

Health & Wellbeing Board Briefing Note

The Place Board have asked to monitor progress on the following issues. This briefing contains the latest position as at 24/10/2022

Subject: An update regarding progress to establish the Combatting Drugs Partnership

OBJECT AND KEY POINTS IN THIS REPORT

This report is intended to provide an overview to the background to the requirement to establish Combatting Drugs Partnerships and of the progress made in North and North East Lincolnshire towards the development of the Northern Lincolnshire Combatting Drugs Partnership

The report will highlight the work to be undertaken by the Partnership and to present the key milestones.

Members are asked to note the current position towards development and achievement of the required milestones

BACKGROUND INFORMATION

In December 2021, the Government released a 10-year Drugs Strategy 'From Harm to Hope'. Local guidance to support the national strategy requires local areas to establish 'Combatting Drugs Partnerships', based on place, that are to deliver the 3 strategic priorities set out in the strategy:

- breaking drug supply chains
- delivering a world-class treatment and recovery system
- achieving a shift in the demand for drugs

Combating Drugs Partnerships (CDPs) should be multi-agency forums that are accountable for delivering outcomes in local areas. They should provide a single setting for understanding and addressing shared local challenges related to drug and alcohol-related harm.

In July 2022 senior leaders across North and North East Lincolnshire (including elected leaders, local authority chief executives, the chief executive of the ICB, regional probation director and the Director of Public Health) agreed a Northern Lincolnshire footprint for the Combatting Drugs Partnership in North and North East Lincolnshire.

At the same time there was agreement for Derek Ward, the Director of Public Health, to be the Senior Responsible Owner for the Partnership. The role of the SRO is to represent the partnership nationally, reporting to central government for its performance, and to offer challenge and support to local partners to drive improvement and unblock issues when necessary.

The key milestones for establishing CDPs, as set out by Government, are in the table below

Milestone	Deadline	Progress
Partnership geography and SRO to be agreed by all partners	1 st August 2022	complete
Membership, terms of reference and governance agreed	End of September 2022	complete
Partners carry out joint assessment of local evidence, data and need	End of November 2022	underway
Delivery plan and performance framework developed across supply, demand, treatment and recovery	End of December 2022	underway
Review progress against plan and local outcomes	End of April 2022	
Work with central government support to update and improve	Ongoing	

The geographical footprint and Senior Responsible Owner for the Partnership was notified to the Home Office in late July, meeting the first milestone.

The second milestone was to agree the core membership, terms of reference and governance for the Combating Drugs Partnership by the end of September has also been achieved.

The third milestone is for partners to carry out joint assessment of local evidence, data and need, required by the end of November 2022. Work is underway with partners to achieve this and the fourth milestone.

Membership

The local guidance sets out expected members for the partnership. Minimum key organisations and individuals include:

- Elected members
- Local authority officials (including expertise in relevant areas such as substance misuse, housing, employment, education, social care and safeguarding)
- NHS (including strategic and mental health provider representation)
- Jobcentre Plus
- Substance misuse treatment providers
- Police
- PCC
- National Probation Service
- People affected by drug-related harm
- The secure estate, such as prisons, young offender institutions (YOIs)

In addition to these organisations, partnerships are also expected to engage and work with:

- Local schools and other education providers
- Higher education
- Further education
- Housing associations and providers of supported housing and homelessness services
- Youth offending teams
- Voluntary, community and social enterprise (VCSE)
- Coroner's offices
- Fire and rescue authorities
- Office for Health Improvement and Disparities regional team

This also a requirement to ensure those with lived experience, such as recovery communities, are involved in the CDP.

Initial meeting of the partnership

The first meeting of the Northern Lincolnshire Combating Drugs Partnership took place on Friday 21st October and enjoyed good representation and engagement from across the key organisations in the group. The work required to achieve the remaining milestones was discussed and agreed. Members were sighted on and committed to their engagement and contribution to the partnership. The next meeting will be scheduled for mid-Dec.

Governance

The proposed Governance arrangement in North East Lincolnshire is for the Combatting Drugs Partnership to report to the Health and Wellbeing Board. An identical arrangement will be in place in North Lincolnshire (please refer to appendix A)

Terms of Reference

Terms of Reference for the Northern Lincolnshire Combating Drugs Partnership have been developed, it is recognised that these will further develop as the partnership progresses.

OPTIONS FOR CONSIDERATION

Members are asked to note the current position towards the development of the Combating Drugs Partnership.

FINANCIAL AND OTHER RESOURCE IMPLICATIONS (e.g. LEGAL, HR, PROPERTY, IT, COMMUNICATIONS etc.)

There will be implications for all partners in terms of identifying need and achieving aims

- As governance arrangements are developed the local reporting mechanisms and alignment with existing groups will need to be determined
- The Government is providing increased funding in the form of the Supplementary Substance Misuse Treatment and Recovery Grant and grants for residential detox programmes to enable the development of local treatment and recovery services to meet the aims of the partnership
- There is little risk that the timetable for action in establishing the partnership will not be met

OTHER RELEVANT IMPLICATIONS (e.g. CRIME AND DISORDER, EQUALITIES, COUNCIL PLAN, ENVIRONMENTAL, RISK etc.)

Drugs and alcohol use are significant contributors to crime and disorder, part of the purpose of the Combating Drugs Partnerships is to reduce the impact of drug and alcohol use and thereby reduce related levels of crime and disorder.

There will be no issues under the Equalities Act 2010 arising from the work of the Partnership

The Partnership will contribute towards the priorities as set out in the Council Plan.

OUTCOMES OF INTEGRATED IMPACT ASSESSMENT

Not applicable

OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED

Not applicable

Contact Officer:

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Northern Lincolnshire Combatting Drugs Partnership

Draft Terms of Reference

Accountability

The Northern Lincolnshire Combating Drugs Partnership (CDP, covering the geographical areas of North Lincolnshire and North East Lincolnshire) is equally accountable to the respective Health and wellbeing Boards North Lincolnshire and North East Lincolnshire. There will also be lines of mutual reporting with the respective Community Safety Partnerships, the nature of these mutual lines of reporting are in development.

Responsibilities

The Northern Lincolnshire Combating Drugs Partnership will:

- Work in partnership to develop and then deliver an evidence-informed drug and alcohol strategy aligned to the 2021 National Strategy from Harm to Hope.
- Develop an accurate understanding of drug and alcohol misuse and incidents arising from this misuse within the Northern Lincolnshire geographical footprint and establish appropriate intelligence gathering and sharing arrangements to do this.
- Raise the awareness of drug and alcohol misuse in Northern Lincolnshire, to support Partners to be able to identify how this affects their work and how they can contribute to reducing drug and alcohol related harm.
- Identify places and groups that are most vulnerable to drug and alcohol misuse and its effects and target them holistically for both prevention and treatment.
- Develop a robust prevention programme for drug and alcohol related harm in Northern Lincolnshire, with a focus on the most vulnerable in society and reducing inequalities in outcomes.
- Manage and monitor multi-agency working to maximise access to treatment for drug and alcohol issues and ensure that treatment and recovery systems are operating effectively within the wider system (e.g. health, housing, employment).
- Develop and share best practice locally, regionally and nationally, applying continuous learning to inform future CDP activity.
- Identify the risks and barriers that the CDP encounters whilst carrying out actions. If these cannot be resolved by the CDP they should be escalated to the respective Health and Wellbeing Boards.

The Role of Members

Combatting Drugs Partnership members are responsible for:

- Contributing to the development and delivery of a local drugs and alcohol plan with a whole-system approach addressing the priorities set out in from 'Harm to Hope'.
- Contributing to reporting progress towards delivering the local drugs and alcohol plan in line with the National Combating Drugs Outcomes Framework.
- Informing the CDP of any relevant information from their agency regarding commissioning activity, gaps and opportunities.

- Informing the CDP of any cross-cutting or emerging issues identified by their agency.
- Informing the CDP of any changes or developments to their agency that may have implications for the CDP.

Outside of CDP meetings representative are responsible for:

- Undertaking relevant tasks arising from attendance at CDP meetings.
- Informing their agency of implications resulting from decisions made by the CDG.
- Communicating important CDG information to colleagues as necessary.
- Contributing to unblocking issues across the system do improve outcomes related to drug and alcohol misuse.

Membership

- The SRO (or their delegate) is responsible for ensuring all the appropriate agencies are represented at each CDP.
- Agency representatives from statutory partners and other appropriate agencies will be invited to attend meetings as necessary according to each meeting's agenda.
- Any issues relating to CDP attendance will be reported to the SRO.
- The SRO should be confident that the membership provides representation from key stakeholders, with appropriate individuals involved who are able to make decisions and hold each other to account.

Senior Responsible Owner and chair	Derek Ward
Vice Chair	TBC
Coordinator	TBC
Business Support	TBC
Partner Agency	Representative Email
NEL Public Health	Mike Hardy Mike.hardy@nelincs.gov.uk
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Humberside police	Matthew Peach matthew.peach@humberside.police.uk
Yorkshire and The Humber Probation Service	Nick Hamilton-Rudd nick.hamilton-rudd@justice.gov.uk
Humber and North Yorkshire Integrated Care Board (ICB)	Jane Ellerton jane.ellerton@nhs.net
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Councillor, portfolio lead for health, NLC	Richard Hannigan cllr.richardhannigan@northlincs.gov.uk
Carers support centre	Hannah Salah hannah.salah@carerssupportcentre.com
NLC social services (specialist substance misuse social worker)	Charlotte Spain Charlotte.spain@northlincs.gov.uk
HMP	TBC Pa.grier@hmps.gsi.gov.uk

Additional members may be co-opted to the CDP as necessarily to deliver the strategic priorities identified by the group.

Attendance

- All members are expected to attend every meeting.
- In the event a member cannot attend a CDP meeting, they should forward their apologies and identify an appropriate replacement to attend the meeting as their delegate.
- Attendance will be monitored and reviewed at regular intervals by the CDP Chair.

Chair

The Chair of the CDP is required to:

- Chair CDP meetings
- Ensure meeting actions that have a purpose, deadline and an owner
- Be the point of escalation for actions that are not completed by stated deadline
- Maintain liaison between the CDP and the respective CSPs and HWBs
- Engage with CDP members outside of meetings
- Report to the Joint Combating Drugs Unit and other central government departments as required.

The Vice Chair will perform the duties of the Chair in the event of the Chair's absence.

Normally the Chair may serve for a maximum of 3 years and will be reviewed annually.

Administration

Secretariat support will be provided from within North and North East Lincolnshire Councils

- Every member has an equal right to place items on the CDP meeting's agenda.
- The agenda and meeting papers will be circulated to all representatives a week before the meeting.
- Minutes and the action log will be distributed within two weeks of each meeting.
- On the agenda for the following meeting any amendments from previous minutes can be made and a revised version circulated if required.

Coordination

The CDP coordinator will:

- Lead the development and implementation of strategies and plans and work to ensure objectives are being met
- Co-ordinate the delivery of meetings and support the CDP Chair and members
- Work with other co-ordinators, CSP members and other boards to avoid duplication of effort and identify and develop synergies in strategies and work programmes
- Work closely with other lead professionals outside of CDP meetings
- Ensure emerging research, evaluation of relevant projects, inspection findings and best practice is shared across partners, to ensure continual practice development and performance improvement.

There is currently no dedicated role to provide this coordination, the CDP members will need to discuss and identify how this function and support can best be provided.

Meeting Dates

- This group will meet 4 times a year.
- Extra meetings may be arranged if necessary.
- The venue for CDP meetings may rotate around suitable partner sites, or meetings may be hosted virtually.

These Terms of Reference will be reviewed annually.