

**Title of meeting:** Health and Wellbeing Board  
**Subject:** Combatting Drugs Partnership  
**Date of meeting:** 23<sup>rd</sup> November 2022  
**Report by:** Helen Atkinson, Director of Public Health  
**Report Author:** Alan Knobel, Public Health Principal  
**Wards affected:** All  
**Key decision:** No  
**Full Council decision:** No

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## 1. Purpose

- 1.1 The purpose of the report is to inform the Health and Wellbeing Board (HWB) of the new Combatting Drugs Partnership (CDP), its purpose and aims.
- 1.2 To seek approval from the HWB for the proposed reporting process for the CDP reporting into the HWB.

## 2. Recommendations

- 2.1 The Health and Wellbeing Board approve the Combatting Drugs Partnership becoming a sub-group.
- 2.2 The Health and Wellbeing Board approve the receipt of an annual plan and progress report from the Combatting Drugs Partnership
- 2.3 The Health and Wellbeing Board agree to review the needs assessment and drug & alcohol delivery plan at its meeting on the 15<sup>th</sup> February 2023

## 3. Background

- 3.1 The National Drug Strategy, '[From harm to hope: A 10-year drugs plan to cut crime and save lives](#)', was published in December 2021, with three strategic priorities
  - Breaking drug supply chains
  - Delivering a world-class treatment and recovery system and
  - Achieving a generational shift in the demand for drugs

- 3.2 Guidance setting out how Local Authorities should implement this strategy was subsequently published<sup>1</sup>. This guidance included the requirement to set up a 'Combatting Drug Partnership' (CDP).
- 3.3 Alcohol is a significant cause of harm in Portsmouth. In the city our specialist treatment and recovery services are integrated for alcohol and illegal drugs. Therefore, while the 10-year drugs strategy primarily focuses on the use and supply of illegal drugs, our partnership will also consider alcohol dependence and wider alcohol-related harms where identified by our needs assessment.
- 3.4 Each CDP is required to have a Senior Responsible Owner (SRO). In Portsmouth the SRO is Helen Atkinson, Director of Public Health. The SRO will have responsibility for chairing the CDP and reporting to central Government on progress.
- 3.5 The aims of the CDP include:
- To bring together senior leaders and organisations to oversee and support the implementation and meet the requirements of the National Drug Strategy, and identified local priorities concerning drugs and alcohol.
  - To provide leadership and strategic oversight, working collaboratively across agencies to reduce drug and alcohol harm through prevention; accessible, evidence-based and effective treatment; promotion of long-term recovery; and enforcement activities across Portsmouth.
- 3.6 The CDP has a multi-agency membership, detailed in Appendix A.

#### **4. Key responsibilities of the Partnership**

The Partnership will lead, develop, and oversee the delivery of:

- a joint local needs assessment, reviewing local drug / alcohol data and involving all relevant partners. This includes working together to understand our population and how drugs/ alcohol are causing harm, identifying any challenges in the local system and the changes that are needed to address them. The first needs assessment is required to be completed by the 30<sup>th</sup> November 2022.
- an agreed local drug and alcohol strategy and delivery plan that reflects the national strategic priorities, including identifying appropriate activities that will deliver the key outcomes outlined in the National Drug Strategy. The first plan is due to be completed and agreed by the 31<sup>st</sup> December 2022.
- Overseeing and co-ordinating relevant funding streams relevant to this agenda to provide the necessary link between funding and delivery. The planned additional funding, provided as part of the national drugs strategy is detailed in Appendix B.

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<sup>1</sup>[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1092762/Guidance\\_for\\_local\\_delivery\\_partners\\_July\\_2022.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1092762/Guidance_for_local_delivery_partners_July_2022.pdf)

- regularly reviewing progress, reflecting on local delivery of the strategy and current issues and priorities, working in partnership to unblock any barriers and progress plans to enable achievement of defined outcomes.
- report progress to the Portsmouth Health & Wellbeing Board and other local partnerships / Boards as appropriate and central government. This includes reporting on delivery against the National Combating Drugs Outcomes Framework (Appendix C) and other local indicators as agreed by the partnership.

## **5. Accountability and links**

- 5.1 The CDP will report and be accountable to the Portsmouth Health and Wellbeing Board (HWB). On an annual basis the SRO will take a report to the HWB outlining performance against outcomes and plans for the coming year.
- 5.2 The SRO will bring a report to the HWB on the 15<sup>th</sup> February 2023, summarising the completed drug and alcohol needs assessment and the delivery plan and seeking approval.
- 5.3 Other key groups which the CDP will link include:
- Hampshire and IoW Integrated Care Board
  - Health and Care Portsmouth Executive
  - Portsmouth Local Safeguarding Adults Board
  - Portsmouth Safeguarding Children Partnership
  - Pan-Hampshire Drugs forum, led by the Police & Crime Commissioner
  - Hampshire Violence Reduction Unit
  - Hampshire and IOW Local Criminal Justice Board

## **5. Integrated impact assessment**

There is no specific change to policy or delivery recommended in the report. Detailed impact assessments will be undertaken on particular policies and initiatives as they emerge from the work of the Combatting Drugs Partnership.

## **6. Legal implications**

The aim of the Report is in line with Government objectives and there are no legal issues regarding these recommendations.

## **7. Director of Finance's comments**

There are no financial implications as a result of this report as it aims to inform the Health and Wellbeing Board of the new Combatting Drugs Partnership purpose and aims.

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Signed by: Helen Atkinson, Director of Public Health, Portsmouth City Council

## Appendices

### Appendix A

#### Combatting Drugs Partnership membership

<b>Job title</b>	<b>Organisation</b>
Cabinet Member for Health, Wellbeing & Social Care	Portsmouth City Council
Cabinet Member for Safety in the Community	Portsmouth City Council
Director of Public Health	Portsmouth City Council
Deputy Director of Public Health	Portsmouth City Council
Public Health Principal	Portsmouth City Council
Assistant Director of Housing	Portsmouth City Council
Deputy Director of Adult Social Care	Portsmouth City Council
Head of Service for Adolescents and Young Adults	Portsmouth City Council
Superintendent	Hampshire Constabulary
Chief Inspector	Hampshire Constabulary
Commissioning & Contracts Manager	Office of the Police & Crime Commissioner
Employer & Partnership Manager	Department for Work & Pensions
Head of Portsmouth & Isle of Wight Probation Delivery Unit	Probation service
Director	Society of St. James
Area Manager	Inclusion NHS
Young People substance misuse lead	Portsmouth City Council
Lived experience representatives	Pushing Change
Carer - lived experience representative	Rebound carers group
Head of Access (Mental health)	Solent NHS Trust
Chair - Advisory Board	Healthwatch
SE Region drug & alcohol coordinator	Office for Health Improvement & Disparities
Deputy Director of Medicines Optimisation	Hampshire and Isle of Wight Integrated Care Board

## Appendix B

Prior to 2021, substance misuse treatment funding had been reducing nationally, including in Portsmouth. Since Public Health services moved from the NHS to local authorities in 2013/14, there had been a steady decline in funding, due to austerity impacting local authority funding, as well as year on year reductions in the Public Health Grant.

For Portsmouth this meant a reduction in funding from £4.83 million in 2012/13 to a low of £2.8 million in 2018/19.

In 2022/23 base recurring funding from the Public Health Grant is £2.82 million annually.

### New funding for 2022/23 onwards

Portsmouth has received notification of different funding streams which will enhance our baseline funding. For the next 3 years we should receive:







	2021/22	2022/23	2023/24	2024/25
<b>Supplemental Substance Misuse Treatment &amp; Recovery Grant<sup>2</sup></b>	Received £397k from the Universal Grant	£503k	£825k	£1.59 m
<b>Inpatient detox allocation</b>	£48k	£48k	£48k	£48k
<b>Rough Sleeping Drug &amp; Alcohol Treatment Grant</b>	£720k	£795k	£807k	To be confirmed
<b>Individual Placement and Support<sup>3</sup></b>	-	£113k	£142k	£146k

<sup>2</sup> This grant replaces the Universal Grant. This funding is only confirmed on an annual basis. This grant is conditional on no disinvestment from existing funding.

<sup>3</sup> This funding is confirmed on an annual basis.

## Appendix C

Figure 1: National Combating Drugs Outcomes Framework

<b>National Combating Drugs Outcomes Framework</b> Our ambition: a safer, healthier and more productive society by combating illicit drugs	
<b>What we will deliver for citizens</b> (strategic outcomes)	<b>Measured by:</b>
 <b>Reducing drug use</b>	<ul style="list-style-type: none"> <li>the proportion of the population reporting drug use in the last year (reported by age)</li> <li>prevalence of opiate and/or crack cocaine use</li> </ul>
 <b>Reducing drug-related crime</b>	<ul style="list-style-type: none"> <li>the number of drug-related homicides</li> <li>the number of neighbourhood crimes</li> </ul>
 <b>Reducing drug-related deaths and harm</b>	<ul style="list-style-type: none"> <li>deaths related to drug misuse</li> <li>hospital admissions for drug poisoning and drug-related mental health and behavioural disorders (primary diagnosis of selected drugs)</li> </ul>
<b>What will help us deliver this</b> (intermediate outcomes)	<b>Measured by:</b>
 <b>Reducing drug supply</b>	<ul style="list-style-type: none"> <li>the number of county lines closed</li> <li>the number of moderate and major disruptions against organised criminals</li> </ul>
 <b>Increasing engagement in drug treatment</b>	<ul style="list-style-type: none"> <li>the numbers in treatment (both adults and young people, reported by opiate and crack users, other drugs, and alcohol)</li> <li>continuity of care – engagement with treatment within three weeks of leaving prison</li> </ul>
 <b>Improving drug recovery outcomes</b>	<ul style="list-style-type: none"> <li>the proportion who are in stable accommodation and who have completed treatment, are drug-free in treatment, or have sustained reduction in drug use</li> </ul> <p><b>Key additional components integral to recovery include housing, mental health, and employment</b></p>

The recommendation(s) set out above were approved/ approved as amended/ deferred/ rejected by ..... on .....

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Signed by: