



FOR PUBLICATION

DERBYSHIRE COUNTY COUNCIL

DERBYSHIRE HEALTH AND WELLBEING BOARD

18 January 2024

Report of the Derby and Derbyshire Drug and Alcohol Partnership

**Tackling the effects of drugs and alcohol; an update on the work
of the Derby & Derbyshire Drugs and Alcohol Strategic
Partnership (the DASP)**

1. Purpose

- 1.1 To provide an update on the work of the Drug and Alcohol Strategic Partnership (DASP) for Derby and Derbyshire since its establishment in November 2022.
- 1.2 To summarise the national context in which the DASP has been established and the national objectives from the Government's 10-year strategy, From Harm to Hope.
- 1.3 The Health and Wellbeing Board is asked to:
 - a) Note the role of the DASP in setting the strategic direction and joint priorities in relation to tackling the negative impacts of drugs and alcohol in Derby and Derbyshire.
 - b) Note the strategic priorities of the DASP and the progress made in delivering against those priorities.
 - c) Receive an update from the DASP at appropriate points, but annually as a minimum.

2. Information and Analysis

- 2.1 The negative effects of drugs and alcohol to both the individual and wider society are well documented; harm and deaths from drugs and alcohol have increased in recent years. The Government's 10-year

strategy, From Harm to Hope, is intended to reverse this trend. The DASP is responsible for setting the priority areas for action that will ensure that: harm and deaths from drugs and alcohol are reduced; drug and alcohol use is reduced, and drug related crime is reduced.

2.2 The 10-year Government Strategy, From Harm to Hope (2021) required all areas in England to establish a Combatting Drugs Partnership (CDP). The headline objectives of the Partnerships are to:

- reduce drug (and alcohol)-related harm and deaths
- reduce drug-related crime
- reduce drug use.

2.3 Additional funding in the form of the Supplemental Substance Misuse Recovery Grant has been received by Public Health for 2022/23 and 2023/24 to increase the capacity and availability of treatment services.

	2022/23	2023/24
Derby City	£0.916m	£1.7m
Derbyshire	£0.936m	£1.699m

2.4 The CDP, known locally as the Derby and Derbyshire Drug and Alcohol Strategic Partnership (DASP), was established in November 2022 and is formed of the following members:

- Derbyshire Constabulary
- Derby City Probation Service
- Derbyshire Probation Service
- Derby and Derbyshire Integrated Care Board (ICB)
- Derby City Council – Public Health, Children’s Services, Adult Social Care
- Derbyshire County Council – Public Health, Children’s Services, Adult Social Care
- Derbyshire Police and Crime Commissioner.

2.4 National strategic and interim objectives for CDPs like DASP are described in the National Outcomes Framework (see Appendix 2).

2.5 During its first year, the DASP has been understanding the nature and size of the drug and alcohol issues across Derby and Derbyshire, from the perspectives of all member agencies, through the completion of needs assessments. The outcomes of these assessments have been used to identify a shared set of strategic priorities to address national and local objectives. In addition, the DASP has been developing a

Partnership Agreement and Information Sharing Agreement to support its work and is in the process of recruiting an Independent Chair.

- 2.6 Needs assessments have been completed by Derbyshire Constabulary, Derby and Derbyshire Probation Services and Public Health at both Local Authorities. Examples of some of the findings from the needs assessments will be included in a presentation to the Health and Wellbeing Board.
- 2.7 The needs assessments have been used to determine a shared set of priorities for the Partnership which will be detailed in full in the presentation and come under the three strands of reducing drug related harm and deaths, reducing drug use and reducing drug related crime.
- 2.8 A wide range of initiatives has been developed and introduced by DASP partners during the last year to deliver the local priorities. These include:
- Increased distribution and use of Naloxone
 - Training and education of prison staff on continuity of care for prison leavers
 - Introduction of an intelligence-led approach to identifying those in need of alcohol treatment – and development of alcohol treatment pilots in primary care
 - Investment in additional nursing and key-worker staff at Chesterfield Hospital to improve continuity of care between hospital and community treatment for some of the most complex individuals
 - Drug Test on Arrest (DToA) Coordinator appointed by the Police; training for DToA to be commenced in early 2024 and implementation workstreams in place
 - Use of 'Clear Hold Build' by the Police in key hotspot areas to support communities following the disruption of supply.
- 2.9 The result of these changes is now being seen across the system. Across Derbyshire the following improvements were reported in September 2023:
- 14% increase of numbers of people in treatment
 - 36% increase in numbers accessing inpatient detox
 - 1833 new presentations to drug treatment
 - 58% increase in young people accessing specialist substance misuse treatment services
 - 5% increase in number of adults in drug and alcohol treatment
 - 49% of prison leavers with a continued treatment need picked up in community treatment services within 3 weeks.

3. Alternative Options Considered

3.1 No other options considered; CDPs are mandatory.

4. Implications

4.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

5. Consultation

5.1 The DASP is a partnership formed of stakeholders. Public involvement and lived experience feeds into the DASP via its sub-group structure.

6. Partnership Opportunities

6.1 The DASP includes partnership working with Police, Probation, Local Authorities, the ICB, NHS providers and the Police and Crime Commissioner.

7. Background Papers

7.1 From Harm to Hope: a 10-year drugs plan to cut crime and save lives. UK Government. 2021.

https://assets.publishing.service.gov.uk/media/629078bad3bf7f036fc492d1/From_harm_to_hope_PDF.pdf

7.2 Drugs strategy guidance for local delivery partners. UK Government 2022. <https://www.gov.uk/government/publications/drugs-strategy-guidance-for-local-delivery-partners>

8. Appendices

8.1 Appendix 1 – Implications.

8.2 Appendix 2 – Summary of the National Outcomes Framework.

9. Recommendation(s)

That the Health and Wellbeing Board:

- a) Note the role of the DASP in setting the strategic direction and joint priorities in relation to tackling the negative impacts of drugs and alcohol in Derby and Derbyshire.
- b) Note the strategic priorities of the DASP and the progress made in delivering against those priorities.

- c) Receive an update from the DASP at appropriate points, but annually as a minimum.

10. Reasons for Recommendation(s)

- 10.1 To ensure that the Health and Wellbeing Board is kept updated on the work of the Derby and Derbyshire DASP and the strategic direction set by the DASP is reflected in the strategies of the wider system.
- 10.2 To ensure the Health and Wellbeing Board maintains an understanding of the multiple negative impacts of drugs and alcohol on the health and wellbeing of the population and communities within it and ensure that action is being taken to lessen these impacts.
- 10.3 To support the partner organisations that form the DASP to share accountability for delivering against all national requirements of CDP.

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Appendix 1

Implications

Financial

1.1 There are no financial implications of this report.

Legal

2.1 There are no legal implications of this report.

Human Resources

3.1 There are no human resource implications of this report.

Equalities Impact

4.1 There are no equalities implications of this report. The DASP is an opportunity to help prevent and reduce health inequalities. The socio-economic impact of drugs and alcohol is central to the work of the DASP.

Partnerships

5.1 Drug and alcohol use will impact all members of the Health and Wellbeing Board.

Health and Wellbeing Strategy priorities







6.1 The DASP will support people impacted by drugs and alcohol and wider societal issues. It will support the following priorities:

- Enable people in Derbyshire to live healthy lives
- Build mental health and wellbeing across the life course
- Strengthen opportunities for quality employment and lifelong learning.

Other implications

7.1 N/A

1.1. Summary of CDP National Outcomes Framework. [Source.](#)

Strategic outcomes and metrics			Intermediate outcomes and metrics		
 Reduce drug use	 Reduce drug-related crime	 Reduce drug-related deaths and harm	 Reduce drug supply	 Increase engagement in treatment	 Improve recovery outcomes
Headline metrics	Headline metrics	Headline metrics	Headline metrics	Headline metrics	Headline metrics
<ul style="list-style-type: none"> Proportion of individuals reporting use of drugs in the last year Estimated prevalence of opiate and/or crack cocaine use (OCU) 	<ul style="list-style-type: none"> The number of neighbourhood crimes; domestic burglary, personal robbery, vehicle offences and theft from the person The number of homicides that involve drug users or dealers, or have been related to drugs in any way 	<ul style="list-style-type: none"> Deaths related to drug misuse Hospital admissions for drug poisoning and drug-related mental health and behavioural disorders (primary diagnosis of selected drug) 	<ul style="list-style-type: none"> Number of county lines closed Number of major and moderate disruptions against organised criminal groups 	<ul style="list-style-type: none"> Continuity of care: engagement in community-based structured treatment within three weeks of leaving prison (adults) The numbers in treatment for adults and young people 	<ul style="list-style-type: none"> Showing substantial progress by completing the treatment programme (free of dependent drug use and without an acute housing need) or still in treatment and either not using or having substantially reduced use of their problem substances measured over the preceding 12 months
Supporting metrics	Supporting metrics	Supporting metrics	Supporting metrics	Supporting metrics	Supporting metrics
<ul style="list-style-type: none"> Number and proportion of households owed a homelessness duty with a drug dependency need Rate per population of children of referral and assessments by social services with drugs as a factor Number of permanent exclusions and suspensions and the proportion that are drug and alcohol related Proportion of 11 to 15 year olds who think it is OK to take drugs to see what it is like, and think it is OK to take drugs once a week 	<ul style="list-style-type: none"> Proven reoffending within 12 months Police recorded trafficking of drugs and possession of drugs offences Hospital admissions for assault by a sharp object 	<ul style="list-style-type: none"> Hepatitis C prevalence (chronic infection) in people who inject drugs Number and percentage of people in treatment that have died during their time in contact with the treatment system 	<ul style="list-style-type: none"> Volume and number of drugs seizures Number and proportion of National Referral Mechanism referrals with a county lines flag 	<ul style="list-style-type: none"> Number of individuals in treatment in prisons and secure settings Number of community or suspended sentence orders with drug treatment requirements Number and proportion of adults starting treatment in the establishment within three weeks of arrival (from community or other custodial setting) Unmet need for OCU treatment 	<ul style="list-style-type: none"> Proportion of people in treatment that have reported no housing problems in the last 28 days Proportion of people in treatment that have reported at least one day of paid work, voluntary work, or training and education in the last 28 days Proportion of people in treatment reporting a mental health need who received treatment or interventions Proportion of parents that have received specific family or parental interventions