

HEALTH AND WELLBEING BOARD 14 FEBRUARY 2023

WORCESTERSHIRE DRUG AND ALCOHOL STRATEGY

Board Sponsor

Cllr Karen May, Cabinet Member with Responsibility for Health and Wellbeing

Author

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Priorities

This report is relevant to the following Joint Local Health and Wellbeing Strategy priorities:

- Mental Health and Wellbeing
- Healthy Living at All Ages
- Homes, Communities and Places
- Jobs and Opportunities

Safeguarding

This report does not have a direct impact on safeguarding children or adults.

Item for Decision, Consideration or Information

• Information and assurance

Recommendation

- 1. The Health and Wellbeing Board is asked to:
 - a) note the development of the Worcestershire Drug and Alcohol Strategy and the implications of wider system development; and
 - b) consider how the Health and Wellbeing Board might support the successful implementation of the Worcestershire Drug and Alcohol Strategy

Background

 The annual Crime Survey for England¹ and Wales collects data related to drug misuse. The survey suggested that, approximately 1 in 11 adults aged 16 to 59 years and approximately 1 in 5 adults aged 16 to 24 years reported last year drug use in the year ending June 2022; there was no change compared with the year

¹ Drug misuse in England and Wales: Year ending June 2022

ending March 2020. Further, there was a significant decrease in the proportion of adults reporting use of class A drugs in the last year.

- 3. The most recent (2021) survey on Smoking, Drinking and Drug Use among Young People in England² showed that the proportion of those aged 11 to 15 years in England who had taken any drug (excluding new psychoactive substances) in the last year was 10.4%. This was lower than previously estimated in 2018 (14.5%).
- 4. The table below shows what the Office for Health Improvement and Disparities estimate to be the prevalence of opiate and crack use in Worcestershire and how this compares to the national rate, per 1000 of the population.

	Worcestershire ³		England
Drug Group	Prevalence estimate (n)	Rate per 1000	Rate per 1000
Crack	1,764	4.9	5.1
Opiates	2,118	5.4	7.3
Opiate and Crack	2,298	6.4	8.9
use			

- 5. Worcestershire has similar or better outcomes relating to Drugs and Alcohol when compared to England averages for a range of variable. The rate of drug related deaths in Worcestershire is similar to the national average, however rates have increased in recent years, aligned with the national trend
- 6. 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, while Malvern Hills has a significantly lower rate. In Worcester, Wychavon and Bromsgrove rates are similar to the national average.
- 7. The rate of alcohol related mortality in Worcestershire is 38.1 (per 100,000) which is similar the national average (37.8) and although the rates vary across the districts, the rates are all similar to the national average. Further, while 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, while Bromsgrove has a significantly lower rate. In Redditch, Wychavon and Malvern rates are similar to the national average.
- 8. 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 governments thinking on what more could be done to tackle the harms that drugs cause. Part 1¹ focused on challenges posed by drug supply and demand and part 2² focused on drug treatment, recovery and prevention.

² Smoking, Drinking and Drug use amongst young people in England 2021

³ National Drug Treatment Monitoring System (NDTMS): Adult Drug Commissioning Support Pack

- 9. The report outlined key themes for improvement which revolved around increasing access to treatment and recovery support for those who misuse drugs; ensuring a high quality package for treatment and recovery and reducing drug demand and problematic use.
- 10. The Government accepted the findings of the review and in 2021 published 'From Harm to Hope3' 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.

Combating Drugs Partnerships

- 11. To support the delivery of 'From Harm to Hope' new local 'Combating Drugs Partnerships' (CDP) were mandated alongside the publication of a new **National Outcomes Framework** which focused on reducing drug use, drug related crime, deaths and harm was published. These new partnerships bring together local stakeholders to understand their populations, 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.
- 12. The Worcestershire and Herefordshire CDP was initiated in 2022 and the Senior Responsible Officer is West Mercia Police and Crime Commissioner, John Campion. An additional West Mercia based CDP, involving Shropshire and Telford has also been develop and is led by the PCC.

Worcestershire Drug and Alcohol Strategy

- 13. In response to the developments 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, attached at **Appendix**A. The new strategy is aligned with 'From Harm to Hope' and is reflective of local priorities and governance arrangements.
- 14. Each chapter of the draft strategy has a series of commitments, each designed to improve outcomes for the Worcestershire population. The full (draft) strategy has been shared alongside this paper.
- 15. 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, the Health and Wellbeing Board and the CDP as required.

Legal, Financial and HR Implications

16. The legal, financial and HR implications of delivery of outcomes rests with responsible commissioners and providers.

Privacy Impact Assessment

17. There is no required privacy impact assessment at this stage.

Equality and Diversity Implications

18. An Equality Relevance Screening has been completed in respect of these recommendations. The screening did not identify any potential equality considerations requiring further consideration during implementation.

Contact Points

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