

1. North East Area Council Finance & Procurement Report – Appendix A

Date of Meeting: 23 November 2023

Recommendation for decision:

Report Title: North East Area Drug and Alcohol Advisor

Report Author: Lisa Phelan, North East Area Council Manager

Is the report due to go to any other meetings?

If yes, where & when?

Public Health & Communities DMT, subject to this recommendation being accepted.

Brief overview of the paper:

Following on from the success of a similar ‘hub and spoke’ model implemented in 2021 to recruit area-based advisors to aid smoking cessation, the North East Area Council would commission a dedicated Alcohol and Drug Advisor to build relationships with members of the community, businesses and organisations, to raise understanding of alcohol and drug use, and the issues related to these substances.

The role will entail providing information, advice, support and training to community members, businesses, and organisations. The role will also deliver brief interventions to people who use alcohol and drugs (this includes all illicit and performance-enhancing drugs, new psychoactive substances (illegal highs), and the problematic use of prescribed and ‘over the counter’ medications) and where appropriate refer to Barnsley Recovery Steps to access structured treatment and support.

In addition, intelligence and data will be gathered to inform the provision and effectiveness of this service.

Prevalence Estimates of Dependant Drinkers in Barnsley:

A study undertaken by the University of Sheffield indicates that there are an estimated 3,839 adults in Barnsley who are alcohol dependent which equates to 1.97% of the adult population.

When compared to the Yorkshire and Humber regional areas, Barnsley recorded the second-highest alcohol prevalence. The highest rate was recorded in Kingston upon Hull (2% of the adult population) and the lowest rate was East Riding (1% of the adult population). The Barnsley prevalence rate is also higher than the national average of 1.3%.

The estimated proportion of people in Barnsley who are dependent on alcohol and not accessing support via Barnsley Recovery Steps is 84.4% compared to the national average of 79.6%.

Alcohol Consumption in the Barnsley Adult Population:

Whilst there are no estimated prevalence figures for individuals who are drinking at harmful levels but are not dependent on alcohol, the Health Survey for England 2011 – 2014, showed

that a large proportion of the Barnsley adult population reported that they drank alcohol (85.5%), which was above both the regional and national averages of 83.2% and 84.5% respectively.

Using the responses from the Health Survey for England 2011 – 2014, this showed that around 1 in 4 adults in Barnsley (25.8%) drank more than 14 units of alcohol a week (CMO recommended limit), which was below the regional rate (26.2%), but slightly above the national rate (25.7%).

Prevalence Estimates of Drug Users in Barnsley:

In 2019 the Public Health Institute Liverpool John Moore's University published a refreshed estimate for the Opiate and Crack using (OCU) population in England and all local authorities.

The latest drug prevalence estimates (June 2023) indicate that there are an estimated 2,199 adults in Barnsley who use opiates and crack cocaine (OCU). This is estimated to include 1,360 adults who use opiates only, 273 who use crack cocaine only, and 566 who are using both opiates and crack cocaine.

The unmet need levels for people using these drugs in Barnsley but not accessing treatment is 53.6% for opiate-only users, 71.4% for crack cocaine-only users (both lower than the national averages of 59.8% and 82.5% respectively) and 48.2% for people using both opiate and crack cocaine (higher than the national average of 46.6%).

National Priorities – Combatting Drugs Partnership (CDP)

In line with the ambitions of Barnsley's Combatting Drugs Partnership and the wider objectives set out in the national drugs strategy and the national outcomes framework, this proposal supports the strategic priority of increasing the number of people in drug and alcohol treatment.

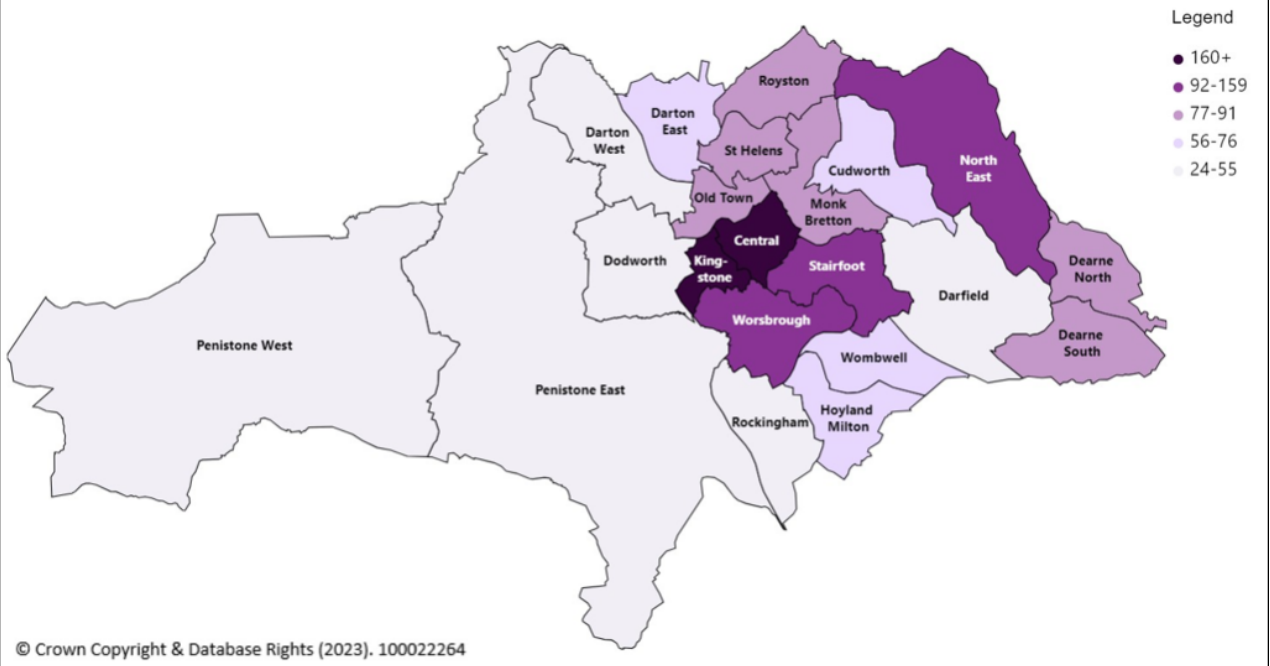
The appointment of a dedicated Alcohol and Drugs Advisor in the North East Area would help to create a safer, healthier and more productive society. Providing information and advice to the local population and offering brief interventions to address drug and alcohol use and access to structured treatment when appropriate.

Working with people, local businesses and partner organisations, the Alcohol and Drug Advisor will assist in the identification of emerging trends, issues and priorities of the needs of people who use alcohol and drugs in the North East area. Activity delivered through the pilot will contribute to the achievement of the National Drug Strategy priorities at a local level.

North East Area - alcohol and drugs prevalence/need:

Postcode data provided by Barnsley Recovery Steps shows that the North East Area (covering Cudworth, Monk Bretton, North East and Royston Wards) has a high prevalence of clients who attended structured treatment for drug and alcohol use between 1st April 2022 and 31st March 2023. The North East falls in the second-highest postcode range with a concentrated number of people from this area accessing specialist support, followed closely by those living in Monk Bretton and Royston.

All Clients Who Accessed the Structured Treatment Programme between 1 April 2022 and 31 March 2023



This is supported by data provided by Barnsley Recovery Steps which shows that 328 people living in the North East Area accessed structured treatment during 2022/23. It is important to note that these figures account only for the number of clients *known* to be receiving support for alcohol and drug use from Barnsley Recovery Steps, and that there are a significantly higher number of people who may require interventions and support who are not known to the service. The Alcohol and Drugs Advisor will play an important role in building and establishing relationships within the North East that will help to establish where additional support may be needed within the communities, using local data and intelligence to evidence this.

Out of the 328 people who accessed structured treatment for alcohol and drug use during 2022/23, the most prevalent age range was between 35 and 44 years, with 37.5% of clients falling into this category and twice as many men (82) than women (41) accessing support.

Residents aged between 45-54 years account for 34.1% of clients, the second highest prevalence rate, which gives a cumulative total of 71.6% of people accessing treatment across these two age groups.

The majority of clients have White British ethnicity (97%), with 73% also presenting with a mental health need (151 men compared with 91 women). Employment status is a key factor with 32.3% of clients registered as unemployed; however, it should be noted that 18.9% are actively seeking work. 30.8% are long-term sick and disabled which may suggest that they require additional support and adaptations to enable them to gain and maintain employment. The links to the wider determinants of health are evident, with sustained alcohol and drug use affecting clients' ability to obtain work and/or remain in employment.

KPIs and Outcomes*:

KPI 1 – Number of training sessions/workshops delivered to community groups, employers etc.

The Alcohol and Drug Advisor will deliver information workshops/sessions in the local community, linking in with the core training team at Barnsley Recovery Steps where specific training needs are identified.

KPI 2 – Number of brief interventions/harm minimisation interventions delivered.

In terms of clients who don't need structured treatment, Barnsley Recovery Steps would collect data on the number of brief interventions delivered by the Alcohol and Drugs Advisor and *Community Champions (volunteers - once appropriately trained). The advisor and community champions will also promote the DrinkCoach app to support people in monitoring and reducing their alcohol intake.

KPI 3 – Number of referrals to structured treatment broken down by alcohol, opiates and non-opiates.

KPI 4 – Number of people starting structured treatment broken down by alcohol, opiates and non-opiates

KPI 5 – Number of successful completions from structured treatment broken down by alcohol, opiates and non-opiates.

KPI 6 – *Number of volunteers/community champions recruited.

The Alcohol and Drug Advisor would train volunteers to act as 'Community Champions' who could then deliver brief interventions in the local community (see KPI 2 above). This would involve visiting existing community groups to give presentations and training sessions about alcohol, drug, and harm reduction. It would also involve setting up and establishing new peer support groups in the area, depending on the specific needs of the community. The Alcohol and Drug Advisor would be responsible for identifying and progressing these opportunities, with support from the Area Teams. The Area Council has specified a minimum of one regular volunteer per ward, with a total of six volunteers throughout the duration of the pilot.

KPI 7 – Number of volunteer hours.

Humankind will recruit volunteers in line with their volunteering policy, which will amount to a minimum of 300 volunteer hours during the lifetime of the pilot.

Contract Management:

Barnsley Recovery Steps will provide quarterly performance monitoring reports against the above indicators to help assess the impact and effectiveness of the work. Reports will include progress against the KPIs and provide accompanying narrative and case studies.

Contract review meetings will take place on a quarterly basis with the North East Area Manager, BMBC Public Health and Communities and Barnsley Recovery Steps.

Barnsley Recovery Steps will also attend monthly briefing meetings during the mobilisation period to report on project mobilisation, give progress updates and identify any gaps and barriers to delivering the project.

Following a referral, structured treatment support will be provided directly by the primary Barnsley Recovery Steps service. However, the Alcohol and Drugs Advisor will have access to the case management system to provide a summary of progress against specific identified needs and outcomes as required. The degree of detail supplied would be dependent on the number of clients entering structured treatment and the capacity of the Alcohol and Drugs Advisor to manage the collation of the data. It may become necessary to review and adjust this depending on service capacity to manage the information.

Finance:

Costings for one support worker 2023-2025:

North East Area Alcohol and Drug Advisor (A3):

This initiative would be funded jointly by the North East Area Council and BMBC Public Health, working collaboratively to achieve the aims of the pilot. Joint funding has also been sought from the OPCC and the wider Stronger Communities budget. The contribution from each funder is as follows:

- Cost for two-years from 1st January 2024 – 31st December 2025 = **£70,893.42 (mid-range) - £82,113.32 (top-range)**
- Funding requested from the North East Area Council – max £41,000 for the two years.
- Funding obtained from the OPCC – max £5,000
- Funding obtained from the wider Stronger Communities budget – max £5,000
- Funding obtained from Public Health – max £20,000 for the two years

North East Priorities:

In brief, the Area Priority that the project would be meeting is Healthy Lifestyles (linked to Healthy Barnsley 2030 strategic priority):

The North East Area Council set the Healthy Lifestyles priority to support residents to lead healthier lives and adopt behaviours that have a positive impact on health and wellbeing. This proposal would help to ensure that Barnsley residents have access to appropriate support, at the right time and place, so that any problems can be tackled early. This would help to address health inequalities resulting from drug and alcohol use, leading to fewer people living in poverty and providing people with the resources needed to look after themselves and their families.

Relevant KPI's specific to North East Area Council:

- **KPI 1 – Number of training sessions/workshops delivered to community groups, employers etc.**
- **KPI 2 – Number of brief interventions/harm minimisation interventions delivered.**

- **KPI 3 – Number of referrals to structured treatment broken down by alcohol, opiates and non opiates.**
- **KPI 4 – Number of people starting structured treatment broken down by alcohol, opiates and non-opiates**
- **KPI 5 – Number of successful completions broken down by alcohol, opiates and non-opiates.**
- **KPI 6 – Number of volunteers/community champions recruited.**
- **KPI 7 – Number of volunteer hours.**

Recommendations:

- That the North East Area Council fund a North East Area Drugs and Alcohol Advisor through Barnley Recovery Steps for a 24-month period, likely to start from 01 January 2024 to 31 December 2026, at a total cost of £41,000.
- That Public Health and Communities DMT agree the collaborative funding proposal for a period of two years at a cost of £20,000 for a mid-range alcohol and drugs worker to be placed in the North East Area Council. This funding is available from public health underspend in Garreth Robinson's Health Improvement budgets.

Appendices:

Once recommendations are agreed upon, a service specification will be drawn up and a Grant Agreement confirmed with Humankind Charity (the service providers of Barnsley Recovery Steps).

North East Area Council is asked to:

Note the report and agree to the funding contribution to the pilot scheme.