PLYMOUTH DRUGS STRATEGIC PARTNERSHIP



Annual Report 2024-25

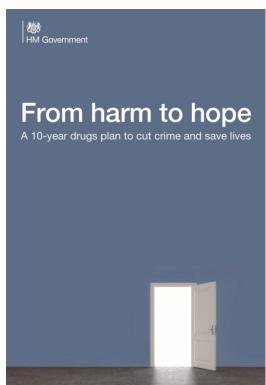
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Background and context



- Significant individual and societal harm associated with drug and alcohol dependence
 - Poor physical and mental health
 - Discrimination
 - Poverty
 - Exposure to violence
 - Offending
 - Homelessness
- Drugs deaths in England rising since 2014
- National Drugs Strategy 2021:
 - Break supply chains
 - Deliver a world class treatment and recovery system
 - Achieve generational shift in demand



Plymouth Drugs Strategic Partnership



 Central body for reporting, oversight and accountability of local delivery of the drugs



Local need



In Plymouth it is estimated that:

- 2,042 people who use opiates and/or crack (OCU), of which:
 - I,266 people who use opiates only.
 - 214 people who use crack only.
 - 563 who use both opiates and crack.
- 3,496 people who are alcohol dependent.
- OCU rate 27% higher than England average
- Alcohol dependency rate 21% higher than England average

Local Provision



- The Plymouth Alliance for Complex Lives. Drug treatment partners are:
 - Harbour
 - Hamoaze House
 - Livewell Southwest (Complex Needs Team)
- Young persons service: The Children's Society





The Children's Society



LOCAL DATA

Treatment capacity



8 % increase in treatment capacity in 2024-25 in adult services

	Number in treatment Apr 2023-Mar 2024	Number in treatment Apr 2024-Mar 2025	Percentage change
Opiate and/or crack (OCU)	1261	1306	+3.5%
Opiates only	852	850	-0.2%
Crack only	55	75	+36%
Opiates and crack	354	381	+7.6%
Alcohol only	433	425	-1.8%
Non-opiates and alcohol (not crack)	201	267	+32.8%
Non-opiates only (not crack)	144	198	+37.5%
Children and young people	107	94	-12.1%

Unmet need



- Percentage of estimated prevalence <u>not</u> receiving treatment
- (Lower is better)

	Plymouth (%)	England (%)
Opiate and/or crack (OCU)	36.8	56.8
Opiates only	33.9	61.5
Crack only	64.9	74.2
Opiates and crack	32.9	44.5
Alcohol dependency	79.1	75.9

Treatment progress



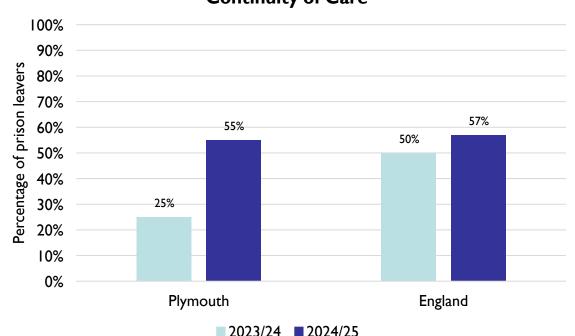
- Adult services: proportion of those in treatment who completed treatment successfully, are drugfree in treatment or have sustained reduction in drug use – 47% (same as England average)
- CYP:

	Plymouth (%)	England (%)
Proportion still drinking alcohol at high-risk levels	n/a	15
Proportion still using cannabis	64	66
Proportion still using other drugs	29	33
Unmet mental health treatment need	42	56

Continuity of Care



- Prison leavers with a drug treatment need are at a higher risk of harm, death and re-offending
- Transfer to community services reduces risk
- Continuity of care picked up by community services within
 3 weeks of leaving prison
 Continuity of Care



Drug deaths and deaths in treatment



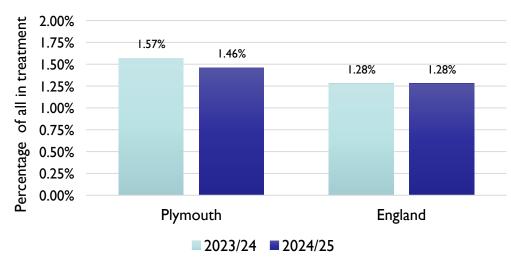
Drug misuse deaths: 2021-23:

Plymouth: 7.5 per 100,000

England: 5.5 per 100,000

Deaths in treatment (any cause)

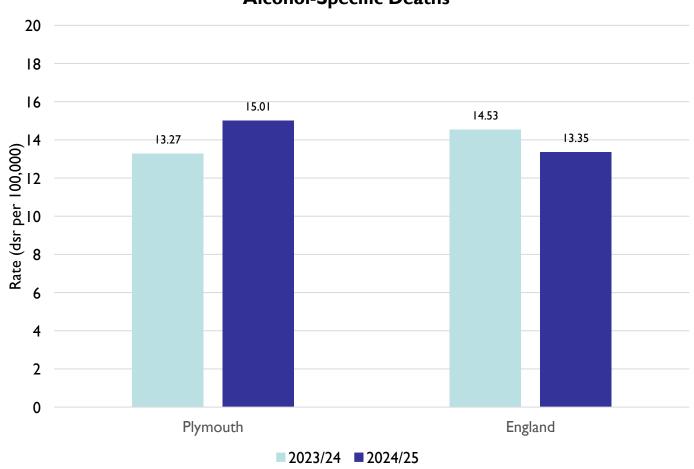
Deaths in treatment



Alcohol deaths



Alcohol-Specific Deaths





DELIVERY PLAN PROGRESS

Delivering world class treatment and recovery system



- Capacity: Improved using DATRIG funding
- Quality: Alliance Treatment Subgroup action plan focusing on eight priorities:
 - Harm reduction and drug and alcohol deaths
 - Drug treatment
 - Alcohol treatment
 - Recovery
 - Mental and physical health
 - Quality improvement and practice
 - Workforce development
 - Lived and living experience
- Focus on collaboration and ensuring delivery remains evidence-based and responsive to local need

Drug deaths



- Local Drug Information System (LDIS)
- Synthetic opioid response preparedness
- Peer-to-peer naloxone
- Plymouth Overdose Response Team (PORT)
- Avoidable deaths review group

Alcohol



- Alcohol steering group set up
- Alcohol needs assessment underway
- New specialist community alcohol treatment team at Harbour
- Dedicated alcohol training package being rolled out
- Strengthening licencing procedures to manage availability
- Expanding use of AUDIT-C screening tool
- Strengthened referral routes from hospital
- Development of audit standards for alcohol treatment
- IM thiamine offer to reduce alcohol-related brain injury

Workforce



- Key priority of treatment subgroup of The Alliance
- Workforce development coordinator in place
- Key activities:
 - ASIST training
 - Trauma-informed approaches
 - Partnership and Pathways sessions
 - Workforce wellbeing champions
- Embedding the Drug and Alcohol Capability
 Framework into the Alliance

Integration of services / accommodation / employment



- More robust clinical mental health and psychological offer in the Alliance
 - Contribution to MDTs, clinical supervision, improved access to CBT and DBT, Trauma-stabilisation
- Health Inclusion Pathway Plymouth (HIPP)
- Drop-ins at hostels
- Harbour's Homeless Intervention Team (HIT)
- Individual Placement and Support at Shekinah access to employment

Criminal justice



- Multi-agency Continuity of Care Strategic Group coordinating improvements
 - In-reach support at HMP Exeter and HMP Channings Wood
 - Specific work on those with alcohol-only treatment need included assertive outreach
 - OHID self-assessment tool and local audits
 - Integration of support from probation service and Harbour

Children and young people and prevention



- Increasing school referrals
- Strong links to CAMHS
- The Zone provides an offer of educational sessions to secondary schools
- Partnership offer to educational settings on vaping of substances controlled under the Misuse of Drugs Act
- Hidden Harm training in partnership with PSCP
- New CYP Drug and Alcohol Working Group
 - Supporting schools, especially with vaping
 - Launching Drug Use Screening Tool (DUST) with training
 - Building understanding of Ketamine through Task and Finish Group
 - Exploring virtual team model to better coordinate care