

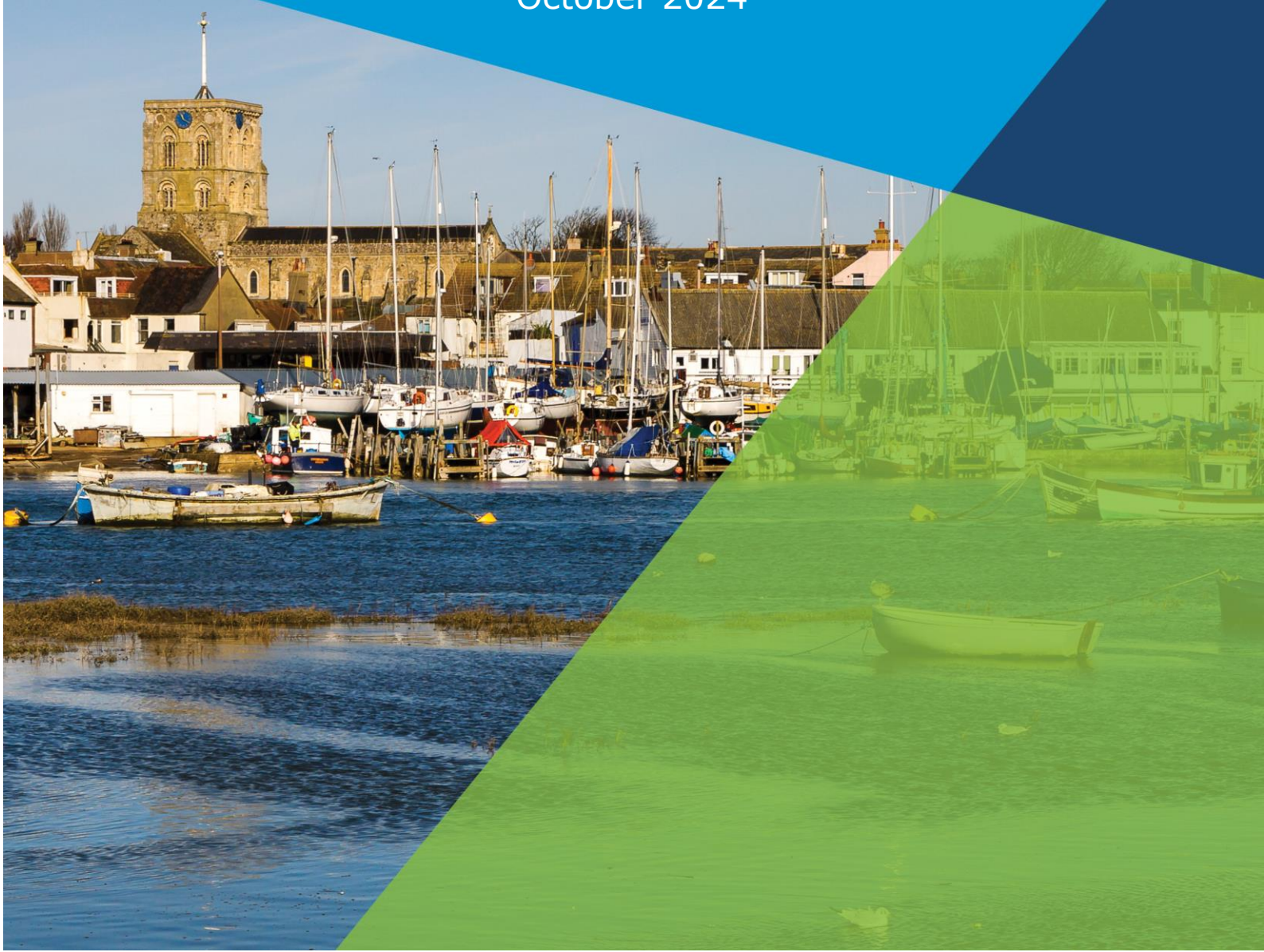
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West Sussex Drug and Alcohol Partnership

Annual Progress Report

October 2024



1. Context

As part of the 2021 national drugs strategy, every local area across England was requested to form a Combating Drugs Partnership (CDP)¹. These partnerships bring together a range of local partners and provide a single setting for understanding and addressing shared challenges related to drug-related harm, based on local context, and need. At a local level, they aim to bring together action and oversight across the three strategic priorities and commitments of the national drug strategy:

1. Breaking drug supply chains.
2. Delivering a world class treatment and recovery system.
3. Achieving a generational shift in the demand for drugs.

2. The West Sussex Drug and Alcohol Partnership

Footprint

Our local CDP is called the West Sussex Drug and Alcohol Partnership (WS DAP) and covers all seven districts and boroughs across the county.

Governance

The WS DAP works alongside and supports other boards, partnerships, and groups that contribute to addressing local drug and alcohol related harm. It reports directly to the Government's Joint Combating Drugs Unit (JCDU), and to the Office for Health Improvement and Disparities (OHID). The interdependencies of the WS DAP include the Safer West Sussex Partnership, the West Sussex Health and Wellbeing Board, the West Sussex Safeguarding Children Partnership, and the West Sussex Safeguarding Adults Board.

Membership

Membership of the WS DAP includes, but is not limited to, representatives from Sussex Police, the Sussex Police and Crime Commissioners Office, Secure estate (for example, prisons), Probation, Public Health, Adults' and Children's services, the commissioned specialist drug and alcohol service, West Sussex mental health services, the NHS, the NHS Sussex Integrated Care Board (ICB), housing and homelessness services, Job Centre Plus, local Community and Voluntary sector services, and people with lived experience of drug and/or alcohol harm.

¹ HM Government 2021. From harm to hope: A 10-year drugs plan to cut crime and save lives. [From harm to hope: A 10-year drugs plan to cut crime and save lives - GOV.UK](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/97111/From_harm_to_hope_A_10_year_drugs_plan_to_cut_crime_and_save_lives_-_GOV.UK.pdf).

Partnership roles

The WS DAP is supported by the following roles:

- Senior Responsible Officer: Alison Challenger, Director of Public Health - West Sussex County Council.
- Partnership Lead: Dan Barritt, Public Health Lead for Substance Use - West Sussex Council.
- Data and Information Lead: Robert Whitehead, Senior Research Officer, Public Health and Social Research Unit – West Sussex County Council.

3. Local picture

The WS DAP has produced a comprehensive needs analysis (2024) of local data, which shows detailed links between the harms of substance use and local vulnerable groups and communities. Although there are significant service demands across all of West Sussex, five key geographic areas were identified as having most demand: Bognor Regis, Littlehampton, Worthing, coastal Adur, and west Crawley. This included the frequency of substance use concerns as a driving factor in Early Help and children's social care referrals.

Exploitation and County Lines represent an ongoing effort for Police and Community Safety partners, and possession and trafficking data show continued activity in the above geographic areas. Probation and secure estate services also support a significant number of people with substance use-related issues, and further opportunities exist to expand the use of community sentencing treatment requirements and to reinforce continuity of care pathways from prison into the community.

Each year, roughly 1,500 people begin treatment with the local specialist drug and alcohol treatment and recovery service, and roughly half are alcohol related. However, significant amounts of unmet treatment need exist for alcohol (estimate of 78%) and drugs (estimates of 60% for opiates and 83% for crack).

Most people access specialist treatment via self-referral, as opposed to from linked services and professionals, for example health and social care and criminal justice. Approximately half of people accessing treatment are parents/carers. There are significant overlaps with housing, employment, and mental health related needs, all of which have an impact on successful treatment outcomes for substance use.

Most people accessing homelessness support services are dependent on alcohol and/or drugs (daily usage), and employment deprivation, Job Seeker Allowance, and Universal Credit support geographically correlate to the above five geographical areas.

Drug related deaths are lower in West Sussex than in the South East, and efforts to reduce drug related deaths by Naloxone distribution has increased significantly in recent years. Across the county, ambulance activity for drug related issues is highest in Arun, Crawley, and Worthing.

4. How the Partnership is addressing drug and alcohol related harms in West Sussex.

The WS DAP brings together key stakeholders across sectors to support delivery of the national drug strategy ambitions: increasing numbers in treatment and successful outcomes, tackling supply, and reducing demand. The Partnership provides oversight of and supports a broad range of activities including building the capacity of treatment services, promoting harm reduction and the local response to new synthetic opioids, tackling middle market drug supply with a focus on county lines, supporting early intervention and health promotion around alcohol and drug related harms, and improving the alcohol environment through licensing activity.

Vision

Our Partnership focuses on bringing partners together to promote positive behaviour change, and sustainable recovery and reintegration, by ensuring accessibility of local treatment services and the reduction of drug and alcohol related crime. Our vision is to: *Reduce the demand for drugs, and lessen the harms caused by drugs and alcohol for both adults and children living in the county.*

Principles

The following principles underpin local action of the WS DAP:

1. To promote social justice by reducing stigma and building on a belief in, and respect for, the rights and vulnerabilities of people who use drugs and alcohol.
2. Use the best available evidence, data, and intelligence to inform county wide decisions and action relating to drug and alcohol use disorders, and to ensure that resources are allocated and monitored effectively.
3. To work in partnership, including people with lived experience, to identify and reduce the local impacts of drug and alcohol harms in West Sussex.

Priority areas of action (2024-27)

This section outlines the cross-cutting priorities, system need priorities, and people need priorities for the WS DAP (2024-27).

Cross-cutting priorities.

This WS DAP plan for 2024-27 has three cross-cutting priorities:

1. A focus on prevention, resilience, and early intervention.
2. Reducing drug and alcohol related deaths. This includes horizon scanning and using the Pan-Sussex local drug information system (LDIS) to monitor the presence, use, and impact of Synthetic Opioids and other harmful substances in Sussex.
3. Ensuring that people who have experience of drug and alcohol-related harms are represented, involved, and are at the heart of local plans and activity.

System priorities

Based on an analysis of local need, the WS DAP plan for 2024-27 has four overlapping domains of system need, with three priority areas of action for each:

1. Protecting and supporting children and young people from drug and alcohol harms.

1. Development of multi-agency approaches to tackling the exploitation of children linked to county line networks, substance use, and the safeguarding of victims.
2. Support the provision of targeted, whole family approaches for those most in need or at risk of harm, considering the impact of multi-generational substance use, and aiming to break the cycle through prevention and early intervention.
3. Enhanced education and policy around the management of drug and alcohol use in schools and making effective use of resources to raise awareness and help young people reduce the harms associated with substance use.

2. Enhancing criminal justice pathways and community safety.

1. A continued focus on county line networks and bringing perpetrators to justice.
2. Strengthen pathways and improve the continuity of care and the seamless transitions for prison leavers into community treatment, and the use of specialist treatment requirements as part of community sentences (including education for judiciary and jurors).
3. Continue to improve multi-agency joined up working and intelligence sharing, including the exploration, development, and implementation of new initiatives for people who encounter the criminal justice system (for example, naloxone provision).

3. Improving the access to, and quality of, treatment and recovery services.

1. Increase numbers and referrals by professionals into specialist treatment across health (primary, secondary, and mental health), social care, community and voluntary sector, and criminal justice settings, and improved treatment outcomes.
2. Maintained focus to support consistent, improved, joined up multi-agency working to support people with co-occurring mental health and substance use conditions.
3. Continued attention on novel psychoactive substances and new synthetic opioids, and enhanced, targeted naloxone distribution and training to reduce drug harms, including increased outreach and community located provision.

4. Developing employment, housing, and alcohol pathways to support recovery.

1. Identify, understand, and enhance existing employment related pathways and outcomes for people recovering from drug and alcohol use disorders.
2. Improve support for people with drug and alcohol use disorders in finding and maintaining suitable accommodation, and navigation of local housing provision and support.
3. Develop the capacity of non-specialist health and care professionals and services to identify, refer and provide support for alcohol-related harms.

People priorities

The following priority action areas are based on recommendations from people from West Sussex with lived experience of drug and alcohol harm.

1. Training and communications for wider key support staff, in how to understand trauma, stigma, and work effectively with people who have substance use disorders with compassion, dignity, and respect.
2. Commit to co-produce solutions with people with lived experience, place them at the heart of plans and developments, and invest in peer leadership.
3. Enhanced peer support networks, and provision within services and communities, including the delivery of harm reduction advice and information around drugs and alcohol and signposting to specialist support (especially housing support services).

5. Progress of the Partnership since establishment

Since the WS DAP was established in September 2022, there has been progress made against the measures set out in the National Combating Drugs Outcome Framework. For example:

- *The number of major and moderate disruptions against organised criminals have increased, as have the number of drug trafficking and drug possession offences and recorded incidents of child criminal and sexual exploitation.*
- *The number of people in treatment for drugs and alcohol has increased overall and have remained stable for those aged 18-24.*
- *The number of people in treatment in prisons has increased, and the proportion of people who engage in community-based drug and alcohol treatment within three weeks of leaving prison (adults) have improved significantly.*
- *The number of community or suspended sentences started with drug, alcohol, and/or mental treatment requirements have increased each year.*
- *The number of deaths of people engaged in treatment have been the same each year, and over half of these were from people who used opiates. The number of take-home naloxone kits distributed in the community has increased significantly.*

Ongoing efforts are being made to increase the numbers of people in treatment (adults and children and young people), increase referrals by professionals, improve treatment progress and outcomes, and increase the proportion of people in treatment who are in paid work, voluntary work, or training and education.

6. How our local community shapes the work of our Partnership

As part of the needs analysis, the WS DAP commissioned The CAPITAL Project Trust, a local lived experience led organisation, to examine and present the unique views of those with lived experience of substance use across West Sussex (both users and carers). The findings and recommendations from this work have directly informed our people priorities, and we are currently working alongside The CAPITAL Project to deliver these.

In addition, the WS DAP works alongside local Community Safety Partnerships to engage the public regarding drug related crime and harm.