

West Yorkshire Drugs Intervention Programme (DIP): Commissioning Review

**Headline Report prepared for
Office of the Police and Crime Commissioner
West Yorkshire**

March 2014

Nicola Hughes
Consulting
SHAPING SAFER COMMUNITIES

DIP Review

Whilst positives have derived from the Drugs Intervention Programme (DIP) to date the funding, commissioning, management and delivery structures for addressing the problems associated with illicit drugs in England are experiencing an unprecedented level of change. It was therefore felt timely to review the current commissioning of DIP across West Yorkshire and undertake horizon scanning on future risks to its continued successful delivery. A review was undertaken which aimed to assess the current position and highlight forthcoming policy and structural impacts and their risks to inform the future commissioning of the DIP by West Yorkshire's Police Crime Commissioner.

The DIP Review report sets out the findings of a review of the commissioning of the Drugs Intervention Programme (DIP) for West Yorkshire. Tackling drug related offending remains a priority for the region and the review should be seen as a conduit to enable improvements to services providing evidence for the future development of service specifications and implementation of approaches to reduce re-offending in the district.

The Drug Interventions Programme (DIP) was launched in 2003 and identified offenders who misuse Class A drugs, namely heroin, cocaine and/or crack cocaine, as they go through the criminal justice system. A key driver for the programme was to identify people early and try to get people into treatment quicker. It was seen as a key element of the Home Office Strategy to reduce crime and improve community safety.

The DIP seeks to engage drug using offenders into treatment at every point of the criminal justice system. DIP identifies drug users in police stations, courts and prisons and deploys a range of interventions to address offending behaviour linked to drug misuse and aims to address the needs of this group and move them out of crime and into drug treatment and other support.

This Summary Report provides a highlight of the main analysis and recommendations derived from the main review report.

Context Analysis

The context in which DIP operates is complex on a number of levels - the individual user needs, determinants of and patterns of their offending, and the commissioning, funding and organizational structural context in which services operate with the aim of delivering a multi-faceted service to respond to complex needs.

Policy, commissioning and evaluated evidence all support that the DIP cannot be delivered in isolation. The Drug Strategy encourages local areas to develop and evaluate options for providing alternative forms of treatment-based accommodation in the community as well as making liaison and diversion services available in police custody suits and at courts by 2014. **DIP should therefore no longer be seen as an isolated intervention but more about a criminal justice thread of**

identification and intervention as part of the drugs and alcohol recovery system.

The initial focus of the DIP was on Class A drug using offenders of acquisitive crime. This profile of drug use and offending has changed. Alcohol and cannabis use are more prevalent and their use associated with offending particularly violent crime, disorder as well as acquisitive crime such as shoplifting. Operationally the DIPs have moved more to supporting drug misusing offenders beyond Class A however this needs formalizing to **ensure that the remit of criminal justice intervention is evidence based linked to prevalent crimes and drug use and therefore the definition is extended to include alcohol, cannabis, violent crime and disorder.** Whilst it is also recognized an increasing prevalence of the use of legal highs there is no evidence currently to support that there is an association between offending and legal highs.

There has been a substantial reduction in public spending alongside wide ranging public sector reform and structural changes. The parameters of budgets and remits of organizations are all under pressure with risks associated with continuation of funding and resource to support the delivery of drugs and alcohol interventions. The current funding through the PCC for the DIP is just one part of the total investment with multiple commissioners contributing to its resourcing. Any withdrawal from funding will impact upon delivery and the outcomes of the other commissioners. The success of the DIP/criminal justice interventions is reliant upon multi-agency funding and also collaborative working. Any of these units change will impact upon delivery. It is therefore **key that there is a joint agreement around the drug and alcohol priorities and funding across key commissioner and that this commitment is embedded within local strategic plans and partnerships.**

Impact evaluations of the DIP and the contribution that treatment makes to reduction in offending are positive. Equally the DIP has achieved its original aim of reducing time for drug using offenders to be identified and access treatment services. It should however be recognized that the profile of Class A drug using offender has changed with an older population who stay in treatment services longer. This necessitates that **services need to be innovative in approaches to both identifying other users and treatment interventions for existing identified group.**

In addition to the government's commitment to the DIP as a means of ensuring treatment of offenders is recovery focused there is also evidence to support the need to make solutions holistic and appropriate to local need and individuals. **Local Needs Assessments provide evidence base and relationships between local commissioners and providers ensure that delivery is adapted to respond. It is important that any new structures allow for continued evidenced based delivery which is appropriate to local need.**

The use of semi-coercive measures including Drug Testing, DRR, Penalty Notices, Released on Bail, Conditional Cautioning, Community Orders and Alcohol Treatment Requirements are all seen as tools available to motivate drug and alcohol offenders to access support and treatment services. **The full use of availability of these sanctions should be explored for their applicability to areas and learn from those districts which have implemented them.** As a regional organization

spanning the five districts, **West Yorkshire Police have the unique opportunity to take a coordinated approach to their implementation and sharing learning across Districts.**

Changes in the Probation Service as well as Policing has and will result in more offenders in the community and out of court orders. The entry points for identification of drug misusing offenders and provision of support have and will continue to change. There will be a need to ensure that the DIP widens its criminal justice pathways to include increased early identification prior to someone entering custody. Local Commissioners and West Yorkshire Police have considered possible models to ensuring this such as the sharing of a leaflet about drug and alcohol services by PCSOs. It is important that in the future the full spectrum of criminal justice pathways considered in the commissioner response and form part of minimum standards for commissioned services.

There are a number of new initiatives and pathways which will need to connect with the DIP. There are opportunities for the new Custody Health, Liaison and Diversion and BIG Lotteries' Fulfilling Lives to all further support and enhance the support and interventions delivered by the DIP. It is **imperative that early discussions about the interface between these services and the pathways for interventions and treatment are agreed.** This includes being clear about information sharing agreements. The future funding decisions about the investment and their operation into such services also need to be strategically considered within the context of the drugs and alcohol commissioned services.

The planned cut in total public spending over five years from April 2011 will be larger in real terms than the UK has seen in any other five-year period since the end of the Second World War. The Coalition Government's ambition to eliminate the UK's structural deficit means a reduction of up to 40% in central government department funding. Within this context, all public services are expected to work more collaboratively and imaginatively: pooling budgets, identifying innovative ways in which scarce resources can be made use of more efficiently and allocating resources on the basis of outcomes, including the adoption of experimental Payment by Results approaches. Increasing public service austerity, alongside considerable, far-ranging policy and organisational change, therefore raises questions about the impact of this on the ability to continue to deliver and operate drug interventions and services in the same way as before. **A potential risk is that the national priority afforded to drug policy may not be reflected at the local level. Most organisations, at the time of the research, with the exception of the police, did not seem to be stepping back from existing partnership working. However, collaboration takes staff time and resources. As changes take place and austerity bites, the sustainability of local collaborative and partnership mechanisms was seen to be vulnerable.**

Service Analysis

The DIP is currently commissioned separately by the 5 District Public Health/Local Authority Commissioners who have a considerable bank of experience and deliver evidenced based commissioning. **The benefits of the current model of district based commissioning uses a local model that works rather than overly**

complicate and put the current integration of the DIP into drugs and alcohol delivery models at risk by commissioning separately.

Whilst there is confidence in the current commissioners **it is important that this clear understanding of the contribution of the criminal justice element needs to be equally acknowledged and embedded within the local authority, other commissioners, the Health and Wellbeing Board, Community Safety Partnership and their Strategies.** This will ensure that it remains a priority for commissioners at a time when budgets and priorities are being squeezed.

The differing procurement timescales across Districts present challenges for jointly commissioning across services. The PCC DIP/criminal justice element of the funding needs to continue to be reviewed and **it would assist both the PCC but other region wide commissioners if there was greater alignment of commissioning timescales.**

There are multiple commissioners of drugs and alcohol services across the District, and across adults and young people. Tight budgets, lack of previously ring fenced budgets, the challenge to deliver more for less all place pressures upon future resource availability. **Withdrawal of funding from any of the funders or changes to the focus of their funding would have an impact on services delivered and outcomes** achieved including criminal justice outcomes. The **key commissioners need to agree a key set of priorities and timescale for review surrounding drug and alcohol services and include these within their local Health and Wellbeing Plans.** Criminal justice aspects to drugs and alcohol also need to be recognised as part of this.

The **funding formula for the PCC DIP funding was found difficult to distinguish separately from other drug and alcohol funding.** The benefits of such integration of funding and delivery has been demonstrated to provide a number of benefits however **it is also important to ensure that return on investment can be shown from the resource made available.** Clear performance indicators and simple minimum standards which could be attached to service specifications would support clearer governance and accountability of the investment.

It is unknown how the original formula for district based allocations was made. Given the proposals to widen the remit, definition and delivery of DIP/Criminal justice delivery it would be a pertinent time to review the funding formula. The formula should be in line with levels of offending and drug/alcohol use within each District to reflect the level of intervention which it is expected to be required.

The PCC funding provided to West Yorkshire Police for **Drug Testing** set out to contribute towards 43 officers but due to changes in testing it is estimated only 17% of their time is spent on testing therefore **questions the value for money.** It is suggested that **testing still has value as a sanction** but the levels would not indicate funding for the original number of officers. The **funding should be scaled appropriately.** **Opportunities regarding whether costs could be reduced by non police personnel undertaking the testing** should also be explored.

DIP has been shown to form one part of an integrated approach to drug and alcohol services. **The original programme has now become embedded in delivery as the criminal justice element.** The evidence in this review is that this element which should continue and **needs to be explicit within future service specifications and partnership strategies.**

Originally there were three key entry points to the DIP - Custody, Court and Prison. This has started to widen as there is a reduction in people being taken to custody and increased management of offenders in the community. **The criminal justice support and interventions need to work more creatively to engage, identify and work with West Yorkshire Police to implement alternative incentives to engage with the group.**

There is some **concern that only between 1-5% of offenders being referred to the DIP in custody are new to the service** hence highlighting a revolving door and continued offending. This highlights several issues:

- Whilst reporting of recovery focuses on successful completions of treatment in terms of drug and alcohol use current data is not monitored around offending.
- There are a group of drug and alcohol using offenders who are not presenting or being identified within custody. Contributory factors include the offence criteria being too narrow and drug and alcohol misusing offenders who are committing more minor offences such as shoplifting or disorder are being dealt with out of custody.
- The current mechanisms for working with the 'problematic' group of drug misusing offenders aren't being effective in reducing their offending

There is therefore a requirement that **more innovative approaches are used for working with the problematic users; the offending criteria should be widened to formally incorporate alcohol, cannabis, disorder and violent crime; and there should be an increased focus on early intervention and identification prior to custody.**

Having DIP/CJIT staff based within cells is costly as it was recognised that there can be void time. To respond Districts have looked at different structures and their remit to respond to this. **The new Super Cell in Wakefield has presented some teething problems around ensuring engagement particularly proactive engagement.** Increased emphasis of identifying and working with offenders in the community suggests that less time should be spent in custody. Leeds have moved their staff out of custody to no negative affects and other areas in the country operate appointment systems for attending custody. **Districts should review the super cell to ensure appropriate information sharing and engagement with less emphasis and flexibility on being custody based** allowing more time for community engagement. There is an increasing emphasis on recognising that many of the client group have multiple and complex needs and the new services such as Custody Health and Liaison and Diversion who will also be custody based allow **potential opportunities which should be explored for the sharing of resource within the custody setting** and thereby achieving greater value for money.

The three original entry points of custody, courts and prison for DIP have changed. DIP Providers have been creative about considering other entry points to identifying and engaging with drug misusing offenders and this **learning needs to**

be shared and replicated as appropriate across the region. It should be formally recognised as there is increased out of court disposals and group of offenders who don't attend custody. **Minimum standards in service specifications relating to criminal justice expectations and offence types should be set out and performance indicators developed to appropriately support** these entry points and offences.

A range of new pathways and initiatives are coming on line which should be welcomed as they support common crime and drugs and alcohol outcomes. It is imperative that there is strategic agreement to how these programmes connect with the drug and alcohol services across the region so that there is consistency and future joint agreements regarding their development are agreed within a strategic context.

Effective partnership working is imperative to enabling clear and consistent pathways of support to the client group. Information sharing and management supports this. There are **opportunities to improve information sharing across the region at key contact points** (Custody – Detention Officers and Custody Health, Court, Prisons, Liaison and Diversion) to ensure consistency, reduce duplication and ensuring it is timely.

Performance Analysis

Criminal justice based drugs interventions has been shown to support the reduction of re-offending and crime levels through identification of and provision of treatment people for people within the criminal justice system.

Offences linked to substance misuse and drug usage profile has changed. There is an **increased misuse of alcohol relating to disorder and violent crime and cannabis use.** To impact on the reducing offending these offence types and substance types should be included in the focus of criminal justice drug interventions. The use of 'Legal Highs' has also increased but there is little evidence currently to support its linkage to offending.

The profile of user is also changing. **An older Class A drug user who stay in treatment longer.** It has also been previously highlighted that there is only a small percentage of clients who are identified as 'new' to DIP currently in custody. It therefore **suggests that alternative creative solutions need to be put in place to work with these users to prevent the revolving door** of drug use and offending. It is also highlighted that **cannabis and alcohol use has a younger age profile supporting the need for increased work with Youth Offending Services.**

There are a small set of performance indicators for each District relating drug users in treatment which are reviewed on a quarterly basis. However there are currently no targets attached to these. **There are no targets or performance indicators specifically relating to drug related crime reduction, offending, re-offending or equally attached to alcohol related crime.** To identify return on investment a set of targets and performance indicators need to be attached to future funding. The focus should relate to the revised remit of the service and funding. Performance indicators should be common across Districts to enable comparisons to be made

and allow valuable benchmarking analysis and quantitative information to be made available.

There is an **extensive set of data and information recorded by drug and alcohol services which can be drawn upon without creating additional data recording**. The data sets allow potential for greater monitoring relating to criminal justice interventions than what the current PCC performance indicator sets prescribe. The current reports shared by PHE with the PCC on a quarterly and annual basis provide a valuable level of data by District and West Yorkshire region which go beyond the PCC performance indicator data set.

Performance governance arrangements for drugs and alcohol currently vary across Districts, often with multiple partnerships being responsible for different parts of the drug and alcohol services and outcomes. To **ensure that there is appropriate governance for the PCC drugs criminal justice funding there needs to be clarity about the performance management arrangements**.

Recommendations

R1. The future focus of the PCC drugs and alcohol resource should be to formally move away from the name DIP which denotes an isolated project towards supporting 'criminal justice interventions' to reduce offending associated with drug and alcohol use.

R2. A wider definition of the remit of the criminal justice intervention should be agreed to also include:

- Class A, Alcohol, cannabis, violent crime and disorder
- With a wider focus on entry points to identify and engage with offenders to include increased early intervention and pre-custody work in the community

R3. Drugs and alcohol should be reflected as a priority within key strategic partnership plans such as Health and Wellbeing Plan and JSNAs.

R4. Strategic agreement across five districts and key drug and alcohol commissioners should be sought on:

- The definition of the remit of criminal justice interventions (R2)
- Including criminal justice interventions as part of the integrated drug and alcohol commissioning of services
- Should form part of the strategic priority and element of DIP/drug criminal justice commissioning
- Agreement across commissioners to maintaining resource commitment to drug and alcohol services (R7)

R5. Strategic agreement to new pathways and their interface with criminal justice drug and alcohol services should be gained. Support should be given to providers to establish how 'new' delivery will integrate especially at cell intervention level. Opportunities should be explored for achieving greater value for money through re-design and skilling to ensure holistic assessment and pathways to people with multiple and complex needs.

R6. There should be continued investment in criminal justice interventions in drugs and alcohol services with the aim of reducing reoffending of drug and alcohol misusing offenders. The following attached to the funding:

- Clarity on definition of DIP/CJ element
- Focus on reducing re-offending and indices to support - focus on offence type
- Robust management of what is commissioned without creating complex and resource intensive data management systems
- Common performance measures across all 5 districts
- Minimum standards for commissioning (R11)

R7. Commitment should be given by other commissioners to continue investment in drug and alcohol services to current levels (R4)

R8. The resource should focus on reducing the following offences: acquisitive crime, disorder and violent crime

R9. The funding formula for district based delivery of drugs and alcohol criminal justice interventions should be re profiled according to levels of drug and alcohol related crime.

R10. The funding formula for drug testing should be re profiled according to level of drug testing undertaken.

R11. A set of minimum standards should be developed for inclusion in service specifications relating to criminal justice expectations and offence types.

R12. Commissioning should be undertaken on a District basis using existing structures within the parameters of the resource minimum standards (R6)

R13. Targets should be attached to the funding which relate to reduction of re-offending and should common to all Districts

R14. A wider set of performance indicators to reflect the target should be reviewed on a quarterly basis

R15. Clarity should be given by each District regarding the governance arrangements for the funding and criminal justice interventions to tackle drug and alcohol related offending. It should be clear which district partnership body will take responsibility. As Districts move towards an integrated drug and alcohol commissioned model it is suggested that all drug and alcohol performance should be considered by one partnership rather than fragmented lines of accountability across a number of partnerships (R4)

R16. Networking opportunities should be developed for the sharing of good practice and exploration of opportunities for collaborative work and commissioning across West Yorkshire Districts and commissioners (R4)

R17. Districts should explore further with West Yorkshire Police the increased and effective use of incentives (Brief Intervention Leaflets, Penalty Notices, Conditional Cautions, etc.) to support engagement and early identification also ensuring there is adequate provision of rehabilitation and diversionary options (R16)

R18. Drug testing where appropriate should continue with a focus on acquisitive crime. The link between drugs and offending type should continue to be periodically reviewed to ensure that testing is appropriate to crime. The legal parameters of non West Yorkshire Police administering the test should be explored.

R19. Having CJIT staff covering custody suites full time should be reviewed with exploration of a more efficient way for staff to engage with clients. This should include consideration of the identified teething problems in super cells and exploring opportunities for added value from working with the new Custody Health and Liaison and Diversion staff to enable integrated triage. (R5)

R19. Opportunities for creative and proactive engagement by West Yorkshire Police and drug and alcohol services should be encouraged (R16, R19)

R20. Consistent information sharing agreements should be established with key West Yorkshire wide stakeholders such as West Yorkshire Police, Courts and Police. Consistency of information sharing around timely sharing of information with drug and alcohol services should be considered at all the key entry points including custody, court and prison.

R21. Further explore innovative approaches and what further interventions are required in delivering a targeted approach to 'frequent flyers'

R22. Further explore with Youth Offending Service early identifications and interventions with drug and alcohol using offenders