



**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**DERBYSHIRE HEALTH AND WELLBEING BOARD**

**30 January 2025**

**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 The Health and Wellbeing Board is asked to:

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

## **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
- drug related crime is reduced.

2.2 This report is intended to provide an update on the work of the Drug and Alcohol Strategic Partnership. Formed in 2022, the DASP works to implement the four aims of national drug strategy across the whole of the county, but more importantly looks at what is needed locally to reduce

these harms and build communities. The DASP is a partnership between the Police, The Integrated Care Board (ICB), NHS providers, The Office for Police and Crime Commissioner (OPCC), Probation and criminal justice, Local Authority Public Health, Children's services and adult social care.

- 2.3 Drug and alcohol harm is wide-ranging and includes all aspects of drug-related crime - from crime used to fund drug taking, to the supply of drugs by organised gangs and 'county lines'. It similarly includes avoidable deaths and illness from drug and alcohol use, and the preventable risks that children and young people face growing up with increasing access to substances.
- 2.4 Much of the current work of the partnership is aimed at improving drug and alcohol treatment, reducing the number of deaths locally caused by overdose, reducing drug supply and reducing alcohol-related illness. As the partnership progresses and strengthens, it will begin to focus on ways of preventing drug and alcohol related harm for future generations.
- 2.5 Additional funding in the form of the Supplemental Substance Misuse Recovery Grant has been received by Public Health in 2024/2025:

Derby City	£2.678m
Derbyshire	£2.586m

This funding allows additional activity and resources to deliver the recovery and treatment aspects of the Harm to Hope strategy locally.

- 2.6 DASP partners have made progress against a series of measures that determine success both nationally and locally. These measures capture progress on reducing drug-related death and harm, on increasing engagement in treatment and its outcomes, and on reducing the supply of drugs and drug-related crime:
- From March 2022 to March 2024 there has been a 9.6% increase in numbers of adults in substance misuse treatment (5,807 to 6,366)
  - There have been 179 recorded disruptions against county lines organised crime groups in the last 12 months
  - 36 County lines have been 'rolled up' – shut down - in the same period
  - From 2022 to 2024, the percentage of prison leavers with a treatment need who are picked up in the community within 3 weeks of leaving prison has increased by 15.1% (from averages of 42.2% to 57.5%)

- Over 300 police officers have been trained in the use of an overdose antidote (Naloxone) and carry it daily. Since June 2024, it has been used by police officers in excess of 5 times and saved a life of each occasion.

Further detail on the activity can be found in Appendix 2.

2.7 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 to reverse opioid overdoses
- Drug Test on Arrest (DToA) implementation in Police stations
- Use of 'Clear Hold Build' by the Police in key hotspot areas to support communities following the disruption of supply
- Continued development of the Local Drug Information Service responding to information of substances of potential serious harm, including issuing of alerts
- Development of a synthetic opioid multiagency outbreak response plan for local use.

### **3. Alternative Options Considered**

3.1 No alternative options considered: Combating Drugs Partnerships (CDP) are mandatory structures.

### **4. Implications**

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

### **5. Consultation**

5.1 No formal consultation. The progress report is due to be published publicly on a DASP partner website and the public invited to respond.

### **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.

6.2 The DASP has ambitious strategic aims and requires continued commitment from partners. There has been a large amount of activity, however, there are gaps in the strategic and operational aspects that HWB partners can support in 2025.

## 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](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 - Maps

## 9. Recommendation(s)

That the Health and Wellbeing Board:

- a) Notes the progress of the DASP in delivering against their strategic direction and joint priorities in relation to tackling the negative impacts of drugs and alcohol in Derby and Derbyshire.
- b) Agrees to accept future updates on an annual basis

## 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.

**Report Author:** Rosalie Weetman, Group Manager and Thom Dunn, Assistant Director of Public Health.

**Contact details:** Rosalie.Weetman@derbyshire.gov.uk

**Organisation:** Derbyshire County Council

**HWB Sponsor:** Ellie Houlston, Director of Public Health Derbyshire

## **Appendix 1**

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. The DASP represents a system wide partnership and all members are invited to support the DASP aims and ambitions.

#### **Health and Wellbeing Strategy Areas of Focus**

6.1 The harms of drugs and alcohol are across the life course and impact virtually every aspect of health and social care. The DASP aims will support four of the five areas of focus. These are:

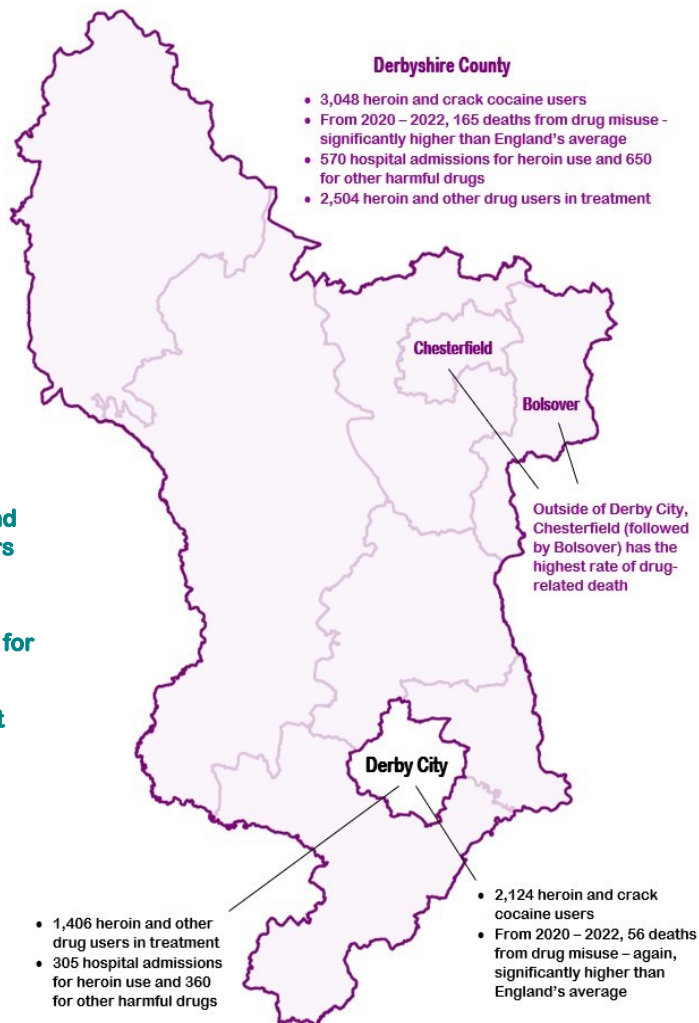
- Area of Focus 1: Tackle the four main risk factors that lead to poor health
- Area of Focus 2: Support good mental health
- Area of Focus 3: Support communities to be resilient and independent
- Area of Focus 4: Tackle child poverty and enable children and young people in Derbyshire to start well.

#### **Other implications**

7.1 N/A

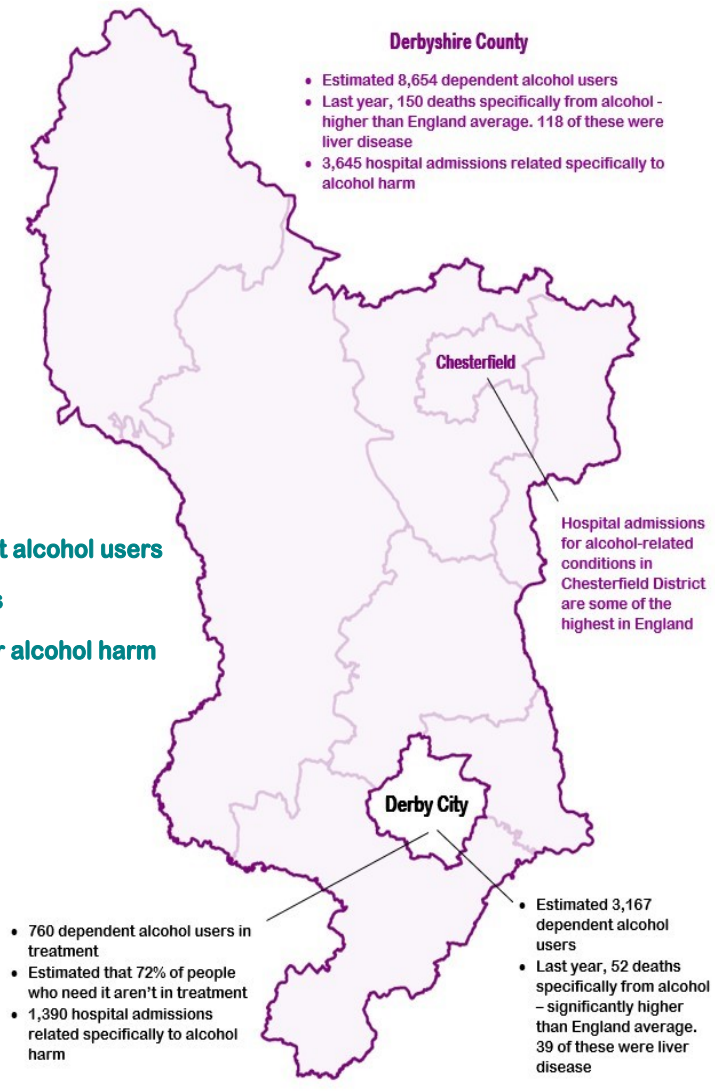
**Map 1 – Drug harm**

- **Estimates of drug and harmful alcohol users**
- **Drug misuse deaths**
- **Hospital admissions for drugs**
- **Number in treatment**



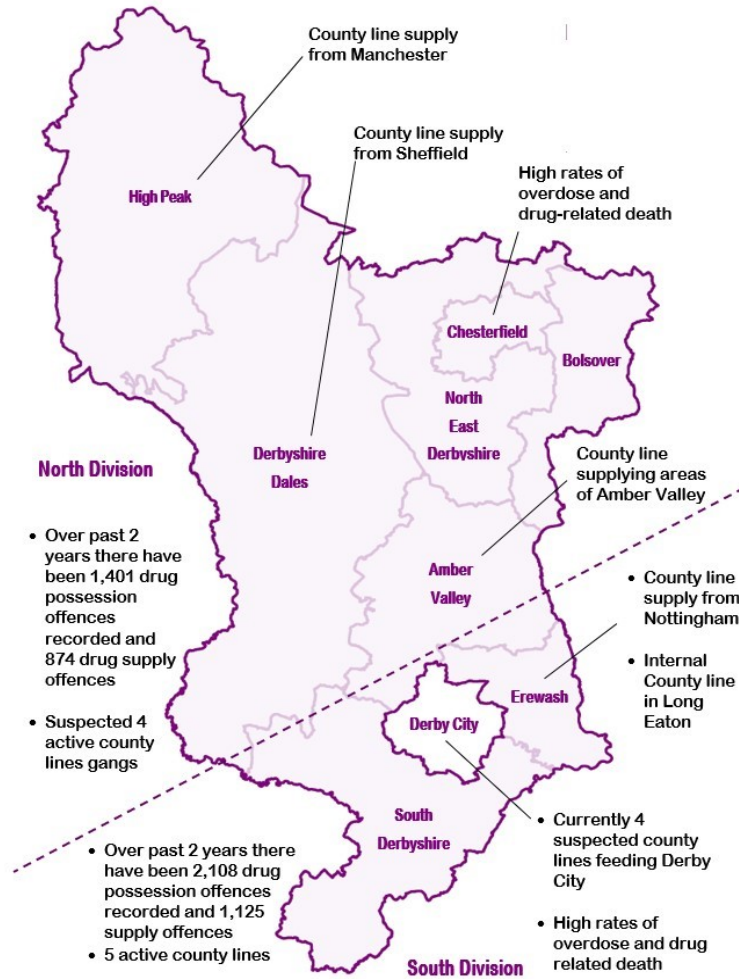
## Map 2 – Alcohol harm

- Estimates of dependent alcohol users
- Alcohol specific deaths
- Hospital admissions for alcohol harm
- Numbers in treatment



### Map 3 – Crime

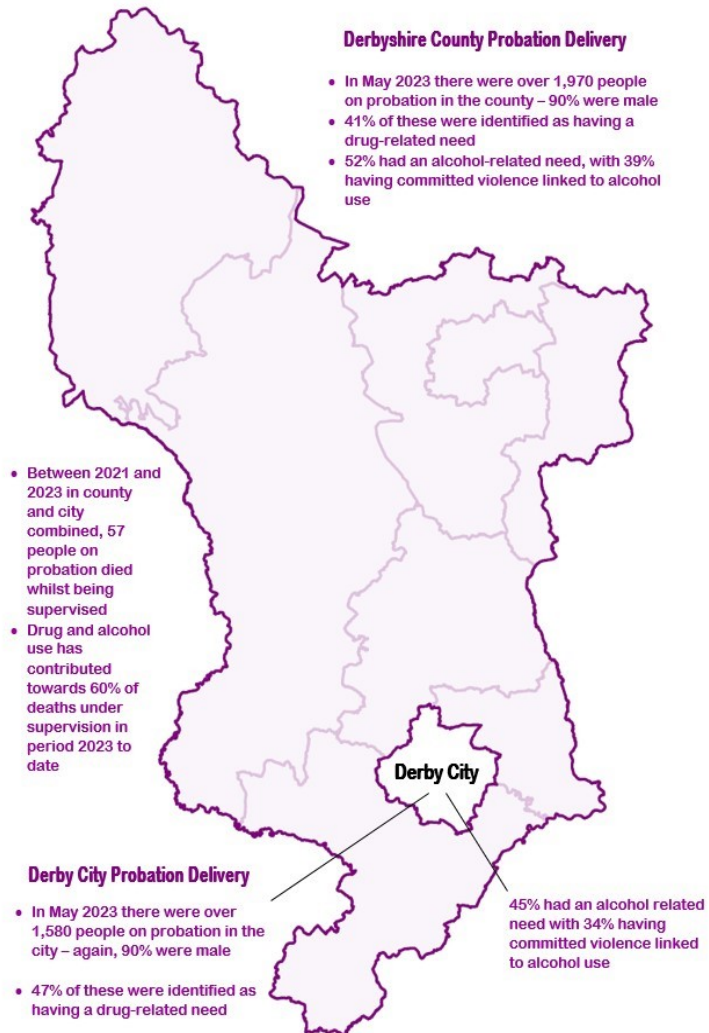
- Drug possession and supply
- County lines
- Drug overdoses





## Map 4 – Probation

- Those in probation with drug and alcohol needs
- Deaths under supervision



Derbyshire County

Over the last 2 years there has been:

From March 2022 to March 2024, 2% decrease in those showing substantial progress in substance misuse treatment (48% to 46%) – similar to the rest of England

- 10% increase in drug misuse deaths since the last reporting period (150 to 165)
- 12.7% increase in alcohol-specific deaths (from 133 to 150)
- 2% increase in those who died in treatment (48 to 49)
- 6% decrease in alcohol hospital admissions (3,875 to 3645)
- 6.1% decrease in drug hospital admissions (1,300 to 1,220)

2022 – 2024

Progress on reducing drugrelated death and harm

- Drug misuse deaths
- Alcohol specific deaths
- Death in treatment
- Hospital admissions for drugs and alcohol

Progress on increasing engagement in treatment

- Numbers in treatment – adults and YP

Progress on improving drug recovery outcomes

- From March 2022 to March 2024, 12.3% increase in number of adults in substance misuse treatment (3,740 to 4,200)
- 91.1% increase in numbers of young people in substance misuse treatment (90 to 172)

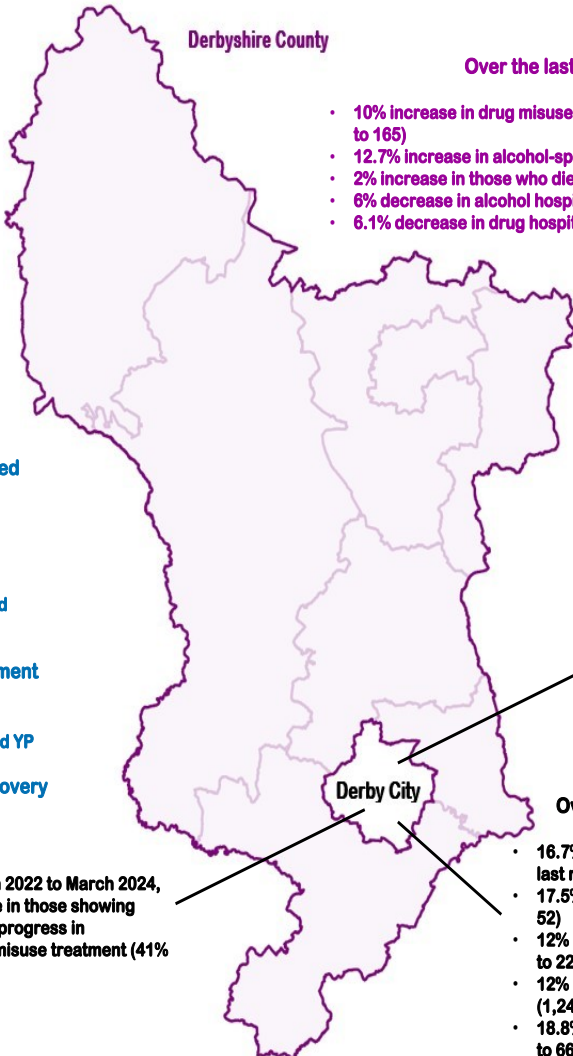
- From March 2022 to March 2024, 4.8% increase in in numbers of adults in substance misuse treatment (2,067 to 2,166)
- 47.6% increase in numbers of young people in substance misuse treatment (21 to 31)

Derby City

Over the last 2 years there has been:

From March 2022 to March 2024, 1% increase in those showing substantial progress in substance misuse treatment (41% to 42%)

- 16.7% increase in drug misuse deaths since the last reporting period (48 to 56)
- 17.5% decrease in alcohol-specific deaths (63 to 52)
- 12% decrease in those who died in treatment (25 to 22)
- 12% increase in alcohol hospital admissions (1,240 to 1,390)
- 18.8% increase in drug hospital admissions (570 to 665)



## Derbyshire County

### Over the last 2 years

The percentage of prison leavers with a treatment need who are picked up in the community within 3 weeks of leaving prison has increased by 11.7% (from 38.6 to 50.3%)

### 2022 – 2024

#### Progress on reducing drug supply

- Number of county lines closed
- Number of organised crime group disruptions

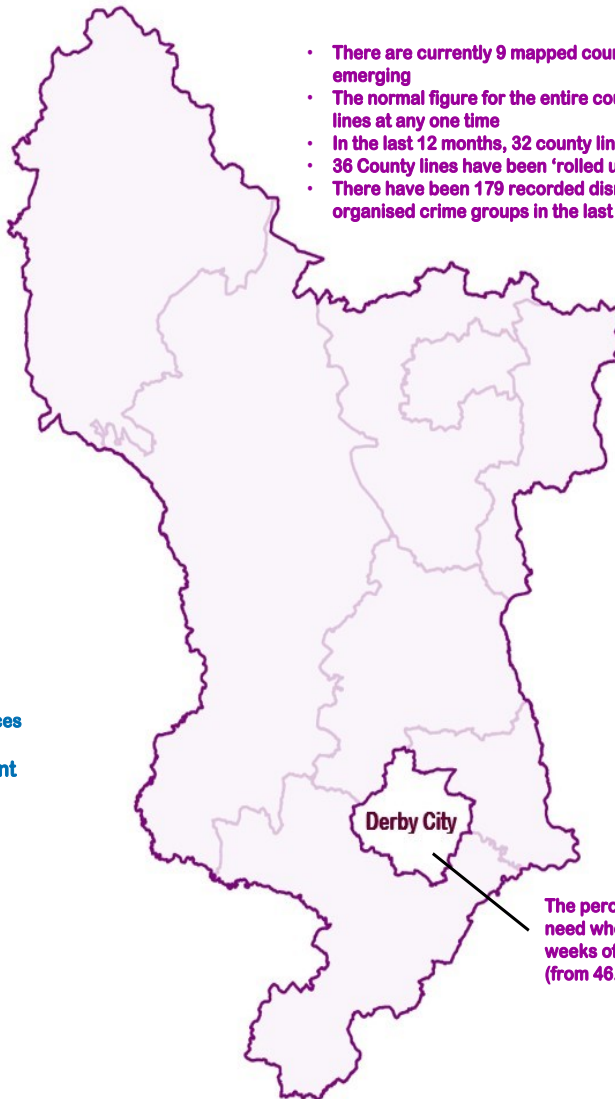
#### Progress on reducing drugrelated crime

- Reduction in drug possession offences

#### Progress on increasing engagement in treatment

- Continuity of drug treatment care within 3 weeks of leaving prison
- Community drug and alcohol orders for offending (CSTR)

- There are currently 9 mapped county lines operating and 4 that are emerging
- The normal figure for the entire county of Derbyshire is 10 to 12 county lines at any one time
- In the last 12 months, 32 county lines have been mapped
- 36 County lines have been 'rolled up' (archived) in the same period
- There have been 179 recorded disruptions against county lines organised crime groups in the last 12 months



- Over the last 2 years there have been 3,544 occurrences of drug possession and 2,033 occurrences of drug trafficking.

- For these offences there were 5,348 total 'outcomes' (cautions, prosecutions, planned forfeitures) of which 65% (3,463) were positive or successful outcomes

- Between May 2023 and May 2024, there were 218 community drug, alcohol and mental health treatment orders given for offending (CSTR)

### Over the last 2 years

The percentage of prison leavers with a treatment need who are picked up in the community within 3 weeks of leaving prison has increased by 18.5% (from 46.2 to 64.7%)