

# Gloucestershire CDP- Annual Report 2024

This report sets out the progress that has been made by Gloucestershire Combating Drugs Partnership (CDP) during the delivery of the national drugs strategy, 'From Harm to Hope', and the third year of Supplementary Substance Misuse Treatment and Recovery Grant (SSMTRG) funding in 2024/25.

## Foreword

I'm pleased to report on the continued progress that Gloucestershire's CDP is making on reducing the harm caused by illicit drugs in the county.

By bringing together all of those involved in dealing with the effects of drugs I genuinely feel we have both the strategic buy-in and operational willingness to make a real difference in the county.

I'm pleased to say that is borne out by the statistics reported in this update, with substantial increases in both the number of drug seizures and numbers in treatment. There is still more to do, but I hope that with the energy and innovative thinking that our new drug and alcohol treatment provider Via are bringing to the county, we can continue to make progress, especially in hearing the voice of those with lived experience to further improve the service that is being provided.

The constabulary's continued focus on the exploitative drug dealers and their criminal enterprises is making our county safer. Our region-wide Operation Scorpion and county lines work is taking the fight to criminals, and helping to protect people at risk of exploitation, as well as getting drugs off our streets.

We have also had some notable successes in the use of our Supplementary Substance Misuse Treatment Grant. I have heard first-hand how Buvidal provision

is having a dramatic, positive effect on the lives of those in treatment, and just as importantly, those around them. Likewise, it was a pleasure to meet some of the first graduates of the new traineeship scheme that is bringing new talent and experience into the treatment workforce in the county. Their enthusiasm was infectious, and I know that Gloucestershire will be a safer, healthier place with them working in their new careers.

Lastly, I would like to take this opportunity to say two 'thank yous'. Change Grow Live, our previous treatment provider helped set our CDP up for success in bringing more people into treatment. They oversaw a strong increase in engagement with the service and have left a solid legacy to build on. I would also like to pay tribute to the unsung hero of Gloucestershire's CDP, Steve O'Neill, who will retire shortly. Steve has driven the partnership's work since its inception and has been an incredible support to me as Chair and SRO. I have no qualms in saying the considerable progress we have made is down to his tenacity, hard work and commitment. His professionalism and wealth of experience will be sorely missed and leaves considerable shoes to fill. Thank you, Steve.

**Nick Evans, Deputy Police and Crime Commissioner for Gloucestershire, SRO for Gloucestershire Combating Drugs Partnership**

## Working Together to Achieve Positive Outcomes

There are four subgroups in the partnership structure driving delivery of the different areas of our local plan. Partners are working together to understand our population and how drugs are causing harm in Gloucestershire, to identify any challenges in our local system and to make the changes that are needed to address them.

The CDP Board meets on a quarterly basis with sub-groups meeting more regularly as need dictates. The Board feeds up to Safer Gloucestershire and has a dotted line across to the Integrated Care Partnership and Health and Wellbeing Board (see Appendix 1 for structure chart).

## Drug and Alcohol Needs Assessment

The Gloucestershire Drug and Alcohol Needs Assessment was developed in response to Dame Carol Black's recommendation that there is a single, agreed picture of local need in relation to drugs across the priorities, ambitions, and outcomes in the National Drugs Strategy that allows the Combating Drugs Partnership to fully understand the issues and plan joint activity to address them. It forms the basis of an ongoing process of assessment and analysis.

Recommendations were made under the following key areas and were drawn from the quantitative analysis, stakeholder review and current national strategy guidance. These 7 actions have continued to be guiding principles of the adult treatment theme within the CDP Action Plan and recommissioned adult drug and alcohol service.

1. Delivering world-class treatment and recovery services and improving pathways into services
2. Strengthening the professional workforce
3. Ensuring better integration of services
4. Improving access to accommodation alongside treatment
5. Improving employment opportunities
6. Increasing referrals into treatment in the criminal justice system
7. Keeping people engaged in treatment after release from prison.

## Progress on Local Delivery and Key challenges

A Joint Combating Drugs Unit (JCDU) survey of partnership members in 2023 identified 3 key challenges:

- Increasing capacity and reducing caseloads to help improve quality.
- Enhancing enforcement and targeting of county lines
- Prevention and Early intervention including assessing need for Tier 2 interventions.

More recently, the partnership has encountered and moved through additional challenges including the recommissioning of both adult and young people's services in 2023, which has led to a slight pause in some elements of performance. We anticipate this growing back quickly with excellent providers in place, and a key focus is to ensure good transitions into adult services for young

people where their substance misuse is a key and primary concern. There is some interesting practice that the new provider is already exhibiting that we think will be very promising in this regard.

The threat of synthetic opioids and planning for a 'multiple overdoses' scenario has taken up stakeholder time and has produced a robust incident plan, which is due to be tested and exercised shortly.

Provider experts have noted an increased use of ketamine over time, and this information is being factored in to prevention messaging.

In spite of these challenges, there is strong progress across all 3 strands of our delivery plan and the partnership is maturing. The partnership officers have been networking with other areas as much as possible and over the last 12 months the CDP has worked with colleagues in Derbyshire and Dorset CDPs. We have shared some good practice on the running of our Adult Treatment Sub-Group with Derbyshire. We will attend an upcoming Dorset CDP Board meeting and Dorset will attend one of our meetings, the aim being to develop a close working relationship and harvest any good practice from each other.

## Data Sub-group

The data sub-group was formed to provide information and to analyse data to support the CDP's understanding of the achievement of these against the main strategic priorities. The sub-group is a partnership between the Office of the Police and Crime Commissioner (OPCC) and Gloucestershire County Council (GCC) and supported by information supplied by the local constabulary, drug and alcohol treatment providers and national sources such as Office of National Statistics (ONS) and Office for Health Improvement and Disparities (OHID).

The data sub-group has developed a dashboard for the CDP's monitoring and insight capability based on the initial outcome framework proposed within the guidance for setting up Combating Drugs Partnerships. This dashboard is comprised of a series of measures to support our understanding of the key national priorities:

- Reducing Drug Use
- Reducing Drug Related Crime
- Reducing Drug Related Harm
- Reducing Supply
- Increase Engagement in Treatment
- Improve Recovery Outcomes

Other indicators, including housing and employment outcomes, are being added. Performance is reviewed at the quarterly board meetings. Data on some of the measures can be seen in the next section.

This report uses data from multiple sources including national statistics, consequently some of the measures use retrospective data (older than a year or more) which prevents monitoring in real-time (e.g. substance misuse deaths). Additionally, the data presented regarding drug and alcohol treatment uses pre-publication data, it is included for illustrative purposes only and we make no comment on whether these are favourable or unfavourable in relation to performance expectations.

#### Performance Measures:

##### The Numbers in Treatment for Adults and Young People

The Gloucestershire target in 2024-25 is for 3,033 adults in treatment and 65 young people under 18 in structured treatment within the year. At the end of 2023-24 there were 2,930 adults in treatment in Gloucestershire, exceeding the target for that year.

The number of young people in treatment has grown significantly across the last three years. In 2023-24 the number was 123 people, more than double the 2021-22 baseline.

Number In treatment ambitions	Baseline 2021-22	Year 1	Year 2	Year 3	Year 2 Actual
		2022-23	2023-24	2024-25	2023-24
All adults “in structured treatment”	2817	2854	2925	3033	2930
Opiates	1323	1323	1356	1389	1297
Non opiates (combined non-opiate only and non-opiates and alcohol)	678	695	712	746	808
Alcohol	816	836	857	898	825

##### Improve Recovery Outcomes

The **treatment progress measure** is defined as where people in drug and alcohol treatment show substantial progress as measured by completing the treatment programme (free of dependent drug use and without an acute housing need) or still in treatment and either not using or having substantially reduced use of their problem substances measured over the preceding 12 months.

Performance against this measure has dipped slightly between April 2023 to the end of March 2024 at 41.4%, compared to the local baseline of 49% at the end of March 2023. This is due to recommissioning of the adult drug and alcohol service, and we expect to see an increase over the next year.

##### Increase Engagement in Treatment

**Unmet need for opioid and/or crack user (OCU) treatment:** official estimates (OHID 2024) suggest that there are approximately 3,056 opiate (primarily heroin) and or crack (cocaine) users in the county. They estimate that the rate of OCUs within the adult population is 7.8 per 1,000 (adult) population in Gloucestershire, which is lower than the England rate of 9.5 per 1,000 population. Estimates from the Crime Survey for England and Wales (ONS 2023) highlights that in the year ending March 2023, an estimated 9.5% of people aged 16 to 59 years reported using a drug in the last 12 months.

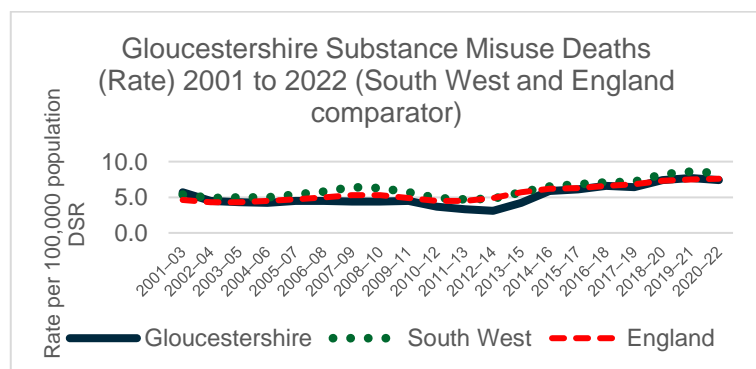
## Gloucestershire Treatment Penetration Rate 2023-24

Substance group	Unmet treatment need	Numbers in treatment	Prevalence estimate (most recent*)	England
OCU	54.4%	1,394	3,056	57.6%
Opiates only	56.5%	545	1,254	60.4%
Crack only	75.1%	125	503	79.8%
Both opiates and crack	44.3%	724	1,300	46.0%
Alcohol	74.4%	1,393	5,509	78.4%

In 2023-24 the proportion of the estimated number of drug and/or alcohol users in treatment for Gloucestershire was higher than the national average across all substance cohorts including alcohol.

## Reduce Drug Related Deaths and Harms

**Deaths related to drug misuse:** The rate of substance misuse related deaths within the county has tended to follow the England and Southwest trajectories. Locally there was a slight reduction in the rate of substance misuse deaths between 2021 and 2022, falling to 7.4 per 100,000 population from 7.7. The rate of substance misuse deaths in Gloucestershire for 2020 to 2022 remains similar to the England (7.6) and Southwest (8.4) rates.



## Enforcement Performance Update

Performance data relating to enforcement is discussed at the quarterly partnership boards to cover the Outcomes Framework. This reviews the drug related homicides, neighbourhood crime, county lines disruptions and organised crime group (OCG) disruptions.

Unfortunately drug related homicide data is not publicly available and cannot be shared within this document, however, the numbers are low and are discussed at the quarterly partnership board to provide scrutiny.

Neighbourhood crime is reviewed quarterly and comprises of domestic burglary, personal robbery, vehicle offences and theft from the person. Levels of neighbourhood crime in Gloucestershire have steadily increased and fallen again over the last 12 months of data available up to July 2024. When comparing Gloucestershire against the most similar group of forces (Cambridgeshire, Devon and Cornwall, North Yorkshire, Suffolk, Warwickshire, West Mercia and Wiltshire) Gloucestershire sits at the third highest for the volume of offences per 100,000 population in the group and above the group average. Each force within the group have seen differing trend patterns over the last 12 months making it difficult to compare activity in Gloucestershire against those forces. Fluctuations in neighbourhood crime numbers in Gloucestershire are largely driven by vehicle crime offences as these make up a large proportion of the offences followed by residential burglary. Vehicle crime had been increasing driving the total increase but in the last three months of the period has begun to fall, and while residential burglary had been showing a gradual decline it has fallen at a faster rate in the last three months also.

## Gloucestershire CDP Action Plan

The Combating Drugs Action Plan outlines the partnership's approach to delivering commitments across three key priority areas:

- Priority 1: Breaking Drug Supply Chains
- Priority 2: Delivering a World Class Treatment and Recovery System
- Priority 3: Achieving a Generational Shift in the Demand for Drugs and Alcohol

## Priority 1: Breaking Drug Supply Chains – led through the Enforcement Sub-Group

To help achieve the Government’s vision to level up our neighbourhoods by ridding them of drugs, making them safe and secure places, and enabling all areas to prosper and grow, partners under the enforcement strand of the Action Plan will work towards a reduction in drug-related crime and homicide and prioritise breaking drug supply chains and ‘rolling up’ county lines.

The enforcement sub-group is led by Gloucestershire Constabulary and its aim is to break drug supply chains by:

- Targeting and disrupting those involved in the supply of illegal drugs.
- Tackling organised crime groups involved in exploitative drug supply and county lines.

Cocaine remains the most commonly seized drug within Gloucestershire, followed by cannabis and heroin. Class A drug types (cocaine/ heroin) remain the focus of police intelligence reports within Gloucestershire and these reports inform tactical operations which naturally means that there are more seizures of these types of drugs. Class A drug supply carries with it significant community harm, particularly when vulnerable juveniles are exploited. Organised crime groups operating within Gloucestershire are predominantly involved in the supply of Class A and Class B drugs. Robust enforcement activity in this area continues to disrupt their activities and protect the community from harm.

The Constabulary continues to contribute to the National County Lines Intensification Week and Operation Scorpion, which is a multi-force and multi-agency operation covering the Southwest of England to tackle drug supply, exploitation, the criminal use of the roads and knife crime. During the last Operation Scorpion, the Constabulary arrested 26 offenders and seized over £200,000 of drugs.

The below statistics combine the above covert operations seizures with those in the Home Office drug seizure return relating to ‘street’ seizures and warrants by

officers. This shows that in most the volume of drugs seized has surpassed the target of a 10% increase in comparison with last year’s seizures.

Seizure Type	2022/23	2023/24	Difference
Cannabis (Herbal)	84.69 kg	175.51 kg	107% increase
Cannabis (Resin)	6.11 kg	0.63 kg	90% decrease
Crack Cocaine	1.33 kg	5.8 kg	336% increase
Heroin	2 kg	4.34 kg	117% increase
Mephedrone (non-injection)	0.25 kg	0.06 kg	76% decrease
Benzodiazepines (doses)	745	339	54% decrease
LSD (doses)	10	44	340% increase
Cannabis plants	2,966	2,253,849	75,890% increase
Nitrous Oxide	2	84	4,100% increase

There is video footage below from a police operation to disrupt a Cheltenham drugs supply line. It features drug dealers showing off how much money they have made from their illegal and highly harmful activity dealing.

[Drugs gang sentenced following months of undercover surveillance by specialist officers | Gloucestershire Constabulary](#)

Priority 1 Actions	Leads and Outcomes	Timeline
<p>Gloucestershire Constabulary will set a target for 10% year on year increase of drugs seizures alongside an increase in cash seizures within the applicable period of this plan.</p> <p>For 2023-24 this means a target of:</p> <ul style="list-style-type: none"> <li>• Class A – 78kg</li> <li>• Class B – 150 kg</li> <li>• Other – 13kg</li> </ul>	<p>Gloucestershire Constabulary; Office of the Police and Crime Commissioner (OPCC)</p> <p>Drugs intelligence gathering and enforcement activity has had to compete this year in the Constabulary; there has been an increased focus on other neighbourhood crimes and there has been less focus by proactive teams on county lines.</p> <p>However, despite this, over the last 12 months Gloucestershire Constabulary's Serious and Organised Crime Unit has concluded a number of successful covert operations which are listed below:</p> <ol style="list-style-type: none"> <li>1. Operation Allaho - 2 kg of cocaine and heroin were seized with a street value of £50,000.</li> <li>2. Operation Pontus - 11 offenders were sentenced to over 50 years in prison for a conspiracy to supply Class A drugs. 3 kg of heroin and cocaine seized with a street value of £75,000.</li> <li>3. Operation Serena - A number of offenders are still going through the Criminal Justice System. 1 kg of cocaine seized with a street value of £30,000.</li> <li>4. Operation Pecan – A medium term undercover operation gathering intelligence regarding drug supply and the exploitation of vulnerable people in Gloucester and Cheltenham.</li> <li>5. Operation Koko – 4 offenders were prosecuted for drugs supply</li> </ol> <p>The Constabulary found that it was not able to reliably measure the total annual cash seizures associated with drugs in the county. This is because cash seizures occurred under a range of circumstances and it was not always possible to attribute these directly to the activity of drug dealing, as the cash could have come from another unknown source.</p>	2023 - 2024
<p>Gloucestershire Constabulary will understand the intelligence that relates to county lines and undertake targeted, proactive work to disrupt these networks.</p> <p>District Councils; Gloucestershire Constabulary</p>		2023 - 2025
<p>Gloucestershire Constabulary will work with partners to understand intelligence and disrupt activity around drugs supply in communities and undertake initiatives (for example Clear, Hold and Build) to reduce the impact of this activity within these communities.</p> <p>Gloucestershire Constabulary and all partners</p>		2023 - 2025



## Priority 2: Deliver a World-Class Treatment and Recovery System – led through the Treatment and Recovery Sub-Group

Tough enforcement action must be coupled with a high-quality treatment and recovery system to break the cycle of addiction. We are using the Supplemental Substance Misuse Treatment and Recovery Grant (SSMTRG) to invest in expanding treatment capacity, strengthening the workforce, and increasing our mix of professionals and will be reviewing and strengthening pathways into treatment.

The Adult Treatment sub-group (ATG) was formed following the publication of the 2021 National Drug Strategy with the strategic aims of the national strategy guiding development of local actions. Membership includes specialist drug and alcohol providers across the third sector and NHS, and experts by experience as well local authority and NHS/ICB commissioners, adult safeguarding, housing providers and criminal justice partners.

During 2023, the county commissioned a new adult provider Via who began to provide services in April 2024.

The ATG works in partnership to develop and help monitor drug and alcohol treatment within Gloucestershire by:

- Identifying access and barriers to treatment
- Making recovery a priority
- Identify appropriate measures of and means to address treatment issues.
- Strengthening the professional workforce
- Numbers in treatment
- Continuity of care from prison

The group has also worked to coordinate projects funded through the Supplementary Substance Misuse Treatment and Recovery Grants (2022 – 2025).

### SSMTRG

The Supplemental Substance Misuse Treatment and Recovery Grant (SSMTRG) was launched in April 2022 to give additional funding to local authorities to support improvements in the quality and capacity of drug and alcohol treatment over a three-year period between 2022 and 2025. This funding is in addition to the money local authorities (LAs) already spend on substance misuse from the public health grant and it is a condition of the funding that local areas maintain their current level of spend on drug and alcohol services. Funding is confirmed annually, and the amounts allocated to Gloucestershire over the three years are as follows:

- Financial year 2022 – 2023 £619,405
- Financial year 2023 – 2024 £631,573
- Financial year 2024 – 2025 £1,130,000

Local authority commissioners engaged with individual partners across the system and through CDP stakeholders to agree the focus of investment. The findings from a strategic review of drugs and alcohol in the county informed the decision-making process. Based on this intelligence, the options which we selected from the menu of interventions to focus on include:

- Increasing treatment capacity and quality through recruitment to additional posts within treatment services which helps reduce caseloads and increase the quality/intensity of engagement for service users.

- Buprenorphine is a new form of opioid substitution therapy (OST) that offers people who are dependent on opioids (such as heroin) an alternative, prescribed medicine. Buprenorphine's long-acting, injectable formulation means that it can be administered to patients monthly rather than daily, which other forms of OST (such as methadone) require. This has been very successful with service users expressing that this has allowed them to change behaviours and potentially gives more freedom. We aim to have 60 people on this treatment during the year.
- Harm reduction initiatives including purchase and distribution of additional naloxone which is a medication used to reverse or reduce the effects of opioids.
- Workforce development Initiative to help increase the available local workforce for drug and alcohol treatment through training scheme for
  - Improving continuity of care for prison leavers with expected employment of specialist workers
  - Increasing capacity on mental health and assertive outreach services. This includes embedding a mental health nurse into our provider's service and running co-existing conditions training (mental health and substance misuse) for staff as well as employing additional outreach workers.
  - Project to improve engagement of treatment services for ethnic minority stakeholders after review undertaken by ethnic minority staff. Commissioners have set up an advisory panel of ethnic minority representatives to oversee this element of adult drug and alcohol treatment for the new adult contract
  - Additional recruitment into the youth support team to increase responsiveness across the county where there are increases in need for young people treatment.

Priority 2 Actions	Leads and Outcomes	Timeline
We will give service users past and present an organisation that can provide support to them and represent their voice to the local partnership and commissioners using all organisations strengths and capacity.	<p>Via, Service User Lead, Adult Treatment Provider Service User Council, Nelson Trust, Clean Plate, Emerging Futures, commissioners, providers.</p> <p>During the year the CDP had the opportunity to showcase work on the BBC and local media about lived experience and treatment  <u>Via – Gloucestershire in Points West - Evening News, BBC Gloucestershire 20/08/24 (youtube.com)</u></p> <p>Via, Nelson Trust and Emerging Futures worked together to create these actions: We aim to create an environment that supports and increases the number of people with lived or living experience to lead on a diverse range of recovery support initiatives that are important to them, as well as progress into and take up wider Leadership roles.</p>	2023 - 2024



	<ul style="list-style-type: none"> <li>• Grow and developing opportunities for service user involvement</li> <li>• Grow opportunities for peer mentoring and volunteering</li> <li>• Build on and implement new recovery support and lived experience initiatives</li> </ul> <p><b>Growing and developing opportunities for Service User Involvement:</b></p> <ul style="list-style-type: none"> <li>• Service user consultation forums facilitated monthly.</li> <li>• Engagement with people by spending time in reception areas and workshops) has been on understanding how we can best design and develop the service hubs to improve the environments.</li> <li>• Super Service User Council -partnership approach to creating and embedding service user/lived experience voice across decision making and key strategic groups including CDP.</li> </ul> <p><b>Growing opportunities for Peer Mentoring and Volunteering including:</b></p> <ul style="list-style-type: none"> <li>• Delivery of Via's NOVA (Nurturing Opportunities Visions an Aspirations) course. A 3-day course designed to be recovery focused building confidence and self-esteem</li> <li>• Peer Mentor accredited Level 2 training programme delivered by VIA and Nelson Trust.</li> <li>• Delivery of Nelson Trust Addiction and Society Level 1 qualification that provides people with basic awareness into working in the sector, helping towards volunteering goals.</li> <li>• Volunteering opportunities within and across the drug and alcohol treatment and recovery system</li> </ul>	
<p>We will prioritise recruitment and retention of the specialist workforce to reduce individual worker caseloads and increase treatment quality.</p> <p>The Adult Treatment Group will also oversee the implementation of a local Workforce Development Scheme (WFD) to train and mentor people and build capacity into the specialist workforce. We will pilot the</p>	<p>Nelson Trust, Via, Emerging Futures, GCC commissioners</p> <p>The WFD 90 Day Substance Misuse Traineeship, began in May 2023. Our goal is to cultivate well-rounded practitioners equipped to effectively and sustainably operate within the substance misuse sector.</p>	2023 - 2024

<p>scheme with an initial group of 8 and further groups through 2023-24. We will build on current approaches and the pilot to maximise volunteering, mentoring roles, and apprenticeship initiatives for service users within the treatment system with opportunities for future recruitment.</p>	<p>The programme has witnessed the successful completion of 14 candidates over 3 groups so far. 10 have been offered or started employment with local treatment services, 1 further candidate is awaiting interview, and 1 is volunteering.</p> <p>The program comprises:</p> <ul style="list-style-type: none"> <li>– 48 hours of face-to-face instruction covering diverse methodologies and practical skills.</li> <li>– 30 hours of e-learning modules offering alternative training approaches.</li> <li>– 20 hours of self-directed learning.</li> <li>– 84 hours of shadowing opportunities in specialist services</li> </ul>	
<p>The pathway between prisons and community-based treatment has been identified through the National Drug Strategy (2021) as requiring improvement and the community ‘pick-up’ needs to grow to 75% by the end of March 2025.</p> <p>We will work with prisons to create clear resettlement pathways and reduce reoffending and will continue to work with the probation service to engage prison leavers. The ‘Out of Court Disposals Scheme’ (post-arrest diversionary scheme) will be retained to divert low-level drug offenders from the Criminal Justice system.</p>	<p>Via, Probation, Nelson Trust, commissioners (+OHID/MOJ data input)</p> <p>The local ambition for continuity of care from prison is to achieve 50% by the end of 2024-25, the performance against this measure at the end of 2023-24 is 33% having increased from 24% at the end of 2021-22. We expect to see an increase over the coming months with new staff being recruited to build relationships with feeder prisons.</p>	<p>April 2023 – March 2025</p>
<p>Using the Individual Placement Support Section 31 Grant from DHSC/OHID we will employ a Senior Employment Specialist and two Employment Specialists to offer intensive employment support provided as part of our multi-disciplinary clinical services, rather than separately through mainstream employment support services.</p> <p>Targets:</p> <ul style="list-style-type: none"> <li>• minimum 25 clients receiving pre-employment support for an Employment Specialist</li> </ul>	<p>Gloucestershire Employment and Skills Hub, OHID, GCC commissioners, Via, DWP Vikki Walters and Steve O’Neill</p> <p>The IPS scheme has been successfully implemented and was operational from 1 April 2024. The Gloucestershire Employment and Skills Hub has been commissioned to deliver Individual Placement Support (IPS) to help drug/alcohol service users into paid employment. The employment specialists complete a vocational profile, identify the client’s strengths and attributes that can be put forward to an employer. The employment specialists are proactive in identifying people to support by being integrated into Via (the county’s drug and alcohol support service) and offering a friendly, face-to face service. Once the client has</p>	<p>April 2024 – March 2025</p>

<ul style="list-style-type: none"> <li>Services are expected to reach full capacity within 3 months of commencing delivery of IPS.</li> </ul>	secured a job, the employment specialist will provide ongoing support to help overcome any early challenges, to ensure that the client stays in their new employment and turns their desire to enter the workplace into a reality.	
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### Priority 3: Achieve a Generational Shift in the Demand for Drugs and Alcohol – led through the Children and Families Sub-Group

The evidence base for how to prevent drug use among children and young people is more developed than prevention for adults. We want fewer people to take drugs or feel drawn toward taking drugs, and for our children and young people to grow up in a safer and healthier environment. We know that a focus on risk and resilience factors is important. Good outcomes can be achieved by building resilience through skills-based education, as well as through multi-component programmes involving parenting interventions and support for individuals and families<sup>1</sup>. To this end we will work with our education partners and other experts to support our young people to understand informed decision making and develop risk awareness; to develop self-esteem and mechanisms to cope with adversity; and to have greater awareness of the harms that drug and alcohol can cause to themselves, their families, and the wider community. Through collaboration and robust evaluation of interventions, we will also work to further develop the evidence base of what works in preventing addiction.

<sup>1</sup> <https://www.gov.uk/government/publications/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives/from-harm-to-hope-a-10-year-drugs->

### Children and Young People (CYP) Sub-group

The children and young people (CYP) sub-group was convened to provide information and drive forward activity focused on the needs of Gloucestershire’s children and young people. It supports coordinated engagement with both those impacted and expert services, in understanding the range and complexity of needs and will agree and implement a local children and young people’s drug and alcohol strategy and action plan.

Members include representatives from early years, commissioning, education, the police, criminal justice, NHS/ICB and community youth services. The group meets once a month.

It holds an overview of and will influence the development and implementation of strategies and commissioning intentions of partnership members that impact the Drugs Strategy relating to children and young people and works in partnership to ensure a joined-up approach to addressing drug and alcohol harm. The group is also responsible for overseeing the CYP commissioning activity in relation to the Supplementary Substance Misuse Treatment and Recovery Grant (SSMTRG) 2022 – 2025.

[plan-to-cut-crime-and-save-lives#chapter-4--achieving-a-generational-shift-in-the-demand-for-drugs](#)

Priority 3 Actions	Leads	Timeline
<p>Develop a coordinated communications plan for schools through education channels to help schools navigate what primary and preventative resources are available to them to assist – and what resources are available to help them work with parents to build their knowledge and skills in supporting young people to make good choices:</p> <ul style="list-style-type: none"> <li>• Mapping resources – what’s available/gaps etc</li> <li>• Developing comms plan</li> <li>• Follow up.</li> </ul>	<p>CDP communications partners, education, GCC CYP commissioners</p> <p>Mapping completed.</p>	<p>2023 - 2024</p>
<p>Undertake an assessment to better understand the level of need in relation to Tier 2 drug and alcohol interventions and the current provision of Tier 2 support.</p>	<p>CYP providers, GCC commissioners, public health</p> <p>In 2024 the county council asked young people specialist providers to undertake a review of ‘tier 2’ to identify need in the county for children and young people in relation Tier 2 substance misuse support. These reports are concluded and will form the basis of any future commissioning when OHID outline any potential future funding in this area.</p>	<p>March 2024 – March 2025</p>

## Appendix 1: GCDP Structure Chart

