



Health and Wellbeing Together

22 January 2020

Report title	Substance Misuse Partnership Update	
Cabinet member with lead responsibility	Councillor Jasbir Jaspal Public Health and Wellbeing	
Wards affected	All wards	
Accountable director	John Denley, Director of Public Health	
Originating service	Public Health	
Accountable employees	Michelle Smith	Principal Public Health Specialist Tel 01902 550154 Email Michelle.marie-smith@wolverhampton.gov.uk
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Recommendations for decision:

Health and Wellbeing Together is recommended to:

1. Agree to endorse the Substance Misuse Partnership's approach to tackling substance related harm.
2. Agree to adopt the proposed governance arrangements outlined at section 4.3 for the Substance Misuse Partnership.

1.0 Purpose

- 1.1 To provide an outline to Health and Wellbeing Together (HWBT) of the intended approach to tackling substance related harm, building upon the Board's previous commitment to the alcohol harm reduction agenda.

2.0 Overview

- 2.1 Alcohol misuse (specifically within the City centre) has been agreed as a priority within the Living Well theme of Wolverhampton's Joint Health and Wellbeing Strategy 2018-2023.
- 2.2 Alcohol dependency is commonly associated with poor outcomes in relation to physical health, mental health, employment and with anti-social and criminal activity that adversely affects individuals, families and communities. For families, excess alcohol consumption can lead to relationship breakdown, domestic abuse, safeguarding and financial issues.
- 2.3 At its world café strategy meeting of 3 July 2019, HWBT considered the harm caused by alcohol and agreed a series of actions to contribute to the Living Well priority area 'City Centre'.
- 2.4 In addition, the Children, Young People and Families Plan 2015-2025 identifies fewer parents, children and young people engaging in substance misuse as a key outcome.
- 2.5 These priorities complement the approach to meeting the shared challenges of substance misuse and further support the aims set out in the Public Health Vision 2030 to:
 - Help people live longer, healthier and more active lives
 - Offer every child the best start in life
 - Close the gap in healthy life expectancy (within the City and between the Wolverhampton and England average)
 - Ensure everyone is protected from harm, serious incidents and avoidable health threats.

3.0 Approach

- 3.1 To facilitate local system leadership and ensure a collaborative approach to tackling substance misuse, the Substance Misuse Partnership (SMP) has been created.
- 3.2 The overall aim of the SMP is to work collaboratively to reduce the level of substance related harm across the City.
- 3.3 The Partnership was developed following the Substance Misuse Summit held in April 2019. The Partnership is in its infancy, with its inaugural meeting held in July 2019.

3.4 The core functions of the Substance Misuse Partnership include:

- The development and implementation of a local substance misuse strategy and accompanying action plans
- Consideration to the synergies between alcohol and drug-related harm and other associated work streams
- Identification of risks to responding to substance harms and mitigations
- Utilising expertise, identification of opportunities and to ensure they are maximised
- Responses to changes to regional and national policy and strategies
- Maximising the work of drug and alcohol services to ensure long term and sustained recovery
- Supporting the development of frontline activity to assist individuals and families with alcohol/and or drug needs.

3.5 The adoption of the system approach aims to ensure:

- A robust partnership ethos and strong local leadership
- A focus upon preventing harm and intervening at the earliest opportunity through early identification
- Protection of vulnerable people from the harm caused directly or indirectly through alcohol
- Co-ordinated use of regulatory powers and enforcement where appropriate
- Innovation

3.6 The following Public Health priorities are expected to form a key part of the upcoming substance misuse strategy:

- To be a top performer in drug and alcohol recovery
- To improve outcomes in housing, employment and mental health for people with substance misuse issues
- Reduce deaths from drug misuse
- Reduce the impact of parental substance misuse
- To reduce the number of young people, children and families engaging in substance misuse
- To reduce the rate of alcohol related hospital admissions
- Earlier identification and response to alcohol harm

3.7 The work of the Partnership will dovetail with the priorities which sit under the system leadership of the Health and Wellbeing Together Board, specifically the Living Well priority area.

3.8 Within the Living Well 'City Centre' theme, key streams of work aim to support this priority and empower communities to hand include:

Tackling the availability and density of alcohol outlets

- 3.9 The City's density of alcohol outlets is well above England average and is the highest across the West Midlands. We know pricing and availability of alcohol has an adverse impact on consumption levels of alcohol.
- 3.10 The Statement of Licensing Policy determines how alcohol Licensing Applications are processed under the Licensing Act 2003. The production of this policy is a legal requirement that City of Wolverhampton Council is charged with. This policy must be updated every five years to take into account local changes, government requirements and changes in case-law.
- 3.11 Wolverhampton City Council has just concluded a consultation into its Statement of Licensing Policy for the period 2020 – 2025. The Policy has changed significantly. Changes have been implemented to address concerns regarding the density of liquor licensed premises outlets in areas already identified as being of concern.
- 3.12 In addition, the authority has a Cumulative Impact Policy which was introduced to enable CWC to carefully consider the effects of granting additional licences into an area which has already been associated with higher rates of crime and disorder as well as anti-social behaviour. This is not automatic and without relevant representation from any of the responsible authorities which necessitates a hearing, applications will be granted.

Licensing matrix tool

- 3.13 Public Health have developed an interactive tool that correlates various pieces of data to provide a comprehensive picture of alcohol density and alcohol related harm. This enables an informed, evidence-based response to alcohol licence applications.

Community role in treatment and recovery – Communities in Charge of Alcohol

- 3.14 Communities in Charge of Alcohol (CICA) takes an Asset Based Community Development (ABCD) approach to reducing alcohol harm. Local volunteers are trained to become accredited 'Alcohol Health Champions' to provide brief opportunistic advice and take action on licensing decisions at an individual level and mobilise action on alcohol availability at a community level.
- 3.15 This initiative trialled in Manchester aims to empower communities to have a positive impact on alcohol related harm. The feasibility of CICA in Wolverhampton is currently being explored.

4.0 Recommendations

- 4.1 Building on recognition that alcohol related harm is a key priority in Wolverhampton HWBT are recommended to act as the executive champion in the City to promote and seek assurance on action to reduce substance misuse related harms.

4.2 HWBT are recommended to adopt this champion role within their respective organisations to assist the strategic priorities of the Substance Misuse Partnership. Board Members are encouraged to be an advocate for change and to help embed alcohol harm reduction activities in their organisation.

4.3 HWBT are also recommended to endorse the upcoming strategy produced by the Substance Misuse Partnership and receive an annual progress report from the Substance Misuse Partnership.

5.0 Financial implications

5.1 Funding for Public Health is provided to the Council by the Department of Health in the form of a ring-fenced grant. The total allocation for 2019-2020 is £20.2 million. Any costs arising from this report will be contained within this overall allocation.

[NM/0601200/M]

6.0 Legal implications

6.1 Health and Wellbeing Together is a statutory Board established under the Health and Social Care Act 2012. Each Board has a statutory duty to produce and implement a Joint Health and Wellbeing Strategy for their local population.

[TS/03012020/Q]

7.0 Equalities implications

7.1 The HWBT strategy meeting has identified a series of actions to take forward related to the Living Well theme of the Joint Health and Wellbeing Strategy including a specific focus on activity to further explore and embed opportunities to tackle health inequality.

8.0 Health and Wellbeing implications

8.1 The content of this report is to enable system leadership to enhance a holistic approach to health and wellbeing through activity to support the Living Well theme of the Joint Health and Wellbeing Strategy.

9.0 Climate Change and Environmental implications

9.1 There are no climate change and environmental implications.

10.0 Human resources implications

10.1 There are no human resources implications.

11.0 Corporate Landlord implications

11.1 There are no Corporate Landlord implications.

12.0 Schedule of background papers

12.1 Health and Wellbeing Together Executive Group Report 04 September 2019.