Police and Crime Commissioner for Gwent Decision			
PCCG-2015- 031	Police and Crime Commissioner for Gwent Decision Session		
Subject	Gwent Drugs Interventions Programme (DIP) Performance Management Annual Report 2014/15.		
Summary	To record the decision of the Police and Crime Commissioner regarding the monitoring of the DIP performance.		

# **DECISION**

1. The Gwent DIP has submitted its annual perf
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- 2. I commend the report and the excellent work of the DIP service in supporting my priorities.
- 3. I have received and monitored the information contained in the report.

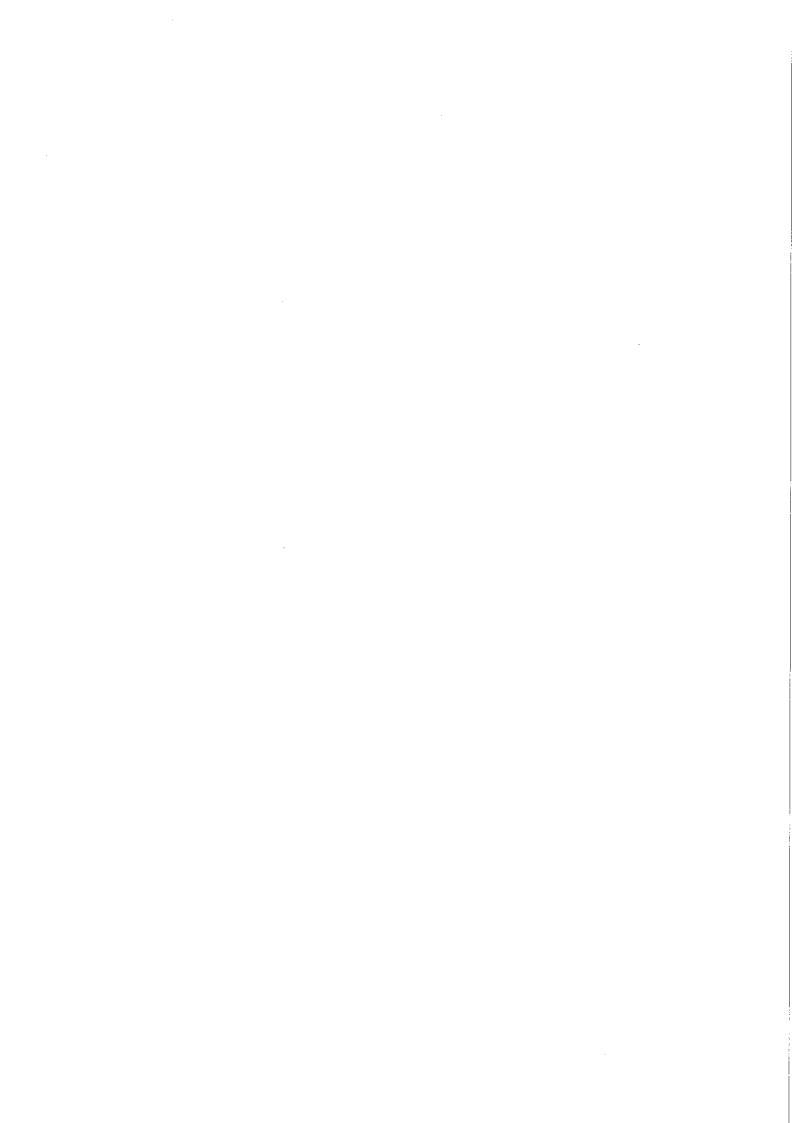
# Ian Johnston QPM, Police and Crime Commissioner for Gwent

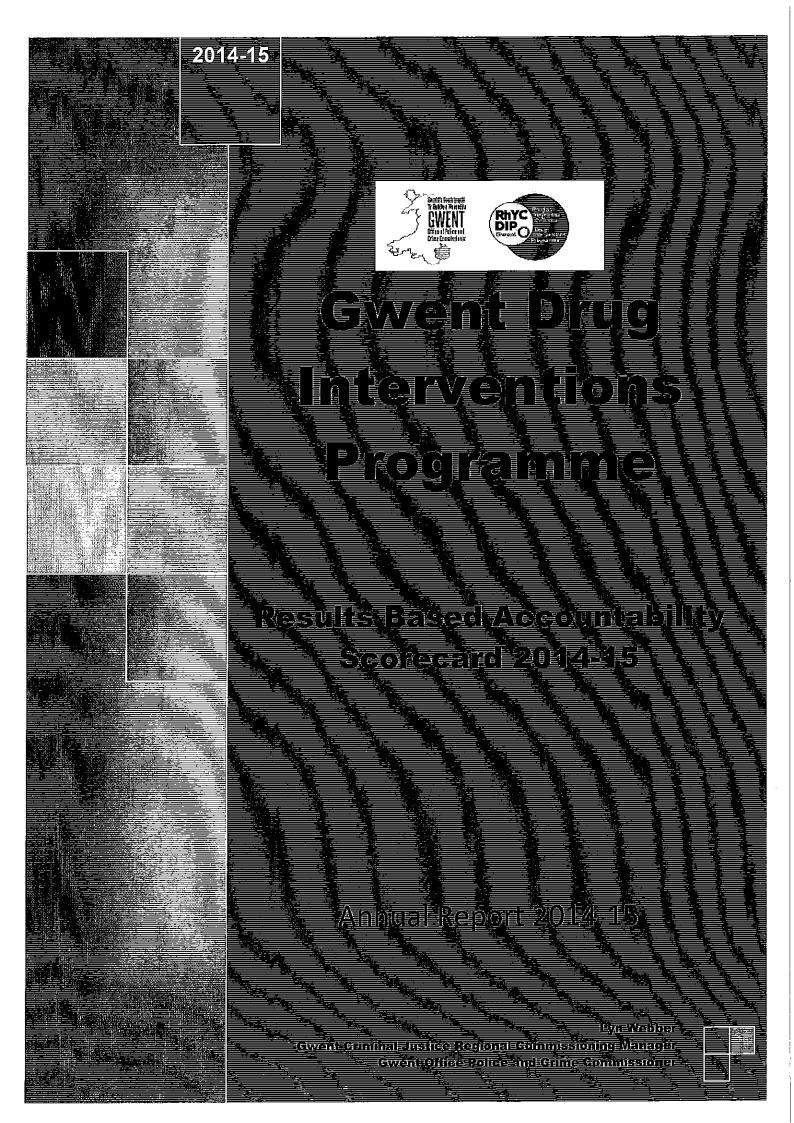
I confirm I have considered whether or not I have any personal or prejudicial interest in this matter and take the proposed decision in compliance with my code of conduct. Any such interests are recorded below.

The above request has my approval.

Signed / Q	John Mo:	Date 26.5.15.

Contact Officer	
Name	Lyn Webber
Position	DIP Manager
Telephone	01633 642200
Email	Commissioner@gwent.pnn.police.uk
Background papers	None





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### **Foreward**

The financial year 2014-15 has seen the Gwent Regional Criminal Justice Commissioning Manager (GRCJCM), in partnership with the Gwent Area Planning Board (Gwent-APB), tender a new Gwent-wide integrated drug, alcohol and family intervention service for individuals, concerned others and communities affected by substance misuse within Gwent, including offenders. This contract is a first in Wales and was developed by (GRCJCM) in partnership with the Gwent Area Planning Board.

The contract totalling £13.5 million over three years has been awarded to the newly formed Gwent Drug and Alcohol Service (**GDAS**) to work with substance misusers who refer into treatment voluntarily or come into contact with the criminal justice system and their families. The new provider will work closely with the Gwent Drug Interventions programme to deliver a bespoke drug and alcohol services for adults across the Gwent Region. The funding for this brand new service has been provided by Gwent PCC lan Johnston, the Gwent Area Planning Board (APB), the Welsh Government, all five Local Authorities in Gwent, the Aneurin Bevan University Health Board and the National Probation Service.

GDAS is made up of a consortium of three providers. Drug and alcohol prevention, support and recovery providers, Kaleidoscope and Drugaid Wales, have for the first time teamed up with leading global security company, G4S, to create a package which combines all the adult services into one main provision.

The criminal justice element of this new single contract will be known as 'IRIS-Gwent'. This name was chosen in consultation with criminal justice service users who felt that it was representative of the service to be delivered - an Integrated Recovery Interventions Service. IRIS-Gwent will engage with, support and manage individuals with substance misuse problems who are involved in the criminal justice system. The service is aimed at drug or alcohol users aged 18 years and over and will work with substance users and their families, friends and carers in both community and criminal justice settings. It will provide prison link services for problem drug users and manage offenders who have statutory orders made by the Court for treatment of substance misuse.

Community provision will be delivered by GDAS staff who will support individuals to address substance related issues and help them to access appropriate interventions which will reduce physical dependence and related health problems. The aim is to improve the service users physical, psychological, family and social functioning. The service will also provide a strong recovery element, including aftercare and peer support for substance misusers and their loved ones, in order to prevent relapse and for them to sustain the gains they have made in treatment.

The Gwent Drug Interventions Programme strives to support the Gwent Police and Crime Commissioner in 'Reducing Crime' and the 'Fear of Crime' by building opportunities for substance misusing offenders to work towards abstinence and address their offending behaviours. Our philosophy is to give these individuals, without discrimination of race, religion or sexual identity, a chance of working with our commissioned services to move into a position of 'Recovery'. Examples of this work can be seen in two case studies found in Appendix 'A'.

The Gwent DIP Management Team has developed an outcome based management tool which is a life-cycle approach integrating strategy, people, resources, processes and measurements of outcomes in a transparent and accountable method.

Historically, at a time of tendering and awarding a new contract performance can often be affected by virtue of the fact that some individuals become demotivated and staff leave due to the uncertainty of

TUPE etc. This has been closely managed by GRCJCM in partnership with both the outgoing and the incumbent new provider. As a result performance has remained at an extraordinarily high level. An example of the continued work and improvements made to the service can be found in appendix 'B'. This shows an example of where processes have been changed to ensure that those that enter the IRIS-Gwent programme via custody are made to realise that they have a duty to attend appointments and engage with GDAS workers to help them address both their offending and substance misuse behaviours.

GRCJCM is looking forward to working with the new senior management team of GDAS over the next 3 years to continue to provide opportunities for change to those individuals who come into contact with the criminal justice system by supporting them to turn their backs on crime and address their substance misuse.

Lyn Webber

Gwent Regional Criminal Justice Commissioning Manager

PERFOR	MANO	CE MEASURES	
How Much Did We Do?	I SACTOR POR	Common Measures	
Number of Referrals	592	<u> </u>	
Source of Referrals		Breakdown of referral source as a percentage	-
· Police	127	broandonn or rollonal course as a percentage	21%
· Probation	85		14%
· Prison	295		50%
· Court	1	-	0%
· Self	84	_	15%
Number of Trigger Offence Drug Tests	2000	Percentage of Drug Tests to all Trigger Offences	57.25%
Number of Higger Offende Drug 16365	2000	Totolitage of Brag Toda to all Trigger Charles	avge
Number of Inspector Authority Drug Tests	9		- 4790
Number of Voluntary Texts (5 Panel)	219		
Number of assessments in quarter	234	Percentage of referrals to assessment	40%
Number of care plans in quarter	226	Percentage of assessment to care plan	97%
Number of care plans in quarter  Numbers engaging in treatment in quarter	226	Percentage of engaging in treatment	100%
Numbers prescribed in quarter	129	Percentage of referrals receiving a prescription	22,25%
numbers prescribed in quarter	129	referringe of federals receiving a prescription	avge
Substances used	15.25	Percentage breakdown of primary substances	See
Substances used		Fercentage breakdown or primary substances	Sheet 2
Activities	avge		OHOUT Z
Number of brief interventions delivered	2450	<ul> <li>Interest in the property of the control of the contro</li></ul>	1. 49 (m) 2. m
Number of brief interventions delivered  Number signposted into specialist services	388	Percentage of Brief Interventions that are	16%
Inditibel signiposted filto specialist services	300	signposted to specialist services other than DIP	1070
Dwigo	290	signiposted to specialist services office than Dir	12%
Drugs Alcohol	87		4%
			0%
· Housing	8 3		0%
Young Person Services			070
Number of Required Assessments	304		
Numbers on coolead of greater and	10E auge		
Numbers on caseload at quarter end:	105 avge		_
Total	40.75		13%
Blaenau Gwent (non-intensive)	13.75		1370
O-ambille (interples)	avge		21%
Caerphilly (intensive)	21.5		2170
M	avge		1.40/
Monmouthshire (non-intensive)	14 avge		14%
Newport (intensive)	45.25		43%
T. C. ( 1.1 )	avge		70/
Torfaen (non-intensive)	7.25		7%
	avge		•
Numbers on caseload designated IOM	82.75		
Ni	avge	Down out on the control of the contr	_
Number of Modalities completed (careplan	225	Percentage	
modalities)	j,		050/
For prescribed clients	57		25%
For non-prescribed clients	169		75%
Number of treatment drug tests completed	85	Breakdown of drug test results against the	24%
		prescribed caseload	avge

How Well Did We Do?		Activities Measures		
Number of Disengagements	49	Percentage of those disengaged of all closures	16%	
Number of Positive Outcomes by area		Percentages of all positive outcomes per area from total caseload.		
Blaenau Gwent (non-intensive)	226		17 <u>%</u>	
Caerphilly (intensive)	409		31%	
Monmouthshire (non-intensive)	80		6%	
Newport (intensive)	420		32%	
Torfaen (non-intensive)	_186		_ 14%	
Number of closures in quarter	303			
Number of clients closed in quarter retained in treatment for 0 to 11 weeks	181		60%	
Number of clients closed in quarter retained in treatment for 12 to 23 weeks	54	Number and percentage of clients retained for 12 weeks or more	18%	
Number of clients closed in quarter retained in treatment for 24 weeks or longer	68	Number and percentage of clients retained for 24 weeks or more	22%	
Quality – Is Anyone Better Off?				
Completions	83	Percentage of completions of all closures	27%	
· Drug/Crime Free	46	Drug/Crime Free	15%	
· Crime Free only	2	· Crime Free only	0.7%	
Drug Free only	35	· Drug Free only	12%	
Randomly selected sample of a cohort of clients 50%		Offences listed prior to DIP engagement, during DIP		
examining offending rates pre, during and post		engagement and then 3+ and 12+ months post		
DIP intervention.	engagement.			

### Discussion

Referrals into DIP over the course of the year tended to be in the 130-140 range (per quarter) with the exception of Q1 which had 175 referrals. Prison tended to be the primary source of referrals (50%) followed by Police (21%). The 5 panel voluntary tests concluded in Q4 of the year and therefore the overall numbers shown will tend towards under reporting. The conversion rate between assessments and care plan completions tends to be high. In other words, those clients that are willing to be assessed tend to wish to effect change and hence engage in treatment. Heroin continues to be the primary substance used in those presenting for treatment.

The number of brief interventions delivered averages over 600 per month. These interventions are provided not just to those service users in treatment with DIP, but also take place when DIP staff make contact with drug misusers not in service or on the caseload. Examples of where this might take place include where DIP Arrest Referral Workers, working in the two custody suites across the Gwent area, conduct cell sweeps, contacting all those suspected drug misusers in custody who are not in treatment. Across the year, 388 referrals were made to other services primarily for drug treatment (290) and also for alcohol (87).

Gwent DIP averages over 100 service users on the caseload at any one time. This number can rise and fall almost on an hourly basis and hence this number is averaged to reflect the transient nature of this figure. The number of DIP users designated IOM averages over 80%. In effect, a large proportion of the caseload falls into the IOM/PPO cohort.

Some 16% of those service users leaving treatment do so in an unplanned way and disengage. By comparison 27% of all closures conclude their treatment programmes, the majority of which are both

drug and crime free. The numbers of positive outcomes are centred around Caerphilly and Newport, the combined number of which amount to 63% of all positive outcomes.

A random sample of 20 former DIP clients are selected at the end of every quarter. These clients' details are examined against the Police National Computer to assess their re-offending rates. Across the four quarters an average of 50% of those leaving DIP treatment do not re-offend again in the first 3 months.

# Reported Drug Use Breakdown

Drugs	617	%
Heroin	416	67.42%
Cocaine	56	9.08%
Unknown	21	3.40%
Cannabis	24	3.89%
Amphetamines	26	4.21%
Mephedrone	18	2.92%
Crack	5 _	0.81%
Alcohol	18	2.92%
Subutex - Illicit	15	2.43%
Benzodiazepines	2	0.32%
Methadone - Script	3	0.49%
Chemical Highs	11	0.16%
Ketamine	0	0.00%
Other - At Risk	2	0.32%
Alcohol Unspecified	1	0.16%
Dihydro-codeine Illicit	2	0.32%
Methadone Illicit	4	0.65%
Methamphetamine	0	0.00%
Solvents	1	0.16%
Synthetic Cannabinoids (a.k.a. K2, Spice)	2	0.32%

Nick Jeremy Data Analyst Gwent DIP

# **Terminology**

### **Performance Measures**

### How Much Did We Do?

- 1. Number of referrals: This is the number of people that have been referred into Gwent DIP.
- 2. Source of referrals: Divided into the five common categories.
- **3.** Number of trigger offence drug tests: This is the number of trigger offences, as defined by the Home Office, across the two Gwent custody suites for the reporting period.
- **4. Number of Inspector's Authority drug tests:** Drug tests, other than those initiated as a result of a trigger offence; as authorized by an Inspector.
- 5. Number of assessments in the Quarter: This is the number of full assessments conducted as part of the process of bringing someone on to caseload and into service.
- **6.** Number of care plans in Quarter: This number reflects new people coming into Service in a Quarter.
- 7. Numbers engaging in treatment in Quarter: Of those coming into service, this number affects the number engaging into treatment.
- **8. Substances used:** A list of the reported substances used at the point of entry into the service. Each individual can report up to and including 3 problem substances, of which alcohol may be listed (but not as the primary presenting problem substance).

# **Activities**

- 1. Number of brief interventions delivered: This metric highlights the work done by DIP staff in outreach work, both inside the Custody Suite and also on the streets of Gwent's populated centres.
- 2. Number signposted into specialist services: Where contact is made through the above described outreach work and yet the individual is deemed unsuitable for or unwilling to engage with DIP, advice on obtaining relevant help is provided by DIP staff. This is highlighted and broken down in this part of the scorecard.

- **3. Number of Required Assessments:** Following on from positive drugs, this is the number of Required Assessments conducted across the two custody suites for the reporting period.
- 4. Numbers on caseload at quarter end: Whilst the number of individuals on the caseload can vary on an hourly/daily basis as a result of new clients coming on and also closures, this number by area represents a snap shot of current workload of active clients across the region.
- **5. Number on caseload designated IOM:** Of those individuals on the caseload, the number designated as requiring additional work under the IOM agenda are highlighted here.
- 6. Number of modalities completed (Careplan modalities) for prescribed and non-prescribed clients: This metric highlights those individuals on the caseload receiving structured support during the reported period, divided between those receiving a prescription and those who are not.
- 7. Number of treatment drug tests completed: The report picks up those that have had at least one treatment drug test during the reporting period. This test establishes illicit drug use whilst in treatment.

# How well did we do?

- 1. Number of disengagements: Of all closures during the reporting period, this element of the scorecard records those that disengaged.
- 2. Number of positive outcomes by area: This records the number of positive outcomes across the entire caseload during the reporting period.
- 3. Number of clients closed in the quarter retained in treatment for 0-11, 12-23 and 24+ weeks: This section of the report identifies the breakdown of those that were closed during the reporting period and how long they were in treatment for.

# Quality: Is Anyone Better Off?

- 1. Completions: Of those that concluded their period of treatment with DIP and came off the caseload, how many were drug free, crime free, and drug and crime free.
- 2. Randomly selected sample of a cohort of clients examining offending rates pre, during and post DIP intervention: This section of the report examines selected clients for rates of offending before, during and after DIP interventions.

# **APPENDIX A**

# Case Studies

The Gwent-Brug-Intervention-Programme-works-throughout-the Caerphilly-berough-bringing drug-treatment-and-support-to-local-communities.—Engaging-service-users-throughout-the borough-tackling-substance-misuse with an aim of reducing crime and aiding recovery.

#### Gwent DIP

#### Introduction:

Client MD, a 27 year old mother of a daughter aged 3. Client is in treatment for opiate misuse and has been engaged with our service since 29/08/2014.

MD self-referred following an arrest for possession of class A substance (heroin) and requested treatment for an addiction to same

### Background:

MD was previously prescribed treatment for opiate addiction whilst living in Cardiff. Her ex-partner, and now her daughter, still reside in the city.

She came to Caerphilly as a result of fleeing domestic violence and, with her daughter, sought accommodation at a local refuge. Police contacted services when MD was found to be in possession of substances at the refuge and has since moved in with her father. Social services are involved with the family and CRI are working collaboratively to address client's parenting issues and provide support for the child

#### Identified needs

Client presented as in need of support for addiction to heroin and stated she was using street subutex to aid her with this.

Client required support in relation to substance misuse, emotional needs, social service involvement and housing needs.

Her daughter is now living with the father, currently in treatment with South Wales IOIS and moving to work with CAU.

Client wishes to have unsupervised access and ultimately to have parental care for her daughter.

#### Summary of work

Client has been referred for treatment and is now in receipt of a subutex prescription.

Client has been provided with relapse prevention advice and motivational interviewing.

Staff attended the core group to bring the group up to date in respect MD's attendance and motivation. MD has since provided negative test results; this has resulted in supervised contact with her daughter being implemented.

Staff continue to work closely with the client, social services and the health visitor, to ensure an holistic approach is taken to her treatment and care plan

MD has shown an increase in emotional wellbeing which has translated to a more effective level of engagement with services and positive outlook.

#### CRI Successes/Outcomes

MD is now having regular supervised access with her daughter and has shown an increase in her willingness to achieve long-term goals by looking to attend college or return to employment to enable her to provide a secure home upon her child's hoped return to live with MD The Gwent Drug Intervention Programme works throughout the Caerphilly borough bringing drug treatment and support to local communities. Engaging service users throughout the borough tackling substance misuse with an aim of reducing crime and aiding recovery.

#### **Gwent DIP**

#### Introduction:

Client was referred from HMP Cardiff by Prison Link Worker for opiate substitute prescribing and for psychosocial intervention for heroin and poly drug use. Client's main substances were heroin, benzodiazepines and alcohol, and due to his chaotic lifestyle was at high risk of overdose.

### Background:

Long history of:
Over 12 years of IV heroin use, poly
drug use and poly depressant use,
including using as many MSJs (illicit
valium as can afford).

- Accidental overdose
- Alcohol dependency
- Street homeless
- Offending (predominantly theft offences)
- Depression, client disclosed having depression for over 20 years.

#### Identified needs

Provide client with harm reduction advice and naloxone. Refer to Kaleidoscope Alcohol Service Refer for support with Housing Provide emotional support and refer for counselling.

### Summary of work

Prior to prison release, prison link worker completed referral to DIP and established client's needs. HMP Cardiff CARAT (Counselling Assessment Referral Advice and Through care) worker and DIP project worker liaised, obtaining client's consent to share work client had completed while in prison. This enabled a therapeutic relationship to be quickly established upon release. Client had reflected on the cyclic nature of his addiction and chaotic lifestyle while in prison and his care plan with DIP on release built upon the insight he had gained.

Client disclosed he was extremely apprehensive about release and meeting associates within the community and his initial appointment focused on gaining coping mechanism and skills.

Motivational Interviewing was used as an intervention to empower client to feel confident handling potential situations.

Client was referred to St Giles Trust who provide support during the transition from prison. Client was released wearing only prison issue clothes and had no money. Client was referred as a priority need case to Going The Extra Mile who provided client with a food parcel and clothing. Client was offered place at In2Change for supported accommodation and prior to client moving in, key worker liaised with probation and In2Change to ensure appropriate risk information was exchanged and information was provided to In2Change about risk management of client's alcohol and substance dependency.

#### CRI Successes/Outcomes

Since obtaining accommodation client is now abstinent of heroin and other illicit substances and is abstinent of alcohol. Client is engaging with the Alcohol Service for support to continue abstinence. Client has not offended since prison release. Client is due to start a volunteering placement and has been referred to Volunteer Co-ordinator for support with diversionary activities. Client is also in contact with a local charity in the Devon area to establish letterbox contact.

# **APPENDIX B**

**GWENT DRUG INTERVENTIONS PROGRAMME** 

**DIP BREACH PROCESS** 

OFFENDERS FAILING TO ATTEND THEIR REQUIRED DIP APPOINTMENTS





Karen Jones Gwent Drug Interventions Officer May, 2015

#### Introduction

The Drug Interventions Programme is a critical part of the Gwent Police and Crime Commissioners strategy on reducing crime and tackling drug misuse in society. The Programme involves criminal justice and drug treatment agencies working together to contact, engage with and steer into relevant treatment those individuals identified as using crime to fund their drug misuse. By providing appropriate treatment and support to such individuals the aim is to break the cycle of drug misuse and offending behaviour.

### Context

The 'Tough Choices' agenda, as enacted in the Drugs Act 2005, provides a range of measures to steer drug misusing offenders out of crime and into treatment. One of these being the requirement, following a positive drug test within custody suite, to attend a Required Assessment-Initial Assessment (RA-IA) or Required Assessment-Follow Up Assessment (RA-FU). Where an individual fails to attend any of the aforementioned without good cause, that individual is liable for enforcement action by the Police, including arrest and charge, which on conviction carries a penalty of either a fine, imprisonment or both. The aim is not to send more individuals to prison, but to move those individuals into appropriate treatment and support. In order for Required Assessments to have any real impact, those cases where deliberate non-engagement occurs should be subject to enforcement action. Failure to attend is termed a 'breach'.

### Implementation of Current Breach Process

Since the beginning of November 2014 a new collaborative Gwent Drug Interventions Programme (DIP)/Gwent Police Breach process has been put in place to identify offenders who have breached their mandatory Initial Assessment and/or Follow Up appointment with the Drug Interventions Programme (DIP), contrary to Section 12(3) of the Drugs Act 2005.

This process was carried out by the Gwent Police DIP Officer, who delivered on behalf of Gwent Police and whose responsibility was defined by Central Government. However, following negotiations between the Gwent Regional Criminal Justice Commissioning Manager and Senior Management of Gwent Police, the responsibility became that of the DIP Regional Drug Interventions officer (DIP-RDIO), within the Gwent DIP Regional Management Team. This was implemented due to the fact that it had been identified that individuals entering the DIP programme who had 'breached' were not being processed and therefore the programme as a whole was being undermined.

The DIP-RDI officer has implemented a range of training to both police and arrest referral staff ensuring the DIP breach process ran smoothly, and was given access to SEW CO/SEO to allow occurrences and case files to be built within NICHE. The DIP-RDI officer role is to follow up offenders who breach their DIP mandatory appointment and task Neighbourhood LPU's to go out and arrest them as "wanted" for their breach. Once this is done the offenders will be sent to court to be sentenced for breaching their DIP Appointment.

This role provides a strong link between Gwent Police and the Service provider to make sure operational processes are seamless and offenders are being arrested and charged for their breach.

Over the past few months a large amount of work has been undertaken to tighten up the DIP breach process and the DIP-RDI officer has been working very closely with Arrest Referral staff, both in

Newport and Ystrad Mynach, along with Custody Inspectors, Detention Officers and the NICHE team to get this process streamlined and working efficiently.

Since the review of processes and procedures and subsequent implementation of the new process in November 2014, figures show that 29 offenders had breached their DIP appointments. Of the 29 breaches, 23 offenders have been arrested and have either been placed on a Drug Rehabilitation Requirement order (DRR) or they have appeared in Court and been charged for their breach. To date there are currently only 6 offenders outstanding who still need to be arrested (however this changes on a daily basis). This has been achieved through efficient working, constant communication and monitoring, and working closely with all relevant parties involved in DIP 'breaches', ensuring the whole process has become more robust and streamlined. This includes a Breach Monitoring RAG system which will advise arresting officers on the level of risk each offender poses to themselves and/or the community and the urgency in which they need to be arrested.

- Offenders with a red marker need to be arrested within 24 hours of their breach.
- Offenders with an amber marker will be put out for arrest within 7 days of their breach.
- Offenders with a green marker will be put out for arrest within 1 month of their breach.

This spread sheet is circulated to all staff involved in the Breach process on a weekly basis and if there are any issues highlighted, these are dealt with immediately.

Gwent DIP strives to improve individuals' lives, reduce re-offending and contribute to the reduction of crime across the Gwent Region in line with the key priorities as defined within Gwent Police and Crime Commissioners Police and Crime Plan (2013-17).