

# Health and Wellbeing Board

1 September 2021

## Alcohol and Drug Harm Reduction Group Update 2021



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### Report of Amanda Healy, Director of Public Health, Durham County Council

#### Electoral division(s) affected:

Countywide

#### Purpose of the Report

- 1 This report provides the Health and Wellbeing Board (HWB) with an update of all activity relating to reducing alcohol and drug harms during 2020-21, the year of the pandemic.
- 2 To update on the refresh of the Alcohol and Drug Harm Reduction Group (ADHRG) Plan on a Page (POP) and Action Plan for 2021-22.
- 3 To reflect on the impact and consequential developments during COVID-19.

#### Executive summary

- 4 The report covers the work of a range of partners engaged in the ADHRG to reduce the impact of alcohol and substance misuse harm and includes updates on:
  - The impact of COVID-19 on alcohol and drug related harms. Nationally and locally alcohol related deaths have increased during the pandemic. Local Drug and Alcohol Recovery Services (DARS) have maintained the vast majority of clients engaged throughout the pandemic which is encouraging.
  - The County Durham Alcohol and Drugs Harm Reduction Group (ADHRG) Plan on a Page (POP) 2021-2025, Action Plan 2021-22 and Terms of Reference (TORs) have been reviewed and updated in line with the Safe Durham Partnership Plan 2021-25.
  - Hospital admissions for alcohol related conditions across the age ranges are significantly higher in the North East region than the national average. Work continues in County Durham to reduce

these figures from both a service and partnership working approach.

- County Durham continues to manage the Balance contract during 2021-22 with Balance's footprint remaining as seven Local Authority areas. Campaign materials from Balance continue to be adopted by County Durham and cascaded to partners to maximise impact at a local level.
- Public Health continues to support licensing to utilise innovative approaches to licensing, which promote Public Health objectives including the vision of an Alcohol Free Childhood.
- The recommendations from the 2017/18 Health Needs Assessment (HNA) on long-term opiate users were reviewed in May 2021. Progress has been made to review medication and offer opportunities for further input from a mental health perspective for opiate clients. Success has been reflected in the increase in Opiate Successful Completions.
- The ADHRG continue to meet quarterly to review substance misuse related deaths (SMRD's) and implement any learning: including increased naloxone provision across the county. County Durham has the lowest rate of drug related deaths per 100,000 population in the North East region.
- The Drug and Alcohol Recovery Service (DARS) has performed well over the pandemic, maintaining the majority of clients and improving successful completion rates across all drug and alcohol treatments to above national levels.
- The Women's Recovery Academy (WRAD) has been approved and has been running three days a week from Eden House, Consett since March 2021. A timetable of work has been developed and women have been recruited to the programme.
- Opportunities to attract new funding from Public Health England (PHE) has resulted in three partnership submissions.
  - i) Universal Funding has been secured (£545k) to help reduce crime in relation to drug use in County Durham.
  - ii) County Durham has led a sub-regional consortia of LAs for commissioning inpatient detoxification beds at a value of £580,000. This programme aims to bring inpatient detoxification options to the LA9 areas (County Durham, Darlington, Stockton-On-Tees, Middlesbrough, Hartlepool,

Redcar and Cleveland, South Tyneside, Sunderland and Gateshead).

- iii) The outcome of a bid for £274k to address homelessness prevention, rough sleeping and substance misuse is pending.
  - A collaborative partnership approach to tackle drug and alcohol related harm in County Durham has been maintained and developed during 2020/21. All meetings have continued virtually with engagement from partners increasing on last year due to no travel commitments.
- 5 There are no areas of work that are highlighted as a risk or require an exception report.

### **Recommendation(s)**

- 6 Members of the HWB are recommended to:
- (a) Note the content of this report as an annual update on the progress of the ADHRG.

## Background

- 7 The Crime and Disorder Act 1998 and subsequent legislation requires responsible authorities in Local Authority areas to develop and implement a Partnership Plan. In County Durham this partnership is called the Safe Durham Partnership.
- 8 The Safe Durham Partnership (SDP) Plan highlights alcohol and substance misuse related harm as a priority and has brought together a range of stakeholders engaged in alcohol and drug harm reduction to oversee the work in this area.
- 9 This report provides the HWB with an update on all activity relating to reducing alcohol and drug harms in 2020-21, during the year of the pandemic and highlights new developments to address need in local communities.

## Impact of Covid-19 on Alcohol and Drug Harms

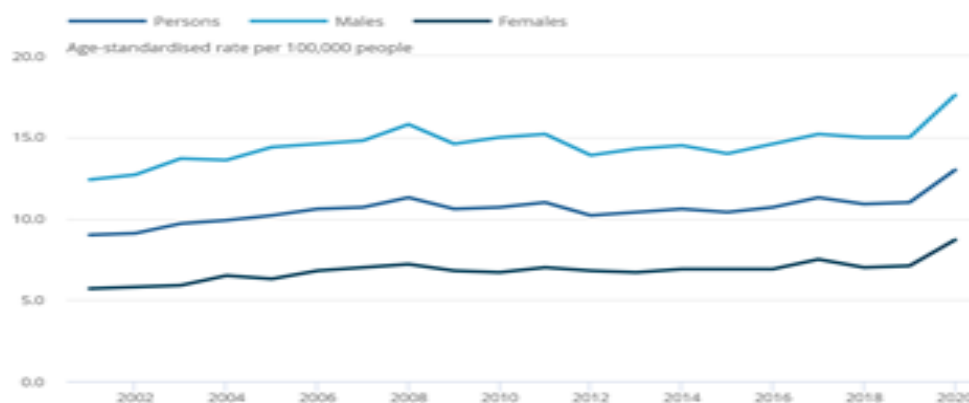
### Alcohol Harms

- 10 An Office for National Statistics report has revealed there were 7,423 deaths linked to drinking last year, which was a fifth more than in 2019 and the highest number since records began in 2001. Provisional data for England and Wales show there were 5,460 deaths related to alcohol-specific causes registered in the first three quarters of 2020 (Jan to Sept during the commencement of the Covid-19 pandemic), a 16.4% increase compared with the same nine-month period in 2019.

Graph: The alcohol-specific death rate for 2020 was 18.2% higher than the previous year

**Figure 1: The alcohol-specific death rate for 2020 was 18.2% higher than the previous year**

**Age-standardised alcohol-specific death rates per 100,000 people, by sex; England and Wales, deaths registered between 2001 and 2020**



- 11 In the North East death rates from alcohol rose from 16.6 per 100,000 people in 2019 to 20.0 per 100,000 people in 2020 – a rise of around 20.5%. Alcohol specific deaths rose quickly from April 2020 as the pandemic resulted in the first national lockdown.
- 12 Most deaths were related to long-term drinking problems and dependency – with alcoholic liver disease making up 80 per cent of cases. This may be due to a lack of willingness to access treatment, or an increase in alcohol intake. Men living in the most deprived areas were four times more likely to die from alcohol than men living in the most affluent areas.
- 13 Unfortunately, as with Covid-19, the bulk of alcohol harm falls on the most deprived people in our communities and this is particularly worrying in the North East where, even before Covid-19, the North East already suffered from the highest rates of alcohol-related death and illness in England.
- 14 The number of alcohol seizures (all ages) has seen a reduction throughout 2020-21 due to the impact of the Covid-19 pandemic and lockdown restrictions – however this area of work is expected to be reinstated more heavily later in 2021.
- 15 Hospital admission episodes for alcohol-specific conditions in County Durham has risen over the last five-year period to a rate of 696 per 100,000 population in 2019/20. This is lower than the North East regional average of 936 per 100,000 population but significantly worse than the national average of 644 per 100,000 population.
- 16 A similar picture is shown when looking at admissions to hospital in County Durham for alcohol-related conditions (narrow) in 2018/19. The rate locally is lower than the regional average but higher than the England average. The figure of 758 per 100,000 is similar to recent years for County Durham. The North East sits at 908 per 100,000 and the England average is 664 per 100,000.

### Drug Harms

- 17 Numbers in treatment during the pandemic have remained consistent; this is in contrast to other local areas. Spring 2020 did not see a drop in numbers or referrals as predicted. The latest figures for numbers in treatment and successful completions are presented later in the report in paragraph 61 under the Drug and Alcohol Recovery Service update.
- 18 Police reported incidents which were drug related increased to 3.5% in 2020/21 compared to 2.8% in 2019/20. However, anti-social behaviour which was drug related reduced to 1.4% in 2020/21 from 1.6% in 2019/20.

- 19 Office of National Statistics (ONS) drug related death data on 2018-2020 registrations was released on 3 August 2021. The North East continues to have the highest rate of deaths relating to drug misuse with 9.9 deaths per 100,000 population compared to the national England average of 5.0 per 100,000 population.
- 20 County Durham's **rate** is 8.3, one of the lowest in the North East region. However, this can be misreported in the press as County Durham has the highest **total number** of deaths due to the larger size of the population. Please see further detail in the SMRD section of the report in paragraphs 45 to 53.
- 21 Work is on-going to address Covid-19 vaccine inequality in County Durham. DARS clients are not classified as an eligible group by the Joint Committee on Vaccination and Immunisation (JCVI) in terms of attending an addiction service. However, many clients fall into eligible generic cohorts as a result of long-term conditions or homelessness. The service has segmented these clients and successfully supported them to access the vaccine. Spectrum staff, the clinical arm of the DARS, have also accessed training to be in a position to deliver the vaccine should the JCVI position change.

### **Alcohol and Drugs Harm Reduction Group Update**

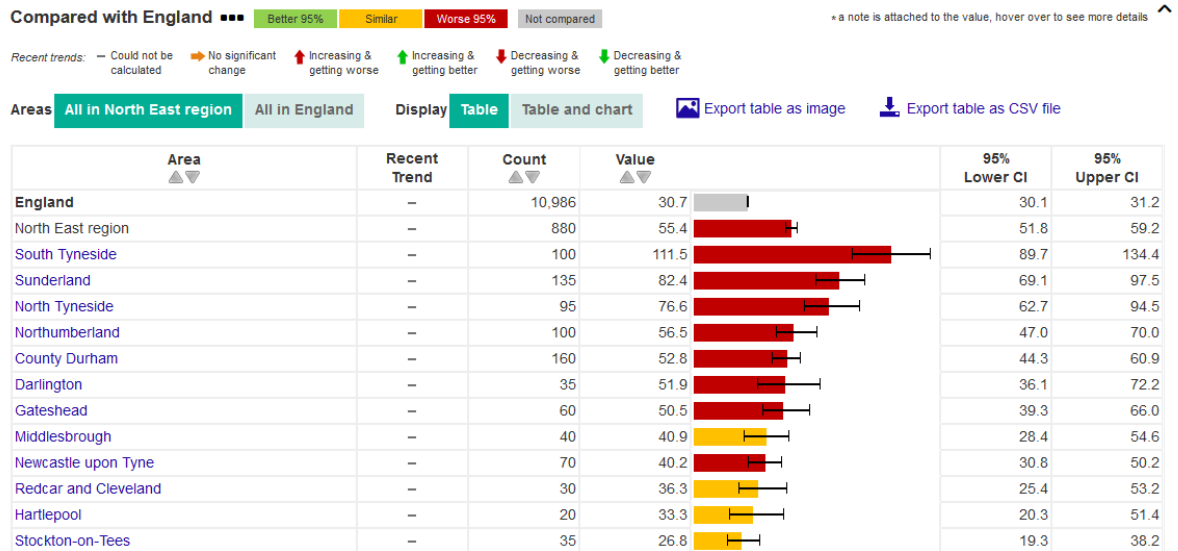
- 22 The County Durham Alcohol and Drugs Harm Reduction Plan on a Page (POP) 2021-2025 has been refreshed and aligned to the Safer Durham Partnership Plan 2021-25. 61 of the 86 actions from the 2020/21 action plan have been completed and 25 are ongoing. New programmes of work from all partners on the group have also been included. The action plan is a collaborative multi-agency document that is updated quarterly and provides the group with clear objectives.
- 23 The Terms of Reference and membership have been updated: all tabled at the ADHRG meeting in June 2021. The refreshed performance indicators for the group continue to be well received; they provide a narrative alongside the figures to support partners' understanding of them in practice.
- 24 The Alcohol Declaration 2015 is to be reviewed and updated by the group in 2021/22.

### **Hospital Admission Episodes**

- 25 Hospital admissions between 2017/18 - 19/20 in the North East for conditions specifically in relation to alcohol for those people aged under 18 years are significantly higher than the England average (55.4 per 100,000 in NE compared to 30.7 per 100,000 England average). County Durham is lower than the NE average and sits around the middle of the

table in relation to the other north east regions at 52.8 per 100,000. See Figure 1 below.

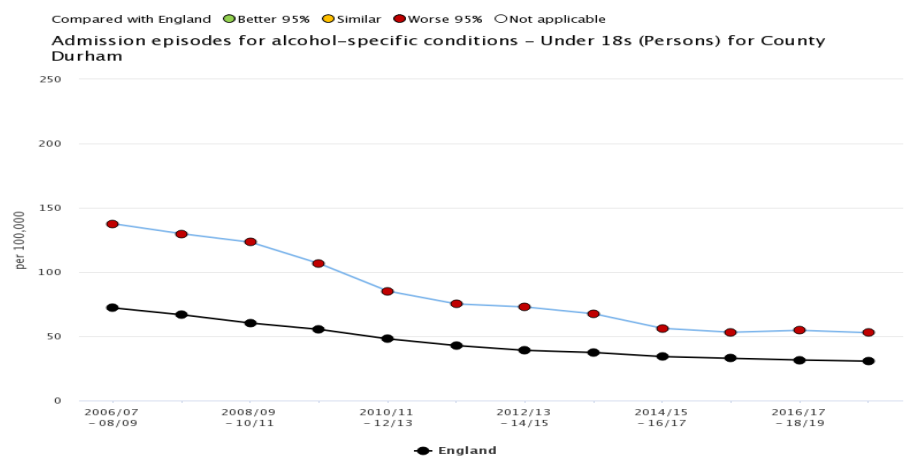
### Admission Episodes for alcohol-specific conditions: Under 18s 2017/18 – 19/20 (Figure 1)



Source: Calculated by Public Health England: Population Health Analysis (PHA) team using data from NHS Digital - Hospital Episode Statistics (HES) and Office for National Statistics (ONS) - Mid Year Population Estimates.

26 Encouragingly this figure has been declining since 2006/7 - 08/09 when it was at 137.9 per 100,000. See Figure 2 below.

### Admission Episodes for alcohol-specific conditions: Under 18s 2006/7 – 2019/20 (Figure 2)



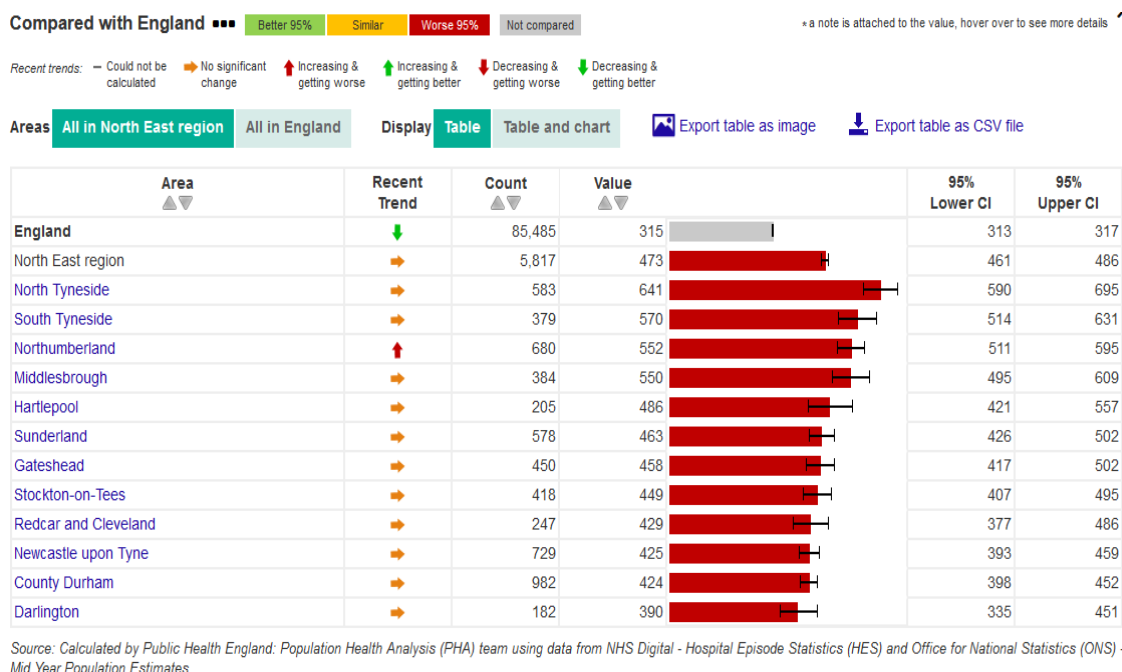
27 Work to address this indicator in County Durham includes a specific children, young peoples and families team within the drug and alcohol recovery service (DARS), dedicated training within schools and the

university, partnership working with a range of colleagues including Durham Constabulary, children’s social care and early help.

28 The North East regional alcohol office, Balance, has been working to address this agenda with a specific campaign, targeted at parents of under 18s, called ‘What’s the Harm?’. This campaign details the health risks and associated harms of any under-age drinking. We also continue to work with Balance to introduce a Minimum Unit Price (MUP) around alcohol to reduce the availability and accessibility of cheap high strength alcohol to young people.

29 Hospital episodes in 2018/19 in the North East for conditions related to alcohol for those people aged under 40 years are significantly higher than the England average (472 per 100,000 in NE compared to 315 per 100,000 England average). County Durham is lower than the NE average, the second lowest local authority area in the region at 424 per 100,000. See Figure 3 below.

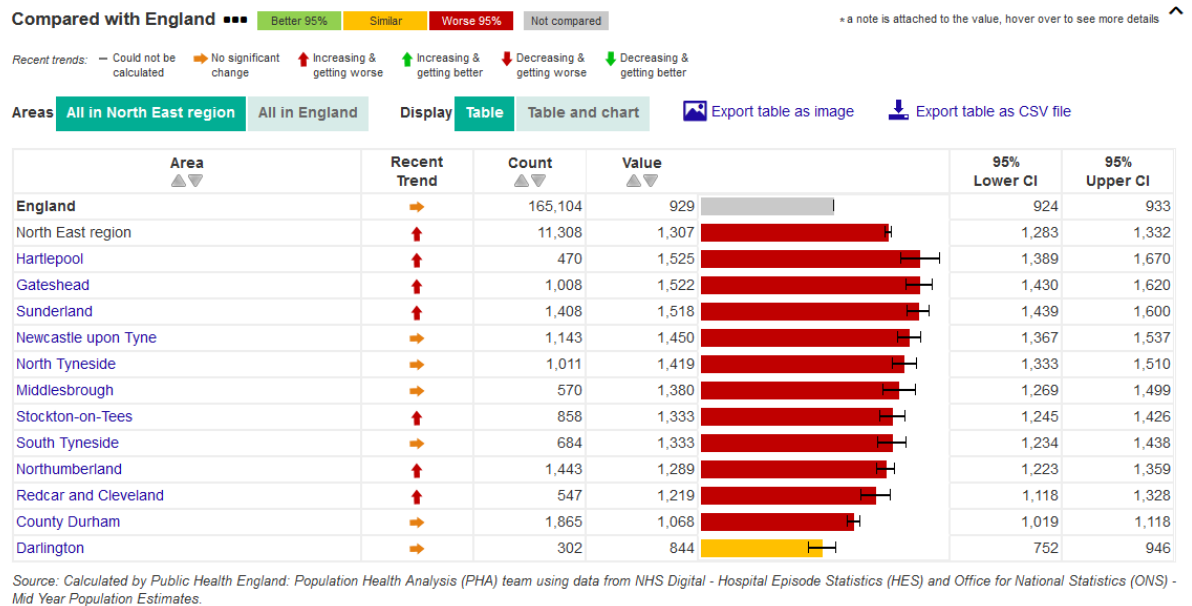
Admission episodes for alcohol-related conditions (Narrow): Under 40s (Persons) 2018/19 (Figure 3)



30 Hospital episodes in 2018/19 in the North East for conditions related to alcohol for those people aged 40-64 years are significantly higher than the England average (1,307 per 100,000 in NE compared to 929 per 100,000 England average). County Durham is lower than the NE average, the second lowest local authority area in the region at 1,068 per 100,000. See Figure 4 below.

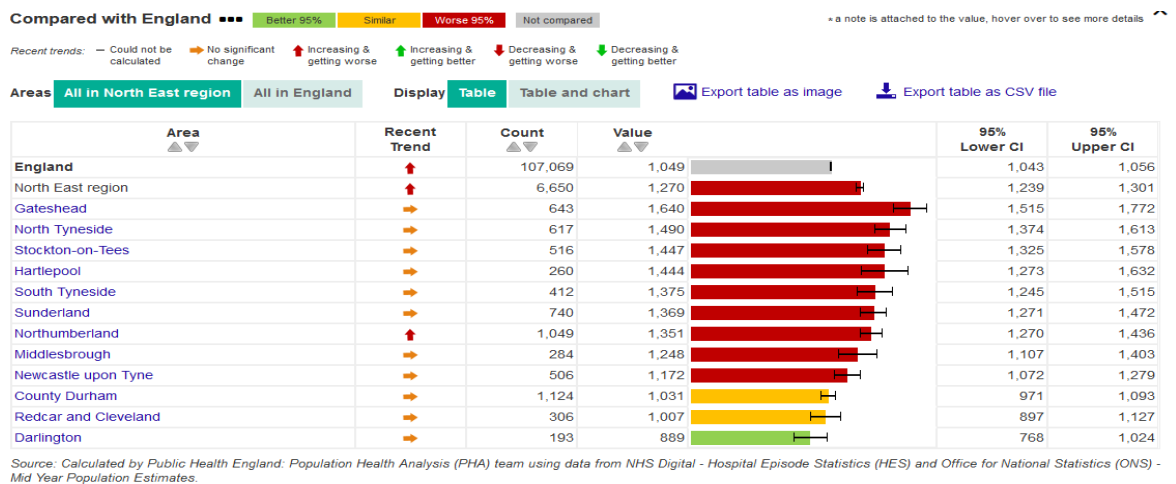


## Admission episodes for alcohol-related conditions (Narrow): 40-64 years (Persons) 2018/19 (Figure 4)



31 Hospital episodes in 2018/19 in the North East for conditions related to alcohol for those people aged over 65 years are significantly higher than the England average (1,270 per 100,000 in NE compared to 1,049 per 100,000 England average). County Durham is lower than the NE average, and not significantly worse than the England average but categorised as similar at 1,031 per 100,000. See Figure 5 below.

## Admission episodes for alcohol-related conditions (Narrow): Over 65 years (Persons) 2018/19 (Figure 5)



## Balance – The North East Alcohol Office

32 County Durham continues to manage the Balance contract during 2021-22 with Balance's footprint remaining as seven Local Authority areas.

Campaign materials from Balance continue to be adopted by County Durham and cascaded to partners to maximise impact at a local level.

- 33 **“Alcohol - Not the Answer”** re-launched in February 2021 in response to increasing concerns about rising levels of alcohol consumption during Covid-19. This was particularly amongst people who were already drinking above the Chief Medical Officer’s low risk guidelines, and who were likely to be drinking even more as a result of pressure and anxiety during the pandemic. The campaign underlines the broad range of physical and mental health problems alcohol causes, why it is important to reduce drinking, and was targeted at men and women of all ages who are drinking more during Covid-19, with a focus on C2DE socio-economic groups.



- In May 2021, Balance launched the next phase of this campaign, **“What’s the harm?”**, aimed at helping North East parents to understand the Chief Medical Officer’s guidance around children and alcohol. The summer is often a peak time for teenage alcohol consumption, but the easing of lockdown has moved some of the issues usually experienced during the summer holidays forward in some local areas. The 2021 campaign’s key messages highlight how alcohol consumption before the age of 18 can harm the developing body and brain, raise depression and anxiety and lead to risk taking behaviour.



- The Council’s communications and marketing approach to this campaign has highlighted key messages; trying not to stockpile alcohol and limit the amount of alcohol bought, opting for non-alcoholic drinks to help stay within the 14 unit low-risk weekly guidelines, the importance of being a good role model to your kids around alcohol, which includes how often and how much alcohol is consumed.

- A funding award given to Public Health by the Contained Outbreak Management Funding (COMF) of £30k will enable the council to amplify the Balance alcohol campaigns at a local level. This activity will help to raise continued awareness about alcohol harms and promote referral and mechanisms helping people to access the County's Drug and Alcohol Recovery Service (DARS).
- 34 Balance will continue to work on behalf of the seven local authorities for broader advocacy activity to promote evidence-based policy change. This includes advocating for action around alcohol pricing, particularly the introduction of Minimum Unit Pricing (MUP) in the North East and increases in alcohol duty in England.
  - 35 A study led by researchers from Newcastle University was published in *The Lancet Public Health* on 28 May 2021. It showed a minimum unit price (MUP) policy for alcohol introduced in Scotland in 2018 continues to have a positive impact more than two years on. The study also found that a more recently introduced MUP policy for Wales has had a similar impact on heavier drinking households – despite the policy being launched in March 2020 at the start of the national Covid-19 lockdown period, where many adults were reportedly drinking more at home. The greatest reductions overall were seen in the purchase of ciders and spirits.
  - 36 The ADHRG continues to support the introduction of a North East MUP and, with Balance, are working to communicate the benefits and gain local support.
  - 37 In February 2021 the ADHRG were called to action by Balance to advocate for a 2% increase in alcohol duty by joining members of the Alcohol Health Alliance to take and share the **email-your-MP action**.

### **Alcohol Licensing in Durham**

- 38 In response to the Covid-19 lockdown the capacity for alcohol licensing teams has been reduced. However, work is now stepping back up. Since March 2021 Durham has seen 63 requests for new, or changes to, alcohol licences.
- 39 Public Health shares recommendations for off-license information provided by the Chief Medical Officer (CMO) guidance on alcohol harms. Information is displayed in at least one prominent point on the shop floor or point of sale, unit information is displayed in the alcohol aisle, alcohol will not be displayed adjacent to, or beside products aimed at children.
- 40 Licensed premises (pubs and restaurants) are also asked to ensure free (tap) water is available, the offer is visible to customers, and the Chief

Medical Officer (CMO) guidance on alcohol related health is displayed in at least one prominent point per floor. In the premises, unit information and calorie data (if available) has to be displayed on any drink menu.

- 41 Public Health continues to support licensing to promote innovative approaches to licensing, which highlight public health objectives including the vision of an Alcohol Free Childhood.
- 42 Trading Standards activity relating to underage sales is beginning to recommence, and the police pathway into Humankind for under 18's Alcohol Seizures is also being reinstated. This referral pathway ensures that all under 18s who have alcohol seized by the police are referred and supported into the DARS.

### **Holistic Needs Assessment (HNA) for Long Term Opiate Users**

- 43 The recommendations from the 2017/18 HNA were reviewed in May 2021. Work has been completed and to date this includes a full review of prescribing practice in the DARS, increased bespoke support for families and women, work with primary care to ensure responsible prescribing practices, a heroin assisted treatment cost benefit analysis and increased naloxone supply across the county.
- 44 Ongoing work towards meeting the health needs of opiate users from the original recommendations made in the 2018 report, and emerging themes since, continues. This focuses on strengthening partnership working across the sector and working towards a whole systems approach to harm reduction and recovery.

### **Substance Misuse Related Deaths (SMRD)**

- 45 The SMRD process continues to follow the five key stage process following notification –Information gathering / Analysis / Lessons learnt / Implementing change / Accountability and governance.
- 46 Office of National Statistics (ONS) drug related death data 2018-2020 registrations was released on 3 August 2021. The North East continues to have the highest rate of deaths relating to drug misuse with 9.9 deaths per 100,000 population compared to the national England average of 5.0 per 100,000.
- 47 County Durham's rate is 8.3, one of the lowest in the North East region. However, this can be misreported in the press as County Durham has the highest number of deaths (117) due to the larger size of the population. Please see Table 1 below.

Table 1: Number of deaths and age-standardised mortality rate for deaths related to drug misuse, persons by North East local authority, England and Wales, deaths registered between 2018-2020, ONS 2020

Area Codes	Area Names	2018-20			
		Deaths	Rate <sup>1</sup>	Lower Confidence Limit <sup>2</sup>	Upper Confidence Limit <sup>2</sup>
E92000001	ENGLAND	8,185	5.0	4.9	5.1
E12000001	NORTH EAST	731	9.9	9.1	10.6
E06000047	County Durham	117	8.3	6.7	9.8
E06000005	Darlington	33	10.8	7.4	15.2
E06000001	Hartlepool	42	16.3	11.7	22.1
E06000002	Middlesbrough	63	16.9	12.9	21.7
E06000057	Northumberland	61	7.0	5.4	9.1
E06000003	Redcar and Cleveland	35	9.6	6.6	13.3
E06000004	Stockton-on-Tees	48	8.5	6.3	11.3
E11000007	<b>Tyne and Wear (Met County)</b>	332	10.2	9.1	11.3
E08000037	Gateshead	66	11.3	8.7	14.4
E08000021	Newcastle upon Tyne	98	11.9	9.6	14.6
E08000022	North Tyneside	39	6.4	4.5	8.8
E08000023	South Tyneside	53	12.6	9.4	16.4
E08000024	Sunderland	76	9.8	7.7	12.3

- 48 Drug-related deaths have been on an upward trend for the past decade. The reasons behind this are complex and differ by drug type. The overall trend is driven primarily by deaths involving opiates, but also by an increase in deaths involving other substances like cocaine.
- 49 There is an ageing cohort of drug users, likely to be suffering from the effects of long-term drug use and becoming increasingly susceptible to a fatal overdose. Rates of drug-misuse death continue to be elevated among those born in the 1970s, with the highest rate in those aged 45 to 49 years.
- 50 Also new trends in taking specific drugs, including gabapentinoids and benzodiazepines, alongside heroin may increase risk of overdose.
- 51 Anecdotal data suggests that Covid-19 lockdowns have increased isolation and driven up drug deaths but further research is needed on this theory.
- 52 An SMRD review meeting is held quarterly for County Durham, coordinated and chaired by County Durham Public Health. This meeting is to understand the local picture and review a snapshot of the deaths to support learning to prevent future SMRDs.
- 53 Preventative measures implemented following learning from the review of deaths by the SMRD group include an increase in naloxone provision within sheltered accommodation, Durham Constabulary and

pharmacies as well as work with primary care to ensure responsible prescription of gabapentinoids.

## **Naloxone**

- 54 Work has been ongoing to extend the availability of naloxone, including for service users, their family members and carers and other key stakeholders, such as the police, involved in the management of substance misusers.
- 55 Newly acquired Public Health England Universal Funding, will enhance the capacity for naloxone provision and extend its use in police first responders. This provision will include a nasal spray to help encourage front line officers to feel confident with its administration.
- 56 66 Naloxone kits were supplied across the County in 2021/22 Q1.

## **The Drug and Alcohol Recovery Service (DARS)**

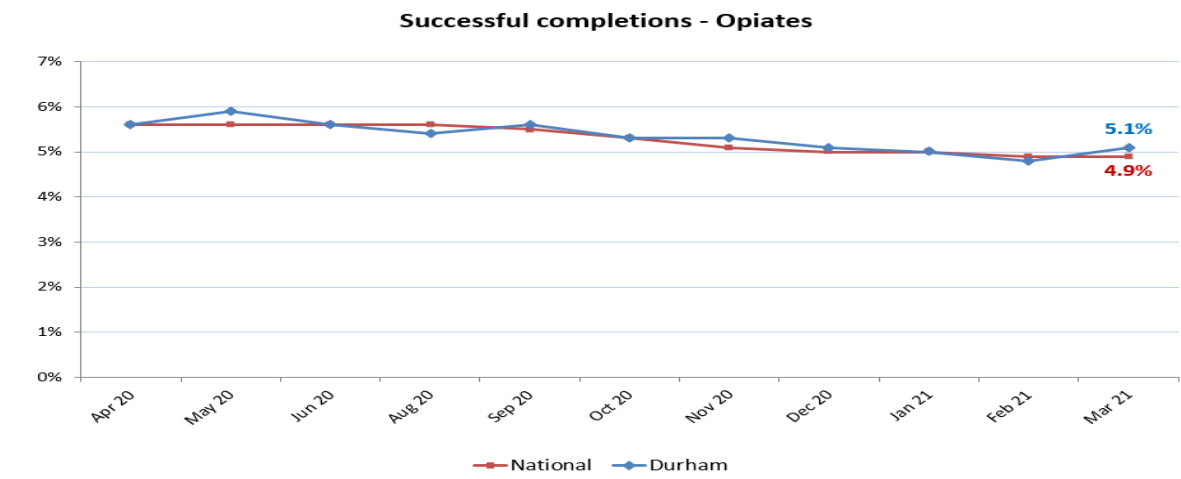
- 57 The Drug and Alcohol Recovery Service (DARS) provides a holistic approach for any local resident using substances across County Durham across the life course. All clients are assessed by the DARS for their needs when initially accessing support, should their substance misuse escalate, or personal circumstances change. The DARS provides a family focus for anyone entering treatment and also has a bespoke service for children and young people.
- 58 The DARS maintained its service delivery throughout Covid-19. Utilising a blended approach to engaging clients, including by virtual-means for those who were stable and for more complex clients a retention of 1-1 support, meant a high level of clients where retained.
- 59 Prescriptions were dispensed over longer time periods due to lockdown requirements. Despite initial concerns, clients reported a new sense of stability in their clinical supervision. This will be taken forward as learning by the DARS as the clinics return to business as usual.
- 60 The DARS continues to perform well. There were 2,866 clients in treatment in Q4 2020/21. This is a small reduction of 149 clients on the same time period last year. In light of the pandemic the maintenance of the majority of clients is excellent.
- 61 Table 2 below breaks this number down into months and treatment type.

Table 2: Numbers in treatment for DARS (January 2021 – March 2021)

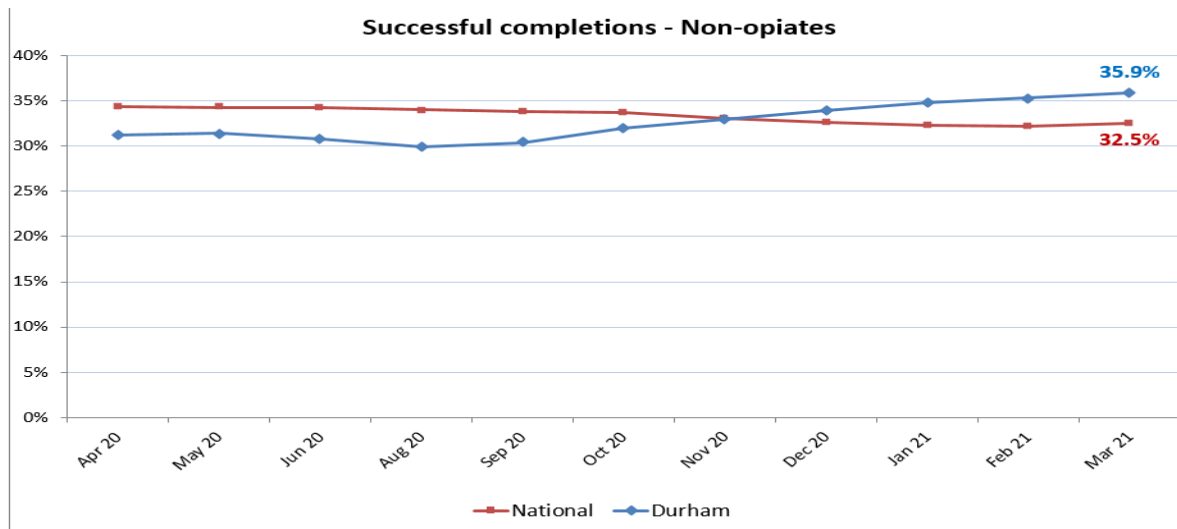
Numbers in Treatment Q4 2020/21			
	January 2021	February 2021	March 2021
<b>Opiates</b>	1451	1446	1446
<b>Non-opiates</b>	419	436	428
<b>Alcohol</b>	1003	985	992

62 Successful completions for all drug treatments within DARS have increased. Opiates successful completions are above the national average at 5.1%. Non-opiate successful completions have been rising since August 2020 and are also reflective of the national average at 33.9%. This is the first time since 2015 that non-opiate successful completions have risen to this level. See graphs in Figures 6 and 7 below.

Successful completions for Opiates in County Durham compared to national figure 2020/21 (Figure 6)

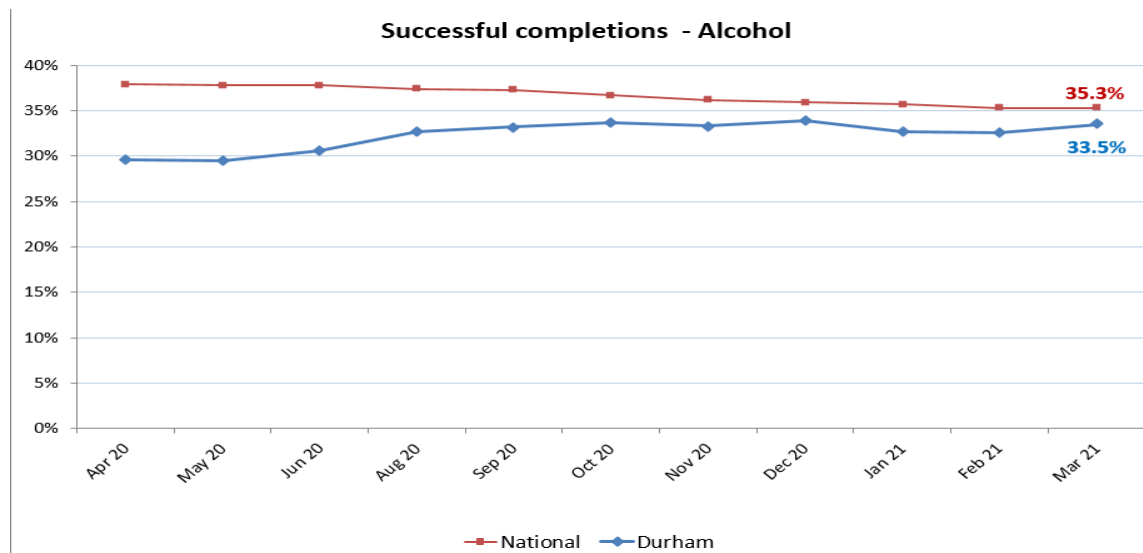


Successful completions for Non-Opiates in County Durham compared to national figure 2020/21 (Figure 7)



63 Alcohol successful completions in County Durham have been below national levels for many years. However, in March 2021 they were at their highest point since 2015 at 33.5% with the narrowest gap between them and the national figure of 35.3%. See graph in Figure 8 below.

Successful completions for Alcohol in County Durham compared to national figure 2020/21 (Figure 8)



64 Following the development of an improvement action plan due to the 'requires improvement' rating of the DARS in the CQC inspection in February 2018, a further inspection was expected in March 2020. Unfortunately, this has been postponed due to Covid-19. The



monitoring of the improvement plan's implementation continues to take place as part of the quarterly contract meetings and the CQC are happy with progress of the DARS.

- 65 The CQC national team have been approached by Public Health to schedule a reinspection to help reflect the significant service improvement. The outcome of this discussion is still pending (August 2021).
- 66 Work continues to deliver DARS services differently in East Durham following the termination of the lease at Ridgemount House. This includes a new recovery centre in Horden. The work is aligned to the Making Every Adult Matter programme (MEAM) pilot in the Horden area as part of the Horden Together work.
- 67 The DARS developed a new website aimed at encouraging people to assess their own alcohol consumption levels. The website is [www.drinkcoach.org.uk](http://www.drinkcoach.org.uk)
- 68 In Quarter 4 2020/21, 2,359 people visited the website leading to 1,467 completing the AUDIT tool. Of those, 32% were low risk drinkers, 44% had increasing risk, 13% were high risk drinkers and 15% had possible dependence. 60 referrals into service have been generated since the launch of the website.
- 69 The DARS service specification is currently being reviewed with a view to procure a new service in February 2022.

### **Women's Recovery Centre (WRAD)**

- 70 The Women's Recovery Academy Durham (WRAD) has been approved. A contract modification was agreed in February 2020 for the service to utilise Eden House, Consett, from 1 April 2020 for a WRAD for three days per week and a generic (mixed-sex provision) drug and alcohol recovery service for two days per week.
- 71 The Covid-19 pandemic resulted in the launch of the WRAD being delayed but the DARS has developed a programme of work and recently began a soft launch.
- 72 The innovative WRAD project will see services including police, probation, children's and adults' social care, debt advice, domestic abuse support, and the DARS work together to meet the needs of the most disproportionately effected clients.
- 73 The probation service has provided additional funding towards the WRAD demonstrating their support and commitment to the project.

## **Newly Funded Services**

### Public Health England (PHE) Drug Crime and Harm Reduction Funding

- 74 In March 2021, the government announced an additional £80 million to fund drug treatment in 2021/22 as part of a funding package for reducing crime. The funding has been made available through the Section 31 grant provisions of the Local Government Act 2003.
- 75 A bid was submitted for the Universal Funding element of the grant with Public Health working with Durham Police and Crime Commissioner's Office (PCVC), Humankind and Probation colleagues to design and submit a bid proposal for £545,000 to help reduce crime in relation to drug use in County Durham. The grant has now been approved and plans are in place to implement delivery.
- 76 The focus of the funding is to add value to the current criminal justice team working within DARS by providing additional posts to create and ensure a whole systems approach. This includes court and custody leads, Integrated Offender Management (IOM)/checkpoint workers and specific harm reduction posts to reach the system from beginning to end.

### Public Health England (PHE) Rough Sleeper and Drug and Alcohol Grant

- 77 During 2019 there were around 35 rough sleepers verified in and around the Durham City area. A dedicated rough sleeper team was established and during 2020 there were over 250 reports of rough sleepers across the county, with the team providing accommodation to 163. As part of this initiative a dedicated Rough Sleeper Substance Misuse (RSSM) Worker based within DARS was recruited to provide direct support to rough sleepers, helping to engage them in drug and alcohol treatment and build their recovery capital.
- 78 PHE approached County Durham to bid for funding to address homelessness prevention, rough sleeping and substance misuse. Adding to the current worker model, but extending the services reach into East and South Durham, formed the basis for the bid of £274,000. To address complexity and entrenched behaviours' of the client group, three mental health nurses were also included in the bid, plus a Domestic Abuse Recovery Worker to enhance the connectivity into the domestic abuse system for both victims, perpetrators and their children. We are still awaiting the outcome of the bid.

## LA9 Inpatient Detoxification Unit

- 79 PHE also allocated funding as part of the drug treatment grant for all regions to benefit from funding awarded to regional or sub-regional consortia of LAs for commissioning inpatient detoxification beds. In total funding of up to £10million, ranging from approximately £0.7m to £1.7m has been allocated depending on size of treatment population per region. The spend has been granted for a 12-month period only.
- 80 Following initial discussions with PHE regional teams, Durham County Council was identified as the lead LA to commission the beds across a footprint of nine LAs, as a single commissioning consortium. DCC are negotiating with hospital trusts and hold the funds on behalf of the LA9 region (the other three LAs in the north are working in partnership to commission services via their own arrangements). The LA9 which are part of this arrangement are County Durham, Stockton, Hartlepool, Middlesbrough, Redcar & Cleveland, Sunderland, South Tyneside, Gateshead and Darlington.
- 81 Negotiations are currently taking place to secure beds on behalf of the LA9 Consortia within North Tees NHS Foundation Trust. A service specification has been issued to the Trust and a Standard Operating Procedure (SOP) is being developed with partners from Humankind to ensure all beds are allocated based on clinical need.

## **Conclusion**

- 82 A collaborative partnership approach to tackle drug and alcohol related harm in County Durham has been maintained and developed during 2020/21. All meetings have continued virtually with engagement from partners increasing on last year due to no travel commitments.
- 83 The reduction of alcohol and drug related harms caused to individuals, families and local communities remains a significant priority for the ADHR Group under the governance of the SDP.

## **Other useful documents**

- Previous Cabinet reports

## **Author**

Jane Sunter, Public Health Strategic Manager Tel: 07825 938455

Rachel Osbaldeston, Public Health Advance Practitioner Tel: 03000 265478

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## **Appendix 1: Implications**

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### **Legal Implications**

No issues identified.

### **Finance**

No issues identified.

### **Consultation**

Public Health will continue to consult with partners in the development and delivery of identified actions to reduce alcohol related harm.

### **Equality and Diversity / Public Sector Equality Duty**

Actions from this report are targeted to reduce the health inequalities of these people suffering from or impacted by alcohol related health harm.

### **Climate Change**

No issues identified.

### **Human Rights**

No issues identified.

### **Crime and Disorder**

Actions from this report are targeted to reduce alcohol related crime and disorder.

### **Staffing**

No issues identified.

### **Accommodation**

No issues identified.

### **Risk**

No corporate risk issues Identified.

### **Procurement**

The report encourages economies of scale and to make best use of available resource and capacity.