

## **LEICESTERSHIRE SAFER COMMUNITIES STRATEGY BOARD**

**08 JUNE 2016**

### **PUBLIC HEALTH – SUBSTANCE MISUSE UPDATE**

#### **Background**

1. Nationally Public Health became responsible for substance misuse in 2013 when substance misuse budgets became part of the Public Health Grant. Locally this resulted in the former DAAT/SMST (Drug + Alcohol Action Team/Substance Misuse Strategic Team) moving from Safer Communities in the local authority to the Public Health department and ceasing as a specific separate team.
2. The Public Health team ensures a full range of interventions are available, from prevention and early intervention, through treatment and into sustained recovery. It does this by directly commissioning services and by supporting partners in delivery of services, and involvement in campaigns.

#### **Notable developments and challenges:**

##### **Past Year**

3. Current substance misuse services contracts end on 30<sup>th</sup> June 2016 (Swanswell, LiFT), and a redesign and procurement process has taken place in collaboration with the City.
4. Turning Point has been awarded the contract for specialist substance misuse services across Leicestershire and Leicester City, and will commence on 1<sup>st</sup> July 2016. This contract will combine adult and young person's community based services including those in the criminal justice system and HMP Leicester.
5. The procurement and continued delivery of the substance misuse service is a good example of integrated commissioning by the local authority and the Office of the Police and Crime Commissioner (OPCC) and NHS England.
6. Public Health supports a tiered approach to tackling substance misuse, from prevention and early intervention through treatment and into sustained recovery. This is delivered via different interventions and includes;
  - i) Support for local and national campaigns – current PHE 'One You' national campaign aimed at people in 40's and 50's. Campaign focuses on getting people to make positive changes

around drinking, eating, smoking. Local resources such as the 'Mock Bar' are available for partners to support local health and wellbeing events.

- ii) Alcohol Risk Reduction Scheme – brief interventions delivered by GP's to patients identified as drinking at increasing risk, and referring those at highest risk to specialist services.
- iii) First Contact Plus – providing advice and onward referral.
- iv) Swanswell/LiFT (Turning Point from 1<sup>st</sup> July) – 1-2-1 support, groups, psychosocial interventions, medical/prescribing interventions, needle exchange.
- v) In-Patient Detox- residential detoxification service for drugs and alcohol in specialist hospital setting. Assessment and referral to medium term residential rehabilitation.
- vi) Recovery – network of SMART Recovery, AA/NA groups, peer mentors, and independent recovery groups (eg Dear Albert).

### **Coming Year – to be developed**

7. Integrated Wellness Service – develop the First Contact Plus model to include 'triage' and health and wellbeing advice + support, particularly related to brief alcohol advice.
8. Young People Managing Risk/Building Resilience - review and redesign of young people's tobacco and substance misuse prevention work to provide a holistic 'healthy decision making' model. (will have links with the future 0-19 service).
9. Licensing – Public Health is a 'responsible authority' in relation to licensing. Currently public health is not one of the objectives within the Licensing Act 2003. Although Public Health has developed a mapping system capable of mapping layers of information (licensed premises, alcohol related crimes, schools etc) this has not been able to be rolled out across all districts. Public Health has written content that can be included within Licensing Statements to address public health concerns, again this has not been taken up by all partners.

### **Challenges**

10. Transition of substance misuse treatment services in a safe and timely manner. Ensuring 'business as usual' on 1<sup>st</sup> July and initial risks managed during first 3 months of new service.
11. Reduction in departmental funding has already required thorough review and evaluation of commissioned services, and this will continue in future years. The same challenges face commissioning partners. Important to sustain momentum in developing responses to substances misuse.

**Key issues for partnership working or affecting partners**

12. Licensing – further develop role of Public Health in relation to licensing. Work with district partners to review Licensing Statements and to identify what support could be provided to district licensing.
13. Psychoactive Substances Act 2016 – this act came into force on 26<sup>th</sup> May. Public Health needs to work with partners to deliver an appropriate local response and ensure there is access to support services for those requiring help.

**Recommendations for the Board**

14. That the Board recommend that the Senior Officer Group review current arrangements for ‘responsible authority’ partner contributions to licensing statements and applications.
15. That the Board note the report in particular the key issues for partners.

**Officer to Contact**

Debra Cunningham

Public Health – Leicestershire County Council

Tel: 0116 305 2684

Email: [debra.cunningham@leics.gov.uk](mailto:debra.cunningham@leics.gov.uk)

This page is intentionally left blank