and the NHS.

4.14 The Recovery Steps Service is an integrated drug and alcohol treatment service provided by the Basement Recovery Project and Humankind from a single site in Halifax. It provides a hub for other services to visit to meet the broader needs of service users, such as wound care, vaccinations, benefits advice alongside community, social activity and mutual aid groups.

4.15 Humankind also provides young people's drug services in Calderdale through the Branching Out Service, which includes work with schools and the provision of treatment to young people aged 10 – 21. A recent Youth Offending Team inspection identified that although young people engage with Branching Out in

Schools, a number of young people with offending behaviour/ at high risk of offending are reluctant to engage with the service for treatment and support. This provides opportunities for further integration of drug and alcohol service into other services and programmes for young people, engaging with young people in their design.

- 4.16 Governance of the planning, commissioning and development of drug and alcohol services and interventions is currently provided by Community Safety Partnership.
- 4.17 Drug treatment services in Calderdale have developed in recent years and a number of the recommendations made by Dame Carol Black are already in place locally. Examples include:
- A thriving recovery community (Calderdale in Recovery) made up of over 1000 members is linked to the drug treatment system. This enables local treatment and recovery services to have a workforce that includes people with lived experience.
  - Our locally grown Lived Experience Recovery Organisation (LERO) has an equal place at the local treatment management board, are landlords to the major service provider and receive 12% of the overall treatment budget (The national drug strategy encourages local authorities to aspire to 4% by year 3).
  - Dame Carol Black's review emphasises the need to improve the provision of physical healthcare to people with drug dependence. We have recruited a Health and Wellbeing nurse within the treatment system and have developed strong joint working relationships with CHFT's Community Nursing Team.
  - We have secured a Home Office licence to enable us to dispense medication from our Recovery Centre, ensuring we see the most vulnerable and unwell drug users on a daily basis; providing the opportunity to expose them to hope of recovery and to develop and deliver a robust outreach and harm reduction offer.

### **Improving drug treatment and recovery outcomes in Calderdale**

- 4.18 Provisional proposals for improving drug and alcohol treatment, reducing harm and preventing drug related deaths in Calderdale were submitted to the Office for Health Improvement and Disparities (OHID) in April 2022. They include:
- Increasing the capacity and effectiveness of approaches developed and put in place following the Burnt Bridges review. This includes further development of the multi-disciplinary team approach, increasing outreach capacity working with the community in Halifax, developing more

dedicated housing capacity (initially developing a women's house/refuge in 22/23 external funding bid success dependant).

- Increasing treatment capacity to ensure that Calderdale makes its contribution to the national targets
- Further increasing the services delivered alongside drug treatment (including dispensing, mental health services)
- Increasing the workforce both in the provision of services to drug users and programme management capacity in the Council to manage the delivery of the improvement programme
- Development of a drug related deaths surveillance system
- Utilising the grant to enable service enhancements across partner services beyond drug treatment, so they better meet the needs of drug users. This will be delivered through reflective practice sessions and training.
- Strengthening harm reduction measures through the development of drug testing, diamorphine assisted treatment and increasing availability of naloxone in high-risk settings

4.19 While Calderdale's drug treatment and recovery services are broadly in line with the recommendations made by Dame Carol Black, there are a number of challenges that the additional investment can support local partners address so that improvements can be sustained. These include:

- The development of local priority treatment and recovery outcomes, co-produced by service users to reflect the unique strengths and needs in Calderdale
- An integrated approach to workforce development, including developing understanding, knowledge, and skills in trauma informed approaches across the whole of Calderdale.
- Improving drug and alcohol prevention and support for young people, by integrating it into existing young people's settings and services and ensuring it reflects the profile of drug use among young people in Calderdale
- Development of effective dual diagnosis support in Calderdale in recognition of the fact that poor mental health and substance misuse are intrinsically linked, especially in the most vulnerable.

## 5. Options considered

### Governance

- 5.1 A multi-agency governance system is required to provide system-wide strategic direction to the transformation of substance misuse services. The Joint Combatting Drugs Unit has issued guidance on the requirements of a partnership board. The guidance requires that local authority / place area is the smallest geography that these partnerships should cover, and consideration should be given to partnerships at Combined Authority/ Police Force/ integrated care system level.
- 5.2 The following options have been considered in relation to the geography and reporting of a local strategic Drugs Partnership
- West Yorkshire Strategic Drug partnership
  - Calderdale Strategic Drug partnership reporting to the Community Safety Partnership
  - Calderdale Strategic Drug Partnership reporting to the Health and Wellbeing Board
- 5.3 Discussions have taken place between the five West Yorkshire local authorities, West Yorkshire Combined Authority and West Yorkshire Integrated Care System about the most appropriate geography for Strategic Drug Partnerships. The outcome of these discussions is a recommendation that each place will have a Strategic Drug Partnership. This is due to the differences in drug related issues in each of the five places and to reflect the responsibilities of Councils in commissioning drug treatment and recovery services, the provision of social care for children and adults and our role in supporting community safety.
- 5.4 In order to ensure that added value of West Yorkshire level working, including through West Yorkshire Combined Authority (particularly in its Police and Crime Commissioner Role), West Yorkshire Police and West Yorkshire Integrated Care System; it has been agreed that a 6 monthly West Yorkshire-wide Partnership discussion will take place convened by the Deputy Mayor for Policing and Crime and involving each local authority as well as other West Yorkshire partners.
- 6.5 When assessing the most appropriate reporting arrangements for a Calderdale Strategic Drug partnership, consideration was given to Dame Carol Black's review. This stressed that addition to drugs is primarily health issue, with drug related harm impacting the health and wellbeing of individuals and communities. The review was critical of the criminalisation of vulnerable people; at the expense of addressing the core health determinants of addiction. Therefore it is proposed that the partnership report to the Health and Wellbeing Board which provides strategic oversight of the health and wellbeing of the local population.



## 6. Financial implications

6.1 Baseline funding for drug and alcohol treatment services (financial year 2021/2) is shown in the table below.

Service area	2021/2 Budget	2021/2 Income	Source of income
Children and young People drug and alcohol service	361,000	0	
Drug and alcohol treatment service	3,025,036	250,000 131,347	Universal grant (non-recurrent) Police & Crime Commissioner
In-patient detox	42,767	42,767	
<b>Totals</b>	<b>3,428,803</b>	<b>424,114</b>	

6.2 The Supplementary Substance Misuse Treatment and Recovery Grant will be available for 3 years (2022/23 to 2024/25). The grant conditions state that it must be additional to baseline investment The confirmed and provision allocations for each year are shown in the table below

2022/2023	2023/2024	2024/2025
£439,100 (Confirmed)	485,540 (TBC)	£796,993 (TBC)

## 7. Legal Implications

7.1 The Supplementary Substance Misuse Treatment and Recovery Grant will be issued as a section 31 grant. The Council's constitution requires formal Cabinet approval prior to agreeing to receive external grants in excess of £200,000.

7.2 The public health team will monitor provision to ensure that the grant conditions are met, and outcomes delivered.

## 8. Human Resources and Organisation Development Implications

8.1 There are no HR implications for existing Council employees

8.2 The proposals for the use of the Supplementary Substance Misuse Treatment and Recovery Grant include the recruitment of fixed term programme management, intelligence and business management capacity.

## **9. Consultation**

9.1 Consultation has taken place with the following partners in Calderdale about the proposals contained in this report:

- Health and Wellbeing Board Members
- Local drug and alcohol partners including service providers, the recovery community, police and community safety colleagues
- Calderdale Council Corporate Leadership Team
- Calderdale Adult Health and Social Care Scrutiny Board

9.2 Consultation has taken place with the following West Yorkshire and Regional level partners:

- West Yorkshire Directors of Public Health
- West Yorkshire Drug and Alcohol Commissioning Leads
- West Yorkshire Combined Authority
- West Yorkshire Integrated Care Board
- Regional Probation Director
- Yorkshire and Humber Office for Health Improvement and Disparities

## **10. Environment, Health and Economic Implications**

10.1 Drug related harm negatively impacts on the health and wellbeing of people and communities in Calderdale. Drug related deaths are devastating for family members and communities. Improving outcomes for people who use drugs and alcohol harmfully can therefore positively affect our communities.

10.2 The illegal drug trade in Calderdale impacts negatively on our environment and economy and it is hoped that a co-ordinated approach to addressing drug related harm will help address some of these challenges.

## **11. Equality and Diversity**

11.1 A programme of action to transform drug treatment will be developed in the coming months, informed by a needs assessment. An equality impact assessment of the action plan will be undertaken and it's outcome and implications will be discussed with the Strategic Drug Partnership

## **12. Summary and Recommendations**

12.1 Drug related harm is a key challenge for Calderdale's communities and requires multi-agency action to address on a sustainable basis

12.2 The National Drug Strategy provides additional investment to improve drug treatment and recovery to contribute to addressing drug related harm

12.3 A new strategic Drug Partnership will be established to co-ordinate multi-agency action to prevent drug use and improve drug related outcomes in Calderdale

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**The documents used in the preparation of this report are:**

1. [Independent review of drugs by Dame Carol Black Phase 2 report](#)
2. [Independent review of drugs by Dame Carol Black: Government response](#)

**The documents are available for inspection at:**

<https://www.gov.uk/government/publications/review-of-drugs-phase-two-report>

[Independent review of drugs by Dame Carol Black: government response - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/independent-review-of-drugs-by-dame-carol-black)