

National Drug Strategy - From Harm to Hope: a 10-year drugs plan to cut crime and save lives

Joe Benmore Offender Management-Strategic Lead

Sarah Hart – Senior Commissioner Haringey Public Health

June 2022

Overview

This slide pack will give background to the discussion at the joint Community Safety Partnership and Health and Wellbeing Board –July 2022

The slide pack covers:

- Background info on drug related harms in Haringey
- An outline of the National Drugs Strategy
- New investment and expectations for delivery of an expanded local partnership response to drugs harm in Haringey with strengthened governance
- We need all the partners on the CSP and Health and Wellbeing Board to play their part in this work

Benefits of combating Illegal drug use in Haringey



Drug misuse harms families and communities



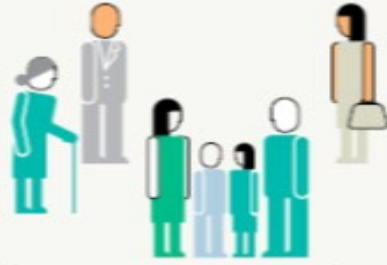
Parental drug use is a risk factor in **29%** of all serious case reviews



Heroin and crack addiction causes crime and disrupts community safety



A typical heroin user spends around **£1,400 per month** on drugs (2.5 times the average mortgage)



The public value drug treatment because it makes their communities safer and reduces crime. **82%** said treatment's greatest benefit was improved community safety

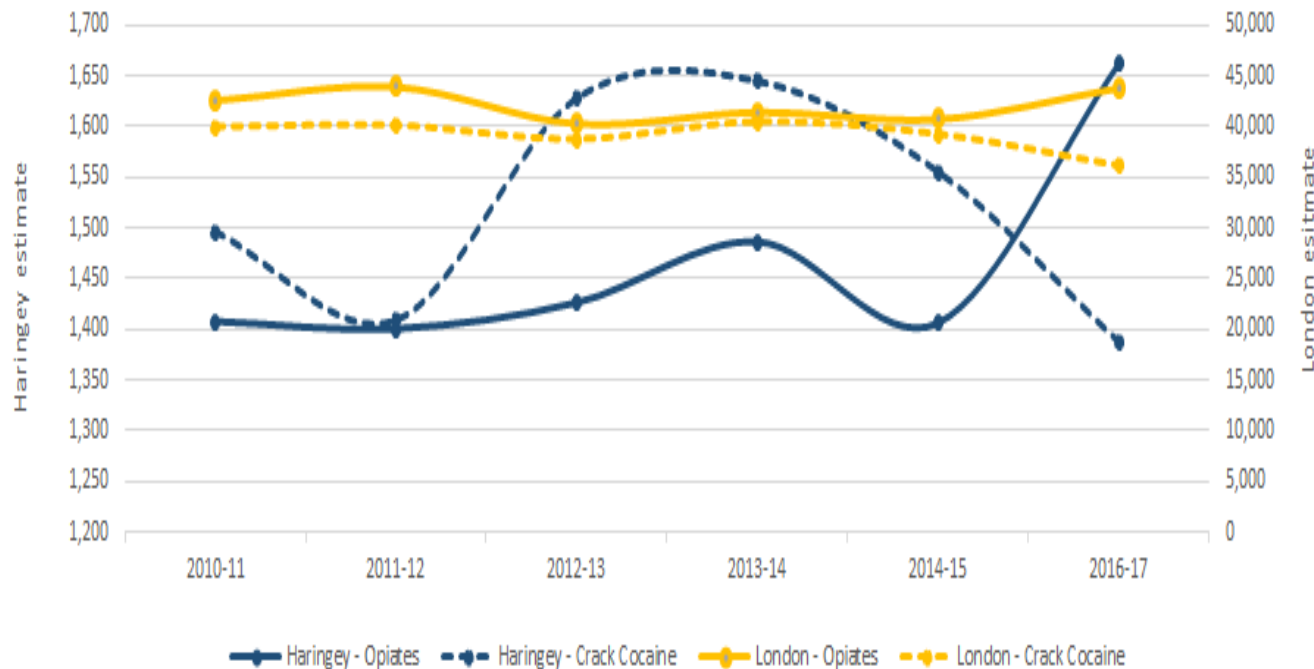


Prevalence of drug and alcohol use 2010/11 - 2016/17

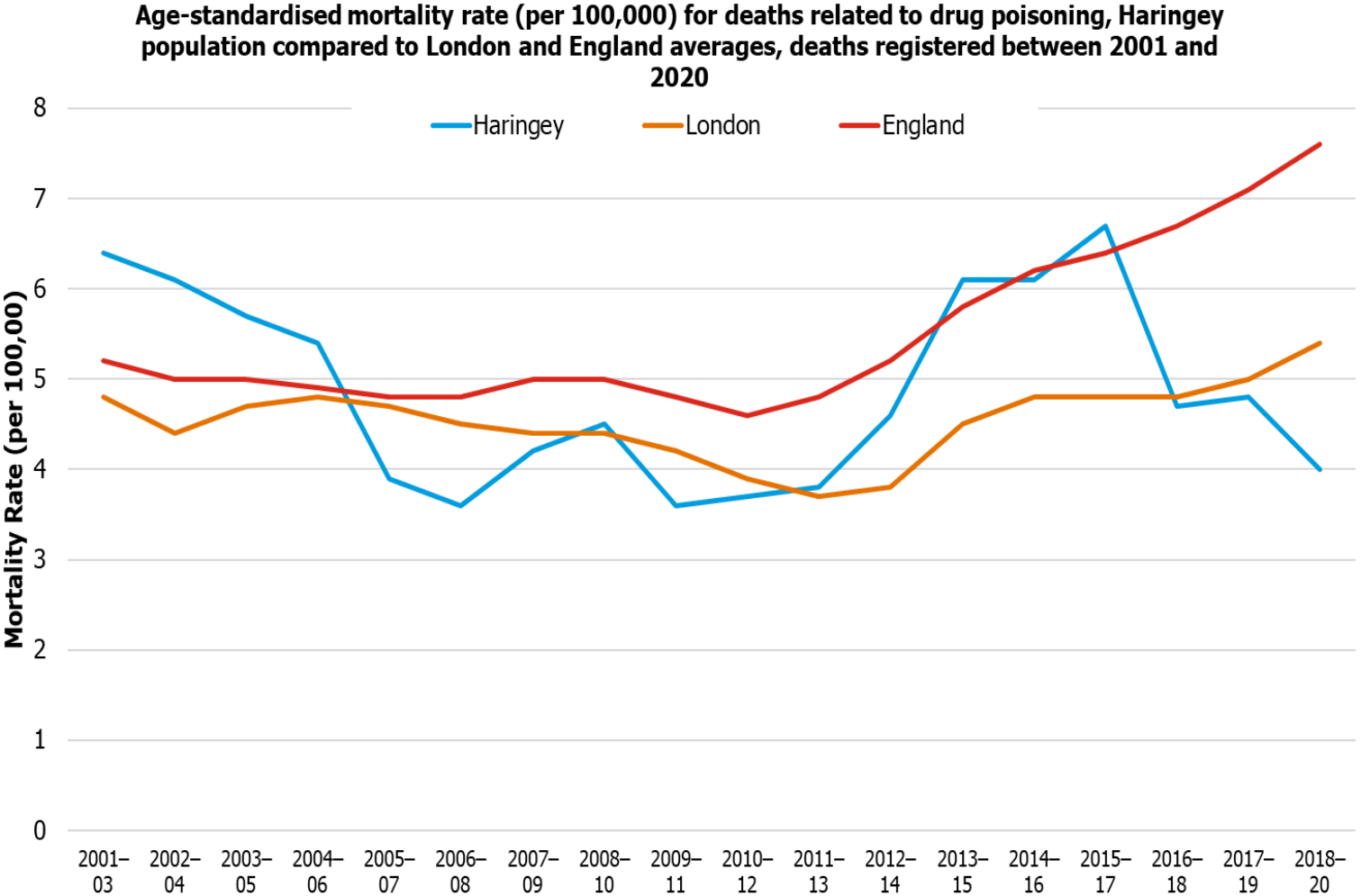
Type	Region	No. of users						2016-17 Rate (000) pop	Change (%) 16/17 - 10/11
		2010-11	2011-12	2012-13	2013-14	2014-15	2016-17		
Opiates	Haringey	1,407	1,400	1,426	1,486	1,406	1,662	8.54	18.1
	London	42,588	43,918	40,293	41,431	40,750	43,823	7.24	2.9
	England	261,792	256,163	251,257	258,737	257,476	261,294	7.37	-0.2
Crack Cocaine	Haringey	1,496	1,408	1,628	1,645	1,555	1,386	7.12	-7.3
	London	39,934	40,080	38,723	40,431	39,226	36,116	5.97	-9.6
	England	170,627	166,640	170,167	182,334	182,828	180,748	5.10	5.9

- Haringey has higher rates of Opiate and Crack-Cocaine users than both the London and national rate (2016/17)
- Opiates
 - There are 1,662 (8.54 per 1,000 pop) users in Haringey in 2016/17. This represents a significant 18% annual increase compared to a 8% London rise and 2% nationally for the same period
 - Similarly large 18% increase in users since 2010/11 compared to London's 3% increase and effectively no-change nationally
- Crack-Cocaine
 - There are 1,386 (7.12 per 1,000 pop) users in Haringey in 2016/17, notably less than the previous five year average of 1,546
 - Haringey's annual 11% reduction in users in 2016/17 was greater than both London's and England's falls of 8% and 1% respectively
 - Since 2010/11 Haringey has seen a 7% drop in users, less than the 10% reduction in London but better than the 6% increase seen nationally

National and local estimated number of people who use opiates & crack cocaine: 2010 - 2017



Age Standardised Mortality Rate (per 100,000) for Deaths Related to Drug Poisoning

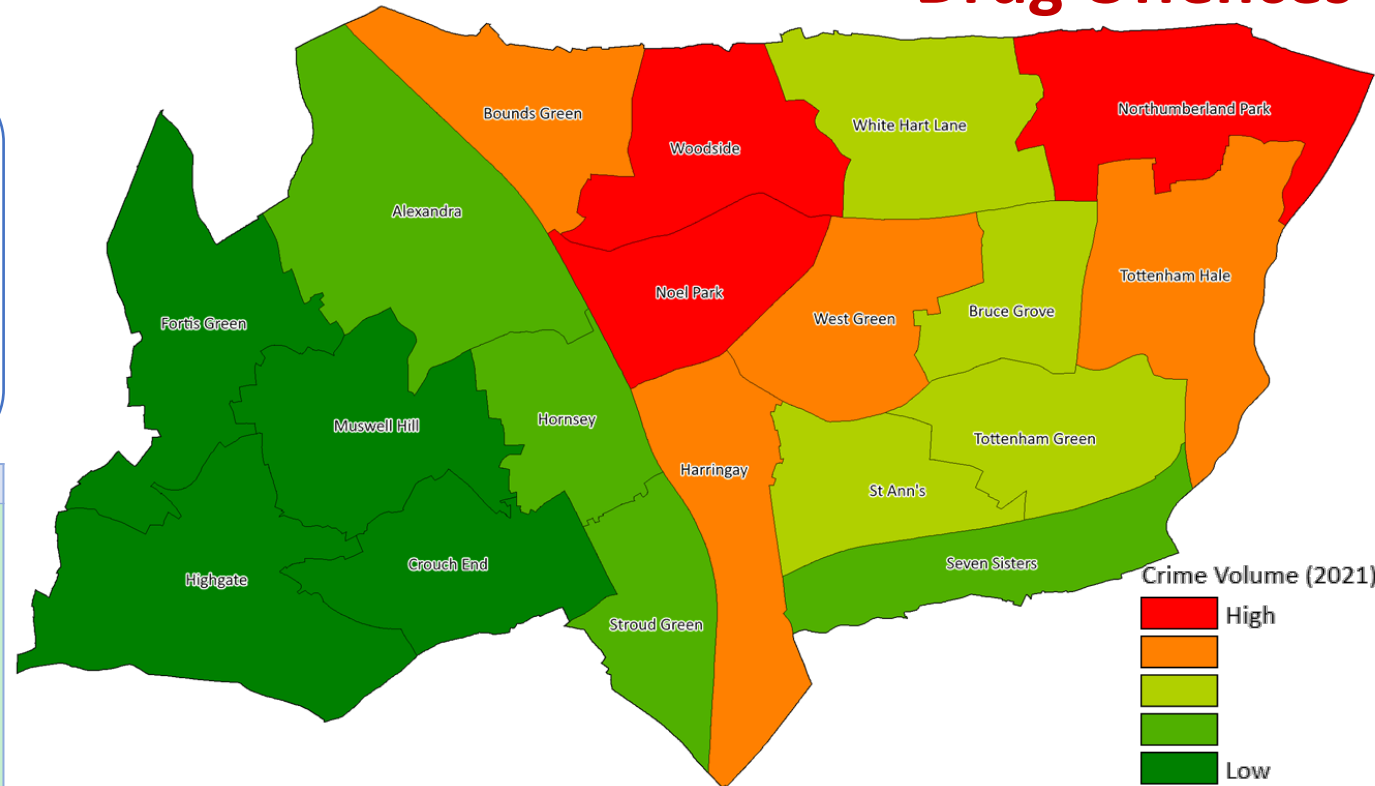


- The age-standardised mortality rate from drug poisoning related deaths in Haringey has been falling since 2015-17 as the average rates in London and England have continued to increase.
- The death rate in 2018-20 (4 per 100,000) is significantly lower than the England average (7.6 per 100,000).

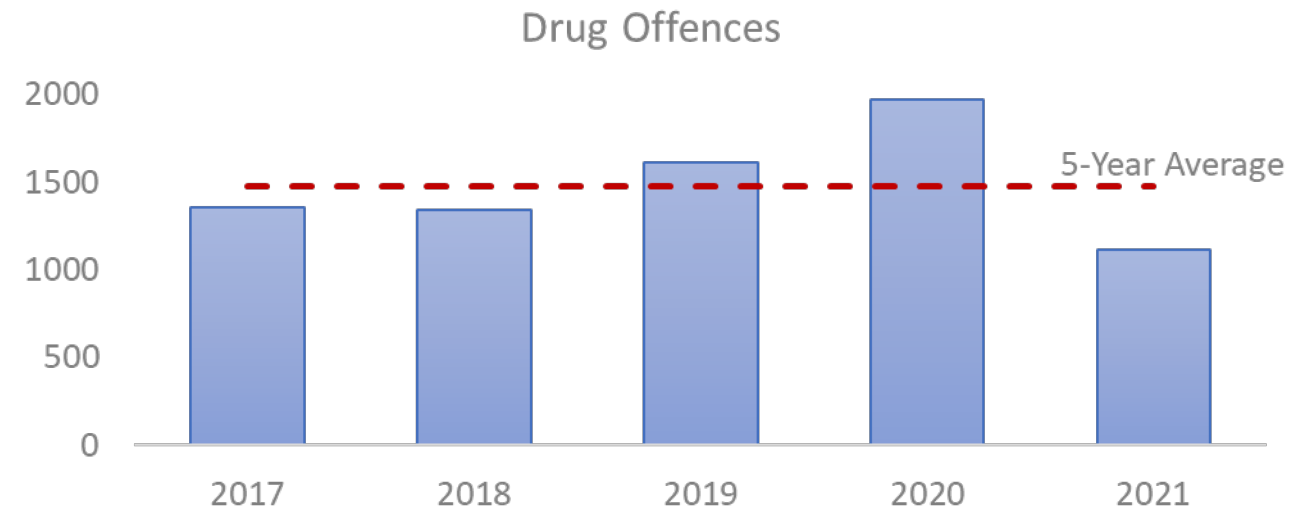
Note: Age-standardised mortality rates per 100,000 population, standardised to the 2013 European Standard Population.

Source: Office for National Statistics

- Drug offences are the possession, consumption, supply of or the intent to supply illegal drugs. This also includes the trafficking of drugs.
- Haringey has experienced a 43.4% reduction in drug offences during 2021. 18 wards recorded a reduction in drug offences, with only Stroud Green experiencing an increase.
- 2021 levels of drug offences were below the 5-year average.



Ward	2020	2021	Change
Alexandra	51	41	-20%
Bounds Green	90	86	-4%
Bruce Grove	125	63	-50%
Crouch End	13	12	-8%
Fortis Green	15	7	-53%
Harringay	90	68	-24%
Highgate	13	7	-46%
Hornsey	57	42	-26%
Muswell Hill	19	9	-53%
Noel Park	169	110	-35%
Northumberland Park	223	151	-32%
Seven Sisters	89	43	-52%
St Ann's	112	50	-55%
Stroud Green	19	36	89%
Tottenham Green	309	64	-79%
Tottenham Hale	217	70	-68%
West Green	124	91	-27%
White Hart Lane	128	64	-50%
Woodside	106	100	-6%
Haringey Total	1969	1114	-43.4%









National
Background
evidence -
Summary of Dame
Carol Black's
independent
review on Drugs
2021: key findings

- an estimated 300,000 people in England use opiates and or crack cocaine
- disinvestment in adult treatment with an **even greater reduction in funding for young people's specialist substance misuse services** and a growing level of unmet need
- there is a lack of oversight and accountability at a local and national level
- prolonged shortage of funding has depleted the workforce, resulting in a loss of skills, expertise and capacity from this sector
- caseloads have grown too high reducing the quality of treatment – 40 maximum
- there is a lack of specialist services, including inpatient detoxification and residential rehabilitation
- recovery support has been underfunded, including housing and employment support, and recovery communities
- there are high levels of physical and mental health need, without sufficient focus on drugs and alcohol within NHS and mental health services or within the workforce, and links with drug treatment are far too weak
- more than a third of people in prison are there due to crimes relating to drug use
- too few offenders are in treatment to make lasting change to their behaviour

Government response - From Harm to Hope 10 year drug strategy

Overview



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

1. Breaking Drug Supply Chains:

The UK is Europe's largest heroin market The heroin and crack-cocaine market is estimated to represent [£5.1 billion per year](#) of the illegal drugs

Ministry of Justice plans include

- ✓ restricting upstream flow – preventing drugs from reaching the country
- ✓ securing the border – a ring of steel to stop drugs entering the UK
- ✓ **targeting the 'middle market' – breaking the ability of gangs to supply drugs wholesale to neighbourhood dealers**
- ✓ going after the money – disrupting drug gang operations and seizing their cash
- ✓ **rolling up county lines – bringing perpetrators to justice, safeguarding and supporting victims, and reducing violence and homicide**
- ✓ **tackling the retail market – so that the police are better able to target local drug gangs and street dealing**
- ✓ restricting the supply of drugs into prisons – technology and skills to improve security and detection
- **Action** -Over the next three years, the strategy aims to:
 - **Close 2,000 more county lines distribution chains**
 - **Disrupt 6,400 organised criminal gangs**
 - **Recruiting 20,000 more police officers to grow Regional Organised Crime Units (ROCUs)**
 - **Utilising technology and developing the security and detection workforce to eradicate the flow of drugs into prisons**

2. Deliver a world-class treatment and recovery system:

£780 million ring-fenced investment for **the first three years**. This figure represents the “largest ever increase in treatment and recovery funding” and will help to deliver:

- ✓ 1. rebuild local authority commissioned substance misuse services, improving quality, capacity and outcomes
- ✓ 2. rebuilding the professional workforce
- ✓ 3. better integration of substance misuse services with physical and mental health services
- ✓ 4. improving access to accommodation alongside treatment – access to quality treatment for everyone sleeping rough, and better support for accessing and maintaining secure and safe housing
- ✓ 5. improving employment opportunities – employment support rolled-out across England and more peer support linked to Jobcentre Plus services
- ✓ 6. increasing referrals into treatment in the criminal justice system – specialist drug workers to support treatment requirements as part of community sentences so offenders engage in drug treatment
- ✓ 7. keeping prisoners engaged in treatment after release – improved engagement of people before they leave prison and better continuity of care into the community

3. Achieving a shift in demand for recreational drugs:

With around three million people across England and Wales reporting having used drugs in the past year, this goal requires a “generational shift in the use of drugs”. To facilitate this societal shift, the strategy aims to develop a world-leading evidence base, which in turn hopes to:

- ✓ Develop a ambitious new research backed by a cross-government innovation fund to test and learn and drive real-world change
- ✓ 2. Applying tougher and more meaningful consequences – decisive action to do more than ever to target more people in possession of illegal drugs, and a White Paper next year with proposals to go further
- ✓ **3 School-based prevention and early intervention – including a clear expectation that all pupils will learn about the dangers of drugs and alcohol during their time at school**
- ✓ **4. supporting young people and families most at risk of substance misuse – investing in a range of programmes that provide early, targeted support.**

Local Context: Haringey drug treatment new system funding

Table below shows existing core funds for substance misuse services and new funding coming into Haringey from government to support implementation of national drugs strategy (in green)

Source	2021-22 (projected)	Year 1 - 2022-23	Year 2 - 2023-24	Year 3 - 2024-25
Public Health Grant - Adult substance misuse spend	£4,189,000.00	£4,189,000.00	£4,189,000.00	£4,189,000.00
Public Health grant - YP substance misuse spend	£399,000	£317,000	£317,000	£ 317,000
Additional local investment – CCG, Adult social care and MOPAC	£277,585.00	£241,585.00	£241,585.00	£241,585.00
Supplemental substance misuse treatment and recovery grant		£795,342	£1,303,160	£2,515,389
Inpatient detoxification grant		£58,911	£58,911	£58,911
Total	£ 4,865,585	£ 5,601,838	£ 6,109,656	£ 7,321,885

Local context: Haringey Treatment performance Indicators and expected increase with new investment

Number of residents in treatment	baseline 21/22	% increase over 3 years
Alcohol	415	20%
Alcohol and non-opiate (crack, cocaine, cannabis etc)	510	34%
Opiate	741	11%
Total adults in treatment	1666	20%
Young people "in treatment"	115	43%

National ambition is 20% increase in those coming into structured treatment (clinical or psychosocial intervention)

Opiates 11% because we don't think there are that many more opiate users not in treatment – unmet need is in non opiates

Young people is high to bring us back to 2017-18 baseline

Initial plans for investment in 2022/23 in Haringey

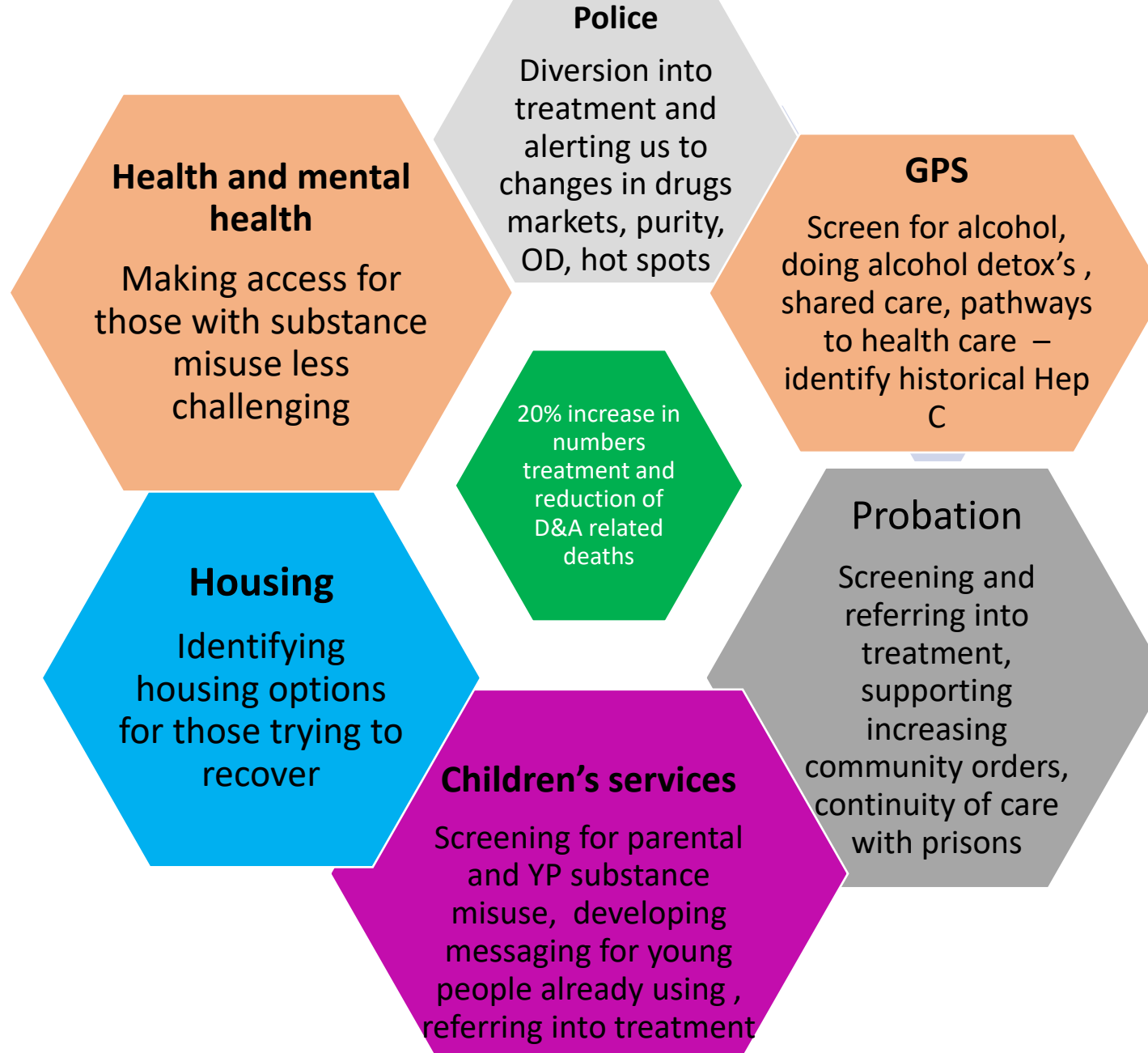
- Year 2 - Rough sleepers drug and alcohol team – (separate funding)
- Peer led all night outreach and drop in
- Peer led recovery project
- Criminal justice team
- New long acting treatment for opiate users
- Harm reduction and recovery workers
- Pharmacy overdose prevention program
- Haringey Works employment worker
- Federation primary care in reach
- Connected Communities in reach

Plans have been developed with staff and service users

Year one of new investment (22/23) is about building back, stronger and fairer. Putting additional services in to help clinical teams and key workers

We need a workforce strategy for year 2

Commitment sought from partners for treatment ambitions



New governance guidance for Local Delivery Partners

Requirements:

- Local Areas will set up Combating Drugs Partnership (CDP) by 1/09/2022
- Nominate a single local Senior Responsible Owner (SRO) who will represent and account for local delivery and performance to central government on the National Combating Drugs Outcomes Framework by 1/08/2022
- Have needs assessment work and a delivery plan in place by the end of 2022.

SRO – options

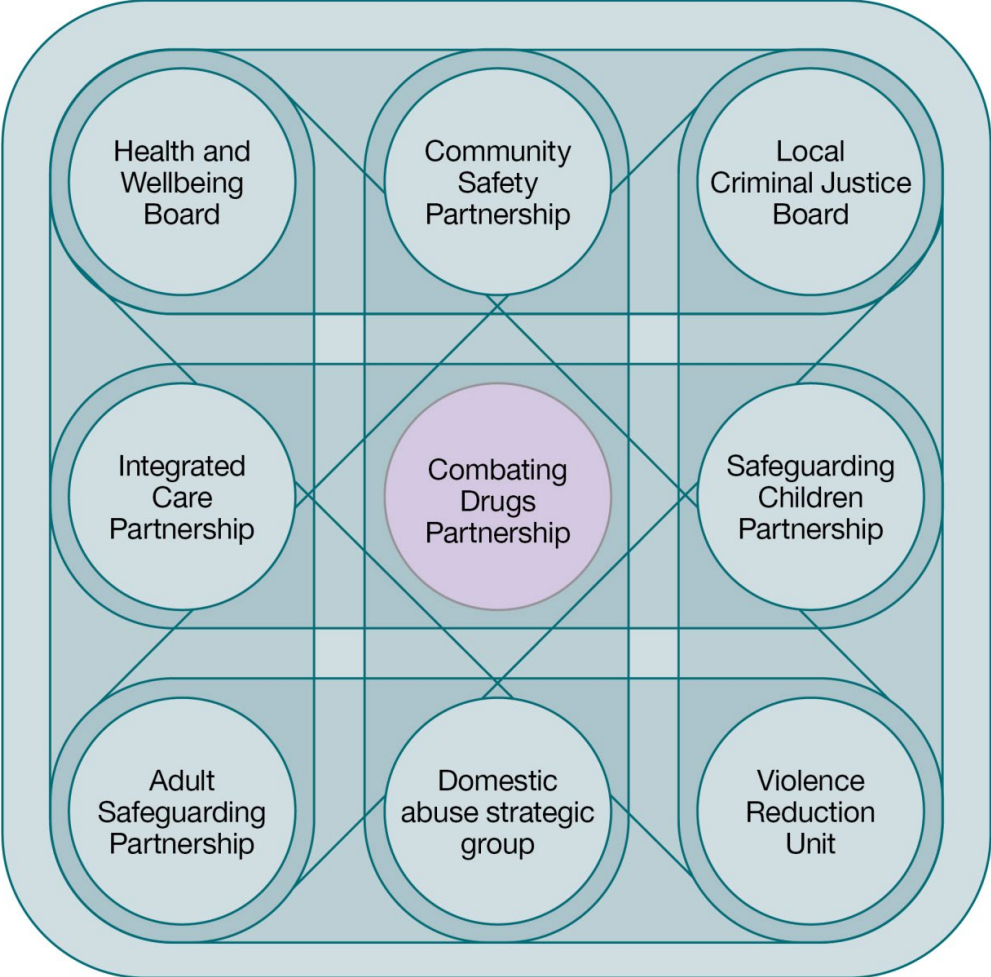
- Local authority elected leader
- Local authority chief executive
- Director of relevant local authority department (e.g. public health, children’s services, housing)
- Regional probation director
- Integrated Care Board (ICB) chief executive
- Senior police officer

Minimum membership of the local strategic partnership body:

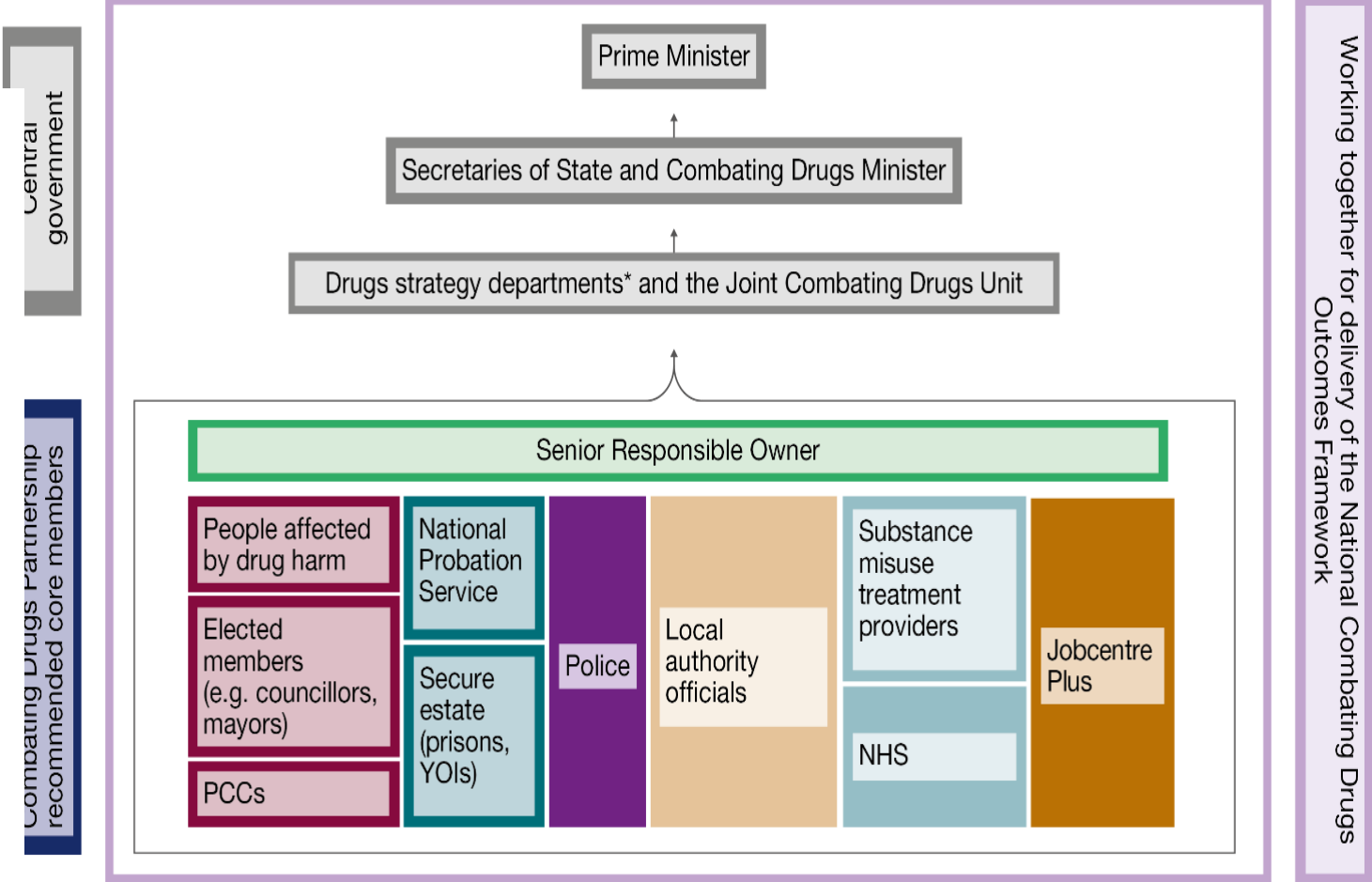


Guidance on Governance Local Combating Drugs Partnership (CDP)

Suggested position of CDP in relation to other boards



Governance on reporting on Combating Drugs Outcomes Framework



Key: External MoJ sector Home Office sector DLUHC sector DHSC sector DWP sector

*Home Office, DHSC, MoJ, DLUHC, DWP, DfE

Working together for delivery of the National Combating Drugs Outcomes Framework