



Title of meeting: Health & Wellbeing Board

Date of meeting: 6th March 2024

Subject: Combatting Drugs Partnership Annual Report

Report by: Helen Atkinson, Director of Public Health

Written by: Alan Knobel, Public Health Principal

Cabinet Member: Councillor Matthew Winnington, Community Wellbeing, Health & Care

Wards affected: All

Key decision: No

Full Council decision: No

1. Purpose of report

1.1 The purpose of the report is to inform the Health and Wellbeing Board (HWB) of the Combatting Drugs Partnership (CDP) work over the past year.

2. Recommendations

2.1 It is recommended that the Health & Wellbeing Board (HWB):
(i) Notes this annual report.

3. Background

3.1 The Health and Wellbeing Board received a report detailing the formation of the new Combatting Drugs Partnership (CDP), its aims and objectives at their meeting in November 2022. Subsequently in February 2023 the Board noted the substance misuse needs assessment and approved the plan.

3.2 The Health and Wellbeing Board agreed to receive an annual report from the CDP.

3.3 The CDP plan had three key objectives:

1. Disrupt local drug supply chains and drug related crime;
2. Improve the quality, capacity and outcomes of our drug & alcohol prevention; and treatment services; and

3. Reduce the misuse and harm caused to young people by drugs & alcohol.

4. Progress

- 4.1 There has been additional government grant funding specifically for substance misuse treatment. This has increased capacity within our recovery services¹ and enabled enhanced outreach and engagement work with hard-to-reach groups, such as homeless people, offenders in the criminal justice system and LGBTQ+ communities.
- 4.2 The number of people in specialist drug or alcohol treatment has increased significantly over the past two years, from 1,436 in December 2021 to 1,750 in December 2022 and to 1,814 in December 2023. The Government target was to achieve 1785 by March 2024.
- 4.3 Partnership working between agencies has increased, with additional activities, information and intelligence sharing, and jointly delivered projects across Portsmouth City Council, Office of the Police & Crime Commissioner, Hampshire Constabulary, NHS partners, National Probation Service and voluntary sector partners. Examples of this include:
 - Increased number of drug intelligence reports to the police
 - Business crime navigator working with prolific shoplifters
 - Drug testing on arrest and provision of a dedicated support worker
 - Working in partnership with criminal justice agencies to develop a plan to increase the percentage of prisoners engaging in treatment post prison release
 - Development of a prescribed drugs drop-in and support group
 - Co-occurring mental health and substance misuse training
 - Supporting the development of trauma informed practice and a trauma network
- 4.4 The number of people successfully completing treatment and leaving drug or alcohol free has increased over the year. However the percentage completing still remains below the national average for non-opiate and alcohol only clients (above for opiate users). The increase in specialist posts should help to increase this over the coming year.
- 4.5 There has been an expansion in the number of staff within the Drug & Alcohol Support Service (DASS)², which supports young people. The service has very recently opened a new young people friendly base, which will allow for confidential direct access to support for young people and their parents. We have begun to see an increase in referrals to the service.

¹ www.portsmouthrecovery.org

² <https://www.portsmouth.gov.uk/services/health-and-care/health/dass-drug-and-alcohol-support-service-for-young-people/>

5. Challenges

5.1 Despite the overall increase in people accessing specialist treatment, there has been a slight decrease in opiate users accessing treatment from 769 to 742 during 2023 (although we have seen an increase in crack cocaine users). This is reflective of a national decline in opiate users accessing treatment. The Government have prioritised increasing the number of opiate users in treatment for all local authorities in 2024/25. We have plans to address this issue, including:

- Funding two new drug specialist nurses at Queen Alexandra Hospital
- Increasing the number of people leaving prison who access treatment through a partnership plan
- Developing more outreach by people in recovery, with a lived experience, with homeless people.

5.2 In common with national data, drug related deaths have increased. We monitor and review these deaths locally. The most common cause of these deaths are long term health conditions, linked to long term drug/ alcohol use, although a high prevalence of smoking is also a contributory factor. We have seen some spikes in overdose deaths in the city, particularly when there has been a batch of heroin which is contaminated with synthetic opioids. This has also become an issue nationally, with a fall in opium harvests in Afghanistan, the void has been filled by drugs such as Fentanyl and Nitazenes, which are much stronger and more unpredictable than heroin. We are working with Hampshire and IOW partners to develop early drug warning processes and seeking to develop rapid drug testing for suspect substances. This will allow us to better manage future cases of contaminated batches in the city.

5.3 A needs assessment completed in December 2023 highlighted the barriers and specific needs of women who misuse substances. This recommended women specific provision, separate from our male dominated services (women make up just a quarter of those in treatment). A recommendation was to develop a holistic service with a range of support on offer. We are working with multi-agency partners to consult with service users and scope what this provision will consist of. We are aiming to launch provision by May 2024.

5.4 Recruitment and retention is an issue in the sector, as elsewhere. There has been a significant turnover in staff over the past 12 months, with more inexperienced staff joining the sector. To address this, our provider, Society of St. James, is developing an accredited training programme to upskill and develop all their staff. In addition to this, additional Government funding will allow us to increase starting salaries and provide additional pay for those staff achieving the accreditation.

5.5 Increasing the percentage of people accessing treatment after being released from prison has been difficult to achieve locally. With improvements nationally, Portsmouth now sits below the national average. We have been working with our



neighbouring local authorities, National Probation service and prisons to develop a plan to improve this. This work has been co-ordinated by the Office of the Police and Crime Commissioner, linked to the Hampshire and Isle of Wight (IOW) strategic drugs partnership board chaired by the Police & Crime Commissioner. The implementation of this plan should lead to improvements during 2024.

6. Plans for 2024/25

- 6.1 With additional funding in 2024/25 specifically for treatment provision, our new developments include:
- Two new drug specialist nurses at Queen Alexandra hospital
 - Three mental health professionals to be co-located in the Recovery Hub to support improvements in care for people with co-occurring mental health and substance misuse
 - Two new social workers to be co-located in the Recovery Hub to support service users with complex needs, including care needs, and support the delivery of multi-agency risk management meetings.
 - Increased funding for inpatient detoxification and residential rehabilitation
 - Women specific multi-agency provision
 - Increased counselling and support for parents, carers and family of substance misusers, with a focus on bereavement support where there has been a drug related death
 - Commissioning rapid drug alert and drug testing systems, alongside Hampshire, Southampton and IOW Public Health teams.

7. Integrated impact assessment

- 7.1 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 Combating Drugs Partnership.

8. Legal implications

- 8.1 There are no legal implications that arise from the report

9. Finance comments

- 9.1 There are no financial implications as a result of this report. Any future schemes and initiatives will be assessed on case by case basis.

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Signed by: **Helen Atkinson, Director of Public Health**

Appendices:
None



Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location

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

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Signed by: