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1 Introduction and Purpose

Our vision for Nottingham is to work effectively as a partnership to minimise the health, social and economic harms associated with alcohol and drug misuse through effective prevention (including promoting a responsible attitude to alcohol consumption), and by providing access to high quality treatment services.

Nottingham has a well-established, partnership approach to addressing the misuse of drugs and alcohol, and the importance of addressing substance misuse has been demonstrated through a number of partnership strategies. The wider city's commitment is also apparent in the broad range of strategies in which substance misuse objectives have been set, and currently there are six inter-agency strategies or plans which contain objectives relating to substance misuse. All of these strategies are alike in their strategic intentions; between them they commit partners to working towards a safer and healthier city, and are clear in the need for active partnership working within and between organisations. They reflect the understanding that often complex, multi-faceted problems can only be solved when all relevant agencies are working towards a common effort.

The purpose of this document is to provide a clear and simple strategic direction for the City in relation to substance misuse. It identifies the key strategic priorities in relation to this important agenda, and draws on commitments made across existing strategies and plans. The overarching aims are to promote a responsible attitude to alcohol consumption and to reduce the number of people misusing drugs or alcohol, we also expect that more people will recover from drug or alcohol misuse and less will experience crime or anti-social behaviour linked to misuse.

2. The National Policy Context

The government has a longstanding commitment to addressing substance misuse which is reflected in the national alcohol strategy: *The Government's Alcohol Strategy: Choice, Challenge and Responsibility* that was published in 2012, and the 2010 drug strategy: *Restricting supply and building recovery in communities: supporting people to live a drug free life*. These inform Nottingham's local strategic approach and focus on managing / restricting supply, motivating change in the industry (for alcohol), preventing misuse where possible and building recovery from dependency. These strategies are summarised below.

The Government's Alcohol Strategy 2012

The national alcohol strategy was published under the coalition government in 2012 and it recognises that although most people do drink sensibly, action is required to ensure that drinking to a level that does harm to the individual or to others, is not considered acceptable. The strategy also identifies a number of other key priorities including reducing levels of alcohol related violent crime, reducing the number of people binge drinking or drinking above recommended levels and reducing the number of

young people aged 11-15 consuming alcohol. It also reflects the government's recognition of moderate drinking as an asset to the economy, both as a major employer and source of tax revenue. It raises the importance of working with the industry to address those areas where alcohol producers and retailers have a role to play in reducing the harm arising from the misuse of alcohol.

Drug Strategy –Reducing Demand, Restricting Supply, Building Recovery: Supporting People to Live a Drug Free Life 2010

The government's drug strategy of 2010 also expresses the importance of partnership working to address the multi-faceted issue of drug misuse. The 2010 strategy makes the shift towards the 'recovery' agenda in specialist drug treatment, away from "harm minimisation" and 'maintenance' approaches. The strategy lays out a number of ambitions around reducing demand, restricting supplying and promoting recovery. In terms of demand reduction, this includes breaking intergenerational pathways to dependency by working with vulnerable families, and by intervening early with young people. Restricting supply includes developing integrated local enforcement, developing an effective response to New Psychoactive Substances (NPS) and strengthening international partnerships, and the recovery agenda includes the provision of recovery focussed treatment services and workforce, rebuilding families and addressing housing and employment issues.

This agenda shift has also been reflected in Nottingham's local approach which, from 2012/13, has had an increased emphasis on successful completions from drug treatment from penetration into the potential client group(s). Nottinghamshire Police have maintained the necessary work of restricting the supply of illegal drugs. In 2012 the Home Office published an annual review of the national drug strategy which addressed the growing issue of new or novel psychoactive substances (NPS). This issue has been taken up through a number of work streams locally.

3. Key local strategic plans

There are a number of local strategic plans in place that shape the partnership's response to substance misuse in Nottingham. These are given alongside their respective targets in appendix 1, and are summarised below:

Partnership Plan 2015-2020

Statutory Status: Statutory (*Crime and Disorder Act 1998*)

Under the terms of the *Crime and Disorder Act 1998* (and as amended) each local authority area is required to develop multi-agency plans to tackle crime, anti-social behaviour, substance misuse and reoffending. In Nottingham this requirement is expressed in the five years Partnership Plan, annually refreshed and approved by the Crime & Drugs Partnership Board. The current plan has two core targets of reducing victim based crime and maintaining successful completion from drug and alcohol treatment to five percent above the average of Core Cities.

Health & Wellbeing Strategy 2013-2016

Statutory Status: Statutory (*Health and Social Care Act 2012*)

The *Health and Social Care Act 2012* established a requirement for all upper-tier and unitary local authorities to develop an inter-agency strategy to reduce health inequalities and promote public health outcomes. The Nottingham Health and Wellbeing Strategy, published in 2013 has established reducing alcohol related harm as a key policy area. The misuse of alcohol has a clear relationship to health inequality, especially when considering the 'alcohol harm paradox' which suggests that while the poorest sections of the population drink at the least harmful levels, they experience the greatest levels of alcohol related health harm.

Children and Young People's Plan 2015-2016

Statutory Status: Statutory (*Children's Act 2004*)

The *Children's Act 2004* created a statutory responsibility on local authority areas to convene a Children's Partnership Board and to bring forward joint plans to promote the protection and wellbeing of children and young people. In Nottingham the Children and Young People's Plan incorporates a commitment to increase the number young people receiving assessments for their substance misuse.

Police & Crime Plan 2015-2018

Statutory Status: Statutory (*Police Reform and Social Responsibility Act 2011*)

The *Police Reform and Social Responsibility Act 2011* created the role of Police and Crime Commissioners (PCCs). It also placed a statutory requirement on PCCs' offices to bring forward a published plan to reduce crime in their areas for scrutiny by Police and Crime Panels. The Nottinghamshire Police and Crime Plan identifies the misuse of drugs and alcohol as a key area of concern.

PCC Alcohol Strategy 2013-2016

Statutory Status: Non-Statutory

Further to the identification of alcohol as a significant crime and community concern within the Police and Crime Plan the Nottinghamshire PCC brought forward a multi-agency plan to address alcohol misuse in 2013.

Nottinghamshire Police Substance Misuse Strategy 2013-2018

Statutory Status: Non-Statutory

In 2013, in order to coordinate the various roles of Nottinghamshire Police in addressing substance misuse the force developed a Substance Misuse Strategy. This outlines the activity of the force in meeting the challenges posed to policing by the misuse of drugs and alcohol as well as revealing the value of partnership working.

4. The Extent of the Problem: Need in Relation to Substance Misuse

Alcohol: Alcohol misuse is associated with a range of health and social issues. Increasing-risk, higher-risk and binge-drinkers are for example more likely to experience poor health and are at increased risk of cancer, liver cirrhosis and hypertension¹. In England and Wales just over half of all violent crime involving adults is also alcohol related² and the societal costs of alcohol misuse in England and Wales is estimated to be £21 billion each year³. Compared to the average for England, Nottingham has higher rates of hospital stays for alcohol harm (878 per 100,000 compared to 637 per 100,000) and higher rates of under 75 mortality from liver disease (27.5 per 100,000 compared to 17.8 per 100,000)⁴. Alcohol was also associated with 18% of all ASB calls to the Police in Nottingham during the two years ending May 2015⁵.

In England it is estimated that 20% of population binge-drink, 20% are increasing-risk drinkers and 7% are higher-risk. Synthetic estimates of alcohol consumption in Nottingham suggest that approximately 20% of the population abstain from alcohol, 24% binge drink, 74% are lower-risk drinkers, 19% are increasing-risk drinkers and 7% are higher-risk drinkers⁵. There are also an estimated 10,687 dependent drinkers in Nottingham⁵. Patterns of consumption vary across the city, with higher rates of higher-risk and increasing-risk drinkers in Dunkirk and Lenton, Mapperley and Radford and Park and lower rates in Basford, Leen Valley and Clifton North⁵. Men are also more likely to drink at a level that is categorised as increasing or high risk (9% of men compared to 6% of women) and more women than men are abstinent (38% of women compared to 26% of men)⁵. Increasing and higher-risk drinking peaks in citizens aged 45-54 years⁵.

Drugs: In terms of drugs, it is estimated that 9% of the population of England and Wales will have taken illicit drugs in the past year⁶. Cannabis is the most commonly reported drug used (6.6% have used this in the last year), followed by cocaine (2.4%). Opiate use is far less commonly reported with 0.2% of the population reporting use in the last year⁶. In terms of gender, 12% of men report having used drugs in the past year compared to 5% of women⁶. Younger people are also more likely to report use in the last year (19.8% of 20-24 year olds for example report use in the last year compared to 2.4% of 55-59 year olds)⁶. New Psychoactive Substances (NPS) use is more common amongst younger people aged 16-24 years and it is estimated that 1 on 40 people in this age group have used one of these substances in the past year⁶. Of these, 84% will also have used other drugs in the past year⁶. The costs of drug use are significant and similar to alcohol; the total societal cost is estimated at £15.4 billion, with almost £14 billion of this cost related to drug related crime⁷. It is estimated from national data that 3.1% of the population in Nottingham are frequent drug users, with almost half of these users being aged 20-24 years, and 77% male. It is also estimated that there are 2615 opiate and crack users in the City⁵.

Children and young people: Overall, 14% of young people aged 11-15 have ever taken drugs and this is similar for both girl and boys⁸. Two percent have taken illicit substances on more than 10

occasions and 3% take drugs at least once a month⁸. Cannabis is the most frequently reported drug used in this age group with 7.0% of 11-15 year olds report having used cannabis in the past year⁸. Overall the number of young people using drugs has reduced. The proportion of 11-15 years olds who used drugs in the last month decreased from 8% in 2009 to 6% in 2013, and in the same period the proportion of 16-24 years olds who are frequent drug users reduced from 8% to 5%. In terms of alcohol, 39% of young people aged 11-15 report never having had an alcoholic drink, but this is associated with increasing age, with 70% of 15 year olds reporting that they have ever had an alcoholic drink compared with less than 10% of 11 year olds⁸. Nine percent report to having had a drink in the last week, and this has reduced significantly in recent years with 25% reporting this level of use in 2003⁸. As with drugs, the proportion of boys and girls reporting alcohol use in this age group are similar⁸. Estimated drug and alcohol use in this age group in Nottingham suggests that the proportion of males and females drinking alcohol or using illicit drugs is similar, but that use is most common in 13-14 year olds⁵. In 2013, 239 young people accessed treatment in Nottingham for substance misuse issues, of which 91% reported cannabis use and 58% alcohol⁵.

5. How we are tackling the problem

In response to the national policies and the local strategic plans described above, a number of initiatives and services have been put in place across the city, these are summarised below in relation to prevention and early intervention, treatment and enforcement:

Prevention and early intervention

Super Strength Free Campaign

In 2013 Nottingham expanded its approach to addressing cheap, strong beers and ciders through its Super Strength Free campaign. This is a voluntary scheme whereby off licences can choose to withdraw high strength drinks from sale. Three quarters of city centre alcohol retailers signed-up to the scheme.

Early Interventions and Prevention (DrugAware and Lifeline “Journey”)

Nottingham City Council currently delivers the drug and alcohol early intervention and prevention programme DrugAware in many of Nottingham’s schools, which in 2014 was awarded a PHSE Quality Mark. DrugAware aims to provide a well-planned, relevant and modern drug education curriculum to support young people, including those most at risk. It also aims to intervene early before problems escalate; pro-actively assessing the needs of vulnerable pupils and ensuring they are referred to specialist treatment services and targeted interventions. It also helps to develop the school’s drug policies, including the processes necessary to identify and respond to the substance misuse related needs of vulnerable young people, including those who may be affected by parental use.

Lifeline “Journey”, the young people’s drug and alcohol service are also commissioned to deliver training to tier 1 providers, universal services and other agencies in contact with young people. They respond to current trends that may affect vulnerable young people and are directed to areas of high risk. Their training is aimed at enabling the recipient to identify and offer brief advice regarding substance misuse and also to enable the recipient to make appropriate referrals to specialist services and targeted interventions.

Harm Reduction and Drug Related Deaths

The Crime & Drugs Partnership team, in conjunction with the Coroner, undertake investigations into drug related deaths in the city. This process enables the gathering of information to better inform the continuing process of harm reduction, coordinated by the Harm Reduction Group. In 2014, there was a rate of 3.18 drug-related deaths per 100,000 of population in Nottingham; this was lower than the 4.03 average of the eight core cities and fourth lowest in the cohort. This suggests that harm minimisation within the city is effective. However, the difference between the rate in Nottingham and that of the core cities has reduced from 2013 to 2014 due to a slight increase in drug-related deaths within Nottingham. Understanding drug related deaths also enables the evaluation of best practice innovations such as Naloxone. As of July 2015 Naloxone had been used on 52 occasions preventing fatal overdose of heroin.

Night Time Economy (NTE) Insight Hub

Nottingham has introduced a new approach to the utilising and sharing of data to inform NTE policing, licensing and partnership interventions. Based on the ‘Cardiff Model’ principles of hospital and ambulance service data sharing, the project will be delivered through a project team which includes police intelligence officers and analysts. The project will deliver three core products: a revised intelligence based NTE police tasking method, a single venue level matrix of risk and a demand management tool to support emergency department and EMAS planners.

Ending Alcohol Harm Campaign

In 2014 as part of the Local Alcohol Action Area (LAAA) programme, the city developed and launched an inter-agency communications plan to cover all areas of alcohol policy. The Ending Alcohol Harm (EAH) campaign has three core elements: protecting and enhancing the reputation of the city; providing resources and information to partner agencies, as well as motivating behavioural change for specific groups. It is intended that the EAH identity will help to place a coherent identity to alcohol related communications for citizens, conceptually linking diverse areas of activity such as licensing, policing and treatment.

Treatment

Drug treatment services

Drug treatment and support services are provided by Recovery in Nottingham who work with all drug users with the aim of supporting them to achieve recovery from illicit drug use and to become fully

integrated within local communities. The services provided include advice and information on drug use, interventions to reduce the harms caused by drug use, brief interventions and structured treatment including pharmacological interventions, recovery interventions and aftercare.

Inpatient services

Specialist inpatient detox for drug and alcohol users is available at The Woodlands provided by Nottinghamshire Healthcare Trust. This service provides clinical detox during a short inpatient stay to support those who are unable to detox within the community.

Criminal Justice Treatment Service

Clean Slate provide first class interventions for offenders who commit crime either to support a substance misuse dependency or to purchase substances of misuse. The service covers the courts, custody suites and the prison and offers Pharmacological and psychosocial interventions alongside wraparound support via a one stop shop.

Alcohol treatment services

Last Orders offer interventions for all levels of alcohol misuse; including pharmacological and psychosocial interventions. The service is based in numerous locations including the walk-in centre, locality hubs, GP practices and the hospitals. The emphasis is on abstinence but will support controlled drinking within recommended guidelines.

Pharmacy

Nottingham City has commissioned 11 pharmacies to provide clean needles and injecting equipment to injecting drug users to reduce the chances of transmission of blood-borne viruses (such as hepatitis and HIV) from sharing equipment and damage to veins from reusing needles. 58 pharmacies also provide supervised consumption of opioid substitution therapy medicines such as methadone and buprenorphine; this service helps to reduce diversion of medications and increases consistency of OST therapy.

Primary Care

10 GP practices across Nottingham City provide shared care drug treatment; this service allows opiate drug users to access treatment in their local area whilst receiving pharmacological, psychosocial and recovery support interventions from a drug worker and a GP in a setting, allowing them to maintain anonymity within their community. GP practices provide alcohol brief intervention and advice (IBA) to clients identified as consuming a level of alcohol which may be damaging; it is a quick process which allows assessment, signposting and advice to those who might not otherwise access treatment services.

Specialist needle exchange

Nottingham City has a specialist needle exchange service which provides clean needles, syringes and injecting equipment, basic wound care, testing for blood-borne viruses, smoking cessation,

signposting to services for domestic violence, substance misuse services, housing and benefit advice as well as the provision of naloxone (an emergency opioid overdose temporary reversal injection).

Family Support

The Family Support Service provides advice and support to adults, children and whole families affected by another's substance misuse as well as training, advice and information to professionals. They deliver tailored one to one and group interventions and family activities. Family support can improve relationships and family functioning, improve child behaviour and school attendance/attainment and can support substance users into treatment.

Young People's Specialist Substance Misuse Treatment

This service works with young people up to age 18. It aims to reduce the negative impact of young people's substance misuse through evidence based, tailored and person centred care planning, psychosocial and harm reduction interventions and targeted support. It also delivers training and advice to the wider children and young people's workforce to increase their confidence and competence in identifying issues and delivering brief interventions.

Alcohol Treatment

Core to the city's approach to tackling alcohol misuse is the provision of high quality specialist treatment services, accessible to citizens from hospital, community and primary care settings. In 2014 the Crime & Drugs Partnership Commissioning Team undertook the re-commissioning of the community treatment model. Responsibility for commissioning alcohol treatment services moved to the local authority in 2013 under the terms of the *Health and Social Care Act 2012*. Provision based on the existing treatment model and pathway successfully commenced under a single provider (Framework Housing Association's Last Orders service) from November 2014. A new performance framework will monitor effectiveness and gather insight to support future commissioning activity. The commissioning process retained the Alcohol Intensive Case Management Service (AICMS) which was piloted from 2011.

Re-commissioned CJS Drug and Alcohol Treatment

From April 2015 alcohol has been incorporated into a single criminal justice substance misuse treatment service alongside illicit drug treatment. Following a process of review and needs assessment undertaken by the Crime & Drugs Partnership, new provision was commissioned from April 2015. Provided by the Framework Housing Association's Clean Slate service, it will deliver court ordered treatment requirements, community orders and required activities enabling the effective management of offenders. The service also provides engagement in the custody suite setting alongside prison in-reach.

The Blue Light Project: Working with Treatment Resistant Drinkers

Public Health England has suggested that 94% of dependent drinkers are not engaged with treatment services and, locally, it is estimated that our penetration rate across all at risk drinkers is as low as 12%. In a borough of 200,00 people it is estimated that there will be at least 250 Blue Light clients who will cost an average of £12m per year, such is their impact on Crime, ASB, fires, domestic abuse and health interventions. The Blue Light Project is a piece of joint working between Nottingham City stakeholders and Alcohol Concern to address the disparity between dependent drinkers in treatment and those who resist entering treatment. Nottingham City is committed to maintain the Intensive Case Management Service to engage the high volume service users of ED and NUH by motivational work until they are treatment receptive. Nottingham city partners are also applying the learning of the Blue Light Project to engage street drinkers in the Arboretum Ward who are causing a considerable amount of ASB, by case conferencing individuals to either access treatment voluntarily or to enforce some coercive treatment on those who continue to resist treatment. We are also using the learning from The Blue Light Project to apply it to Alcohol related Domestic Homicides, the aim being to identify these individuals and motivate them into treatment before the worst case scenario happens. The Blue Light Project and its application rely heavily on a multi-agency strategic statement which underlines the priority to be accorded to this group of clients and which highlights that this client group is a shared responsibility.

Enforcement

City-Wide ‘Street Drinking Ban’

In March 2013 the Designated Public Place Orders (DPPOs) in place in parts of the city were expanded to cover the whole of Nottingham. It is now a requirement to relinquish alcohol upon request to an authorised officer anywhere in the city. These terms have migrated to the new arrangements for Public Space Protection Orders (PSPOs) under the terms of the *Anti-Social Behaviour, Crime and Policing Act 2014*.

Cannabis Destruction Team

In 2014 Nottinghamshire Police responded to the issue of domestic cannabis cultivation through the development of a dedicated cannabis grow dismantling team. This team pursues police and community intelligence on cannabis cultivation and ensures avenues of inquiry are rigorously pursued and responded to. Raising awareness to encourage reporting has been undertaken with Crimestoppers using ‘scratch and sniff’ cards.

Late Night Levy

Nottingham established a Late Night Levy (LNL) in 2014. The LNLs were established under the *Police Reform and Social Responsibility Act 2011* and allow licensing authorities with the support of local PCCs to introduce a charge to licensed premises open after midnight to contribute to the cost of night time economy (NTE) policing. The city agreed to exempt members of the Business

Improvement District (BID) from the levy in recognition of the financial contribution the BID makes to NTE safety. Revenue, after costs is shared between the PCC and Nottingham City Council.

Operation Promote

Operation Promote works to reduce violence in Nottingham city centre's night time economy (NTE) using a Home Office recognised best practice approach of restricting the supply of cocaine and other stimulants. Following the successful deployment of a pilot in November and December of 2013 in which violence was reduced by 23% funding was secured for a further deployment of 20 nights per year for three years. The impact of crime recording changes following inspection by HMIC resulted in an increase in incidents being recorded as 'violent crimes'. Nevertheless over the 2014/15 deployment proactive activity by Operation Promote saw violence increase by only 5.74% on the nights it operated against a city centre NTE increase of 17%.

Cumulative Impact Policy Expansion

The city centre Cumulative Impact Policy (CIP or 'Saturation Zone') was established in 2011. The policy enables the increased management of alcohol retail through the automatic generation of objections to new licenses under the terms of the *Licensing Act 2003*. Analysis of the intervention was undertaken in 2014 which identified that crime had fallen at a greater rate in the CIP area than in neighbouring areas. Full Council approved the extension to the east and west in 2014 to incorporate Sneinton Market and the Castle Quarter of the city centre.

Industry Partnership – Nottingham BID

Nottingham Business Improvement District (BID) funds and manages a number of interventions to assist in the effective management of the NTE. The BID manages the Purple Flag scheme which Nottingham has secured every year since its inception in 2010; a recognition of the strong partnership operating in the city centre. The Best Bar None scheme also helps to raise standards for venues while promoting good practice. Taxi marshals, street cleansing, the business radio scheme and financial support to the Street Pastors also make a strong contribution to reducing alcohol related problems in the NTE.

Drug Intervention Programme

The Nottinghamshire Police led Drug Intervention Programme (DIP) was established in 2003 with the aim of engaging drug misusers at every stage of the criminal justice system. A regime of testing for 'trigger offences' and for other offences under 'Inspector's Authority' identifies offenders' substance misuse needs which in turn allows for engagement by custody treatment teams as well as informing ongoing criminal justice actions. Over the life of the DIP programme the extent to which trigger offences are informed by heroin or cocaine has markedly reduced.

From April 1st 2013, the Drugs Intervention Programme (DIP) was discontinued as a national programme and the responsibility of how to run DIP was transferred to local areas to run in accordance with the Police and Crime Commissioner's guidance. Nottingham has chosen to continue with the DIP ethos with a change in some of the delivery methods. As a result, trigger offence testing has been replaced by target testing. The aim of introducing target testing is to reduce the number of negative tests, give the Criminal Justice Intervention Team more influence in who is tested and plan to increase the number of Inspector's authority tests for other crimes, particularly violence in the night-time economy. Due to the introduction of target testing in April 2013, the overall number of positive tests has reduced, but the proportion of all tests that were positive has improved. An unintended consequence of the introduction of target testing is that it is no longer possible to compare current performance with historical figures on a like-for-like basis; which makes it difficult to assess the true level of drug-related offending over time.

New Psychoactive Substances

In 2013 partners in Nottingham undertook a number of activities to better understand and respond to the threat caused by new psychoactive substances (NPS), sometimes less accurately referred to as 'legal highs'. A partnership working group was established which led to the incorporation of NPS into the DrugAware schools programme, the training of staff on NPS issues as well as Trading Standards led enforcement against 'head shops' selling NPS in the city. The city also responded to government consultation through the LGA which has informed the *Psychoactive Substances Bill* currently before Parliament.

The use of NPS is considered an emerging threat in the City. They pose a serious health problem to the user and are manufactured in unregulated conditions where their quality is not controlled. The effects upon the user's health, both immediate and long term, are largely unknown due to the inconsistent nature of the product. Their use has been linked to deaths in the City and intelligence suggests that there is no typical user (although cohorts within prisons and young vulnerable young people have been identified) which renders targeted education programmes difficult. Intelligence suggests that NPS pricing does not provide a deterrent because the substances are affordable to many. Through partnership work between the Police and Community Protection colleagues, tens of thousands of pounds worth of product has been seized from various shops within the City in the past year. NPS products have been forfeited through the courts and one premises has been issued with a Community Protection Notice under the Antisocial Behaviour, Crime and Policing Act 2014.

6. Future strategic priorities 2016-2020

Our future priorities are given below and draw on those already identified across a number of strategic plans for the city. They are focussed around three key aims, these being to promote a responsible attitude to alcohol consumption and to reduce the number of people misusing drugs or

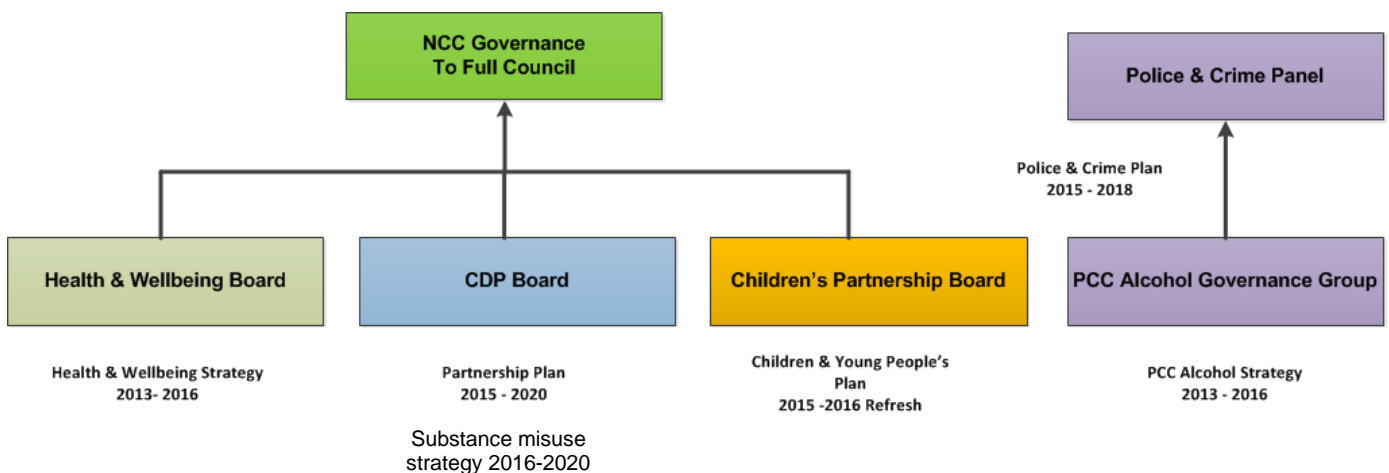
alcohol, we also expect that more people will recover from drug or alcohol misuse and less will experience crime or anti-social behaviour linked to misuse.

Key priorities	Action	Possible headline indicators
Prevention and early intervention		
More people will have a responsible attitude to alcohol consumption and there will be a reduction in the number of people misusing drugs and/or alcohol.	Reduce the number of children and young people misusing drugs and/or alcohol	<ul style="list-style-type: none"> - Illicit drug use in adults - The proportion of young people aged under 18 who regularly drink alcohol - The proportion of young people aged under 18 who misuse drugs - The proportion of adults who binge drink - The proportion of adults who are harmful drinkers - Hospital admissions for alcohol related causes - Alcohol specific mortality
	Ensure the provision of high quality substance misuse education in schools	
	Reduce the number of adults drinking at harmful levels and/or misusing drugs	
	Reduce the number of adults binge drinking	
	Support professionals working with citizens to identify harmful drinking and/or drug misuse so that they can be signposted to appropriate services	
Treatment		
More people will recover from drug and/or alcohol misuse	Commission high quality specialist drugs and alcohol services	<ul style="list-style-type: none"> - Number of successful completions from drug and alcohol treatment (opiate and non-opiate users) - Re-presentations to drug and alcohol services - Number of people entering prison identified as having a substance misuse issue through screening, referred to a recovery service within 1 day of screening.
	Increase the number of children and young people accessing substance misuse services	
	Increase the number of harmful drinkers accessing and successfully completing treatment	
	Increase the number of people misusing drugs accessing and successfully completing treatment	
	Ensure people entering prison with substance misuse issues are identified and treated appropriately	
Enforcement		

Less people will experience crime or anti-social behaviour linked to drug and/or alcohol misuse	Reduce levels of alcohol related violence and crime both in the city centre and in local neighbourhoods	- Alcohol related all crime
	Reduction on alcohol related ASB	- Drug related all crime
	Reduction in NTE ASB	- Alcohol related NTE all crime
	Decreased perception in NTE of drunk and disorderly behaviour	- Drug related NTE all crime
	Increased feelings of safety in NTE	- Street drinking offences
	Decreased street drinking	- Begging offences
	Decreased begging	

7. Delivering our objectives: Governance structures

The strategies currently operating in the city (as detailed above) have an existing scheme of governance to a range of statutory and non-statutory functions. This strategy is owned by the CDP board and progress against aims and associated indicators will be reported to the CDP Board.



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Appendix 1: Key local strategic plans and associated actions and targets

Local policy driver	Description	Key actions	Related targets	Target measures
<p>1. Safe, Responsible, Healthy: Nottingham's Approach to Alcohol 2012-2015.</p>	<p>The 2012 partnership alcohol strategy structured its approach around three core themes: prevention, treatment and enforcement. More specifically it lays out the key priorities for Nottingham around working with the drinks industry to develop a night time economy that is safe, where alcohol related violence is reduced and where safeguards are in place to protect families and children from alcohol related harm. It also provides a commitment to developing a culture of responsible drinking and promoting a healthy attitude towards alcohol consumption, reducing levels of alcohol related harm by identifying those misusing alcohol and providing access to appropriate treatment.</p>	<p>Overall Aims The statutory aims of the Partnership are to:</p> <ul style="list-style-type: none"> ○ Reduce crime ○ Reduce Reoffending ○ Reduce Substance Misuse ○ Reduce Anti-social Behaviour 	<p>To meet the Partnership's aims, additional focus will be given in 2015/16 to:</p> <ul style="list-style-type: none"> • 'Other violence' • Domestic violence • Drug and alcohol misuse • Burglary • Anti-social behaviour. 	<p>The headline targets for the Partnership are:</p> <ul style="list-style-type: none"> ○ 20% reduction in victim based crime by 2020 ○ Increase the rate of recovery from substance misuse dependency to be 5% above the average for the Core Cities by 2020.
<p>2.Partnership Drugs Strategy 2012</p>	<p>In 2012 the Crime & Drugs Partnership Board approved the inter-agency drug strategy. The strategy is based on the national drug strategy and is structured around the three core elements of prevention, treatment and enforcement. This strategy also recognises the national policy shift towards the 'recovery agenda' for drug treatment.</p>			

3.Partnership Plan 2015-2020	<p>Under the terms of the Crime and Disorder Act 1998 (and as amended) each local authority area is required to develop multi-agency plans to tackle crime, anti-social behaviour, substance misuse and reoffending. In Nottingham this requirement is expressed in the five years Partnership Plan, annually refreshed and approved by the Crime & Drugs Partnership Board.</p>	<ul style="list-style-type: none"> -Commission high-quality specialist [drug and alcohol] treatment services -Undertake investigations of drug related deaths alongside the Coroner 	<p>In addition to those given in 1 (alcohol strategy):</p> <ul style="list-style-type: none"> -Reduce victim based crime by 20% by 2020 -Increase successful completions to+5% over the Core Cities average. 	<ul style="list-style-type: none"> -Reduction in Alcohol Related All Crime -Reduction in Alcohol Related VAP -Reduction in NTE All Crime Reduction in Alcohol Related NTE VAP
4. Health & Wellbeing Strategy 2013-2016	<p>The <i>Health and Social Care Act 2012</i> established a requirement for all upper-tier and unitary local authorities to develop an inter-agency strategy to reduce health inequalities and promote public health outcomes. The Nottingham Health and Wellbeing Strategy, published in 2013 established reducing alcohol related harm as a key policy area. The misuse of alcohol has a clear relationship to health inequality, especially when considering the ‘alcohol harm paradox’ which suggests that while the poorest sections of the population drink at the least harmful levels, they experience the greatest levels of alcohol related health harm.</p>	<ul style="list-style-type: none"> -Support professionals working with citizens to identify harmful levels of drinking and signpost to treatment services. -Extend to neighbourhoods the successful schemes which encourage responsible drinking and enforcement. -Support national campaigns to tackle alcohol misuse. -Prevent alcohol misuse to reduce the number of citizens who develop alcohol-related diseases -A complete ban on street drinking across the city -Ensure that the recovery of those in treatment is supported by addressing wider factors associated with dependency, including housing and social care needs, employability, family support needs and domestic violence -Support families, and their carers, to reduce their drinking, and join up referral between alcohol health promotion, treatment and aftercare services . - Raise awareness of the risk of excessive alcohol consumption among students through targeted health promotion work 	<ul style="list-style-type: none"> -Reduce alcohol related crime -Reducing the rate of alcohol related hospital admissions -Preventing alcohol misuse, defined by a reduction in the number of people who drink at levels which are harmful to their health. 	<p>To reduce the proportion of adults who drink at harmful levels by a third.</p>

		<ul style="list-style-type: none"> - Provide universal, good quality drug and alcohol education and deliver effective harm reduction messages to children & young people -Support professionals working with citizens to identify harmful levels of drinking and signpost to and support a healthier approach to alcohol consumption - Extend to neighbourhoods the successful schemes which encourage responsible drinking and enforcement, so that alcohol-related harm is reduced across the whole city, such as the introduction of the voluntary “super strength free” code for off-licences -Work towards a net reduction in the number of licensed premises and off-licences - Support national campaigns to tackle alcohol misuse, such as introducing a minimum unit price for alcohol. 		
<p>5. Children and Young People’s Plan</p>	<p>The <i>Children’s Act 2004</i> created a statutory responsibility on local authority areas to convene a Children’s Partnership Board and to bring forward joint plans to promote the protection and wellbeing of children and young people. In Nottingham the Children and Young People’s Plan incorporates a commitment to increase the number young people receiving assessments for their substance misuse.</p>	<ul style="list-style-type: none"> -Increase the number of new presentations to young people’s drug and alcohol treatment. - Young people will have a positive, informed approach to risk taking 	<ul style="list-style-type: none"> -Under 18 conception rate (Nottingham Plan target) -Rate of first time entrants to the Youth Justice System (Nottingham Plan target) • Number of new presentations to young peoples’ drug and alcohol service 	

6. Police & Crime Plan

The *Police Reform and Social Responsibility Act 2011* created the role of Police and Crime Commissioners (PCCs). It also placed a statutory requirement on PCCs' offices to bring forward a published plan to reduce crime in their areas for scrutiny by Police and Crime Panels. The Nottinghamshire Police and Crime Plan identifies the misuse of drugs and alcohol as a key area of concern.

- Reduce the impact of drugs and alcohol on levels of crime and anti-social behaviour
- Support the development of a clear purpose across agencies to deliver improved services.
- Develop clarity and understanding across agencies with regard to roles, responsibilities and outcomes in response to priority individuals and locations, particularly with regards to the factors that drive vulnerability such as age, mental health, disability, hard to reach community, new and emerging communities, financial hardship, and problematic alcohol and substance misuse.
- Develop approaches to tackling areas of risk through links to organised crime.
- Encourage increased reporting of the production and supply of drugs.
- Develop approaches to tackling areas of risk through links to organised crime.
- Review gaps in technology, capacity and capability available to respond to new criminal techniques and practices and seize opportunities to use technology and social media to make communities safer, including targeted engagement and greater use of open source intelligence.

- To monitor the proportion of alcohol-related violent crime
- Review and implement the refreshed alcohol action plan, including 'Blue Light Project.
- Reduce alcohol related crime and ASB in the Night Time Economy (NTE)
- To monitor the number of violent crimes and ASB which appear to be alcohol related in the NTE
- An evidenced improvement in reoffending levels and seriousness of offences committed by drug-fuelled offenders in the IOM cohort
- To monitor the number and seriousness of offences committed by drug-fuelled offenders in the IOM cohort (2 cohorts throughout
- To encourage the increased reporting of offences of the production and supply of drugs
- To monitor the number of production and supply of drugs offences
- Reduce the demand for the supply of illegal drugs, tackling class A drug trafficking, closing crack houses and disrupt cannabis cultivation.

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			<ul style="list-style-type: none">-To continue to implement multi-faceted partnership problem solving plans for each of the key night time economies (NTEs). -Better understand the prevalence and impact on crime and new psychoactive and legal substances on crime through substance misuse needs assessment. -Ensure a smooth transition to NHS England of Custody Health Provision. -Ensure that the new ASB Powers are fully utilised to reduce ASB and monitor (quarterly) the number of times the different powers are utilised by Districts and City	
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7. Police and Crime Commissioner Alcohol Strategy 2013-2016

Further to the identification of alcohol as a significant crime and community concern within the Police and Crime Plan the Nottinghamshire PCC brought forward a multi-agency plan to address alcohol misuse in 2013.

- Improve information sharing arrangements between Community Safety Partnerships, local A&E departments and EMAS- the 'Cardiff Model'.
- Ensure appropriate information sharing is in place between DSV and alcohol treatment services (e.g. ensuring appropriate representation for SM Treatment providers on MARAC etc.).
- Promote the gathering of community intelligence on under-age alcohol sales
- Deliver a co-ordinated social media campaign [for Alcohol]
- Ensure activity is in place to address the use of illegal drugs alongside alcohol in the NTE
- Explore barriers to effective implementation of cumulative impact policies for licensed premises (e.g. addressing barrier to 'presumption against' award of licenses)
- Expand the use of innovative means to support on-licensed premises such as provision of cocaine torches, breathalysers, ID scanners and vulnerability training.
- Increase the use of treatment as a condition of bail and through conditional cautions.
- Better align partnership budgets
- Ensure alcohol is a strategic priority for partners
- Provide drug testing and support services within the Criminal Justice System
- Increase the use of civil enforcement
- Increase responsible and respectful behaviour on our streets

		<p>-Ensure robust enforcement of licensing conditions of pubs and clubs</p> <p>-Consider and explore the benefits of family drug and alcohol courts</p> <p>-Ensure appropriate attendance and membership at local partnership, neighbourhood and area meetings to take forward joint working at a local level</p> <p>-Promote the gathering of community intelligence on under-age alcohol sales through the use of reporting mechanisms such as Crimestoppers, 101, the Community Protection Helpline and to Local Authority Trading Standards teams Nottinghamshire Police</p> <p>-Provide a co-ordinated social media campaign across Nottingham and Nottinghamshire Pilot Community Alcohol Partnerships in priority local neighbourhoods in areas where there is an identified need Nottinghamshire Police Ensure that staff delivering alcohol awareness training and those delivering domestic and sexual abuse training are cross-trained in their respective fields.</p> <p>Public Health /CDP -Expand the "Making Every Contact Count" campaign across all appropriate services</p> <p>Public Health: -Improve identification of alcohol misuse within families via routine screening for alcohol abuse by all treatment providers and early years professionals</p> <p>CFCS/ Children and Families -Initiate a pilot "Diversion" programme in secondary schools</p>		
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		<p>Public Health -Ensure that alcohol awareness educators have had domestic and sexual abuse training and are able to deliver Domestic & Sexual Violence education elements appropriately and safely.</p> <p>-Ensure effective transitional referral pathways are in place from young people's to adult alcohol treatment services with particular attention to the impact of the Transforming Rehabilitation agenda on the provision of offender management arrangements</p> <p>CFCS / Children and Families -Ensure that alcohol treatment providers are flexible in accommodating the provision of gender specific workers</p> <p>Public Health /CDP -Undertake an assessment of the accommodation provision available for domestic and sexual abuse survivors to identify gaps in provision for those with complex needs.</p> <p>City / county Domestic Abuse Leads: -Fully implement ACPO guidance in cases of cross allegations in cases of domestic violence</p> <p>Nottinghamshire Police: -Establish and maintain a treatment and enforcement model to tackle street drinking across the city and county</p> <p>Local Authorities: Support Black and Minority Ethnic (BME) communities by ensuring availability of culturally sensitive services</p> <p>CDP/Public Health/Responsible Commissioners: -Ensure that best practice based activity is undertaken to address the use of illegal/ stimulant</p>		
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		<p>drugs alongside alcohol, raising awareness of health harms while reducing violent offending</p> <p>-Expand the number of quality mark Schemes (such as Best Bar None, Purple Flag etc) within Nottinghamshire's Night Time Economy</p> <p>Community Safety Partnerships:</p> <p>-Explore the barriers to the effective implementation of cumulative impact policies and saturation zones for licensed premises, including the presumption in favour of awarding alcohol licenses.</p> <p>Local Authorities:</p> <p>-Strengthen the Alcohol Diversion Scheme in the City through encouraging the use of the disposal for relevant offences, ensure consistency of delivery across the Force Area and explore the expansion of the scheme to 16 to 18 year olds</p> <p>-Nottinghamshire Police: Expand the use of innovative means to support the management of unlicensed premises with door staff through the use of vulnerability training, cocaine torches, ID scanners and smartphone ID apps for young adults.</p> <p>Nottinghamshire Police: -Expand the level of proactive licensing visits in alcohol related ASB hot spots in city and county to ensure compliance with licensing conditions and objectives</p> <p>Local Authorities: -Encourage local support for a Super Strength Free approach in the County while working to maximise uptake in the City</p> <p>-Increase the number of licensing officers employed by Nottinghamshire Police in the county</p>		
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		<p>-Nottinghamshire Police: Intervene earlier to prevent those already under the influence of alcohol continuing to drink to excess within the our towns and City such as “Direction to Leave” s27 Violent Crime Reduction Act 2006</p> <p>Nottinghamshire Police: -Explore the use of strategic interventions to increase robust enforcement, including Early Morning Restriction Orders and the Late Night Levy</p> <p>Local Authorities: -Explore the extent and impact of non-licensed alcohol sales including counterfeit alcohol alongside evidence-led targeted enforcement to reduce harm.</p> <p>Local Authorities / Trading standards: -Increase the number of test purchases and other enforcement tactics on premises that supply alcohol to underage young people Local Authorities -Engage criminal justice partners to consider and explore the viability of specific Family Drug and Alcohol Courts Nottinghamshire Police</p> <p>-Increase the use of treatment as a condition of bail and conditional cautioning</p>		
8. Nottinghamshire Police ALCOHOL STRATEGY & ACTION PLAN 2015-2018	<ol style="list-style-type: none"> 1. Tackle the underlying causes of alcohol abuse and promote recovery 2. Reduce violent crime 3. Discourage underage drinking 4. Promote healthier lifestyles 	<p>There are six Force objectives relating to alcohol:</p> <ol style="list-style-type: none"> 1. Change behaviour, so that people do not think it is acceptable to drink in ways which cause harm either to themselves or others 2. Reduce alcohol related violence (including domestic violence), crime and anti social behaviour; 3. Reduce the percentage of people who perceive alcohol misuse related ASB to be a 		

		<p>problem in their area</p> <p>4. Improve the management and planning of the night time economy;</p> <p>5. Reduce the level of alcohol related harm to children and young people;</p> <p>6. Improve assessment and treatment programmes for alcohol misuse offenders.</p>		
<p>9. Nottinghamshire Police Substance Misuse Strategy 2013-2018</p>	<p>In 2013, in order to coordinate the various roles of Nottinghamshire Police in addressing substance misuse the force developed a Substance Misuse Strategy. This outlines the activity of the force in meeting the challenges posed to policing by the misuse of drugs and alcohol as well as revealing the value of partnership working.</p>	<p>-Develop a media and communications strategy to ensure messages are clearly delivered to stakeholders and partners.</p> <p>-Make full and appropriate use of Cumulative Impact Policies.</p> <p>-Working with partners within the MARAC to share information and mitigate risk associated with high risk domestic violence cases; working with Women's Aid to facilitate signposting to relevant drug or alcohol support [services].</p> <p>-Address domestic cannabis cultivation</p> <p>-Use coercive powers to encourage drug-using IOM offenders into treatment.</p> <p>-Ensure that IOM offenders arrested for non-trigger offences are considered for drug testing on every occasion</p> <p>-Enforce required assessments and restrictions on bail where users refuse to take advantage of treatment opportunities</p> <p>-Tackle Class A drug trafficking [develop intelligence, monitor trends, work with local communities].</p> <p>-Disrupt open markets [Use stop search as a legitimate tactic, arrest individuals supplying in open markets, develop bottom-up intelligence]</p>		