

ADULTS AND HEALTH SCRUTINY COMMITTEE	AGENDA ITEM No. 7
17 SEPTEMBER 2024	PUBLIC REPORT

Report of:	Mike Robinson, Interim Director of Public Health	
Cabinet Member(s) responsible:	Councillor Dr Shabina Cabinet Member for Adults and Health	
Contact Officer(s):	Kathy Hartley, Consultant in Public Health Joseph Keegan, Substance Misuse Commissioning	Tel. 07795 557595

Update on the impact of additional Supplementary Funding on addressing Substance Misuse in Peterborough

RECOMMENDATIONS	
FROM: Substance Misuse Commissioning	Deadline date: September 2024
<p>It is recommended that Adults and Health Committee review the improvements in the Substance Misuse service offer since the award of Supplementary Grants and the outcomes achieved, and to support the continuation of delivery where there is impact.</p>	

1. ORIGIN OF REPORT

- 1.1 Following a meeting of the Group Representatives, the Committee has requested that this report comes to the committee.

2. PURPOSE AND REASON FOR REPORT

2.1 *The purpose of the report is:*

1. To provide an overview of the need, process and outcome of substance misuse services in Peterborough.
2. Explain how services are funded and to describe the service developments which have been funded by the Supplementary Substance Misuse and Treatment Recovery Grant (SSMTRG) since it started on the 31st of March 2022
3. To assess the impact of the SSMTRG on outcomes

- 2.2 This report is for the Health Scrutiny Committee to consider under its Terms of Reference Part 3, Section 4 - Overview Scrutiny Functions, paragraph No. 2.1 Functions determined by Council:

1. Public Health;
4. Adult Social Care; and
5. Safeguarding Adults.

3. TIMESCALES

3.1

Is this a Major Policy Item/Statutory Plan?	NO	If yes, date for Cabinet meeting	N/A
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4. BACKGROUND AND KEY ISSUES

4.1 This section provides an overview of drug and alcohol needs/gaps in Peterborough, the services to support those with drug and alcohol problems and some of the historic funding challenges resulting in pressure on services, before the supplementary substance misuse and treatment recovery grant.

4.2 Drug and Alcohol Needs

Drug and Alcohol misuse is a significant public health issue in Peterborough as it is nationwide. A comprehensive drug and alcohol needs assessment was completed in January 2023, which included a review of data from 21/22. The following sections summarise the findings of the needs assessment.

4.2.1 Table 1 – Summary of key alcohol needs taken from the 2023 drug and alcohol needs assessment

Metric	Need in Peterborough compared to England																																											
% of the Peterborough population needing alcohol treatment compared to England.	Peterborough has a higher rate of (15.2 per 1000 population) needing alcohol treatment compared with England (13.7 per 1000 population).																																											
% of people in Peterborough accessing alcohol treatment compared to England.	24% of the people needing treatment in Peterborough were in treatment compared to 20% in England.																																											
% Admission rates to hospital for alcohol related conditions.	<p>There were 819 hospital admissions in 2021/22 for alcohol related conditions in Peterborough, however the rate of admissions is lower than that of England</p> <table border="1"> <thead> <tr> <th rowspan="2">Area</th> <th colspan="3">Persons</th> </tr> <tr> <th>Number</th> <th>Rate</th> <th>Trend</th> </tr> <tr> <th></th> <th colspan="2">2021/22</th> <th>to 2020/21</th> </tr> </thead> <tbody> <tr> <td>Cambridge</td> <td>521</td> <td>480.0</td> <td>→</td> </tr> <tr> <td>East Cambridgeshire</td> <td>340</td> <td>374.8</td> <td>→</td> </tr> <tr> <td>Fenland</td> <td>538</td> <td>499.9</td> <td>→</td> </tr> <tr> <td>Huntingdonshire</td> <td>777</td> <td>420.1</td> <td>→</td> </tr> <tr> <td>South Cambridgeshire</td> <td>599</td> <td>368.6</td> <td>→</td> </tr> <tr> <td>Cambridgeshire</td> <td>2,774</td> <td>420.0</td> <td>→</td> </tr> <tr> <td>Peterborough</td> <td>819</td> <td>435.5</td> <td>↓</td> </tr> <tr> <td>England</td> <td>270,774</td> <td>494.0</td> <td>→</td> </tr> </tbody> </table>	Area	Persons			Number	Rate	Trend		2021/22		to 2020/21	Cambridge	521	480.0	→	East Cambridgeshire	340	374.8	→	Fenland	538	499.9	→	Huntingdonshire	777	420.1	→	South Cambridgeshire	599	368.6	→	Cambridgeshire	2,774	420.0	→	Peterborough	819	435.5	↓	England	270,774	494.0	→
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4.2.2 Table 2 - Summary of key drug needs taken from the 2023 drug and alcohol needs assessment

Metric	Need in Peterborough compared to England where possible
Rates of people with Opiate and Crack Cocaine use in Peterborough compared with England.	<p>Prevalence of Crack Cocaine use in Peterborough is estimated to be 6.9 per 1000 compared with 5.1 nationally.</p> <p>Prevalence of Opiate use in Peterborough is estimated to be 11.47 per 1000 compared to 7.37 nationally</p>

	Prevalence of concurrent Opiate and Crack in Peterborough is estimated to be 13.77 per 1000 compared to 8.85 nationally
% of people in Peterborough accessing drug treatment compared to England.	48% of people in need of treatment were accessing drug treatment in Peterborough compared with 46% nationally 54% of those needing help for Crack Cocaine use in Peterborough were in treatment compared with 46% in England
Substances	Main substances used are Opiates, Cannabis, Cocaine and Crack Cocaine 70% of drug clients are using opiates e.g. heroin, comparable to findings nationally
Length of time in treatment (shorter is regarded as better)	People are in treatment for less time in Peterborough with 49% in treatment for less than 2 years compared with 42% nationally
Offending	Around two thirds of the criminal justice clients in community treatment had previously been in prison.

4.2.3 **Qualitative feedback from drug and alcohol service users and stakeholders – From Tonic Report Completed November 2022.**

In addition to the quantitative needs identified, the Council consulted with staff, service users and local stakeholders. The following service gaps were identified.

- Lack of detox and rehab in Peterborough
- Need more housing support options
- Need better access to employment
- Need more support in recovery
- Need to improve prescribing capacity
- More awareness of young person's service
- Earlier interventions for those on criminal justice pathway
- The size of caseloads at CGL (number of clients per worker) was too high impacting on quality

Summary of drug and alcohol needs at the beginning of 2023:

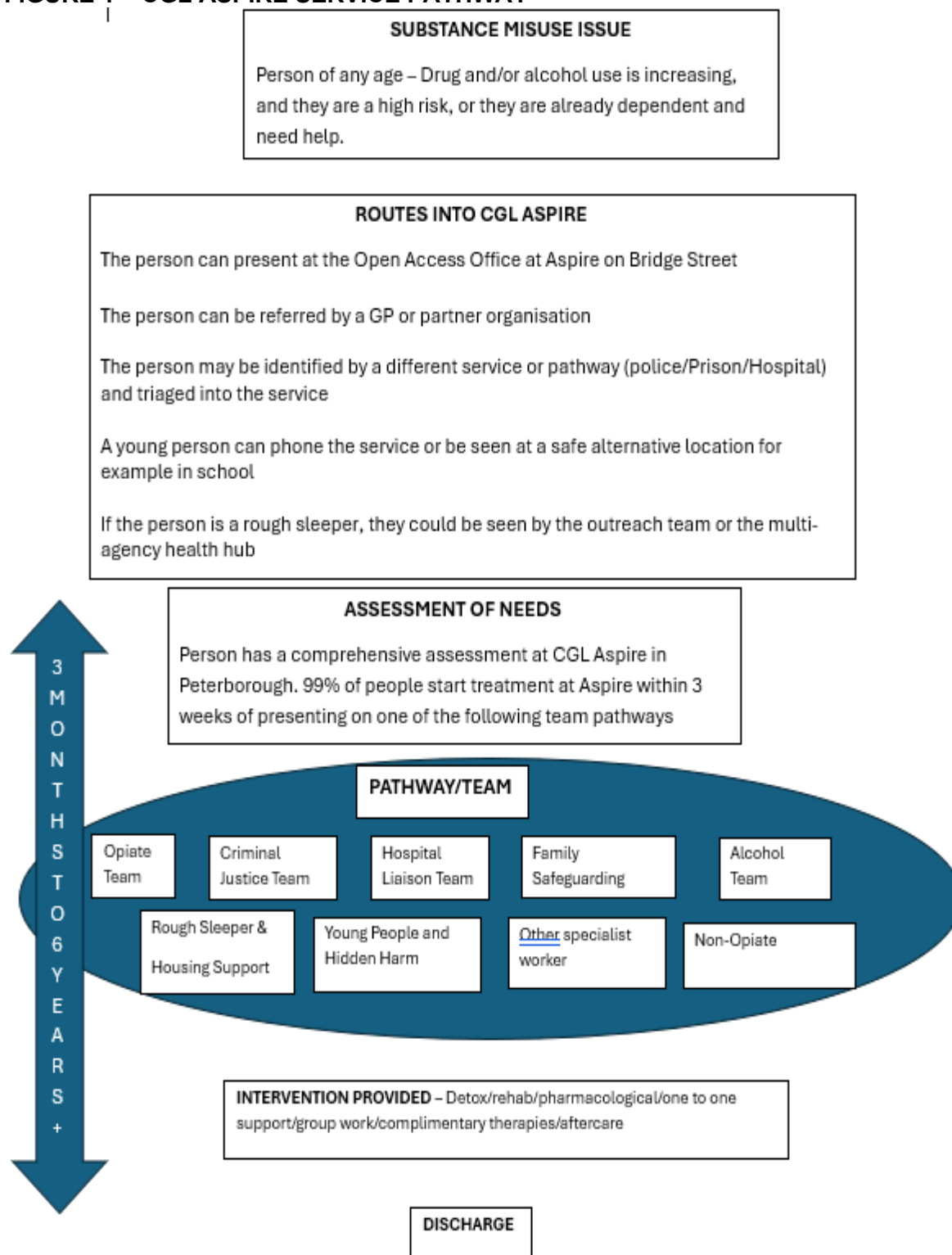
- Peterborough has a more complex client group compared to England – higher number of clients using crack cocaine, significant housing problems and a high-risk offender profile and limited early intervention
- Peterborough was doing well at supporting clients into drug and alcohol treatment compared with England but still more than half of people needing drug treatment were not in treatment and for every 100 people needing alcohol treatment only 24 were in treatment at a given time
- The service lacked key funding to address wider public health determinants e.g. access to work, stable housing and opportunities to sustain and support recovery.

4.3 **Process for accessing drug and alcohol services in Peterborough**

The process for accessing drug and alcohol services in Peterborough is very simple. There is one main provider of support covering adults and young people, which helps them with both drug and alcohol issues. The provider is Change Grow Live (CGL). Locally the service is known as

CGL Aspire. Aspire was a name chosen by service users locally. Figure 1 shows a basic pathway and journey through treatment:

FIGURE 1 – CGL ASPIRE SERVICE PATHWAY



The CGL Aspire service is very easy to access:

- People can directly go to the service and be seen via open access
- Professionals can refer clients to the service
- People can be seen at drop-in and outreach sessions including in hospital.

There are no waiting lists for the service or thresholds which delay or prevent care. The service helps people with relatively straightforward presentations requiring help with one substance that has recently developed into a problem, to more complex presentations with decades of use using multiple substances impacting on all aspects of their life and outcomes.

If people have increasing but not higher risk alcohol drinking, there is one other service separately commissioned by the Council called Everyone Health which provides short-term alcohol brief interventions. This is for people with lower-level needs not requiring specialist treatment.

4.4 **Funding of services before the Supplementary Grants Programme**

Funding for drug and alcohol services nationally and locally was significantly impacted during the continuing austerity period affecting public services. During this period there was no ring-fence on the budget for drug and alcohol services and it was not possible to give inflationary uplifts on contracts. As an example, the CGL Aspire Core contract in Peterborough has a base budget for 24/25 of £2,482, 510. This is lower than the original contract value of £2, 636, 416 when the current CGL contract began eight years ago on the 1st of April 2016. During this period there has of course been considerable cost of living rises. This situation has been mirrored nationally.

4.5 **Dame Carol Black Review**

Following concerns about the impact of drug abuse in England and the impact of cuts to drug and alcohol services, the government asked Dame Carol Black to undertake a review of the state of drug and alcohol services in England. The review was published in 2020 and found the following:

- There was a need to reform the funding model for drug and alcohol services
- A whole system approach was required encompassing health, housing, criminal justice and employment
- There was a need to strengthen harm reduction services
- There was a need to expand and upskill the workforce
- There is significant stigma experienced by people with drug and alcohol issues
- There is a need to recognise the link between co-occurring mental health and substance misuse

Following Dame Carol Black's review the national government published the 10 Year National Drugs Strategy "From Harm to Hope". More details are provided below.

4.6 **National 10 Year Drugs Strategy – "Harm to Hope"**

The National Drugs Strategy was published in 2021, which addressed the following key priority areas:

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

To accompany the delivery of the strategy, central government committed £900m worth of additional funding over 3 years. Each authority was asked to set up a Combatting Drugs Partnership to oversee the local delivery and a Senior Responsible Officer (SRO). For Peterborough the role of the Combatting Drugs Partnership is taken by the High Harms Board and the SRO is Police and Crime Commissioner, Darryl Preston. These are supported by the Countywide Drug and Alcohol Delivery Board. Given the overlapping drug and alcohol issues in Cambridgeshire and Peterborough and footprint of local public services (Police/Probation, Integrated Care Board and at the time Public Health) these groups operate countywide across Cambridgeshire and Peterborough.

As part of the roll out of the National Strategy, Peterborough has received a set of 4 supplementary grants.

5.0 **Supplementary Substance Misuse and Treatment Recovery Grants (SSMTRG).**

To support the roll out of the National Drugs Strategy the Council has been awarded 4 additional grants.

Table 3 - Summary of Grants

Grant	2024/25 (Peterborough)
Supplementary Substance Misuse Treatment & Recovery Grant (SSMTRG)	£1,116,875
Rough Sleeper Drug & Alcohol treatment grant (RSDATG)	£734,803
Individual Placement & Support (IPS)	£108,006
Housing Support Grant	£662,754
Total	£2,622,438
Inpatient detox (regional commissioned beds-consortium independent from local LA budgets)	+ £58,315*

*The inpatient bed money is part of a regional collaboration, and this money is paid direct to the provider and does not come via Peterborough City Council

The total supplementary grant fund of £2, 622, 438 compares with the core grant £2, 482, 510. Combined the total investment in drug and alcohol services in Peterborough is now £5, 104, 948. The Council is currently in the 3rd year of these the Supplementary Grants. **See Appendix 1 for more detail on each grant.** The central government funding has been very welcome and has completely transformed services for the public in Peterborough.

5.1 Service offer BEFORE the Supplementary Grants

Prior to this additional funding, CGL Aspire was outperforming England in the percentage of the potential treatment population engaged in treatment. Each service user received the following help:

- Comprehensive assessment
- Allocation to treatment pathway that most closely addressed their needs
- An allocated Recovery Co-ordinator which oversees their care and their personal plan
- Prescribing interventions (drug and alcohol only) by CGL clinicians
- Group interventions and one to one where possible
- Complimentary therapies like acupuncture
- Limited access to inpatient detox

But due to the shortage of funding, many issues were identified:

- limited preventative criminal justice work for those involved in or at risk of drug related crime
- only one worker who could help rough sleepers
- staff with excessive caseloads (some had 80+ per worker)
- limited support for clients at high risk of losing their housing
- no protection for clients as risk of being cuckooed by drug dealers
- a restricted offer for young people
- prescribers under pressure and a lack of flexibility to meet client needs
- very limited detox and no rehab
- limited support around benefits
- challenges for different diverse community members facing additional stigma
- limited pathways into employment
- inability to help those in recovery following discharge from treatment.

The gaps in service provision were very much reflected by the qualitative needs assessment report from 2022, as outlined in section 4.1.3.

5.2 The current service offer WITH the Supplementary Grants

With the addition of the four Supplementary Treatment Grants, there has been a complete transformation of the drug and alcohol service offer to the residents in Peterborough. Council Commissioners have had an opportunity to radically develop and reshape the offer, using the funding available. Figure 2 below depicts this as an image. The boxes in GREEN summarise the additional areas funded by the extra grants.

Figure 2 – Additional services provided by the Supplementary Treatment and Recovery Grants.



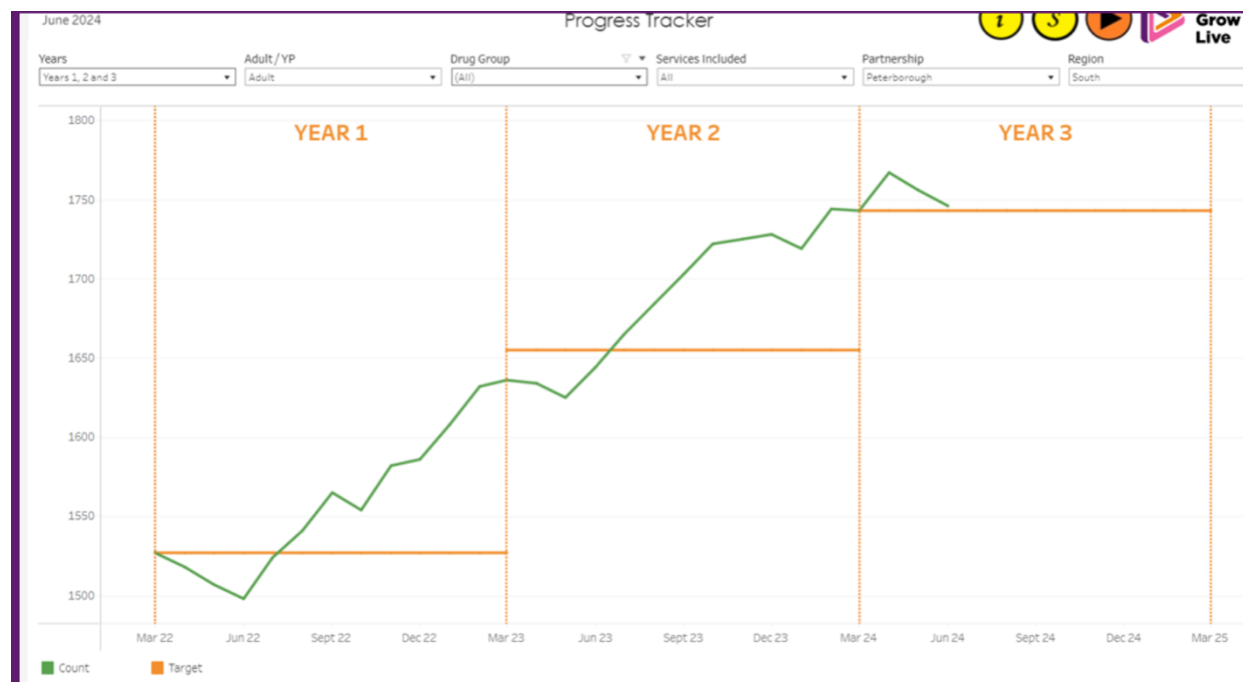
5.3 Assessing the impact on outcomes of the SSMTRG

5.3.1 Now midway through year 3, we are still only in the early stages of the 10 Year National Drug Strategy from Harm to Hope. The grants were released at different stages with the most recent, Individual Placement and Support starting in January 2024 and the Housing Support starting in October 2023. The earliest release of money was the Rough Sleeper Drug and Alcohol Treatment Grant which preceded the other grants, and the longer length of time has enabled a full external evaluation. Appendix 1 provides detail on all 4 grants and what has been achieved.

The top ambition in the Harm to Hope Strategy is to increase the numbers in drug and alcohol

treatment. Peterborough was set a target to increase the total numbers in treatment to 1747 from 1522 by 31st March 2025. Thanks to innovation and dedication CGL achieved the target a year early. Graph 1 below details:

GRAPH 1 - Key headline measure - Numbers in treatment



Furthermore, Peterborough was visited in January 2024 by the Office of Health Improvement and Disparities (OHID) and was congratulated on its progress in reaching this target where many other authority areas did not. OHID wanted to learn from Peterborough how this has been achieved; the consensus was early mobilisation and the creation of specific specialist teams within the overall service, as described above.

The achievement increasing the numbers in treatment, whilst a headline measure, is only part of the story so far. Other benefits realised as a result of the investment are detailed in Appendix 1 and summarised below.

Service Quality Improvements

- With additional staff in place, it has been possible to reduce the average number of clients from 38 per worker in March 2022 to 27 in April 2024. This has provided more time for one-to-one interventions and support to help address patient needs
- Training 1082 front line workers in drug and alcohol awareness, trauma informed approaches and Naloxone use and administration (Naloxone can be used to save lives and reverse the effects of an opiate overdose)

Investment in detox and rehab (known as Tier 4)

- More patients have benefited from inpatient detox - an increase from 11 in 21/22 to 27 in 23/24 and there are 7 rehab places for Peterborough where previously this could not be afforded at all

Clinical improvements

- The money has funded a new Prescribing Doctor, who can offer more clinical time to support with increased patient numbers
- CGL have recruited a Health Care Assistant. This has helped to increase testing and treatment of Hepatitis C. Positivity of HEP C has reduced from 44% in 21/22 to an average of 18% in 23/24
- 15 clients are now on a new Opiate Substitution Treatment called Buprenorphine, a monthly depot injection, which is providing to be more effective at helping clients to feel better and not need heroin. It is also helping to giving them greater independence by not needing to have daily or weekly pickups of prescriptions. This helps with preparing and returning to work and prevents them mixing unnecessarily with other drug users.

Greater prevention work

-Funding has been provided for prevention and early intervention for those on the criminal justice pathways. The Criminal Justice case load sat at 364 in March 2024 a 66% increase from March 2022, with a greater proportion of preventative work for people just entering the criminal justice system

-Extra investment has been made to identify patients in Peterborough City Hospital who will need support around drug and alcohol use. Brief interventions doubled in 23/24 to 1132 compared with 668 the previous year 22/23. During the same period there has been a near trebling of people picked up by the CGL community service following hospital discharge up to 44 from 16 over the same timescale

-A new Community Engagement Worker is supporting up to 20 clients who may face additional cultural challenges in engaging in treatment by reaching out to them and offering greater awareness of drug and alcohol issues to different community groups

Transformation of joint housing and substance misuse work

-A new Floating Support Team is targeting around 150 drug and alcohol users who are struggling to maintain or might lose their housing and is providing a combined housing and drug and alcohol package of support.

-The Cuckooing Worker is protecting up to 15 vulnerable clients who are being 'cuckooed' by drug dealers using their homes and is working with the Police to prevent them from harm and homelessness.

-The Council is funding 3 posts in the Homelessness Team to support people on the housing register to engage in drug treatment in tandem with progressing their housing applications

-The Housing Support Grant has contributed to the costs of running the Homeless Health Hub at the Garden House. CGL have provided 350 visits to the Health Hub since Jan 2024. The independent review of the rough sleeper team found 85% of clients engaged by the team are reducing their primary drug use and 65% moved into accommodation during the period being supported.

Employment support work and welfare benefits

- The new Individual Placement and Support Service (IPS) has helped 15 people in structured drug and alcohol treatment secure employment since January 2024.

-Between the 1st of October 2023 and the 31st of March 2024 115 people received support from the dedicated CAB worker with a total £138,730 income gained for clients against a worker cost of 20k over the timescale.

Recovery HUB

-A new Recovery HUB is being offered for those who have completed their structured treatment but want facilitated mutual support to keep them free of substances and prevent a return to addiction. This is an important safe space open now 3 days per week and attended by 15-20 people at each session.

Client Feedback

The following quote is from a client who has been helped by joint work between the Homelessness Team and Aspire and is a good example of the holistic support now being provided:

"My housing officer and Aspire worked great together and helped me come from the lowest of low to the best I've felt in a long time I'm so grateful of them both...I've gone from the streets a heroin user to being completely clean passing every drug test I'm now on an injection that stops me from relapsing to having my own place and best of all a decent job so grateful thank you so much I'm super buzzing on life right now!"

Some additional quotes from service users:

"Without PCC, and Aspire, I would be homeless. Earlier this year I could see nowhere out of my

situation, but thanks from the guidance and support I received I am now on the road to recovery. Thanks to all that has helped me”

“Tenant advised that from October through to December he would normally be in prison, however, in 2024 he managed to stay out of prison with ongoing support.”

6.0 CORPORATE PRIORITIES

6.1 Environment and Growth

Carbon Impact Assessments have been completed for each commissioned service.

Homes and Jobs

This funding is helping to prevent around 150 people currently from losing their homes via the Floating Support Service which gives help to people struggling to maintain their homes due to their drug and alcohol use. The funding also directly helps people to find employment and so far, 15 people have been helped to find employment.

Health and Wellbeing

Substance misuse addiction can cause and exacerbate a very wide range of illnesses also impacting on psychological health and wellbeing. Treating people for substance misuse can significantly help to improve their health and wellbeing. Also, by sending people to rehabilitation the service is helping to explore the underlying reasons leading to substance misuse in the first place.

Prevention, Independence and Resilience

The services funded by the grants are identifying individuals in different settings e.g first time entrants into the criminal justice system, in education settings, people admitted into hospital, families identified via Early Help or identified by the Councils homeless team with drug and alcohol issues. Individuals in these settings are offered the opportunity to be screened for drugs and alcohol needs and offered a pathway into treatment services.

7. CONSULTATION

7.1 *See above qualitative insights obtained through the Needs Assessment 2022.*

8. ANTICIPATED OUTCOMES OR IMPACT

8.1 Support from Adults and Health Scrutiny Committee will strengthen the case for continuing funding.

9. REASON FOR THE RECOMMENDATION

9.1 To continue improved health and wellbeing of substance misuse service users

10.0 ALTERNATIVE OPTIONS CONSIDERED

10.1 The Grants are intended to be spent on activity related to supporting those in structured drug and alcohol treatment or helping people to access that treatment. Each proposal had to be signed off the Office of Health Improvement and Disparities (OHID) and was completed after consultation with OHID. This activity falls within the scope of the Drug and Alcohol Treatment Contract so no alternative options were considered.

11. IMPLICATIONS

11.1 Financial Implications

11.1.1 No direct financial implications from the recommendations in this report. An announcement of continuation of the Supplementary Grants is expected in December 2024

12.0 **Legal Implications**

12.1 Supplementary Grant funding awarded to the Council to date has been used to modify the Drug and Alcohol Treatment Services contract in accordance with the Public Contracts Regulations 2015.

13.0 **Equalities Implications**

13.1 Continued development of substance misuse services will improve equalities as clients have more protected characteristics than the population overall

Health inequalities within Peterborough will consequently be reduced.

14.0 **BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

14.1 Substance Misuse Needs Assessment 2023 [Cambridgeshire & Peterborough Insight – Drugs and alcohol needs assessment 2023 \(cambridgeshireinsight.org.uk\)](https://www.cambridgeshireinsight.org.uk)

Rough sleepers drug and alcohol evaluation Peterborough 2023 [RSDATG-Peterborough-Evaluation-Report-FINAL-07.12.23.pdf \(cambridgeshireinsight.org.uk\)](https://www.cambridgeshireinsight.org.uk)

15.0 **APPENDICES**

15.1 *Appendix 1: Details of use of grant*

APPENDIX 1 – OVERVIEW SUMMARY OF EACH SUPPLEMENTARY RECOVERY AND TREATMENT GRANT AND WHAT HAS BEEN ACHIEVED

A brief overview of what each grant stream is provided below:

Supplementary Substance Misuse Treatment & Recovery Grant (SSMTR)

This grant was received by all Local Authorities in line with the ambitions set out in the National Drugs Strategy ‘From Harm to Hope’. Local authorities had to set out annual local spend plans investing in activity that increased the capacity and quality of local treatment and recovery systems. Local Authority plans have had to be signed off by OHID and are robustly monitored quarterly through the national team.

Grant	2024/25 (Peterborough)
Supplementary Substance Misuse Treatment & Recovery Grant (SSMTRG)	£1,116,875

SSMTRG Peterborough- How the grant was invested.

Profile Peterborough	Resource	Impact
Mainstream front line recovery workers & team leaders	1 x FTE Community connector role 1 x FTE Recovery Coordinator Alcohol worker 1 x FTE Alcohol Brief Extended interventions worker 1 x FTE Entry into service Recovery Coordinator 1 x FTE Hospital Liaison Practitioner	Numbers in specialist treatment (adults) has risen by 18% from 21/22 to 23/24 (increase of 260 clients) Average Caseload of CGL Peterborough workers has dropped from an average of 38 in March 2022 to 27 in April 2024. Peterborough is one of the best performing services in the country and has met its 3 year target for numbers in treatment 1 year early!
Young person’s service provision	1 x FTE YP Resilience worker	Numbers in treatment have risen by 32% (x38) from 21/22 compared to 23/24.
Criminal justice team	2 x FTE Recovery Coordinator 0.6 x FTE Recovery Coordinator 1 x FTE Criminal Justice Single Point of Access 1 x CJ Team Leader 0.3 CJ Project Manager	Overall numbers of CJIT clients rose from 219 in March 2022 to 364 in March 2024 A 66% increase All Alcohol Treatment Requirements (ATR) and Drug Rehabilitation Requirements (DRR’s) ambitions met or exceeded.

Buvidal-long acting opiate substitution (alternative to methadone which is daily/more frequent)	£55,440 funding allocation for 20 clients to receive Buvidal.	Currently 15 Buvidal prescribed patients. This is a new type of drug requiring only 1 dose per month, as opposed to daily visits at pharmacy. This is transforming the lives of clients promoting stabilisation and recovery in their lives.
Enhanced Pharmacy Costs, Naloxone provision & prescribing provision.	72K funding allocation £63940.24 funding allocation for 1 x FTE clinical fellow £55505 allocation to fund additional prescribing Doctors Clinics (staff time) 0.8 FTE Healthcare Assistant	Increase in number of Opiate Substitute Therapy (OST) clients and therefore increase in clinical capacity to meet need of increased case load with 28 additional opiate clients in treatment Health care Assistant helping the service toward goal of elimination of HEP C which is expected to be achieved this year. Over 300 clients have been issued Naloxone. This reverses the effects of an opiate overdose and is being used every day to save lives in Peterborough.
Quality Assurance	£3333.36 funding for externally provided training for frontline staff	Contributed to delivery of 1082 training places via 72 training sessions. These included drug and alcohol awareness training, Naloxone training which is a drug that can be used by front line workers to prevent drug related deaths and trauma informed training.
Residential Rehabilitation placements	£112665 funding allocated to 12wk rehab placements. 1 x FTE Tier 4 Specialist worker to support the roll out of increase drug and alcohol rehabilitation for service users	Increase in rehab placements from 0 in 21/22 to 7 (March 2024). Target met in 23/24.
Inpatient detox	£58300 funding allocation to secure inpatient detox bed at Park house. This is for detoxes only and separate from the rehab work above.	11 clients accessed inpatient detox in 21/22. This has increased to 27 in 23/24.
Blood Borne Viruses Treatment incentivisation scheme	£6708.56	Hep C testing has increased from an average of 43% in 21/22 to 66% in 23/24. PCR positive Hep c tests have reduced from 44% in 21/22 to an average of 18% in 23/24.

Citizens Advice Bureau	1 x FTE CAB worker.	Between 1 st of October 2023 and 31 st of March 2024 over 115 people with drug and alcohol problems were supported by the CAB in Peterborough, totalling of £138, 730 for unclaimed welfare benefits or grants to support independence for a post costing £40,000 per year
Recovery support provision enhancement	1 x FTE Recovery Service Worker £13k contribution towards independent service user involvement. £17k contribution to Fletton & Recovery services hub rent which are new components to our service.	New Recovery Post in Peterborough to strengthen and develop the Recovery offer and interventions. Expansion and development of the Fletton Recovery HUB. Funds to support the Sun Network to enhance the service user voice in Peterborough.
PH Behavioural Insights Research	£10k contribution to Behavioural insights research	Funding research to help understand behavioural insights in Peterborough in respect to alcohol for higher risk drinkers. Work being during 2024/25.

Rough Sleeping Drug & Alcohol Treatment Grant (RSDATG).

The purpose of the grant is to ensure that people rough sleeping, homeless and 'at risk' of homelessness can access drug and alcohol services and to engage those in treatment who have not yet done so (engagement and access). To meet this objective a specialist drug and alcohol rough sleeping team is provided by CGL and funded by the grant.

Grant	2024/25 (Peterborough)
Rough Sleeper Drug & Alcohol treatment grant (RSDATG)	£734,803

Peterborough-How the RSDATG grant was invested.

Profile Peterborough	Resource	Impact
Mainstream front line recovery workers & team leaders	2 x FTE Team leaders 5 x FTE Outreach workers 1 x EU Outreach worker 2 x FTE Transitional workers 1x FTE PSI Group workers 1 x Peer Navigator 1 x Data administrator	Dedicated rough sleeper treatment team with current case load of 145. Conducting outreach all over Peterborough to help rough sleepers come off the streets, take assessments/access to

		service and prescribing interventions direct to service users. Provided 350 visits to Homeless Health Hub in Peterborough since Jan 2024. 85% of clients engaged by the team are reducing their primary drug use and 65% moved into accommodation during the period being supported. Independent evaluation found this to be excellent performance given the rough sleeper client group.
Inpatient detox and Residential rehab	£62888 funding allocation for detox and rehab placement	A total of 10 clients had an inpatient detox in 23/24 and 1 had a rehab placement. The numbers are projected to increase further during 24/25. (extra to detox and rehab in supplementary table)
Dedicated Social Worker role	1 FTE social worker	Provided interventions to 47 clients between 1 st of Sep 2023 and 31 st of March 2024. Assisting clients to access social care support who may be struggling.
Project management/ commissioning	1 x FTE Project Manager	Manages Rough Sleeping Team and Housing Support Team. Oversees budget and prepares quarterly grant returns. Leads on key harm reduction areas in Peterborough a key role in preventing harm from newly emerging drugs in Peterborough.
Clinical prescribing capacity	Dedicated 0.6 Prescribing Nurse	Providing rapid prescribing direct to client group via an outreach capacity.

C) Individual Placement Support (IPS)

The IPS grant was received by both Peterborough and Cambridgeshire Local Authorities in 2023/24. The purpose of the grant is to enable people with complex substance use problems to

achieve paid employment and enjoy a good quality of life through the benefits associated with paid employment, including independence, social inclusion, better recovery and reduced health inequalities. CPFT deliver the integrated service, in close partnership with CGL, across Cambridgeshire and Peterborough. The service is in the early infancy phase and went live in January 2024.

Grant	2024/25 (Peterborough)
Individual Placement & Support (IPS)	£108,006

Peterborough how the IPS grant is invested.

Profile	Resource	impact
Front line IPS workers & team leader	2 WTE staff	From Jan to July. A total of 15 people in structured drug and alcohol treatment have secured paid employment since supported by IPS service.

D) Housing Related Support

This grant was only received in Peterborough (from 23/24). Operational Delivery of the grant began in Autumn 2023. The purpose of the grant is to provide a holistic housing support offer to improve the recovery outcomes for people in treatment for drug/alcohol dependency.

Peterborough-how the housing related support grant is invested.

Grant	2024/25 (Peterborough)
Housing Support Grant	£662,754

Profile	Resource	impact
Housing Support for drug and alcohol dependant service users	X1 Team Leader X5 Floating Support Workers X1 Cuckooing Worker X4 Womens House Workers X1 off the street's worker X3 Housing Officers X1 HAP Coordinator X1 Commissioning Manager	440 cases referred and supported to date across whole Housing Support Service. 47 new drug and alcohol presentations to Aspire up to 31.3.24 Due to the housing support service being offered. 37 cases have reported positive housing outcomes because of support provided (up to 7.8.2024). Floating support team having supported 151 tier 3 drug and alcohol dependant individuals (up to 7.8.2024) who are

		<p>vulnerably housed.</p> <p>Additional cuckooing specialised post with 15-person caseload.</p> <p>Pilot Women's House Project for vulnerable females at risk of exploitation with a local connection.</p> <p>Best practice standards on partnership working procedures embedded between PCC Outreach teams and Aspire, leading to transformative system change.</p>
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