

# Agenda

## Overview and Scrutiny Performance Board

**Thursday, 19 October 2023, 10.00 am**  
**Worcester**

All County Councillors are invited to attend and participate

This document can be provided in alternative formats such as Large Print, an audio recording or Braille; it can also be emailed as a Microsoft Word attachment. Please contact Scrutiny on telephone number 01905 844963 or by emailing [scrutiny@worcestershire.gov.uk](mailto:scrutiny@worcestershire.gov.uk)

## DISCLOSING INTERESTS

There are now 2 types of interests:  
**'Disclosable pecuniary interests'** and **'other disclosable interests'**

### WHAT IS A 'DISCLOSABLE PECUNIARY INTEREST' (DPI)?

- Any **employment**, office, trade or vocation carried on for profit or gain
- **Sponsorship** by a 3<sup>rd</sup> party of your member or election expenses
- Any **contract** for goods, services or works between the Council and you, a firm where you are a partner/director, or company in which you hold shares
- Interests in **land** in Worcestershire (including licence to occupy for a month or longer)
- **Shares** etc (with either a total nominal value above £25,000 or 1% of the total issued share capital) in companies with a place of business or land in Worcestershire.

**NB Your DPIs include the interests of your spouse/partner as well as you**

### WHAT MUST I DO WITH A DPI?

- **Register** it within 28 days and
- **Declare** it where you have a DPI in a matter at a particular meeting
  - you must **not participate** and you **must withdraw**.

**NB It is a criminal offence to participate in matters in which you have a DPI**

### WHAT ABOUT 'OTHER DISCLOSABLE INTERESTS'?

- No need to register them but
- You must **declare** them at a particular meeting where:
  - You/your family/person or body with whom you are associated have a **pecuniary interest** in or **close connection** with the matter under discussion.

### WHAT ABOUT MEMBERSHIP OF ANOTHER AUTHORITY OR PUBLIC BODY?

You will not normally even need to declare this as an interest. The only exception is where the conflict of interest is so significant it is seen as likely to prejudice your judgement of the public interest.

### DO I HAVE TO WITHDRAW IF I HAVE A DISCLOSABLE INTEREST WHICH ISN'T A DPI?

Not normally. You must withdraw only if it:

- affects your **pecuniary interests** **OR** relates to a **planning or regulatory** matter
- **AND** it is seen as likely to **prejudice your judgement** of the public interest.

### DON'T FORGET

- If you have a disclosable interest at a meeting you must **disclose both its existence and nature** – 'as noted/recorded' is insufficient
- **Declarations must relate to specific business** on the agenda
  - General scattergun declarations are not needed and achieve little
- Breaches of most of the **DPI provisions** are now **criminal offences** which may be referred to the police which can on conviction by a court lead to fines up to £5,000 and disqualification up to 5 years
- Formal **dispensation** in respect of interests can be sought in appropriate cases.

**Overview and Scrutiny Performance Board**  
**Thursday, 19 October 2023, 10.00 am, Council Chamber,**  
**County Hall, Worcester**

**Membership**

**Councillors:**

Cllr Tom Wells (Chairman), Cllr James Stanley (Vice Chairman), Cllr Alastair Adams, Cllr David Chambers, Cllr Brandon Clayton, Cllr Matt Dormer, Cllr Emma Stokes, Cllr Shirley Webb and Cllr Richard Udall

**Co-opted Church Representatives (for education matters)**

Mr Tim Reid (Church Representative - Church of England) and Vacancy (Church Representative - Catholic)

**Parent Governor Representatives (for education matters)**

Vacancy (Primary) and Vacancy (Secondary)

**Agenda**

<b>Item No</b>	<b>Subject</b>	<b>Page No</b>
1	<b>Apologies and Welcome</b>	
2	<b>Declaration of Interest and of any Party Whip</b>	
3	<b>Public Participation</b>  Members of the public wishing to take part should notify the Assistant Director for Legal and Governance in writing or by e-mail indicating both the nature and content of their proposed participation no later than 9.00am on the working day before the meeting (in this case 18 October). Further details are available on the Council's website. Enquiries can also be made through the telephone number/e-mail address listed in this agenda and on the website.	
4	<b>Confirmation of the Minutes of the Previous Meeting</b> (previously circulated).	
5	<b>Worcestershire County Council Community Safety Update Report</b>	1 - 40
6	<b>Scrutiny Chairmen and Lead Member Update and Work Programme</b>	41 - 52

Agenda produced and published by the Assistant Director for Legal and Governance, County Hall, Spetchley Road, Worcester WR5 2NP. To obtain further information or hard copies of this agenda, please contact Samantha Morris 01905 844963 email: [scrutiny@worcestershire.gov.uk](mailto:scrutiny@worcestershire.gov.uk)

All the above reports and supporting information can be accessed via the Council's website [Council's Website](#)

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## **OVERVIEW AND SCRUTINY PERFORMANCE BOARD**

### **19 OCTOBER 2023**

## **WORCESTERSHIRE COUNTY COUNCIL COMMUNITY SAFETY UPDATE REPORT**

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### **Summary**

1. The Overview and Scrutiny Performance Board (OSPB) is asked to consider the annual update on developments in relation to Community Safety in Worcestershire.
2. Key partners involved in community safety have been invited to attend this meeting.

### **Background**

3. The OSPB has been designated by the Worcestershire County Council (the Council) as its statutory Crime and Disorder Scrutiny Committee and is responsible for the consideration of Crime and Disorder matters. As part of this responsibility, OSPB meets on an annual basis with Crime and Disorder partners, to discuss issues of mutual interest.
4. Community Safety responsibilities are primarily set out under Section 17 of the Crime and Disorder Act 1998. The Act details the requirement for Responsible Authorities (Local Authorities, the Police, Fire and Rescue, the Integrated Care Board (formerly the Clinical Commissioning Groups) and the Probation Service) to develop policy and operational approaches to prevent crime and disorder, combat substance misuse and reduce reoffending.
5. Community Safety is not a specific “service” as such and the wide-ranging Section 17 requirements are carried out through a range of Council and Worcestershire Children First (WCF) duties and activities.
6. These include some significant commissioned services. Activities for instance include the wider safeguarding management responsibilities within the People Directorate and WCF (such as the GET SAFE child criminal exploitation services and tackling issues such as modern slavery and trafficking). There is strong partnership working which extends into the Voluntary and Community Sector (VCS) and private sector. Much of the work is about systems leadership, coordination, and reassurance, to ensure that these responsibilities are brought together as appropriate and co-ordinated in a way that helps protect the local population. There are good working relationships with the West Mercia Police and Crime Commissioner (PCC) across the Council and WCF, with excellent

examples of co-operation in commissioning of services relating to child exploitation and domestic abuse.

7. At County level, in two tier Local Government, there is a requirement for a group to take strategic oversight of community safety matters, although it does not have the same operational duties that are required of Community Safety Partnerships (CSPs). The Worcestershire Safer Communities Board (SCB) discharges the statutory duty under S17 of the Crime and Disorder Act 1998 (within two tier authority areas) to provide strategic coordination and support to community safety and criminal justice activity, in Worcestershire, taking account of national legislation and guidance. It produces an annual Community Safety Agreement and action plan and has oversight of several priority areas overseeing the work of subgroups on domestic abuse, substance misuse, reducing offending and Prevent and Prepare (violent extremism). The SCB is chaired by the Director of Public Health (PH) and administered by dedicated officers in the PH team.
8. Members of SCB have key strategic roles and are responsible for reporting back to their own organisations. They are also engaged in other, related, forums such as the West Mercia Police and Crime Panel, the West Mercia Criminal Justice Board, the Health and Well-being Board, Worcestershire Adults Safeguarding Board and Worcestershire Safeguarding Children Partnership.

### Key points to note

9. There are some key points for OSPB to note regarding significant activity within the Council's PH Community Safety Team and broader partnership:
  - **Drugs and Alcohol**
    - The significant increase in Continuity of Care engagement
    - Drug Death Group now operational
    - Drug Alert process refreshed and operational
    - Needs Assessment underway
    - Worcestershire Strategy now in place (attached as Appendix 1)
  - **Contest Strategy**
    - positive feedback on assurance and structures
  - **Domestic Abuse**
    - Sanctuary Scheme now in place
    - Lived Experience Advisory Group delivering Domestic Abuse Act duty requirements
    - Needs Assessment underway to support service development.

### Drugs and Alcohol

10. According to Home Office ministers, the government's 10-year drug plan, [From Harm to Hope](#), is one of their 'top priorities'. Its ambition to build a world-class treatment and recovery system guides important commissioning activity for PH. The other two ambitions are breaking supply chains and reducing demand.
11. Current commissioning expenditure (to five providers) across Worcestershire is funded by the Public Health Ringfenced Grant (PHRG) and additional Government grants, as follows:

Grant	Duration	Purpose	2023-24	2024-25
The Councils PHRG	2020-2025	Drug and Alcohol Service, Cranstoun	£3,883,536	£3,895,480
Government grant, Supplementary Substance Misuse Treatment and Recovery Grant	2022-2025	Additional funding to support growth and improvements in substance misuse treatment.	£1,038,940	£1,705,375 (indicative)
Government grant, Inpatient Detox Grant	2021-2025	Inpatient detox (commissioned through a West Midlands consortium).	£78,631	£78,631
Government grant, Individual Placement Support (IPS)	2024-2025	To fund a dedicated employment support service.		£158,000
Government grant, Rough Sleeping Drug and Alcohol Treatment Grant	2023-2025	To help support people who sleep rough, or who are at risk of sleeping rough, to access substance misuse treatment and longer term accommodation	£420,205	£420,205 (indicative)
<b>Total</b>			<b>£5,421,312</b>	<b>£6,257,691</b>

12. Whilst the primary outcome for the substance misuse treatment and recovery services is predicated upon reducing people's drug and alcohol use, a potential wider benefit to society is a reduction in offending behaviour. There is encouraging evidence in the Ministry of Justice report, [The impact of community-based drug and alcohol treatment on re-offending](#), 2017. In this national two-year study, a reduction of 33% in offences was recorded among pre-treatment offenders.
13. Some individuals will enter prison with opiate addiction issues (which may have led them to commit volume crime). A high-profile objective of all substance misuse treatment services across England, therefore, is to engage drug/alcohol-dependent prison leavers into treatment, who are at higher risk of reoffending and overdose or death by drug poisoning having acquired a naivety to opiates. There have been encouraging results in Worcestershire with the rate of engagement more than doubling in the last two years (from 18% to 52%), now higher than the England average. Cranstoun is the substance misuse treatment provider whose designated staff are part-based at Hewell prison delivering this continuity of care from prison out into the community.

14. Other targeted commissioned activity in Worcestershire includes harm reduction among opiate and crack users, who may not be engaged in substance misuse treatment and are a higher risk of committing acquisitive crime (e.g., shop lifting). Distribution of the medicine naloxone, which rapidly reverses opioid overdose, has saved lives in Worcestershire, and remains vital as the supply of more toxic synthetic opioids increases across the Western world. Related is the Council's commissioned work in Worcester City targeted at people rough sleeping or at risk of rough sleeping. This started early in 2023 and engaged 14 new people into substance misuse treatment in quarter one of 2023-24. This, again, is encouraging not only to reduce individuals' drug use but to enable access to sustainable accommodation and physical or mental health support. These are key building blocks to people's recovery and active citizenship.
15. The Substance Misuse Oversight Group is the partnership forum where issues of drug and alcohol abuse are discussed and addressed. It additionally discharges some of the responsibilities of the Herefordshire and Worcestershire Combatting Drugs Partnership.

### **Combatting Drugs Partnership**

16. Recent Government guidance, that sits alongside its Drugs Strategy, outlined the structures and processes through which local partners in England should work together to reduce drug-related harm. To assist with the delivery of the strategy, a Combatting Drugs Partnership has been formed covering Worcestershire and Herefordshire and chaired by the PCC. This partnership has:
  - conducted a joint needs assessment, reviewing local drugs data and evidence; and
  - produced a local performance framework to monitor the implementation and impact of local plans (this aligns with the Worcestershire Drug and Alcohol Strategy and Action Plan.)
17. Worcestershire's Drugs and Alcohol Strategy was approved by the Health and Wellbeing Board in March 2023 (attached at Appendix 1).

### **Drug and Alcohol Related Death Group**

18. The Drug and Alcohol Related Death Group is now in operation. Information on suspected drug related deaths is provided by the Coroner's Office following toxicology reports. Multi-agency reviews are now taking place, with the overall aim to reduce drug related deaths in Worcestershire. As of September 2023, there have been 12 suspected drug deaths this year – the majority occurring in the home. Substances vary and include opiates.
19. Overall, 40 deaths are on the system, which date back to April 2022. Reviews are focussing on the most recent deaths with an examination of agencies involvement with the deceased, together with consideration around the problem substance(s) involved in the death. Although in the early stages, themes are already being identified, which include mental health, domestic abuse and issues around engagement.



Number of cases	Average days for Coroners outcome	Number of drug related deaths	Number of Alcohol related specific death.	Number of Drug and alcohol related deaths	Number of drug death reviews
40	107	15	1	3	4

## Drug Alert System

20. Since OSPB last considered the Worcestershire Drugs and Alcohol Strategy in January 2023, the local Drug Alert process has been reviewed and updated to ensure partners are briefed and able to rapidly disseminate concerns about dangerous substances that present a threat to those who are vulnerable. The intentions are to assess the risk, communicate the threat and mitigate the threat.
21. Since June 2023, this system has warned of a number of instances of synthetic Opioids coming to light (including a number of overdoses) as well as adulterated/counterfeit Pregabalin, a prescription drug that is misused for recreational purposes.

## Contest Strategy

### PREVENT

22. The Counter Terrorism and Security Act 2015 sets a duty (the PREVENT duty) on specified authorities; education, health, local authorities, police and criminal justice agencies (prisons and probation) to have due regard to the need to prevent people from being drawn into terrorism. The Worcestershire Prevent Strategy Group's role is to provide strategic co-ordination and support to the Government's PREVENT agenda, in Worcestershire, taking account of national legislation and guidance. It receives an annual Counter Terrorism Local Profile for Worcestershire. From this, a local risk assessment has been created and the annual action plan has been developed.
23. The Independent Review of PREVENT was released earlier this year. This recommended that PREVENT should go back to first principles and reassert its objective of stopping people from becoming terrorists or supporting terrorism. This has led to new PREVENT duty guidance, which becomes statutory in January 2024. The revised Contest strategy published in July 2023 highlights that the threat from terrorism is enduring and evolving, the threat is dynamic and complex, and the risk is rising.
24. In Worcestershire, the Prevent Strategy Group supports the national picture whilst remaining focussed on issues relevant to Worcestershire. This year on the advice of the Home Office Regional Advisor, all organisations have been asked to produce an Annual Assurance Statement, which records activity around PREVENT. This includes training, referrals, and senior leadership responsibilities. This year's action plan considers how referrals can be increased to tackle the Islamist threat, it also examines the issue of mental health and its impact on radicalisation. A PREVENT Problem Solving Group shares information on current extremist activity in Worcestershire, which currently relates to far right stickering.

25. Although activity suggests the most significant threat to Worcestershire is from the Far Right it is also important to raise awareness of the ongoing national threat from Islamist Extremism. The Prevent Strategy Group is also sighted upon issues such as violence towards women and girls in education settings which may lead to radicalisation.
26. The Independent Review of PREVENT has led to national developments in training which is forthcoming and will include face to face inputs. Until this is released, training continues as business as usual. 201 Council employees were trained in PREVENT between April 2022 and 2023. A Synergy event was held at County Hall in July, regarding the Far Right, including a briefing on signs and symbols of the extreme far right, and Incel behaviour. There were 31 attendees from the Council.
27. Worcestershire Channel Panel continues to receive referrals from a wide spectrum of sources. Advice from the Office for Security and Counter Terrorism is that it is inappropriate to share statistics, but common themes include an increase in Right Wing referrals and a consistent issue with individuals with mental health issues and learning difficulties.
28. The Council has issued the Annual Assurance Statement regarding Channel Panel which captures its compliance with the requirements relating to Channel panels. It is based upon a self-assessment for local authorities. The Statement considers processes and whether the Chair and Deputy Chair have the appropriate skills and authority to discharge the duties of the Panel. This document was endorsed by the Council's Chief Executive and returned to the Home Office on 10 May 2023.
29. The Home Office Lead formally observed a Channel Panel meeting in June 2023 and fed back their satisfaction to the Chairman with a request that the Council share the iterative agenda and minutes process to be used as best practice.

## **Protect**

30. The Protect Strategy Group continues to meet in preparation for the Terrorism (Protection of Premises) Bill. This has now been released and scrutinised by the Home Affairs Select Committee; therefore the final legislation is unlikely to change.
31. To prepare for this legislation, local Counter Terrorism Security Advisors have provided SCan (See, Check and Notify) training to Council staff and are now expanding this to the district councils. A presentation has taken place at Worcester City and events are planned in Pershore and Malvern during this Autumn.
32. The Council is supporting the National Protective Security Authorities current briefing for Local Authorities on the misuse of household chemicals. This 15-minute packages explain to staff who visit homes what to look out for that potentially could be evidence of explosive or drug manufacture. The inputs have been well received. To date, Redditch and Bromsgrove Housing staff have been briefed, as have Malvern and Wychavon, while further agreement has been reached to brief 200 social workers.

## **Serious Violence Duty**

33. The new Serious Violence duty is set out in the Police, Crime, Sentencing and Courts Act 2022 and requires changes to Section 6 of the Crime and Disorder Act 1998, ensuring that preventing and reducing serious violence is a priority for CSPs.
34. Three key success measures for the prevention and reduction of serious violence are:
- a reduction in hospital admissions for assaults with a knife or sharp object;
  - a reduction in knife and sharp object enabled serious violence recorded by the police; and
  - homicides recorded by the Police.
35. Statutory Guidance has been released setting out in detail the requirements placed on “specified authorities”, (Chief Officers of police, fire and rescue authorities, Integrated Care Boards, Local Health Boards, local authorities, youth offending teams and probation services). All organisations and agencies subject to the Duty will be accountable for their activity and co-operation.
36. It requires specified authorities for a local government area to work together and plan to prevent and reduce serious violence, including identifying the kinds of serious violence that occur in the area, the causes of that violence (so far as it is possible to do so), and to prepare and implement a strategy for preventing, and reducing serious violence in the area. The Duty also requires the specified authorities to consult secondary group known as the relevant authorities, which includes educational, prison and youth custody authorities for the area, in the preparation of their strategy.
37. Specified authorities must identify the kinds of serious violence that occur in their area, and, so far as it is possible to do so, identify the causes of that violence. This requires an evidence-based analysis of the causes of serious violence within their area and use this analysis to develop a local strategic needs assessment which should inform the local strategy.
38. The local strategy, which specified authorities must prepare and implement, should contain bespoke solutions to prevent and reduce serious violence in their area. This must be kept under review, which should be done on an annual basis and updated when necessary. The final date for publication is **31 January 2024**.
39. The duty requires CSPs to formulate and implement strategies to prevent people from becoming involved in, and reduce instances of, serious violence in the area. As CSPs are subject to both the new Crime and Disorder Act requirements and the Duty, this will enable them to escalate local serious violence issues to a higher strategic level where necessary, which would in Worcestershire be the Safer Communities Board. This will ensure that CSPs have accountability for ensuring that a strategy to prevent and reduce serious violence is in place even if they are not the partnership arrangement chosen to deliver the Duty.
40. PCCs, are not specified authorities under the Duty. However, they are strongly encouraged to take on a role as lead convener for the local partnership arrangements for the Duty in order to support the development and implementation of Serious Violence Duty Statutory Guidance 13 the local strategy. Locally, the West Mercia PCC has led on very short timescale bids for funding to implement the new Duty.

41. To ensure consistency, a Council Senior Public Health Practitioner represents the views of the two CSPs, acts as liaison with the PCC's office and has drawn together a Serious Violence group to agree activity. This will feed into a data led, supportive approach to reducing serious violence.

### **Youth work and diversionary activity**

42. A new model of youth commissioning started in September 2023. The model allows decisions about youth services to be made at a more local level within the mix of universal fixed location, detached and targeted youth work to be delivered. All of these have a role to play in crime prevention.

43. Youth work will use recreational and educational leisure-time activities as a conduit to improving social and emotional learning. The overall aims of commissioned youth services are to:

- Improve access to youth services for those at risk of poorer outcomes and minority groups
- Improve mental and physical health for young people
- Improve young people's skills for life and work; and
- Increase opportunities for, and engagement by, young people connecting with and making a positive contribution in their communities.

44. The expected outcomes of commissioned youth work are:

- Quality youth service provision
- Improvements in young people's social and emotional learning, behaviours and mental health; and
- An increase in young people's engagement with their local communities.

45. There is also a requirement for youth workers to have undertaken children's safeguarding, PREVENT and Get Safe training.

46. The youth provision requirements to support positive social and emotional learning for young people and for them to be involved in positive engagement with their local communities are both strategies that prevent crime. In addition, youth services offer young people meaningful and enjoyable activities allowing them to develop and explore opportunities that fulfil their lives.

47. This youth provision is complemented by the Respect diversionary activity within Channel (targeted at young people who are at risk of radicalisation) funded through Counter Terrorism Policing Targeted Initiative Fund.

48. The labour costs funded through the Serious Violence Duty for Worcestershire will be used in similar fashion to the Respect programme, through the Worcestershire Reducing Youth Violence Programme. Hosted by Redditch Borough Council and administered by Redditch Community Safety Officers, this programme will provide a prevention and early intervention service for young people at risk of becoming involved in serious violence.

### **Trading Standards**

49. The Strategic Assessment for the Council's Trading Standards Team has the following areas as key priorities relevant until next financial year:

- Doorstep Crime and Scams
- Illegal Tobacco
- Product Safety
- Protecting animals and the food chain
- High value incidents of consumer detriment

50. In the last 12 months, the service has:

- Removed 205,499 cigarettes and 32kg of hand rolling tobacco from the marketplace, with 4 prosecutions resulting in community punishments and one suspended prison sentence
- Removed 12,132 non-compliant vapes from the marketplace and worked with PH colleagues to develop materials for schools and colleges to help reduce the likelihood of young people starting to vape. The primary purpose of work with schools was to raise awareness of vaping and illegal vapes with teachers and parents so they could report any underage sales to us.
- Undertaken 8 sessions of underage sales test purchasing activities, with 33 premises tested and 5 sales (one of alcohol, the others vapes).

51. Whilst the Team has yet to formally map any organised crime groups, the distribution of illegal tobacco is this type of activity, with links to other groups outside of the County. In 2022/23 four defendants were found guilty of involvement in these activities with 536 hours of community punishment, £2024 in fines and £14,679 being awarded in costs.

52. With regard to doorstep crime, rogue traders approaching older and vulnerable consumers about unnecessary home improvements remained a focus for the team. Also, dealing with the victims of mailing and telephone scams, with 114 local people being spoken to about changing their behaviour in relation to postal scams. These tend to originate overseas, outside of UK legal jurisdiction, meaning persuading people not to respond is the only solution. One trader accepted a simple caution in relation to the sale of an unroadworthy car, which constitutes an admission of guilt that can be cited as a previous conviction if the person re-offends in the next two years.

53. Illustrating the breadth of the service, the Trading Standards Team have also:

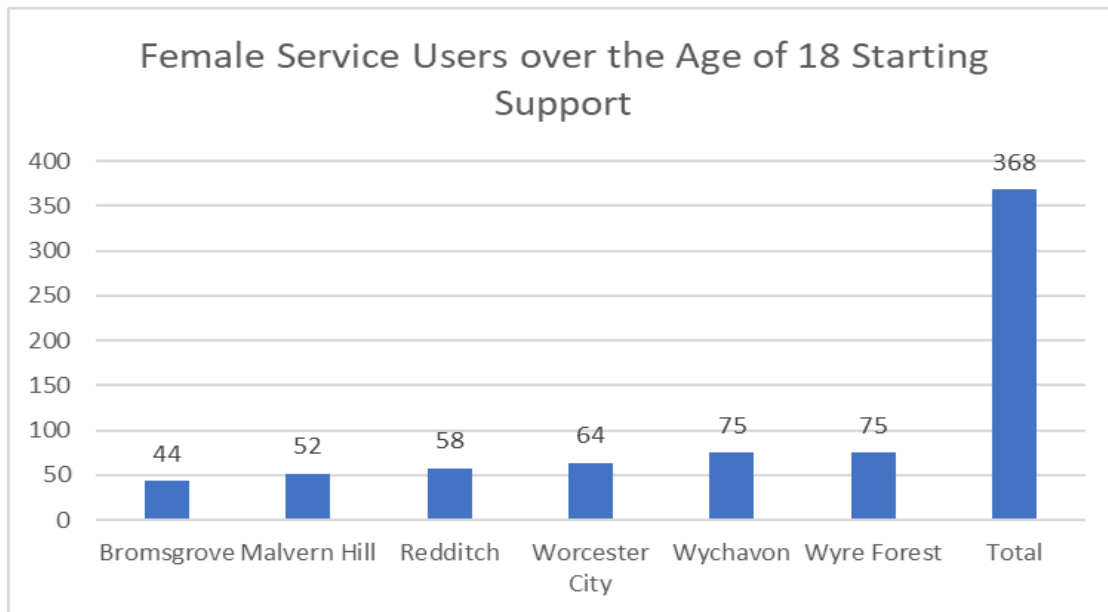
- Dealt with allegations of the supply of contaminated human breast milk products,
- Addressed several incidents or near misses with food allergens, fortunately none of which had serious consequences,
- Worked through one bird-flu outbreak,
- Identified 87 food business that were not compliant with labelling requirements and five farms where welfare and disease control measures were not being observed,
- Signed up to the Trading Standards Southwest No Proof, No Sale scheme to allow free training for businesses in the County on preventing sales to minors; and

- Found that 9 out of 15 businesses using large weighbridge scales for trade or ensuring the safe road-weight of vehicles, had inaccurate equipment that had to be rejected, requiring the businesses to have them fixed.

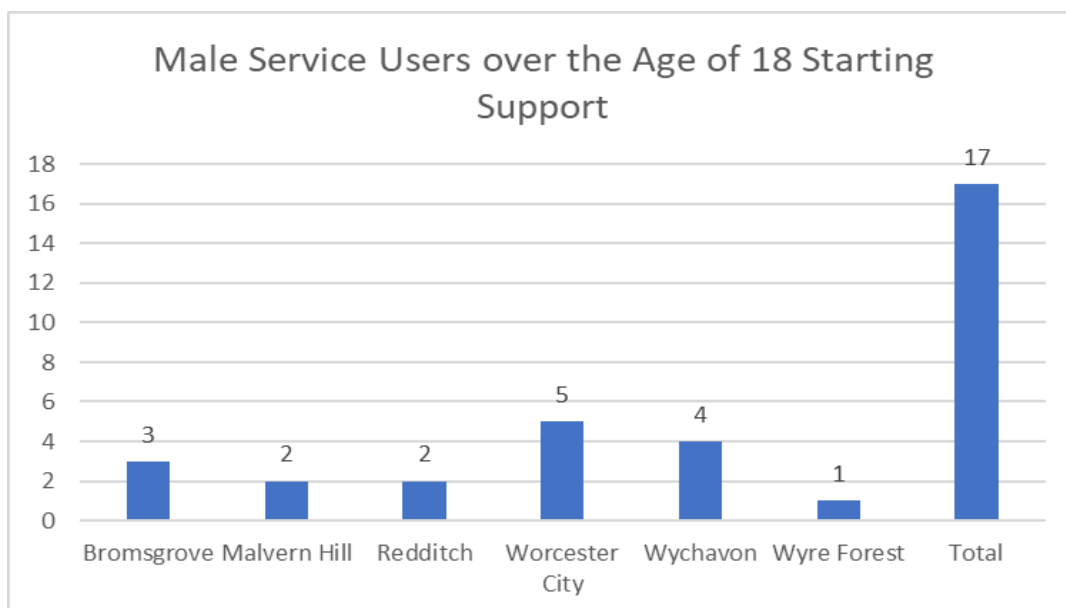
## **Domestic Abuse**

54. Last year OSPB were provided with details of the duties imposed by the Domestic Abuse Act 2021 and the activities that were taking place as a direct result of the publication of the Act.
55. The Worcestershire Domestic Abuse Partnership Board (DAPB) includes partners from the Council, West Mercia Police, the PCC, NHS, the National Probation Service, WCF, specialist providers and District Councils and is supported by people with lived experience.
56. The DAPB is responsible for overseeing the development and scrutiny of the Domestic Abuse Strategy and the actions associated with it. The contract for locally commissioned Domestic Abuse services is for three years to the 31 March 2025 (with an option to extend).
57. A Domestic Abuse Needs Assessment has commenced which will allow the Council to review current delivery, the gaps, advise on any recommendations moving forward and will shape service provision post March 2025. This needs assessment should be complete by the end of the year and will draw upon qualitative as well as quantitative data.
58. The existing Domestic Abuse Advice and Support Service (DAASS) is commissioned to West Mercia Women's Aid and provides a range of support including refuge services, support into Safe Accommodation, Help line, one-to-one support, and children's play therapy. Referrals into the service are increasing, with many referrals extremely vulnerable and in need of multi-agency specialist support.
59. To allow the Council to review that the DAASS is being delivered consistently across Worcestershire in their reports WMWA include the number of female, male, and young people starting a provision of support per quarter per district. The graphs below represent data from April – June 2023 and give an overview of the service users receiving support. The graphs illustrate that 368 female service users, over the age of 18, accessed support and 17 male. In addition, 28 service users under the age of 18 accessed support.

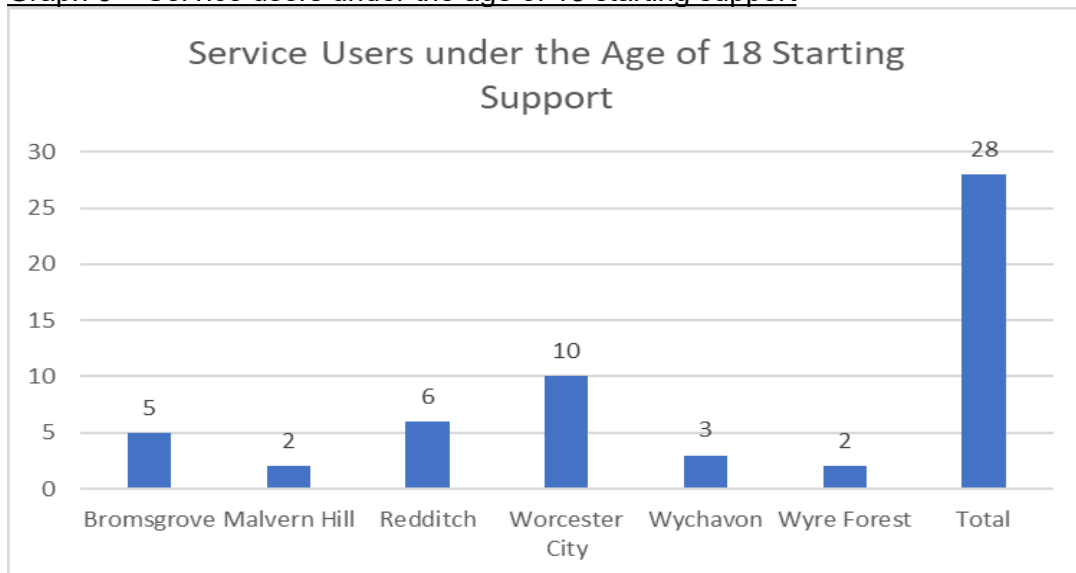
Graph 1 – Female service users over the age of 18 starting support



Graph 2 – Male service users over the age of 18 starting support



Graph 3 – Service users under the age of 18 starting support



60. Current commissioning expenditure across Worcestershire is funded by the PHRG and additional government grants, via the Department for Levelling Up, Housing and Communities (DLUHC), as follows:



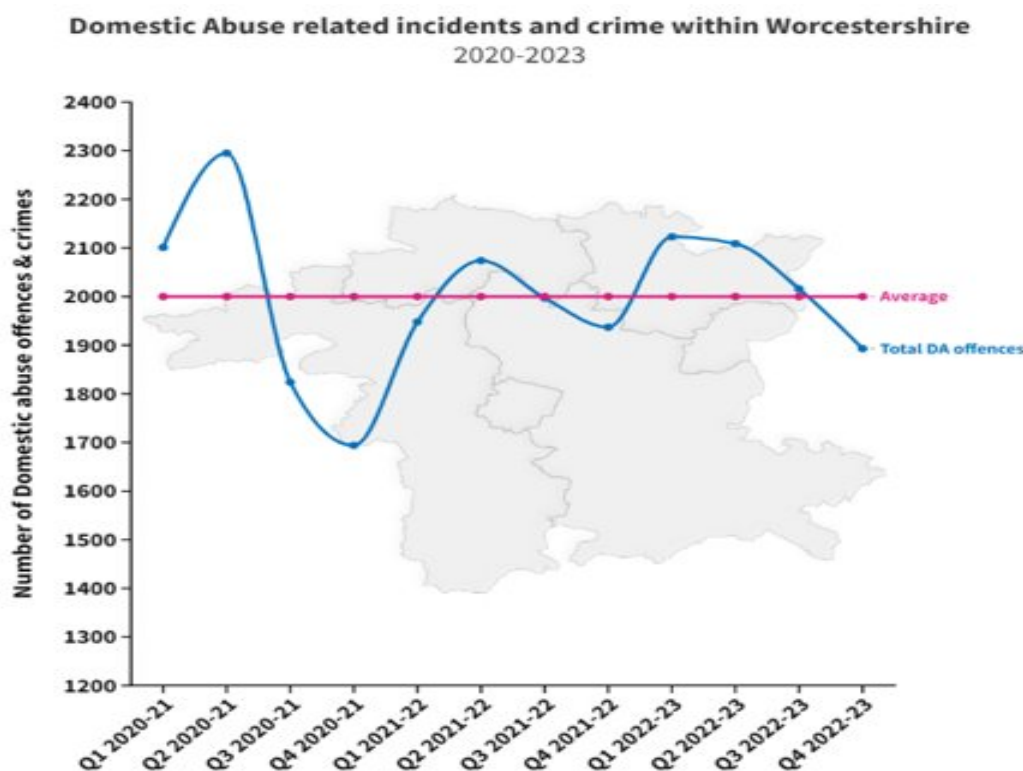
<b>Grant</b>	<b>Duration</b>	<b>Purpose</b>	<b>2023-24</b>	<b>2024-25</b>
DLUHC	2022-25	West Mercia Women's Aid Domestic Abuse Advice and Support Service (including refuge and trauma informed support to children)	637,000	637,000
DLUHC	2022 - 25	Council Social Worker - Adults with health and care needs. Enhanced Domestic Abuse and housing support.	52,892	52,730
DLUHC	2022-25	Domestic Abuse Training - Mandatory training to frontline social care, elected members and nominated partners	30,000	30,000
DLUHC	2022 - 25	Domestic Abuse Housing Officers - Supporting the victims of DA in/into safe accommodation	202,000	202,000
DLUHC	2023-24	Lived Experience Advisory Group - Understand the experience of DA Survivors and particularly those from groups with protected characteristics	30,000	
DLUHC	2022 - 25	Domestic abuse element(s) of Family Safeguarding Model - Supporting the tripartite activity in support of families experiencing DA	150,000	110,000
PHRFG	2023 – 25	Domestic Abuse Working Network (DAWN) - Support for victims of Domestic Abuse in the South of the county – designed to reduce the demand and impact upon children's services	125,630	94,222
PHRFG	2023 - 25	Sanctuary Scheme - Target hardening accommodation, enabling survivors of domestic abuse to remain in their own homes.	97,500	100,000
PHRFG	2022 - 25	DRIVE - Domestic Abuse Perpetrator programme to address behaviours, reduce risk and reoffending.	185,815	185,815
<b>Total</b>			<b>1,510,837</b>	<b>1,411,767</b>

61. This commissioning activity is supported by a partnership, Joint Commissioning Group involving the Council, the District Councils, the PCC and the Integrated Care Board.

62. Historically, disaggregating Worcestershire's data from that of West Mercia has proven difficult. This data is presented as a result of work currently being conducted between PH analysts and West Mercia.

- In West Mercia there were 32,601 domestic abuse related incidents and crimes recorded in the year ending March 2022.
- The rate of police recorded domestic abuse-related incidents and crimes in West Mercia is 25 per 1,000 of the population.
- This is similar to both West Midlands (28 per 1,000) and England and Wales (25 per 1,000).
- In West Mercia 53% of domestic abuse-related incidents and crimes were classified as domestic abuse-related crimes.

Graph 4 – Domestic Abuse Related Incidents and Crime 2020-2023



63. The number of domestic abuse related incidents and crimes within Worcestershire have been broadly stable during the period 2020 to 2023, aside from a notable reduction in reporting during the early stages of the COVID-19 pandemic (Q2-4 2020/21).

64. In July 2023, the Domestic Abuse Commissioner published a report around the failings of the family court system and the impact this can have on the survivors and their families. Through the Local Family Justice Board and, following a meeting with Judge Plunkett at the family court to discuss the experiences of survivors and how this process can be improved, a working group has been set up to discuss and tackle this issue. This is a key area of focus for the DAPB action plan.
65. The Domestic Abuse Lead for the Council, an Advanced Public Health Practitioner is working with Herefordshire Council to prepare for the White Ribbon Campaign 2023, with a particular emphasis on reaching out to businesses across the counties and their role in identifying, supporting, and signposting those suffering abuse.

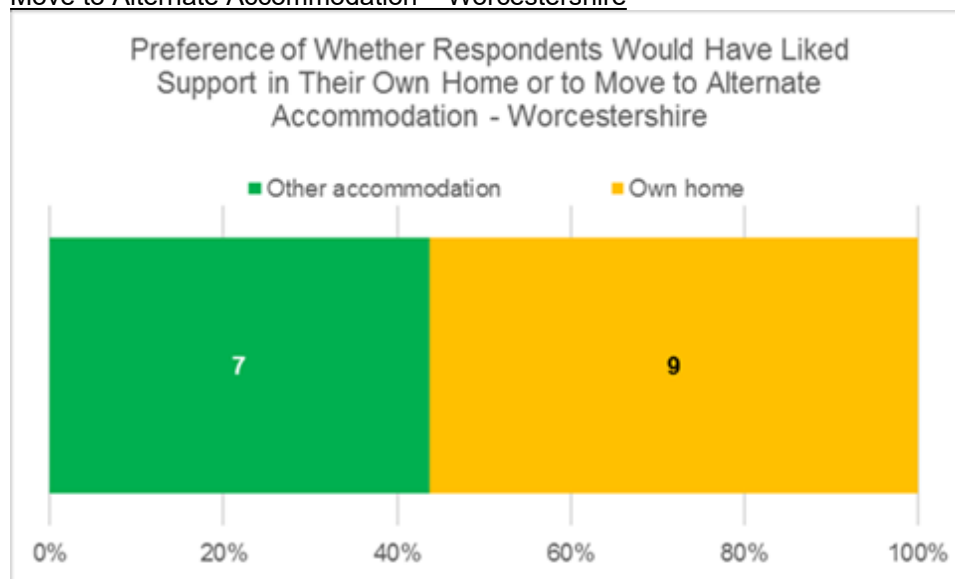
### **The Lived Experience Advisory Group (LEAG)**

66. In partnership with Herefordshire County Council, and with the intention of meeting specific requirements in part iv of the 2021 Domestic Abuse Act, a Domestic Abuse Lived Experience Advisory Group (LEAG) has been commissioned and is being delivered by West Mercia Women's Aid. A LEAG Coordinator has been recruited who is actively recruiting members to the group. The breakdown of the membership is:
- Total membership – 23 (12 Worcestershire, 11 Herefordshire)
  - Highest level of engagement (have attended an induction day) – 13
  - Lower level of engagement (remote involvement through survey completion etc) – 10
67. This group will provide a core element of the Needs Assessment and informing the service specification and activity going forward.
68. The first survey supported by the group focused on local housing provision, while the current work focuses on children in domestic abuse situations.

### **Sanctuary Scheme**

69. Many victims of domestic abuse leave their own homes and uproot their lives to escape a perpetrator. Through the housing survey it was important to explore ways in which those experiencing domestic abuse can be supported to remain safely in their own homes.
70. The graph below demonstrates the number of Worcestershire respondents who would prefer to remain at home rather than be supported to enter alternative accommodation such as Refuge. This table is included as under the Sanctuary Scheme this level of provision is provided to victims of domestic abuse.

Graph 5 – Preference of Whether Respondents Would Have Liked Support In Their Own home or the Move to Alternate Accommodation – Worcestershire



71. At its meeting on 20 October 2022, the OSPB discussed the introduction of a Sanctuary Scheme. The scheme aims to provide survivors and their families with a safe place to live. The target hardening element of the scheme has been commissioned to a provider named, 24/7 locks, and delivery commenced on the 1 April 2023. Activity is taking place to raise awareness of the Scheme which will increase referral numbers. Research and feedback from victims indicate that Cyber Abuse is an increasing issue, where perpetrators can continue to control and abuse victims albeit remotely. Discussions are taking place to advise how this issue can be tackled moving forward.

### Domestic Homicide Reviews

72. The duty to carry out statutory Home Office Domestic Homicide Reviews sits with the two CSPs. In Worcestershire it has been agreed through the SCB, that these will be co-ordinated at County level, with PH Community Safety Officers leading as its contribution to the DHR process.

73. Sadly, since last year's annual update to the Board, there have been 3 Domestic Homicide Review referrals that have been identified as meeting the criteria for review. This presents a considerable commitment for Public Health and its Safer Communities Team.

74. More positively, a backlog of Domestic Homicide Reviews have been completed, though there is now a similar backlog within the Home Office which is delaying their review of the material submitted to them.

### Sex Workers

75. The Lead Member for Crime and Disorder has raised concerns about how partners work together in Worcestershire to provide support to Sex Workers as victims.

76. It is proposed that this will be explored separately through a workshop supported by Public Health and that the Board will be informed of the findings in due course.

## **Purpose of the Meeting**

77. The Board is asked to consider:

- The Annual Update on developments in relation to Community Safety in Worcestershire;
- Whether it wishes to make any comments to the Cabinet Member for Health and Well-being, or partner agencies; and
- Whether there are any issues which should be the subject of future scrutiny work.

## **Supporting Information**

Appendix 1 – Worcestershire Drug and Alcohol Strategy

## **Contact Point**

Paul Kinsella, Advanced Public Health Practitioner (01905) 846550

Email: [pkinsella@worcestershire.gov.uk](mailto:pkinsella@worcestershire.gov.uk)

## **Background Papers**

In the opinion of the proper officer (in this case the Assistant Director for Legal and Governance) the following are the background papers relating to the subject matter of this report:

[Agenda and Minutes for Overview and Scrutiny Performance Board on 20 October 2022](#)  
[Agenda and Minutes for Overview and Scrutiny Performance Board on 30 January 2023](#)

[All agendas and minutes are available on the Council's website here.](#)

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# Worcestershire Drug and Alcohol Strategy

2022-2027



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# Foreword

The devastating effects of drug and alcohol misuse are well known, not just those who misuse drugs and alcohol but also their families, loved ones, carers, wider communities, services and businesses.

Following the publication of the new Government 10-year plan to combat the harm caused by illegal drugs, the local drug and alcohol partnership board have taken the opportunity to create a new Drug and Alcohol Strategy for the county.

This strategy is a unique opportunity for partners to state their shared ambitions to address drug and alcohol-related crime, death, harm and overall use in Worcestershire. The strategy will act as a vehicle to allow local partners to jointly identify how they will address the priorities set out in this document.

In Worcestershire, we are taking a holistic view of drug and alcohol abuse from prevention, through treatment, to recovery. Supported by existing work identified across the Integrated Care System, this Strategy aims to tackle the issues that lead to drug and alcohol misuse as well as ensuring our residents have access to world-class treatment and recovery services.

Together we can improve people's lives and help them live happier, more prosperous and independent lives.

**Councillor Karen May**, Cabinet Member with Responsibility for Health and Wellbeing and Chair of Worcestershire's Health and Wellbeing Board



# Introduction

## DRUG AND ALCOHOL STRATEGY

This document describes the local drug and alcohol partnership's plans for addressing drug and alcohol misuse in Worcestershire.

The Drug and Alcohol Strategy outlines the partnership's approach to delivering commitments across four key priority areas:

**PREVENTION** – Breaking Supply Chains

**PREVENTION** – Health and Wellbeing

**TREATMENT**

**RECOVERY**

Page 22 The development of this strategy has been informed by stakeholder engagement and local intelligence on the drug and alcohol needs present in Worcestershire, reflecting relevant national and local strategies and partnerships including:



- Government's 10-year drugs plan, From Harm to Hope, 2021
- Government's rough sleeper strategy, Ending Rough Sleeping for Good, 2022
- Worcestershire's Health and Wellbeing Board and Strategy, 2022-2032
- Herefordshire and Worcestershire Combatting Drugs Partnership (CDP)
- Worcestershire Substance Misuse Oversight Group (SMOG) – the local partnership board directly overseeing this strategy
- Worcestershire Safer Communities Board and partnerships.

It will cover the period from publication until 2027, reviewed annually.

## IMPROVING HEALTH AND WELLBEING

This Drug and Alcohol Strategy will support the wider ambitions identified in several key Strategies aimed at improving the health and wellbeing of people who live and work in Worcestershire. This includes Worcestershire's new 10-year Joint Local Health and Wellbeing Strategy (JLHWS) 2022 - 2032, the Integrated Care Strategy and the local Combatting Drugs Partnership (CDP).

Worcestershire's JLHWS sets out the key priority, ambitions and evidence-based approaches to improve health and wellbeing in the County. To ensure alignment, this Drug and Alcohol Strategy is structured around the same underpinning health approaches:

- Wider determinants of health
- Reducing inequalities
- Prevention and early intervention

Herefordshire and Worcestershire's Integrated Care Strategy will build upon existing partnership work that is already focused on achieving improvements in population health outcomes and reducing health inequalities. This will include the work that partners already do in addressing the wider determinants of health, such as the work outlined in this Drug and Alcohol Strategy.

This strategy will also support the work of the Herefordshire and Worcestershire Combatting Drugs Partnership (CDP). The new partnership will be working locally to deliver the Government's strategic priorities including the combatting drugs outcome framework, outlined in the 10-year plan: 'From harm to hope.'

# National picture

## From Harm to Hope

'From Harm to Hope' is the Government's 10-year plan to combat illegal drugs. The plan sets out how the supply of drugs by criminal gangs will be targeted and how those with a drug addiction will be given a route to a drug free life.

The Government pledges over £3 billion of investment over the next three years to reduce drug-related crime, death, harm and overall drug use.

National and local partners will focus on delivering three strategic priorities:

1. Break drug supply chains – Home Office and Ministry of Justice
2. Deliver a world-class treatment and recovery system – Department of Health and Social Care, Ministry of Justice, Department for Levelling Up, Housing and Communities, and the Department for Work and Pensions
- Achieve a generational shift in demand for drugs – Home Office, Department for Education, Department of Health and Social Care, Ministry of Justice, Department for Culture, Media and Sport, Department for Levelling Up Housing and Communities

# Local picture

## POPULATION, OVERVIEW

- Overall, Worcestershire is not seen as a deprived area compared to England as a whole. However, there are still almost 28,000 residents who live in one of the top 10% of deprived areas in the country.
- There are 18 LSOA's in Worcestershire that are in the top 10% most deprived areas in England, and 74 LSOA's in the county within the top 30% most deprived areas in England. Almost 5% of the Worcestershire population are living in LSOA's that are within the top 10% most deprived areas in England, whilst just over 20% are living in places categorised as being within the top 30% most deprived areas in England.
- Worcestershire is a two-tier authority, including the County Council and six district councils. Its population in 2021 was 605,437 forecast to grow by 5.5% to 638,786 in 2030. Of the six Worcestershire districts, Wychavon has the largest proportion of the population (22%) and Malvern Hills the smallest (13.5%).
- The proportion of under 20s across the county is (21%) – highest in Redditch (24%) – and the proportion of over 65s is 23% – highest in Malvern (28%). The total population is forecast to increase by 5.5% by 2030. Over the same period, over 65s are forecast to increase significantly, e.g., over 85s by 35%.

All population data is available from the Worcestershire Insights website. See bibliography for specific reference.



# DRUG AND ALCOHOL RELATED HEALTH NEEDS

## DRUG AND ALCOHOL USE, UNMET NEED

- In 2016-17 (the last estimate), 1,764 adults in Worcestershire were estimated to be crack users, 2118 opiate and 2,298 both (OCU). The rate of unmet need for OCU was 46%, lower than England, 53%.
- In 2018, 5,321 adults in Worcestershire were estimated to be alcohol dependent; 1,029 (alcohol only and alcohol and non-opiate) were engaged in treatment meaning 4,292 (81%) dependent drinkers' needs were unmet, the same as England. In 202-21, the proportion of dependent drinkers not in treatment was the same, 81%.

## IMPACT ON FAMILIES

- In 2014-15, the estimated number of adults with opiate dependence living with children in Worcestershire was 745. The unmet treatment need for 2020 was estimated at 66%, worse than England, 58%. The number of children living with drug users entering treatment, for Worcestershire and England, 2020-21 was 251.
- In 2018-19, the estimated number of alcohol dependent adults living with children was 1,131. Unmet need was estimated at 76% compared to 79% for England.

## MORTALITY

- In 2018-20 there were 69 drug misuse deaths in Worcestershire. Age-standardised mortality rate from drug misuse per 100,000 population in Worcestershire is 4.2 per 100,000, below the national average of 5.3 per 100,000.
- In 2020, alcohol-related mortality was 38 per 100,000 in Worcestershire compared to 42 for West Midlands and 37 per 100,000 for England. In 2017-19, the directly age-standardised rate for alcohol-specific mortality in Worcestershire was 10.6 per 100,000; England was 10.9. Mortality from chronic liver disease was 12.7, slightly higher than England, 12.

## HOSPITAL ADMISSIONS

- In 2020-21, there were 283 adult hospital admissions for drug poisoning in Worcestershire; the local rate was 47 per 100,000 compared to a national rate of 50. In 2017-20, the directly standardised rate of admission for young people (15-24 year olds) due to drug misuse was 56 per 1000, lower than England, 85 per 100,000.
- In 2020-21 the rate of admission episodes for alcohol specific episodes for all ages in Worcestershire was 473 per 100,000 compared to 587 per 100,000 for England. For adult admissions to hospital for alcohol-specific conditions in Worcestershire in 2019-20, the directly standardised rate was 487 per 100,000, lower than the national average of 644 per 100,000.

## TREATMENT

- In 2021-22 a total of 2,586 people were engaged in treatment for alcohol and/or drug dependency in Worcestershire, including 28 young people (under 18).
- On 31.3.22 the number of adults with a drug and/or alcohol treatment need who successfully engage with community-based structured treatment following release from prison was 25%, lower than England, 37%. Government has set a national target of 75%.
- In 2020-21, of the number of adults engaged in drug treatment who self-reported their housing status, 15% had a housing or urgent housing problem.

All data is latest available and taken from OHID Fingertips and the National Drug Treatment Monitoring System (NDTMS). See full bibliography for specific references.

# Current Provision

In Worcestershire the drug and alcohol treatment system consists of evidence-based provision related to prevention, treatment and recovery, as detailed in the graphic below.

Treatment service approaches include, but are not limited to GP shared care, delivery of psychosocial interventions, opiate substitution therapy. These approaches are complemented by harm reduction initiatives including needle exchange, blood borne virus testing and various targeted rough sleeping and recovery initiatives.



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# Strategic Priorities

**The overall aim of this strategy is to reduce drug and/or alcohol-related crime, death, harm and overall use in Worcestershire.**

To achieve this aim, we have identified four key strategic priorities that are detailed below. Included under each priority are commitments that demonstrate how we, as a partnership, plan to meet the overall aims of this strategy. These commitments will be taken forward into a joint action plan that will be owned and monitored by the local partnership board. The priorities and their commitments are for everyone irrespective of gender, sex, age, disability, ethnicity, sexual orientation, or religion, and recognising intersectionality of these characteristics.

## SMOG PARTNERSHIP COMMITMENTS

- Partnerships and governance, assessment of need, integrated approach, high quality treatment

### PREVENTION - Breaking Supply chains

- Aligning with the relevant regional and national criminal justice policies
- Supporting the delivery of the West Mercia Police Force Drugs Delivery Plan 2022 – 2024

### PREVENTION – Health & Wellbeing

- **Primary prevention**  
*Taking actions to prevent problems before they happen*
- **Secondary prevention**  
*Taking actions to reduce the impact of problems at the earliest possible stage*
- **Tertiary prevention**  
*Taking actions to soften the impact of ongoing problems to improve people's quality of life*

### TREATMENT

- **Treatment options**  
*World class treatment provision*
- **Treatment access**  
*Improve the routes into services*
- **Treatment exit**  
*Develop in-patient community detoxification services*
- **Young People**  
*Ensuring appropriate services in place for young people*

### RECOVERY

- **Recovery Orientated System of Care**  
*Ambition for every person who enters treatment to recover and live a life independent of services*
- **Jobs**  
*Continue to develop the responses of employment services*
- **Homes**  
*Ensure that people's ability to engage in treatment is not hampered by their need for support with accommodation*
- **Friends**  
*We will ensure the availability of*

# Key Priority 1 – PREVENTION: Breaking Supply Chains

## We will target all stages of the drug supply chain in Worcestershire.

It is the aim of the partnership that within the lifetime of this strategy, Worcestershire will be a significantly harder place for organised crime gangs to operate. In Worcestershire, we will build on the national and regional initiatives attacking all stages of the drug supply chain. This will have a positive effect on the associated impacts of drug dealing – violence, exploitation, and imprisonment.

In pursuing this priority, the partnership will align itself with the West Mercia Police's 'Force Drugs Delivery Plan' 2021-24 (See Appendix), which details how the police and their partners – the National Crime Agency, the Regional Organised Crime Unit, British Transport Police, and Her Majesties Prison and Probation Service – will reduce the harms associated to the supply of illicit drugs. In Worcestershire, the impact of illicit drugs impacts numerous vulnerable groups, including children.

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## COMMITMENTS - PREVENTION: Breaking Supply Chains

### COMMITMENT 1

The partnership will work with key national and regional partners and groups to reduce the harm associated to the supply of illicit drugs in Worcestershire and work collectively to deliver the West Mercia Police Force Drugs Delivery Plan 2021-24

### COMMITMENT 3

The partnership will work with local enforcement officers to ensure that those shops and establishments who engage in the sale of alcohol and tobacco to those who are underaged, face punitive measures.





# Key Priority 2 – PREVENTION: Health and Wellbeing

## We will aim to increase our focus on all types of prevention and early intervention to achieve a safer and healthier environment for all.

In Worcestershire, we will consider primary, secondary, and tertiary prevention approaches. We will take an evidence informed approach to activities aimed at reducing the number of people drinking alcohol to harmful levels, taking drugs, or drawn towards drugs. This approach will ultimately contribute towards creating a safer and healthier environment for all.

As a partnership, we state a desire to reduce the rise in the use of recreational drugs, such as powder cocaine and ecstasy. In the county, we will use the latest evidence-based practice to encourage people to change their attitudes and behaviour by making sure that the significant risks and harms - to themselves and others - involved with drug use are fully promoted to drug users.

We aim to increase preventative activity amongst children and young people to reduce the likelihood that they will start drinking alcohol or taking drugs. This will involve a response from the local partnership board but also ensuring that universal initiatives that address the risk factors associated with childhood drug and alcohol use are promoted.

The factors that increase childhood risk for drug and alcohol use are also related to poor academic performance, mental health problems and harm to self and others. As a partnership, we will promote and advocate for non-drug focussed prevention programmes and services that address the risk factors associated with childhood drug and alcohol use. These risk factors include chaotic, unrewarding environments, unremitting stress, social exclusion, and individual risk factors such as having difficulty managing emotions, coping with challenges, and exercising behavioural self-control (DHSC, 2021).

As a partnership, we recognise that improving outcomes in relation to drug and alcohol use does not sit within the partnership board alone. We will endeavour to actively represent the partnership board and its aims on the relevant boards within Worcestershire. This will include building on the desire of the Health and Wellbeing Board to improve the mental health of the population of Worcestershire.

Harm reduction continues to be a key part of our approach to helping those with drug and alcohol use needs. We will continue to develop our naloxone programme and our needle exchange programmes to ensure they are more visible and available to all who need them. The programme will be aimed at staff and peer champions.

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**Delay:** taking action to support individuals and families to manage long term health needs, preventing complications and improve, as much as possible, people's quality of life. For example, rehabilitation programmes to support people with a mental health condition to return to or stay in work.

**Reduce:** taking action to reduce the impact of problems at the earliest possible stage. Stop them getting worse and/or targeting actions at groups who have an increased risk of developing needs. For example taking measures to reduce high blood pressure, support for families affected by substance misuse.

**Prevent:** taking action to prevent problems and reduce risk before they even happen across the whole population. For example, vaccination programmes or supporting people to make healthier choices through education programmes about healthy eating and being active.

## HEALTH AND WELLBEING COMMITMENTS

### COMMITMENT 1

We will consider the latest evidence-based practice to encourage people to change their attitudes and behaviour by making sure that the significant risks and harms - to themselves and others - involved with drug and alcohol use are fully promoted to drug and alcohol users. This will include reviewing the delivery of drug focused prevention programme in schools, in alignment with RSE guidance. Where appropriate, there should be explicit mention in school's RSE policies as to how needs relating to drug and alcohol use are addressed.

### COMMITMENT 2

As a partnership, we will work strategically to ensure that the aims and priorities of the partnership are represented at other partnership boards within Worcestershire. This includes but is not limited to the Health and Wellbeing Board and Combatting Drugs Partnership.

### COMMITMENT 3

The partnership commits to all prevention work being monitored and evaluated in a way that promotes continuous improvement.

### COMMITMENT 4

We commit to a partnership approach to the drug and alcohol component of school's RSE policies and programmes. This can include but is not limited to joint development of RSE programmes, outreach work in schools to deliver parts of RSE programmes, and training and upskilling of teachers in relation to drug and alcohol issues. To build resilience amongst young people, we will promote and advocate for non-drug focused programmes that address the risk factors associated with childhood drug, alcohol, and tobacco use.

### COMMITMENT 5

We will support primary care networks, neighbourhood teams and district collaboratives so that they can offer brief interventions to service users/ patients on drug and alcohol related concerns, including the Alcohol AUDIT screen

### COMMITMENT 6

As a partnership, we will increase our work with key vulnerable groups such as looked after children, and care leavers. We will use the latest data and guidance to develop our support for vulnerable groups

### COMMITMENT 7

We will increase the availability and visibility of naloxone through providing more peer naloxone training and training for appropriate staff. We will increase the availability of our needle exchange offering through working closely with providers, such as pharmacies. Further develop a digital drug and alcohol offer

### COMMITMENT 8

We will continue to investigate the reasons behind drug and alcohol-related deaths in the county and work towards reducing them.

# Key Priority 3 – TREATMENT

**We will build on our existing high-quality treatment services to ensure that there are a full range of services that meet the needs of the local population.**

As a partnership, we are committed to growing and improving the quality of treatment services. We will increase the number in treatment to reduce unmet need and grow the treatment service workforce to reduce caseloads.

We will aim to increase the skills and professional mix of the workforce. We will also build on our existing services and ensure that there is a full range of evidenced based harm reduction and treatment services in place to meet the needs of the local population.

We recognise the recurring problems of people cycling in and out of prison without achieving rehabilitation or recovery. As a partnership, we support the use of police diversions and community sentences with treatment as an alternative to custody. We will monitor additional demand for treatment places and strive to ensure that there are treatment places to accommodate this demand.

As a partnership, we wish to improve the experience of treatment services for prisoners with drug or alcohol needs. We wish to ensure that those with a drug dependence are helped to continue with drug treatment in the community as soon as possible. It is known that for those with a drug need, the period immediately after release from prison is challenging. There can be a high risk of overdose and reoffending. To improve outcomes for those leaving prison, all partners will need to work closely together to ensure that those with a drug

dependence access and receive treatment in the community.

We understand how important psychosocial interventions are for those with a drug problem, and particularly for those with a non-opioid need for whom there are no effective pharmacological interventions. We want to ensure that there are flexible psychosocial interventions available that meet the needs of all those with a drug problem, including crack cocaine users, people who use image or performance enhancing drugs or people engaging in chemsex.

Nationally, there has been an increase in drug use among children. This increase is seen across a wide range of substances and socio-economic groups. It is also alarming that there is widespread involvement of vulnerable children and young people in drug supply, often through 'county lines'. As a partnership, it is necessary for us to build on our existing services and ensure that there are appropriate interventions in place for young people with treatment requirements. This includes meeting multiple needs including poor mental health, self-harm, and sometimes criminal or sexual exploitation.



## TREATMENT COMMITMENTS

### COMMITMENT 1

As a partnership, we aim to ensure that there is a full range of evidenced based treatment services in place to meet the needs of the local population. We aim to increase the number in treatment overall and the proportion of adults who engage with treatment on release from prison. This approach will be extended to the wider criminal justice system including those on community sentences.

### COMMITMENT 2

We will engage with people with lived experience to strengthen our pathways into treatment services and the services themselves.

### COMMITMENT 3

We commit to enhancing the quality of treatment provision by reviewing our workforce plan, with a view to reducing caseloads of practitioners, increasing our drug and alcohol workforce, and increasing the skills and professional mix of our workforce.

### COMMITMENT 4

As a partnership, we will promote the use of police diversions and community sentences with treatment as an alternative to custody. We will monitor additional demand for treatment places and strive to ensure that there are treatment places to accommodate this demand.

### COMMITMENT 5

We want to ensure that there are flexible psychosocial interventions available that meet the needs of all those with a drug or alcohol problem, including those with non-opioid problems such as crack cocaine users, people who use image or performance enhancing drugs or people engaging in chemsex.

### COMMITMENT 6

We will continue to develop our aftercare provision for those who exit treatment.

### COMMITMENT 7

We will continue to develop our response for those who require inpatient detoxification and residential rehabilitation. This will include regional commissioning of services, where appropriate.

### COMMITMENT 8

We will continue to strengthen partnership working for adults and young people with co-occurring mental health and drug or alcohol conditions.

### COMMITMENT 9

We will further develop opportunities for brief interventions and co-ordinated support for people who are admitted to hospital with a drug and/or alcohol use related condition. This will include further increasing the use of the AUDIT-C screening tool and enabling communication with community services following patient discharge.

## YOUNG PEOPLE COMMITMENTS

### COMMITMENT 10

We will build on our existing services and ensure that there are appropriate services in place for young people with treatment requirements. This includes meeting multiple needs including poor mental health, self-harm, and sometimes criminal or sexual exploitation.

### COMMITMENT 11

We will continue to review services for children and young people affected by parents who misuse drugs or alcohol and ensure quality service delivery.

### COMMITMENT 12

Our training offer will include training and upskilling programmes for partners in relation to identifying children and young people affected by drugs or alcohol.

# Key Priority 4 - RECOVERY

**In Worcestershire, we will work as a partnership to continue to develop our recovery model so that there is a county wide offer of world class recovery support.**

The process of reaching recovery takes time to achieve, and effort to maintain. In Worcestershire, we will work towards achieving a Recovery-Orientated System of Care (ROSC). The UK government's Drug Recovery Champion stated that the creation of a ROSC offers the best chance for helping people to move on from drug dependence. At its best, ROSC is built on person-centred services and supports multiple non-linear pathways to recovery.

In Worcestershire, we will build on our current recovery services which see those with lived experience of drug dependence working as recovery champions and recovery coaches. We would like there to be networks of peer-based recovery support, communities of recovery, and mutual aid groups available in areas of need across the county.

## RECOVERY COMMITMENTS

### COMMITMENT 1

The partnership will actively engage, promote, and enable recovery-oriented systems of care (ROSC) so that there is a hope and ambition for every person who enters treatment to recover and live a life independent of services.

### COMMITMENT 2

We will work to ensure that those with a drug and alcohol problem have equitable access to health services. This includes support address mental health and physical needs of services users .

## JOB, HOMES AND FRIENDS COMMITMENTS

### COMMITMENT 3

We will seek to expand opportunities for people in recovery to access meaningful activities. This includes employment support, volunteering and peer support opportunities.

### COMMITMENT 4

We will continue to develop our response to those with drug or alcohol problems and ensure that people's ability to engage in treatment is not hampered by their need for support with housing.

### COMMITMENT 5

We will ensure that peer-based recovery support services and communities of recovery are linked to and embedded in Worcestershire's drug and alcohol treatment system.





# Delivering the Strategy

## PARTNERSHIP AND GOVERNANCE

This strategy is the overarching document that demonstrates a collective understanding and commitment from local partnership members to address drug and alcohol use across Worcestershire. Accountability for this strategy sits with the local partnership board. This strategy will be supported by a joint action plan agreed to and championed by each partner within the partnership.

The action plan will be directly linked to our identified priorities and commitments, with progress measured against an outcomes framework linking to the CDP framework. Below this, each partner will choose whether to develop bespoke, or adopt existing individual action plans to capture the actions that they as an organisation will have responsibility for. The local partnership board will oversee the action plans arising from this strategy.

Feedback from those who use interventions and services will form a vital part of service development, our commissioning which includes joint commissioned activity with the key partners, and our monitoring procedures. We will work to ensure that the voice of those with lived experience of drug and alcohol issues informs and continually improves our provision.

The local partnership board will provide annual monitoring reports to the Worcestershire Safer Communities Board, setting out progress against our priorities and identified outcomes. The strategy and joint action plan will be regularly reviewed by the board.

Delivery of this Strategy will require sustained commitment from all partners, if we are to continue to make a measurable difference to the lives of those impacted by drug and alcohol use. We are focused on delivering real change, strengthening the coordination of services, learning from the latest research, and continuing to develop and respond to the needs of our community.

## LOCAL PARTNERSHIP BOARD MEMBERS

- Worcestershire County Council, Public Health and Adult Social Care
- Worcestershire Children First
- West Mercia Police
- West Mercia Police and Crime Commissioner
- West Mercia Youth Justice
- West Mercia Probation
- HM Prison Service
- People with lived/living experience
- Cranstoun, community treatment provider
- Herefordshire and Worcestershire Integrated Care Board
- Worcestershire Acute Hospitals NHS Trust
- Herefordshire and Worcestershire Health and Care NHS Trust
- Department of Work and Pensions
- Housing and District Councils across Worcestershire
- Office for Health Improvement and Disparities

## PARTNERSHIP COMMITMENTS

In addition to the commitments attached to the four priorities, we have created a set of partnership commitments that will inform all areas of our work as a partnership. They are informed by the National Commissioning Quality Standard (CQS) for drug and alcohol treatment and recovery and supported by all partners.

### COMMITMENT 1

We commit to ensuring that the local partnership board includes all relevant local members detailed in the draft CQS. The board will run regularly and be accompanied by joint delivery and commissioning plans. Partners, including those with lived experience, must ensure that their organisational approaches align, incorporate, and complement the partnership's activity to reduce drug and alcohol harm, and opportunities to jointly commission services are pursued where appropriate. Above all, there should be a strategic and collaborative relationship with alcohol and drug treatment providers.

### COMMITMENT 2

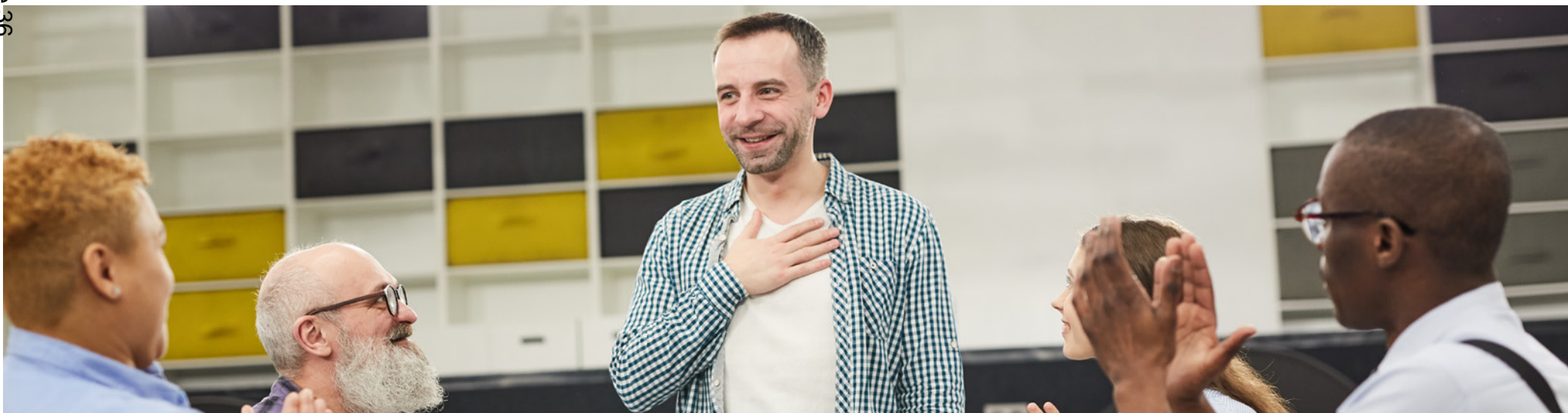
The partnership ensures there is sufficient strategic and commissioning capacity to coordinate partnership delivery, and that commissioners and coordinators are supported to develop and maintain specialist knowledge of problem alcohol and drug use. Representatives from the local partnership board will display an active involvement in other relevant strategic groups and feed back to the partnership.

### COMMITMENT 3

The local partnership board will ensure that performance is regularly reviewed against agreed outcomes and appropriate actions are taken. The board will identify, agree, and publicise its priorities and develop mechanisms to monitor and report on progress.

### COMMITMENT 4

The board will ensure that it has a sufficient and shared understanding of local need, including the experiences of diverse and protected populations.





# Glossary

<b>CCG</b>	Clinical Commissioning Group
<b>CDP</b>	Combatting Drugs Partnership
<b>CQS</b>	Commissioning Quality Standards
<b>CSP</b>	Community Safety Partnership
<b>DLUHC</b>	Department for Levelling Up, Housing and Communities (formerly MHCLG)
<b>IPS</b>	Individual Placement and Support
<b>MHCLG</b>	Ministry for Housing, Communities, and Local Government
<b>OHID</b>	Office for Health Improvement & Disparities
<b>ROSC</b>	Recovery Orientated Systems of Care
<b>RSE</b>	Relationships and Sex Education
<b>SMOG</b>	Substance Misuse Oversight Group

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WCC Worcestershire Insights website. Available at: <https://data.worcestershire.gov.uk/>

# Appendix

## WEST MERCIA POLICE FORCE DRUGS DELIVERY PLAN 2021-24

Force Drugs Delivery Plan 2021-24

Work with our local partners, NCA, ROCU, BTP and Prisons Establishment to reduce the harm associated to the supply of illicit drugs



### PURSUE

- Resource drugs expert witness and proactive investigation assets proportionate to the demand
- Seek to expedite PWITS and drugs conspiracy investigations
- Seek to recover financial assets from those convicted of PWITS and drugs conspiracy investigations

### PREPARE

- Develop and maintain a current market profile to understand the Force's picture of demand, dependency and consumption
- Embed partnership pathways for referrals and diversion
- Develop a structured CPD process for Drug expert witnesses thus ensuring continued credibility of status
- Identify and disseminate relevant learning throughout the organisation

### PROTECT

- Seek to engage and align with regional and national campaigns targeting illicit drugs supply (examples - County Line Intensification Weeks and Naloxone capability & Government 10yr Drugs Strategy "From Harm to Hope")
- Work with partners and 3<sup>rd</sup> sector organisations to identify online opportunities that reduce risk

### PREVENT

- Have in place early warning mechanisms to identify emerging trends and risks
- Develop and promote education opportunities with children and young persons
- In conjunction with PCC's office, Partners & 3<sup>rd</sup> sector organisations develop, implement and maintain diversionary schemes
- Utilise out of court disposals where appropriate to educate, rehabilitate and prevent further offending
- Drugs testing on arrest



## OVERVIEW AND SCRUTINY PERFORMANCE BOARD 19 OCTOBER 2023

### SCRUTINY CHAIRMEN (AND LEAD MEMBER) UPDATE, WORK PROGRAMME AND CABINET FORWARD PLAN

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#### Summary

1. Members of the Overview and Scrutiny Performance Board (OSPB) are asked to consider and comment on the Scrutiny Chairmen (and lead member) updates, OSPB Work Programme, Scrutiny Task Group suggestions and the Cabinet Forward Plan.

#### Member Updates

2. In order to ensure that Members of the Board are fully informed about issues relating to scrutiny in Worcestershire, communication between Members is essential.
3. Members of the Board are therefore invited to feedback on recent Scrutiny meetings (including performance and budget monitoring), Task Groups and emerging issues and developments within their remit. Regard for the Council's statutory requirements in relation to access to information will be critical.
4. Board Members' areas of responsibility are as follows:
  - Adult Care and Well Being Overview and Scrutiny Panel – Shirley Webb
  - Children and Families Overview and Scrutiny Panel – David Chambers
  - Corporate and Communities Overview and Scrutiny Panel – Emma Stokes
  - Economy Overview and Scrutiny Panel – Matt Dormer
  - Environment Overview and Scrutiny Panel – Alastair Adams
  - Health Overview and Scrutiny Committee (HOSC) – Brandon Clayton
  - Crime and Disorder – Richard Udall
5. To assist in their role, scrutiny lead members have the benefit of regular briefings from the Directorates they are shadowing, something which was put into place by the Strategic Leadership Team (SLT). These briefings, alongside the Forward Plan (see below), can be used to help identify any emerging issues that may be appropriate for future scrutiny. Recognising that work across the County Council is of interest and value to all Board members, the notes from these briefings (where produced) are available to all members electronically.

#### Work Programme

6. From time to time, the Board will review its work programme and consider which issues should be investigated as a priority.

7. Worcestershire County Council has a rolling annual Work Programme for Overview and Scrutiny, which is agreed by Council on an annual basis. The last programme was agreed on 18 May 2023.
8. The Board is asked to consider its 2023 Work Programme (attached at Appendix 1) and agree whether any amendments are needed.
9. The main responsibilities of the Board are:
  - Commissioning work for Scrutiny Panels
  - Establishing Scrutiny Task Groups (agreeing Terms of reference and Reports)
  - Advising on Council's Policy Framework ie Sustainable Community Strategy (if any), Corporate Plan, Children and Young People's Plan, Local Transport Plan, Youth Justice Plan, 'Act Local in Worcestershire' framework, such other plans and strategies as required by law to form part of the Policy Framework or which may be and have been adopted to be part of that Framework eg Corporate Plan, Budget
  - Call-ins
  - Designated by the Council as its statutory Crime and Disorder Committee and must meet at least annually.
10. The Board agreed to use a set of criteria (listed below) to help determine its scrutiny programme. A topic does not need to meet all of these criteria to be scrutinised, but they are intended as a guide for prioritisation.
  - Is the issue a priority area for the Council?
  - Is it a key issue for local people?
  - Will it be practicable to implement the outcomes of the scrutiny?
  - Are improvements for local people likely?
  - Does it examine a poor performing service?
  - Will it result in improvements to the way the Council operates?
  - Is it related to new Government guidance or legislation?

### **Scrutiny Task Groups**

11. At the Board's 6 September meeting, an initial discussion took place about possible areas for the next scrutiny task group. The Board has since sought suggestions from all Councillors and the Overview and Scrutiny Panels/ Health Overview and Scrutiny Committee have also been consulted.
12. The most recent Scrutiny Task Group exercises have been:
  - Developer Funded Infrastructure
  - Child and Adolescent Mental Health Services
13. All suggested topics received are included at Appendix 2. Taking into account the prioritisation criteria detailed in paragraph 10, Board members are asked to consider the suggestions put forward and agree which of those suggestions should be scoped out.

## **Cabinet Forward Plan**

14. The Board will wish to consider any issues arising from the Council's Forward Plan. The latest version of the Plan available at the time of Agenda despatch is included (as Appendix 3) for consideration.

## **Purpose of the Meeting**

15. Members of the Board are asked to:
- (i) provide feedback on the work within their Scrutiny remit, Panels and Task Groups
  - (ii) consider the Board's Work Programme and agree if any amendments are needed
  - (iii) agree a prioritisation list of scrutiny task group suggestions for further scoping
  - (iv) consider the Cabinet Forward Plan and agree whether any issues should be added to the Scrutiny Work Programmes.

## **Supporting Information**

- Appendix 1: OSPB 2023/24 Work Programme
- Appendix 2: Suggestions for Scrutiny Task Group Work
- Appendix 3: **Forward Plan 2023**

## **Contact Point for the Report**

Samantha Morris, Interim Democratic Governance Scrutiny Manager - Tel: 01905 844963 Email: [sjmorris@worcestershire.gov.uk](mailto:sjmorris@worcestershire.gov.uk)

## **Background Papers**

In the opinion of the proper officer (in this case the Assistant Director for Legal and Governance (and Monitoring Officer) there are no background papers relating to the subject matter of this report:

All agendas and minutes are available on the Council's website.

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**Overview and Scrutiny Performance Board – 2023/24 Work Programme**

<b>Date of Meeting</b>	<b>Issue for Scrutiny</b>	<b>Date of Last Report</b>	<b>Notes/Follow-up Action</b>
19 October 2023	Annual Crime and Disorder Meeting	20 October 2022	
	Scrutiny Chairmen (and Lead Member) Update, Work Programme and Cabinet Forward Plan		
19 December 2023	Update on the progress of the recommendations from the Child and Adolescent Mental Health Services Scrutiny	27 February 2020	Considered by Cabinet on 30 March 2023 and the Herefordshire and Worcestershire Integrated Care Board
	Budget Scrutiny 2024/25		
	Scrutiny Chairmen (and Lead Member) Update, Work Programme and Cabinet Forward Plan		
January 2024	Budget Scrutiny 2023/24		
	Scrutiny Chairmen (and Lead Member) Update, Work Programme and Cabinet Forward Plan		
February 2024	Scrutiny Chairmen (and Lead Member) Update, Work Programme and Cabinet Forward Plan		
March 2024	Review of Overview and Scrutiny Performance Board Work Programme		
	Scrutiny Chairmen (and Lead Member) Update, Work Programme and Cabinet Forward Plan		

April 2024	Refresh of the Overview and Scrutiny Work programme		
	Scrutiny Chairmen (and Lead Member) Update, Work Programme and Cabinet Forward Plan		
<b>Possible Future Items</b>			
July 2024	Update on the Corporate Plan	26 July 2023	
TBC	Income Generation		Suggested at 17 March 2020 meeting
TBC	Update on the progress of the recommendations from Developer-Funded Highways Infrastructure and Section 278 Technical Approval Scrutiny	28 April 2023	Considered by Cabinet on 25 May 2023
TBC	Crime and Disorder – Safety of Worcestershire parks and open spaces		Suggested at 30 September 2021 meeting
TBC	Update on the Drugs and Alcohol Strategy	30 January 2023	
TBC	Draft Scrutiny Report: Education, Health and Care Plans (EHCPs)		
<b>Standing Items</b>			
Each meeting	Scrutiny Chairmen (and Lead Member) Update, Work Programme and Cabinet Forward Plan		

	(including Quarterly Performance and In-Year Budget Monitoring – Feedback from Scrutiny Panels where appropriate)		
March	Review of Overview and Scrutiny Performance Board Work Programme	Annually	March
April	Refresh of the Overview and Scrutiny Work programme	Annually	April
September	Annual Update from Worcestershire Local Enterprise Partnership (LEP)		September
October	Annual Crime and Disorder Meeting	20 October 2022	October
November – January (as appropriate)	Budget Scrutiny	Annually	November – January (as appropriate)
As necessary	Call-ins		As necessary
As necessary	Commissioning work for Scrutiny Panels		As necessary
As necessary	Establishing Scrutiny Task Groups (agreeing Terms of reference and Reports)		As necessary
As necessary	Advising on Council's Policy Framework i.e. Sustainable Community Strategy (if any), Corporate Plan, Children and Young People's Plan, Local Transport Plan, Youth Justice Plan, 'Act Local in Worcestershire' framework, such other plans and strategies as required by law to form part of the Policy Framework		As necessary

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## Suggested Topics for Scrutiny Task Group Work

Topic	Background to suggestion
Footpath degradation	Footpath degradation is becoming a problem across the county and the long-term footpath program needs to be reviewed.
Adoption of Roads into the Public Highway	Issues resulting from the time taken to adopt roads in developments - the problem is very challenging.
How planning conditions/recommendations are drafted when responding to Planning Authority enquiries or consultations.	
How to have better partnership working with Highways England on highways projects.	
Council notices of motion which were passed in this term of office (whether amended or not) to be scrutinised to see if any actual action has resulted.	
Major projects and how local councillors and residents can be better involved in every step of the process.	To ensure future major projects are wanted by residents.
Traffic Regulation Orders – to ensure processes are open to councillors and residents.	
Bus Services	
Mobile connectivity in relation to health – looking at care agency implications/ enabling people to continue to live in their homes.	
Disabilities Facilities Grant process.	
Challenges for those with sight loss in accessing Council services.	
Traffic calming	To review the Council's current policy including use of chicanes and speed bumps which are used in other countries, and use of 20 mph speed limits in residential areas.
West Mercia Police staff morale	

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## EXTRACT OF THE CABINET

### FORWARD PLAN

#### FORMAL NOTICE OF KEY DECISIONS TO BE TAKEN BY, AND PRIVATE MEETINGS OF, CABINET (OR OTHER EXECUTIVE DECISION-MAKING BODY OR PERSON)

Forward Plan	Decision Not Before	Page No.
<a href="#">Healthy Worcestershire Programme</a> Key Decision	26 October 2023	4
<a href="#">Shrub Hill Towns Fund Funding Agreement</a> Key Decision	26 October 2023	5
<a href="#">Treasury Management Mid-Year Update</a>	26 October 2023	6
<a href="#">Worcestershire County Museum Review of Lease</a>	26 October 2023	7
<a href="#">Adult Social Care Strategy</a> Key Decision	23 November 2023	8
<a href="#">Income and Debt Policy</a>	23 November 2023	9
<a href="#">Local Nature Recovery Strategy</a>	23 November 2023	10
<a href="#">Revenue and Capital Budget Monitoring Period 6</a>	23 November 2023	11
<a href="#">The New Foxlydiate First School</a> Key Decision	23 November 2023	12
<a href="#">Worcestershire Parkway Rail Station Car Park Expansion</a> New Entry	23 November 2023	13
<a href="#">'Called In' Decisions or Scrutiny Reports</a> Potentially Key Decision	Within the plan period	14
<a href="#">Notices of Motion</a> Potentially Key Decision	Within the plan period	15

**All entries will be for decision by Cabinet unless otherwise indicated**

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