

OVERVIEW AND SCRUTINY PERFORMANCE BOARD 30 JANUARY 2023

WORCESTERSHIRE DRUG AND ALCOHOL STRATEGY

Summary

1. The Cabinet Member with Responsibility for Health and Wellbeing and the Interim Director of Public Health have been invited to the meeting to update the Panel on developments relating to local drug and alcohol related outcomes and the development of a Worcestershire Drug and Alcohol Strategy

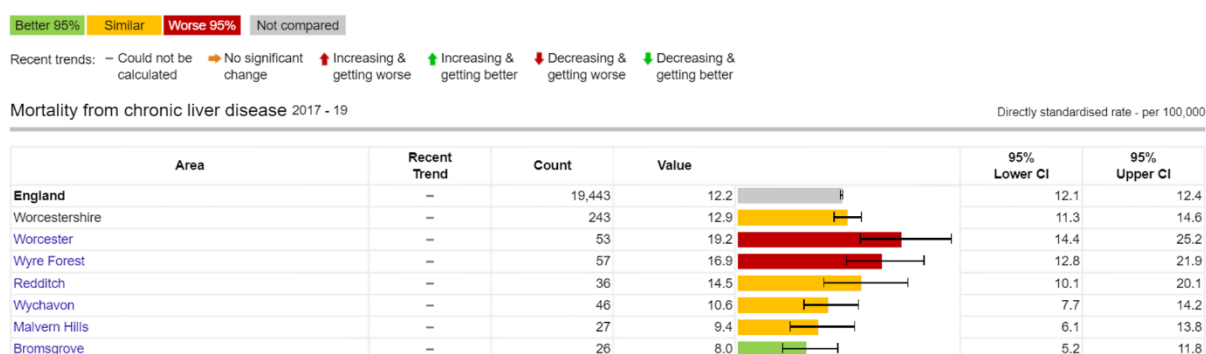
Background

2. Following a discussion during the community safety update report at the Overview and Scrutiny Performance Board on 20 October 2022, an update on drug and alcohol services and local outcomes was added to the Board's Work Programme.
3. Drug and alcohol misuse have the potential to cause increased risk of harm to individuals, those closest to them and wider society. The primary purpose of the drug and alcohol service is to reduce drug and alcohol related harm and promote recovery.
4. Under the Health and Social Care Act (2012), local authorities have the duty to reduce health inequalities and improve the health of their local population by ensuring that there are public health services aimed at reducing drug and alcohol misuse. Improving outcomes from Drug and Alcohol treatment services is a requirement of the Public Health Ring Fenced Grant
5. Cranstoun have been commissioned to deliver an integrated Drug and Alcohol specialist treatment service for young people and adults living in Worcestershire. The annual value of the contract is £3,883,536 and is due to end in April 2025. The aim of the service is to reduce drug and alcohol related harm and promote recovery throughout Worcestershire, working together in partnership with service users and stakeholders in the wider health and care system.
6. In recent years central government investment in drugs and alcohol support has resulted in additional funding for services in Worcestershire. This has enabled a new targeted service which supports individuals who are rough sleeping (or at risk of) to access drug and alcohol treatment and wider health and care support. Additional investment will also enable increased service capacity, increased availability of in-patient detox and residential rehab and greater availability of naloxone.
7. In 2020/21, 2,390 adults accessed structured drug and alcohol treatment in Worcestershire. Of those 777 (33%), accessed support for alcohol use conditions with the remaining services receiving support relating to drug use.

- Successful completions from drug and alcohol treatment measure the proportion of service users who have left structured treatment successfully (free of alcohol dependence), who do not then re-present to treatment within 6 months. In 2020¹, 42.4% of Alcohol users successfully completed treatment, significantly better than the England average of 35.3%. In the same year, 5% of opiate users successfully completed treatment, similar to the England average 4.7%. This is one measure of recovery; however it is important to note that the term recovery can mean different things to different people.

Local need

- For many variables, Worcestershire has similar or better outcomes relating to Drugs and Alcohol when compared to England averages. The rate of drug related deaths in Worcestershire is also similar to the national average, however rates have increased in recent years, aligned with the national trend.
- The rate of hospital admissions for alcohol-related conditions in Worcestershire (465 per 100,000) is similar to the national average (456). However, this masks considerable variation across the county. In Redditch and Wyre Forest, rates are significantly worse than the national average, whilst Malvern Hills has a significantly lower rate. In Worcester, Wychavon and Bromsgrove rates are similar to the national average.
- The rate of alcohol related mortality in Worcestershire is 38.1 (per 100,000) which is similar to the national average (37.8) and although the rates vary across the districts, the rates are all similar to the national average. Further, whilst the rate of mortality from chronic liver disease (see image below) in Worcestershire (12.9 per 100,000) is similar to England (12.2) rates again vary considerably across the County. In Worcester (19.2) and Wyre Forest (16.9), rates are significantly worse than England, whilst Bromsgrove has a significantly lower rate. In Redditch, Wychavon and Malvern, rates are similar to the national average.



- Across England, hospital admissions and mortality related to alcohol consumption disproportionately impacts individuals living in the most deprived communities. The alcohol harm paradox is the observation that individuals of a lower socioeconomic status experience the greatest alcohol related harm even though alcohol consumption is often the same or less than those of high

¹ Office for Health Improvement and Disparities (OHID), Public Health Outcomes Framework

socioeconomic status. The causes of this observation are complex, but likely related to differing patterns of consumption and the impact of wider social determinants of health.

Worcestershire Drug and Alcohol Strategy

13. In 2021, Dame Carol Black was commissioned by the Home Office and the Department for Health and Social Care (DHSC) to undertake a two-part independent review of drugs, to inform the government's thinking on what more could be done to tackle the harms that drugs cause. The report outlined key themes for improvement, including increasing access to treatment and recovery services
14. The Government accepted the findings of the review and in 2021 published '[From Harm to Hope](#)' a 10-year plan to cut crime and save lives by reducing the supply and demand for drugs and delivering a high-quality treatment and recovery system. The strategy has three key strategic priorities, 1) Break Supply Chains; 2) Deliver a world class treatment and recovery system and 3) Achieve a generational shift in demand for drugs.
15. To support the delivery of 'From Harm to Hope' the development of new local 'Combating Drugs Partnerships' (CDP) were mandated. These partnerships bring together local stakeholders to better understand their populations and identify challenges and solutions. CDP's are accountable for delivering the outcomes in the National Outcomes Framework with a named Senior Responsible Officer reporting to central government. The Senior Responsible Officer is West Mercia Police and Crime Commissioner, John Campion.
16. In response to the development outlined above, a Worcestershire Drug and Alcohol Strategy has been co-produced by members of the Substance Misuse Oversight Group (SMOG) and supported by Public Health. The new strategy is aligned with 'From Harm to Hope' and is reflective of local priorities and governance arrangements.
17. Each chapter of the draft strategy has a series of commitments, each designed to improve outcomes for the Worcestershire population. The full (draft) strategy is attached as Appendix 1.
18. The commitments will support the development of an action plan, to be owned and overseen by members of SMOG. Progress against the action plan will be reported to Safer Communities Board (SCB), the Health and Wellbeing Board (HWB) and the CDP as required.

Purpose of the Meeting

19. Members of the Board are asked to:
 - Consider and comment on the development of the Worcestershire Drug and Alcohol strategy and
 - Determine whether any further information or scrutiny on a particular topic is required.

Supporting Information

Appendix 1 – Worcestershire Drug and Alcohol draft Strategy

Contact Points

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Background papers

In the opinion of the proper officer (in this case the Democratic Governance and Scrutiny Manager (Interim Monitoring Officer) the following are background papers relating to the subject matter of this report.

[Agenda and Minutes for Overview and Scrutiny Performance Board on Thursday, 20th October, 2022, 10.00 am - Worcestershire County Council \(moderngov.co.uk\)](#)

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