



***COMMUNITY SAFETY AND PUBLIC PROTECTION  
SCRUTINY SUB COMMITTEE***

***10.00 AM FRIDAY, 18 MARCH 2022***

***VIA MICROSOFT TEAMS***

**All mobile telephones to be switched to silent for the duration of the meeting**

**PART 1**

1. Welcome and Roll Call
2. Chairs Announcements
3. Declarations of Interest
4. Minutes of Previous Meeting (*Pages 5 - 10*)
5. Officer's Announcements
6. Quarterly Performance Management Data 2021-2022 - Quarter 3 Performance (1st April 2021- 31st December 2021) (*Pages 11 - 18*)
7. Substance Misuse Update (Area Planning Board) - Presentation (*Pages 19 - 52*)
8. ADDER Project, A Swansea Bay Perspective - Presentation (*Pages 53 - 70*)
9. Urgent Items

Any urgent items (whether public or exempt) at the discretion of the Chairperson pursuant to Section 100B (4) (b) of the Local Government Act 1972

**K.Jones**  
**Chief Executive**

**Civic Centre**  
**Port Talbot**

11<sup>th</sup> March 2022

**Committee Membership:**

**Chairperson:**      **Councillor S.K.Hunt**

**Vice**                      **Councillor R.L.Taylor**  
**Chairperson:**

**Councillors:**      D.Cawsey, C.J.Jones, S.Pursey, S.Rahaman,  
N.T.Hunt, S.Bamsey and S.M.Penry

**Notes:**

- (1) If Committee Members or non-Committee Members wish to have relevant items put on the agenda for future meetings, then please notify the Chief Executive/Chair eight days before the meeting.*
- (2) If non-Committee Members wish to attend for an item of interest, then prior notification needs to be given (by 12.00 noon on the day before the meeting). Non-Committee Members may speak but not vote, or move or second any motion.*
- (3) For pre scrutiny arrangements, the Chair will normally recommend forthcoming executive items for discussion/challenge. It is also open to Committee Members to request items to be raised - though Members are asked to be selective here in regard to important issues.*

- (4) *The relevant Cabinet Board Members will also be invited to be present at the meeting for Scrutiny/ Consultation purposes.*
- (5) *Would the Scrutiny Committee Members please bring the Cabinet Board papers with them to the meeting.*

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## Community Safety and Public Protection Scrutiny Sub Committee

(Via Microsoft Teams)

**Members Present:**

**17 December 2021**

**Chairperson:** Councillor S.K.Hunt

**Vice Chairperson:** Councillor R.L.Taylor

**Councillors:** C.J.Jones, S.Purseley and S.Rahaman

**Officers In Attendance:** C.Cole, C.Jones, C.Owen and C.Plowman

**Cabinet Invitees:** Councillors L.Jones

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### 1. **Minutes of Previous Meeting**

The minutes of the meeting held on 12 November 2021 were approved as a true and accurate record.

### 2. **CCTV: Position Statement and Update**

The Committee was provided with an update on the Local Authorities public space Closed Circuit Television (CCTV) provision.

Members were informed that CCTV was a non-statutory service, however the Council was continuing to invest due to the high importance of community safety across Neath Port Talbot. It was also noted that the Council was developing new operating models with various Town Councils, in which they fund additional CCTV cameras where needed in the area; this allows the Council to scale the CCTV operation in some locations across the County Borough.

Officers were asked if there was a procedure in place for identifying new camera locations; the Council needed to consider a fair and logical way of dealing with this matter going forward, as there will potentially be additional requirements arising in the future. In terms of the new and revised locations of the camera, as part of the current replacement programme, it was stated that the work around this had

been completed in line with intelligence from Police colleagues and other partners; the number of cameras weren't increasing significantly, as they were predominantly being installed to replace what was previously in situ. Officers provided examples of reasons why certain cameras had been replaced, and also explained that Police colleagues had highlighted particular areas which would benefit from having CCTV due to anti-social behaviour. It was added that Officers had looked into moving some cameras to different locations in order for better coverage and balance.

Further to these replacements, it was mentioned the Team had taken the opportunity to refresh the CCTV estate; for example repainting the columns to promote their presence and visibility. Officers confirmed that they would consider the comments made regarding the need for a policy/procedure to determine future positioning of new cameras.

Reference was made to the business case relating to 24/7 monitoring; Members asked for a position update and queried when they would be receiving a report on this matter. Officers confirmed that it had been drafted and was currently with various officials for comment; the aim was to bring a report to Members in the New Year for discussions to start taking place around this. The Committee was informed that one of the issues with moving to a 24/7 operation was that staffing needed to be increased to cover the additional hours, which would require extra costs; Officers explained that the replacement scheme was generating some efficiencies and cost savings, which could be used to try and offset the costs of increasing to 24/7 monitoring.

Members stated that further discussions needed to take place to consider various factors, particularly around resources, funding and how the Council progresses with CCTV. The Deputy Leader and Officers confirmed that they would take on board the Committees comments and concerns.

Following scrutiny, the report was noted.

### **3. Quarterly Performance Management Data 2021-2022 - Quarter 2 Performance (1st April 2021- 30th September 2021)**

Members received the Quarter 2 Performance Management Data, for the period 1st April 2021 to 30th September 2021, for Education, Leisure and Lifelong Learning Directorate relating to Community Safety and Public Protection.

Discussions took place regarding the Performance Indicators that were rated 'Red' on the traffic light system detailed in the circulated report; the Committee asked if there was a plan to try and improve this to an 'Amber' or 'Green' rating. Members also raised concerns in regards to the impact on resource and capacity if the demand was to continue to increase.

Officers highlighted that the RAG traffic light system was not always reflective of the performance, instead it was reflective of the demand on the service. It was explained that the Performance Indicator detailing the percentage of incidents of domestic abuse where people were repeat victims was rated 'Red' on the traffic light system, as the Teams saw more repeat victims come through the service than the number that they first anticipated. It was noted that this could be seen as positive as individuals were accessing the service to obtain the help that they needed; there were various complex needs of individuals, and the more that Officers encouraged people to use the service, the more that will come looking for support. Members were informed that Officers were hoping to carry out a piece of work which will look at some repeat cases in more detail, in order to check that the Team have the right understanding and knowledge of the reasons why they were repeat referrals. It was highlighted that the IDVA's (Independent Domestic Violence Advisor) within Community Safety, saw a high number of victims come through the service that had previously received support, known as 'repeat victims'. It was noted that this could be seen as positive, as individuals were accessing the service to obtain the help that they need; some feel unable to fully engage with support for domestic abuse due to the many complexities and the dynamics involved in an abusive relationship. Officers stated that the Community Safety Team and partners, continue to encourage victims to come forward and receive help, and repeat referrals into the service were always welcomed. However, it was mentioned that there was always various complex needs of individuals that could sometimes make the cycle even harder to break. Members were informed that Officers hoped to carry out a piece of work which will look at some repeat cases in more detail, in order to check that the Team fully understand the reasons for repeat presentations to the service; this work does depend on increased demand that may result from changes to Covid-19 restrictions and the subsequent impact this has on incidences of domestic abuse.

In regards to the Performance Indicators that were relating to referrals into the service, it was noted that the Council will

continuously publicise the service and the support that was available; therefore, these figures were always likely to be rated 'Red' on the traffic light system.

As previously mentioned, Officers hoped to gain more understanding of the repeat referrals and carry out this piece of work in the New Year; however, they were currently unable to provide a timeline of when this can be done due to the current high demands on the service.

Reference was made to Performance Indicator 483, which was the number of agreed service outcomes achieved in Area Planning Board (APB) commissioned substance misuse services; the narrative explained that CDAT Swansea and CDAT NPT both had waiting lists which prevented individuals from being able to access the support they needed. The circulated report stated that this was being addressed with the Health Board, who were awaiting the outcome of their internal review. Members asked when this information would be made available and expressed their concerns with the impacts of the waiting lists. Officers highlighted that the Health Board had completed their internal review and were considering the next steps; additionally, they were working hard to find immediate solutions and actions to help reduce the numbers, such as holding extra clinics and seeing more people during the working day. It was mentioned that Health Board colleagues would express their concerns around the increased demand on these services, which was ultimately the reason for the waiting lists; the Council would continue to work with the Health Board on this issue.

Officers agreed to circulate the most up to date waiting list figures to Members after the meeting; and would also keep Members updated on this matter.

Members highlighted that the Performance Indicator which related to the percentage of non-fatal over-doses notified through the protocol that received appropriate advice and or other intervention, had a figure of 133.00 for 2021/22; it was asked if this was a typing error, as in the explanation in the circulated report, it stated that so far six people had received an intervention or advice, which was 50%. Officers confirmed that they would check this outside of the meeting and inform Democratic Services of the outcome.

Following scrutiny, the report was noted.

#### 4. **Forward Work Programme 2021/22**



The Community Safety and Public Protection Scrutiny Sub Committee Forward Work Programme was noted.

Members highlighted that if there were any further updates regarding CCTV, before the end of the Civic Year, they would appreciate if a report could be brought to the meeting scheduled for March 2022.

**CHAIRPERSON**

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Cyngor Castell-nedd Port Talbot  
Neath Port Talbot Council

## **NEATH PORT TALBOT COUNTY BOROUGH COUNCIL / CYNGOR BWRDEISTREF SIROL CASTELL-NEDD PORT TALBOT**

### **Community Safety & Public Protection Scrutiny – Sub Committee**

18<sup>th</sup> March 2022

### **Report of the Head of Education Development**

Chris Millis

#### **Matter for Monitoring**

**Wards Affected: All Wards**

#### **Report Title**

Quarterly Performance Management Data 2021-2022 –  
Quarter 3 Performance (1st April 2021– 31st December 2021)

#### **Purpose of the Report:**

To provide members with quarter 3 performance management data, for the period 1st April 2021 to 31st December 2021 for Education, Leisure and Lifelong Learning Directorate relating to Community Safety & Public Protection. This will enable the Community Safety &

Public Protection Scrutiny – Sub Committee to discharge their functions in relation to performance management.

**Executive Summary:**

The report provides data relating to 11 KPI's (including 2 Corporate Plan indicators) in respect of the Community Safety Team and Western Bay Commissioning & Development Team elements of the Partnerships & Community Cohesion section.

**Background:**

Members are presented with a full suite of Community Safety & Public Protection KPI's (Corporate Plan and Local KPI's). A list of quarter 3 key performance KPI's with progress comments on each indicator are attached as appendix 1.

KPI status:

- GREEN (green traffic light) - KPI's that have improved on or achieved target
- AMBER (amber traffic light) - KPI's that have not achieved target but performance is within 5%
- RED (red traffic light) - KPI's that are 5% or more below target

Where available, appendix 1 provides performance data for quarter 3 performance for 2019/20, 2020/21 & 2021/22. The target provided is for the corresponding period.

**Financial Impacts:**

The performance described in the report is being delivered against a challenging financial backdrop.

**Integrated Impact Assessment:**

There is no requirement to undertake an Integrated Impact Assessment as this report is for monitoring / information purposes.

**Valleys Communities Impacts:**

No implications.

**Workforce Impacts:**

The Council's workforce continues to contract as financial resources continue to reduce. In recognition of the scale of change affecting the workforce, a new Corporate Workforce Plan has been developed to support the workforce to adapt to the changes that are taking place.

**Legal Impacts:**

This Report is prepared under:

The Local Government (Wales) Measure 2009 and discharges the Council's duties to "make arrangements to secure continuous improvement in the exercise of its functions".

The Well-being of Future Generations (Wales) Act 2015

The Neath Port Talbot County Borough Council Constitution requires each cabinet committee to monitor quarterly budgets and performance in securing continuous improvement of all the functions within its purview.

**Risk Management Impacts:**

Failure to provide a suitable monitoring report within the timescales could lead to non-compliance with our Constitution. Also, failure to have robust performance monitoring arrangements in place could result in poor performance going undetected.

**Violence Against Women, Domestic Abuse and Sexual Violence Impacts:**

Section 2(1) of the Violence Against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 introduced a general duty where a person exercising relevant functions must have regard (along with all other relevant matters) to the need to remove or minimise any factors which:

- (a) increase the risk of violence against women and girls, or
- (b) exacerbate the impact of such violence on victims.

**Consultation:**

There is no requirement under the Constitution for external consultation on this item.

**Recommendations:**

Members monitor performance contained within this report.

**Reasons for Proposed Decision:**

Matter for monitoring. No decision required.

**Implementation of Decision:**

Matter for monitoring. No decision required.

**Appendices:**

Appendix 1: Key Performance Management Data - Quarterly.

**List of Background Papers:**

The Neath Port Talbot Corporate Improvement Plan - 2019-2022

Monitoring forms/spreadsheets

Welsh Government Statistical Releases

**Officer Contact:**

Neal Place, Performance Management Officer.

E-mail [n.place@npt.gov.uk](mailto:n.place@npt.gov.uk). Tel. 01639 763619



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Neath Port Talbot Council

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# Performance Indicators




Neath Port Talbot Council

Appendix 1 - Partnerships & Community Cohesion Performance Indicators - Quarter 3 ( 1st April - 31st December) 2021/22








*Print Date: 28-Feb-2022*


## How will we know we are making a difference (01/04/2021 to 31/12/2021)?

PI Title	Qtr. 3 Actual 19/20	Qtr. 3 Actual 20/21	Qtr. 3 Actual 21/22	Qtr. 3 Target 21/22	Perf. RAG
<b>Organisation</b>					
CP/034 - Percentage of incidents of domestic abuse where people are repeat victims - Independent Domestic Violence Advisor (IDVA) Service - highest risk victims	41.37		34.39	32.00	 Red
<p>1130 of 378 repeat referrals for this nine month period.</p> <p>We have seen a decrease in repeat cases in quarter 3, 23.8%, compared to quarter 1 and quarter 2. However the overall repeat referral rate, up to and including December, of 34.39% remains above the Safelives suggested national average percentage of repeat cases which is around 28%. We will need to analyse the data in detail and over a longer period to identify any trends and opportunities for learning.</p> <p>Data not reported for quarter 3 2020/21 due to the pandemic.</p>					
CP/115 - % of children that have received the Healthy Relationship lesson to address violence against women, domestic abuse and sexual violence (VAWDAYS)					 NA
<p>New indicator for 2021/22.</p> <p>As per previous quarters, due to Covid restrictions in schools and funding issues, the programme has been temporarily suspended. The Relationship and Sexuality Education Group have called together a Task &amp; Finish Group to look at a pilot in 1 school to address missed lesson delivery during the past 18 months. If successful, we will look at the possibilities of rolling this out across all schools.</p> <p>There are some lessons planned across secondary schools during quarter 4, now that restrictions are lifting.</p>					
PI/153 - Number of referrals of high risk victims to the IDVA (Independent Domestic Violence Advisor) service	307.00		378.00	338.00	 Red
<p>Q3 referrals continue to be consistent with referral rates seen in Q1 and Q2 and it is predicted that the service will received over 500 referrals of high risk cases for the period April 2021 to March 2022. As multi agency responses to risk management and safety planning in high risk cases have returned to some sort of normal, current caseloads within the IDVA Team have appeared to return to a more manageable level however the intensity of the work in these cases remains very high.</p> <p>Staff remain working from home in isolation and staff wellbeing remains a priority and is being closely monitored.</p>					



PI Title	Qtr. 3 Actual 19/20	Qtr. 3 Actual 20/21	Qtr. 3 Actual 21/22	Qtr. 3 Target 21/22	Perf. RAG
PI/154 - Number of new members to Paws on Patrol	81.00	0.00	231.00	75.00	 Green
<p>All of the new members who joined during quarter 3 have signed up online.            No face to face engagement events have taken place during quarter three.            Our event that was planned for October had to be cancelled due to severe weather conditions and a yellow weather warning.            Dates are in the diary for 2022 events. However, early dates were cancelled during Q3 has been cancelled due to an increase in Covid cases and the new Omicron variant, but we are hopeful that others will go ahead. This is dependent on Covid restrictions closer to the time.</p>					
PI/466 - Percentage of children and young people who have participated in a suitable programme that addresses VAWDASV (violence against women, domestic abuse and sexual violence)	63.64			55.00	 NA
<p>These lessons are delivered via the Community Safety Crucial Crew event. This is usually held during Q2 but restrictions prevented live events in 2021/22. Planning is underway to re-establish some form of live event for 2022/23</p>					
PI/467 - Percentage of year 6 children and young people who have participated in a suitable programme to address cyber-crime	96.97			98.00	 NA
<p>These lessons are delivered via the Community Safety Crucial Crew event. This is usually held during Q2 but restrictions prevented live events in 2021/22. Planning is underway to re-establish some form of live event for 2022/23</p>					
PI/482 - Number of monitoring visits undertaken to APB (Area Planning Board) commissioned substance misuse service	0.00	34.00	52.00	51.00	 Green
<p>Target is 17 per quarter, 16 held in quarter 3. 2 meetings not held, one not held with NPT Social Work Service, which is currently without a Senior Practitioner, and one not held with Platform, as the service they provide is not currently being delivered. 1 additional meeting held for the RAPs service which the APB has maintained.</p>					
PI/483 - Number of agreed service outcomes achieved in APB commissioned substance misuse services			46.00	51.00	 Red
<p>Due to the introduction of a new information management system across western bay substance misuse services (WCCIS) and the issues affecting the ability of services to record on that system, it has not been possible to obtain performance management information for Q3 21/22. Work is on-going to find ways to fix the issues with the system.            3 (out of 18) services have been identified as underperforming:</p> <ul style="list-style-type: none"> <li>• CDAT Swansea; CDAT NPT: both have waiting lists, which means that Individuals are unable to access the support that they need. This is being address with the Health Board.</li> <li>• Platform Counselling service: this is currently not being delivered due to redundancies made as a result of funding changes. They are currently considering their options for the future of this service.</li> </ul>					

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PI Title	Qtr. 3 Actual 19/20	Qtr. 3 Actual 20/21	Qtr. 3 Actual 21/22	Qtr. 3 Target 21/22	Perf. RAG
PI/484 - Percentage of non-fatal over-doses notified through the protocol that received appropriate advice and or other intervention		53.78	69.70	50.00	 Green
<p>There was an error in reporting for quarter 2 due to the cumulative recording of percentages. This has now been corrected from 133% to 70%. The numbers of overdoses reported were correct.</p> <p>Qtr 3 data is as follows:  13 non-fatal overdoses. 9 of which received an intervention or advice.</p>					

# Community Safety & Public Protection

- Claire Jones: Strategic Manager Partnerships & Community Cohesion
- Julia Jenkins: Commissioning and Development Manager
- Matthew Rafferty: Harm Reduction Lead



# Area Planning Board (APB)

This presentation will highlight

- The ROLE and responsibilities of the APB, including
  - Membership, structure, governance, and reporting arrangements
  - The services in the area
  - Drug market information
  - Drug deaths
  - Its priorities and aspirations including developing a public health approach
- The work and makeup of the APB support TEAM

# Area Planning Boards

Area Planning Boards (APBs) were established in 2010 and provide a regional framework across Neath Port Talbot and Swansea, to:

- Strengthen partnership working & strategic leadership in the delivery of the substance misuse strategy;
- Enhance and improve the key functions of planning, commissioning and performance management.

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**APBs fulfil the responsibilities of Community Safety Partnerships in relation to substance use, at a regional level.**

- Provides a mechanism to pool scarce resources where appropriate
- Has over-sight of all substance use related issues but is not responsible for the commissioning of e.g. Statutory criminal justice interventions (this is via PCC)



# Area Planning Board

- **Chaired: Keith Reid Director of Public Health, SBUHB**
- **Vice Chair: Trudi Meyrick, Chief Superintendent, SWP**
- The membership of the APBs includes representatives from all the responsible authorities which comprise CSPs, as voting members

## **Voting Members (full members/responsible authorities)**

- NPT Council – Claire Jones & Chris Millis
- Swansea Bay University Health Board
- Swansea Council
- South Wales Police
- Mid & West Wales Fire & Rescue
- HM Prison and Probation
- Office of Police & Crime Commissioner



# Area Planning Boards- membership

**The APB is also attended by a range of organisations, inc.**

**Invited members, include**

- Providers
- Housing & supporting people
- Children & young people services

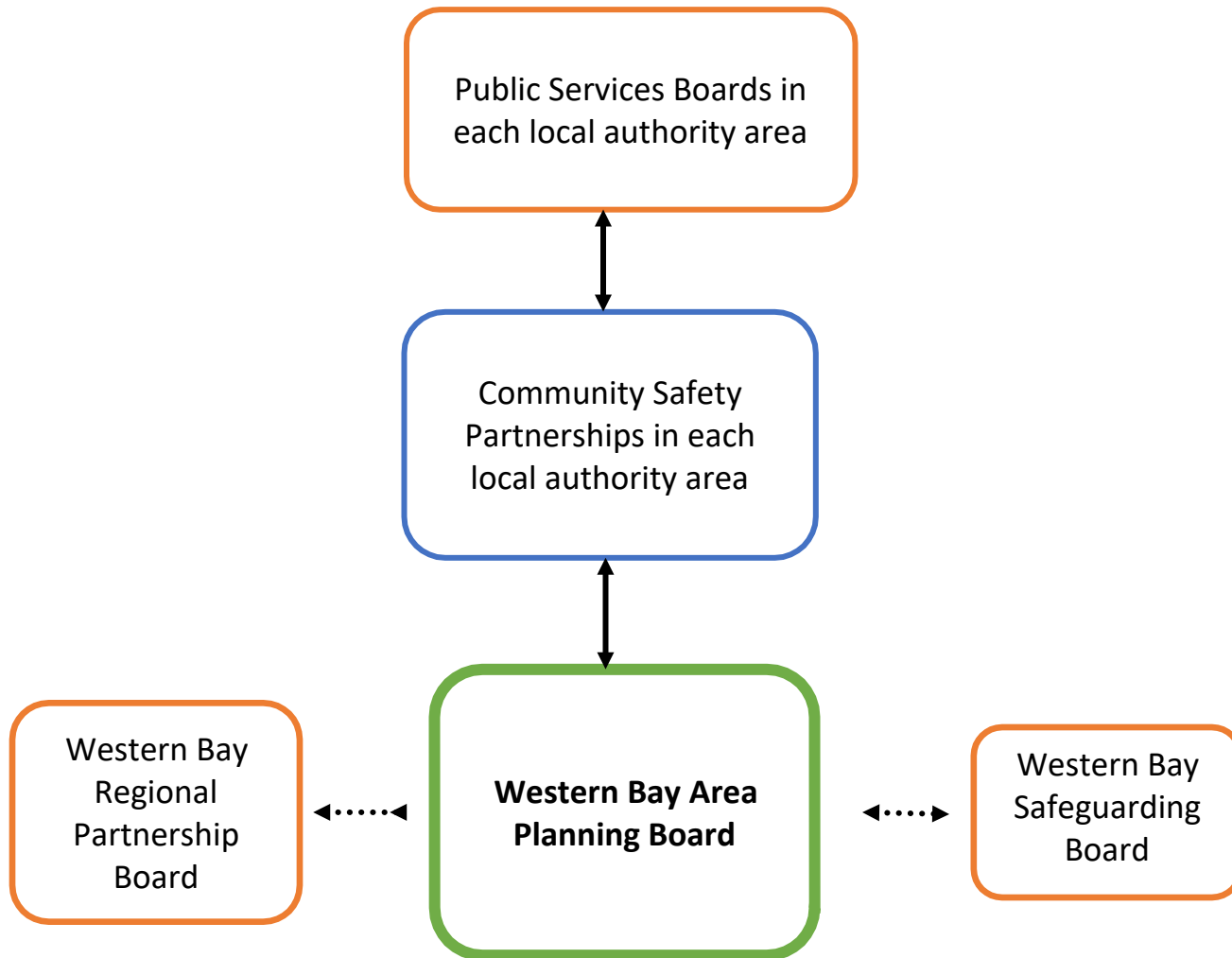
## **Advisors**

- Page 23
- Welsh Government
  - APB Team
  - Representative from Regional Partnership Board
  - Public Health Wales

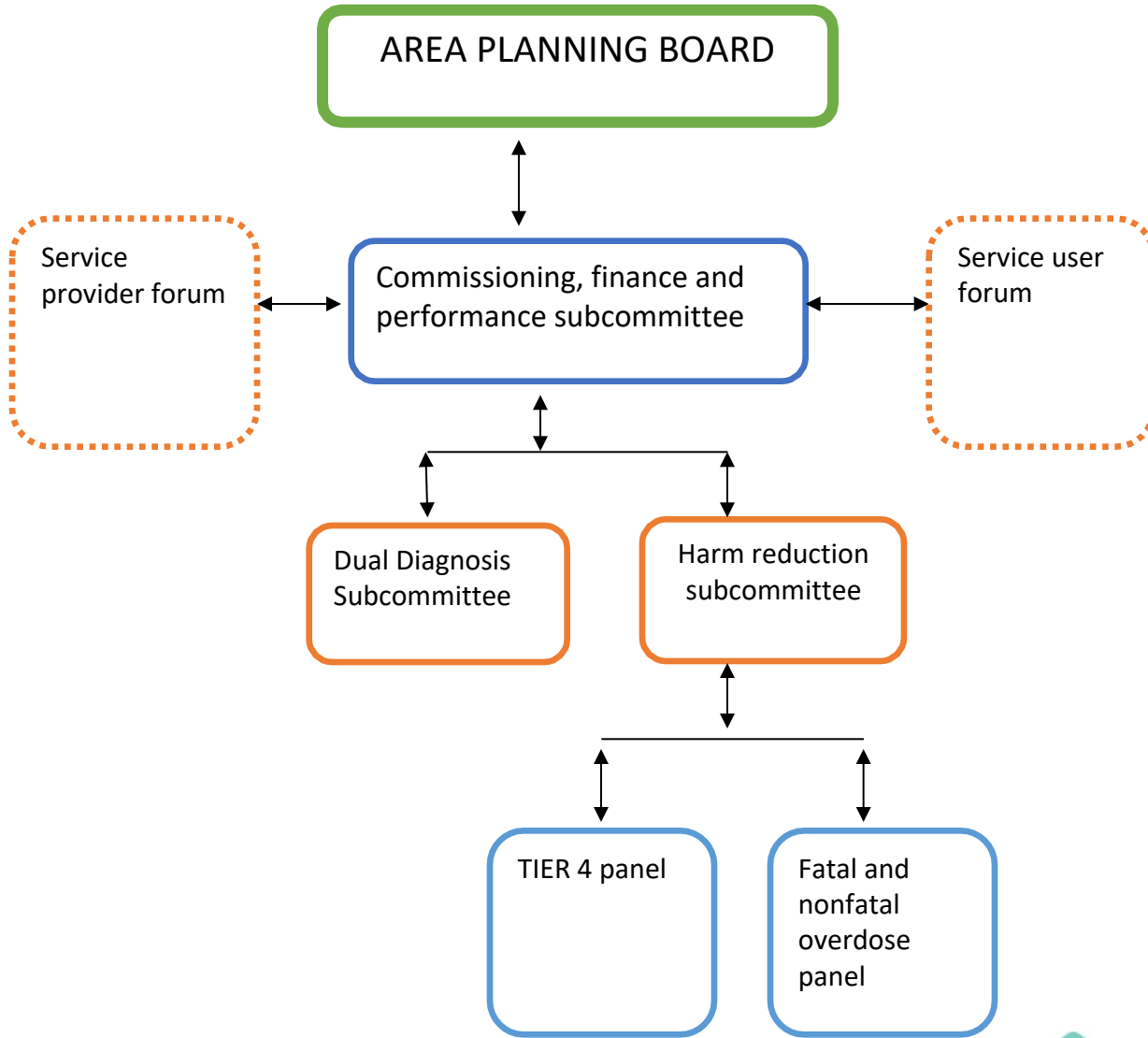
## **Governance**

- Secretariat: APB Team
- Meets: Quarterly
- Governance: governance framework in place

WESTERN BAY APB STRUCTURE







# Key role of APB

- To assist responsible authorities to discharge their duties in relation to substance misuse by, amongst other things:–
  - Development of an outcome based commissioning strategy.
  - Production of a fully costed implementation plan to support the commissioning and estates strategy.
  - Ensuring there are appropriate budget, accounting and audit management systems in place to effectively administer the Substance Misuse Action Fund (SMAF) revenue and capital funds
  - Ensuring the National Core Standards for Substance Misuse and other relevant standards are embedded in all service planning and delivery systems with appropriate arrangements in place for performance management and review.
  - Establishing arrangements to receive consider and act on performance management data.

# Remit of the APB

- The APB is an unincorporated body - has no legal powers,
- Representatives on the APB are accountable to their separate organisations but people should attend with the necessary authority
- The APB itself cannot commission work, procure goods/services, and incur costs or to enter into contracts etc.

The nominated grant recipient body can carry forward the proposals approved by the responsible authorities – NPT is the banker/grant holder

- Representatives of the Responsible Authorities should take the recommendations of the APB to their representative organisations, e.g. the financial risk sharing.
- The Responsible Authorities, as Board Members of the APB, will be held to account for the progress of the work of the APB through their own organisational performance management and decision-making frameworks.



# Issues: Fatal and Non-fatal Drug Poisonings – NPT area

- Drug related deaths and non-fatal poisonings are a real concern to the APB
  - 18 fatal cases reported to the Case Review Coordinator in 2021.
  - 10 cases for Neath and 8 for Port Talbot
  - Increase of 5 cases compared to 2020
  - IRP commenced review of the fatal cases reviews in October 2021
  - Working more closely with the coroner to ensure fatal cases are identified in a timely manner
  - CRC has access to Niche to ensure fatal and non-fatal cases are identified and dealt with in a timely manner
  - 58 non-fatal drug poisonings, 28 in Neath and 30 in Port Talbot
  - All cases are reviewed and clients offered an intervention or support
- It is clear however that despite all the incredible work, DRD and non-fatal poisonings continue to increase
- Evidences need for systemic change

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# Issues: Drug Market– NPT area

- There are correlations between drug markets and areas that are ranked highly on the Welsh Index of Multiple Deprivation
  - Data and intelligence from South Wales Police suggest that the majority of drugs seized in Neath and Port Talbot are Cannabis, Cocaine, Heroin and Benzodiazepines
  - Cannabis remains the most reported drug seized in Neath Port Talbot.
  - Benzodiazepine type drugs being the second most seized drug, with 20% of all occurrences relating to the seizure of this drug
- Concerning to the area is the reports suggest that benzodiazepine type drugs can be bought for as little as 30p per tablet.
- National and local evidence suggests that these tablets contain far more potent substances which many consumers of the tablets are unaware of.
  - There have been no reports from service users that substances are difficult to obtain, with heroin, cocaine (crack cocaine and powdered cocaine), benzodiazepines and amphetamine all readily available in NPT
  - It has been noted that the demand and supply of cocaine at the moment is an astronomically high level. The supply is diverse and can cost over £95 a gram in some areas of NPT.



# Drug Market– NPT area

- There is also large demand for crack cocaine which, although is cheaper for the user, is far more addictive. All this is leading to the expansion of cocaine supply and as a result, means NPT (and Western Bay) is a sought after area for organised crime groups who operate large county lines.
- In NPT we are also seeing increasing demand for amphetamine. Amphetamine is usually associated with areas that have high levels of deprivation and poverty

In recent months we have also seen the increase in ketamine and MDMA use, upon review this is likely to be down to night time economy and students returning to the area and the easing of restrictions. However this is further increasing the lure of supply chains into the area

- Substances are being sold and bought via a range of platforms which include; online sales, dark web, social media, on the street and over the phone, which makes it difficult to fully understand the true picture
- Neath Port Talbot is a lucrative area for county line operations. Anecdotal reports from frontline services suggest that county lines are exploiting vulnerable individuals in two forms
  - Cuckooing

- Exploitation



# APB Priorities - integrated public health model

- The APB acknowledges that the services in respect of substance misuse needs to improve.
- A joint meeting of the two Public Services Boards decided to establish an 'Integrated Public Health Model for Substance Misuse in Swansea and Neath Port Talbot' as the key driver for transforming substance use services

The APB is on a journey to develop a model for substance misuse services, that is seamless, evidence based and intelligence led

- A direction of travel has been agreed toward this integrated model, i.e. to develop a model collaboratively involving those with lived experience, and clinicians and people who work within the sector.
- This is about trying to break down the silos – whole system change i.e. across all sectors
- Strong, open relationships,



# APB Priorities - integrated public health model

- The APB has acknowledged that it does not have a fully detailed model, at this stage, this will evolve collaboratively.
- More work is needed to create a shared view of what an 'integrated public health approach to tackling substance misuse' might look like, and how this will be achieved.
- Work is underway, including
  - **Vision and values workshop**

The workshops will help the APB build a shared understanding of what we are trying to do in Western Bay and that is vital as the basis for the changes that we know we want to make locally

- **The establishment of an expert panel**

.An independent expert advisory panel will be set up to support the development of the new model and hear evidence to help inform the new service model and reduce deaths.

- **Over-arching steering group established**

Representatives from SBUHB, SWP, PCC, NPT, and Swansea Councils



# Priorities

- Understanding the resources needed to deliver the new model
- Continue to work with the PCC's office in the delivery of ADDER
- Signing of financial risk sharing agreement by ALL partners
- Reducing drug related deaths
- Launching new routes into service – to make it easier
- Strategic evaluation of prescribing services
- Improving service quality through monitoring
- Service user involvement
- Ensuring that tests for BBV is improved
- Promoting harm reduction
- Getting the risk-sharing agreement signed by all partners
- To implement learning from drug death reviews



- newid is the over-arching description/branding of the services available across the region <https://www.newidcymru.co.uk/services-available/>

## Services delivered under newid

- The Engagement Team is a service delivered by WCADA (now called Adferiad) in NPT providing assertive outreach as part of the wider Newid service provision. Barod deliver in Swansea. The Engagement Team will work with people in a variety of settings, including their home to ensure maximum engagement is achieved.
- The Community Drug and Alcohol Team (CDAT) Health Board services that provides a complex needs service for people experiencing problematic substance misuse requiring medical interventions.
- PSALT (pronounced P-SALT) is Newid's Primary Care, low threshold medical prescribing service. PSALT delivers high quality care to people who require opiate substitute therapy supported by highly experienced key workers within the community.

- Adferiad Recovery provides support and interventions in Neath Port Talbot And Swansea). Adferiad has designated services for children and young people, adults, older people and family and carers. Adferiad provide the Minnesota 12-Step Abstinence treatment programme and Harm Reduction services, including needle and syringe programmes, outreach support, diversionary activities and counselling.
- Barod provides high quality substance misuse services to help improve peoples wellbeing who are affected by drugs and alcohol in Swansea. Barod assist people to make informed decisions about their care and support by promoting harm reduction and health promotion strategies.
- Dyfodol deliver the Rapid Access Prescribing service within the Newid partnership. RAPS, is an integral part of Newid, ensuring our most vulnerable people are provided with clinical interventions and specialist holistic support. The RAP's service encompasses an assertive outreach approach to service delivery, allowing flexible and dynamic engagement with people.

- Platform deliver substance misuse counselling within the Newid partnership. The substance misuse counselling service is designed to help people get more of an insight into the substance misuse problems they may be struggling with.
- Needle and Syringe Programmes (NSP's) formally known as needle exchanges are a vital harm reduction service that aims to reduce the harms and risky behaviours associated with injecting drugs. The programme provides clean and sterile injecting equipment, Blood Borne Virus (BBV) screening and support into more treatment services if requested.
- People can also obtain **Naloxone** kits in Needle and Syringe Programmes. Naloxone is the life saving medication given when someone has had an overdose, from opiate based drugs such as, heroin. Naloxone is pivotal to reduce drug related deaths in the region something that remains a high priority in Swansea and Neath

# Other

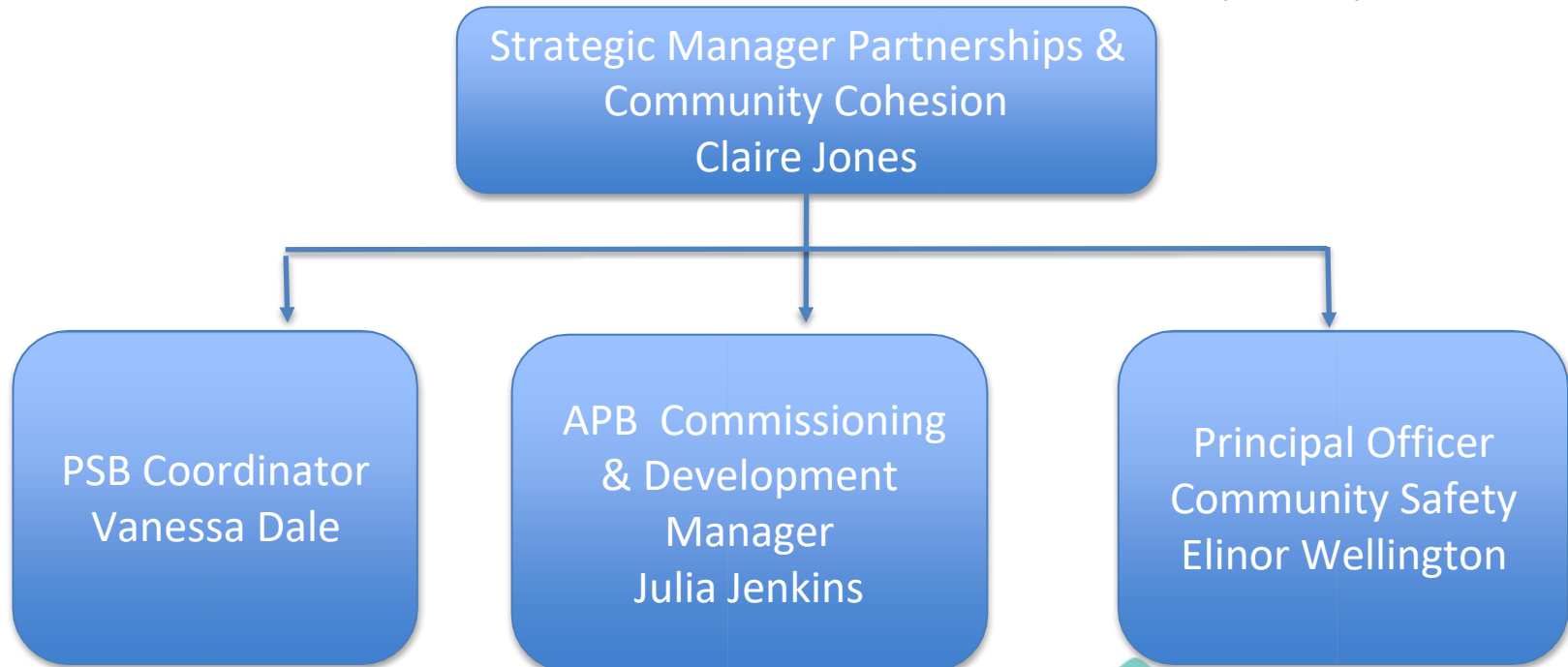
- The PCC's office also commissions statutory interventions programme called Dyfodol

## Project ADDER

# APB TEAM

- The APB team is a regional team, hosted by NPT, sitting within ELL/Partnerships & Community Cohesion
- The APB team supports the APB, but is not the APB, e.g. it enacts decisions of the APB in relation to Substance Misuse Action Fund (SMAF)

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# APB Team

Julia Jenkins

Ellis  
Owen

Erica  
Barrett

Cerys  
Thomas

Matthew  
Rafferty

Nicola  
Headon

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# APB Team: Julia Jenkins

Cabinet Portfolio: [Cllr Leanne Jones](#)

**Purpose:** Improving lives for people and communities affected by substance misuse

## What we do:

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- The APB support team ensures that substance misuse services funded through SMAF across Western Bay are commissioned and delivered in an effective and efficient way, in-line with WG guidance and policy.
- Ensuring that the effect that substance misuse has on our communities is minimised by having oversight of overdoses and drug trends and responding to issues as they arise.





# APB Team:

- Developing and implementing contractual and commissioning strategies for the APB
- Ensuring the smooth running of APB and sub-group meetings.
- Monitoring services provided by internal and partner organisations in order to ensure safety, quality and best value is achieved.
- Performance Monitoring
- Working with partners across the statutory and voluntary sector to develop and deliver an effective harm reduction strategy in respect of the misuse of drugs and alcohol.
- Managing the system of reviewing fatal and non-fatal overdoses
- Gathering together information necessary to carry out multi agency reviews of suspected drug related deaths including trends, Police intelligence and coroner's reports.
- Co-ordination meetings, papers, receive apologies for and take minutes of meetings etc.
- Service user engagement (new post/ADDER funded)
- Monitoring expenditure



# APB Team: Covid 19 response

- The team maintained all its services throughout the pandemic including during lockdown
- Team members have been working hard at home.
- NEX and THN schemes were maintained throughout the lockdown
- Provided support for the Housing Options teams in Swansea and NPT for service users homed in B&B's and hotels to ensure that outreach continued to be provided at those locations.
- Met with HB colleagues to develop a medication delivery scheme
- All APB meetings were successfully maintained on-line
- Worked with providers to develop risk assessments
- Ensured that Buvidal funding from WG was administered appropriately.
- Coordinated applications from providers for WG Winter Covid fund for PPE and Digital Support
- Coordinated lists of CYP working with services to the MA Vulnerable Children meetings

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# APB Team: Achievements

- Established a contract monitoring system and performance management framework
- Developed the Drug Poisoning Task Force and improved systems for reporting and recording overdoses
- Established 2 new prescribing services to increase the amount of places available for service users
- Worked with SWP and A&E dept to introduce a naloxone programme
- Local Drug Information System (LDIS) Model
- Established a new SM service website <https://www.newidcymru.co.uk/>
- Established a 72 hour protocol in responding to non-fatal overdoses
- Worked with PCC to secure ADDER funding from the Home Office

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# Harm Reduction

- Local Drug Information Model – regional drug alert system to allow access to concise and accurate information to control the public narrative and stop “fake news”.
- Peer to Peer Naloxone Distribution – Trained volunteers with lived or living experience will distribute naloxone to their peers this will build on the successes of naloxone distribution in the area by improving the reach to those who may not come into services
- Early Help Hub – collaboration with SWP and Social Services where people who are known to services are referred voluntarily to the Hub without sanction (PPN). When people are voluntarily referred it ensures that they engage with service providers for the right reasons rather than being forced to via police sanctions. It also reduces administration for SWP.
- BBV screening – this reduced dramatically during lockdown. This is now a clear priority. The APB agreed that a local protocol be established with individual testing targets for substance use services to adhere to, which will be monitored and reported to the APB.

# Service user involvement

- SU Involvement Officer – Home Office funding via the Police and Crime Commissioner (ADDER) has allowed for a new officer.
- Ellis Owen took up post in Jan 2022 and is based with the APB Team.
- This post will support the implementation of the ADDER project across Swansea Bay and will scope and review existing opportunities across the partnership landscape, with a view to ensuring opportunities to develop the involvement of Service Users, their families and communities in review of existing and development of new Substance Misuse services.

## Main areas of work:

- To develop and support service user engagement across the area.
- To act as a conduit for information and research in developing transparent, communication and feedback mechanisms between planning structures of commissioners, providers, service users and carers as directed by service users and carers.
- Working across all organisations in scoping what currently exists in terms of SU engagement
- Address barriers to meaningful engagement.
- Liaise with relevant personnel for concerns/complaints and success stories to be acknowledged and addressed within the service provision and planning structures.
- Ensure service user engagement contributes to an individual's recovery pathway, therefore engagement within wider community support services and acknowledged as part of the journey.

# Service Developments

- Strategic Evaluation of Prescribing Services – the APB team is carrying out an evaluation of prescribing services in Western Bay to identify issues within the current arrangements and to recommend improvements which may require additional investment.
- In-patient detoxification – due to the pandemic the health board closed the in-patient detoxification ward as it is being used as an isolation ward. The interim provision of 2 beds on the main mental health ward has raised some issues. The APB has requested an options appraisal be carried out to advise on possible alternative arrangements during the interim period. The HB hasn't advised when the ward will reopen. Longer term plans are being considered.
- Buvidal Treatment – During lockdown Welsh Government provided funding for Buvidal, a ground breaking slow release medication as an alternative to Methodone. Prescribing services in NPT are now offering this treatment and a priority of the APB is to ensure that people can continue to access this option further into their recovery. People in treatment have reported wide ranging benefits. The APB team is working with providers to develop a new Buvidal Maintenance Service in 2022.

# Service Developments

- Rapid Access Prescribing Service (RAPs) – the APB commissioned a new assertive outreach model which provides people who don't usually access services and are at high risk of harm with rapid access to opiate substitute prescribing. 30 places across Western Bay. Performance monitoring has shown that this model is highly effective and efficient. There have been no deaths in service since it started in 2020.

Route into Services – following a long period of evaluation and consultation, with a range of stakeholders a new first point of contact service aimed at improving access to services is being introduced. The new service will help to ensure that more people can access the advice and support that they need, when they need it, as we have extended the number of ways that people can make contact with services. Access will be through a Freephone number, drop-in, email and via the Newid website.

- Western Bay Expert Panel/Change Project – APB team will support this.



# Service Provision – areas of concern

- WCCIS – the new integrated information system commenced in April 2021.
  - 3 areas of concern have been identified:
    - performance of the system (resolved Feb 22)
    - Lengthy processes for inputting data
    - Staff knowing how best to use the system
  - A working group has been established with an action plan to address the particular issues identified. This group reports to the APB.
  - Issues with the system have affected the APB Team’s ability to effectively monitor services as well as the capacity of services to deliver front line support.
- Waiting Times for accessing prescribing – monitoring has identified that the length of time to wait for prescribing treatment is above acceptable limits. As of the end of January there were 51 people waiting (36 for alcohol and 15 for drugs). The longest waiting time was 29 weeks. The strategic evaluation mentioned previously will look into this in more detail and recommend improvements to provision.





# APB Team: priorities going forward

- To ensure that WB meets its BBV testing target
- To work on the APB's vision and values
- To successfully implement the new first point of contact service
- To commence with the first phase of the Transformation Project

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Whilst change project is in the development stage, developing services that plug gaps that have been identified.

- To establish an information sharing protocol between all partners
- To continue to work to support community safety and housing colleagues
- To work with PCC's office in the delivery of the ADDER project



# APB Team: Issues & Challenges

- Managing relationships between partners effectively
- Dealing with organisations that are not receptive to change
- Getting buy-in for development ideas at a strategic level from ALL partners
- Implementing effective service developments
- Scale of issue

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# Partnership & Community Cohesion

Thank You

Any Questions....



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Home Office



De Cymru  
Comisiynydd yr Heddlu a Throseddau  
Police and Crime Commissioner  
South Wales



Western Bay  
Area Planning Board



Bae Gorllewinol  
Bwrdd Cynllunio Ardal

WORKING TOGETHER TO MAKE POSITIVE CHANGES  
GWEITHIO GYDA'N GILYDD I WNEUD NEWIDIADAU CADARNHAOL

# Project ADDER

## A Swansea Bay Perspective

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Agenda Item 8

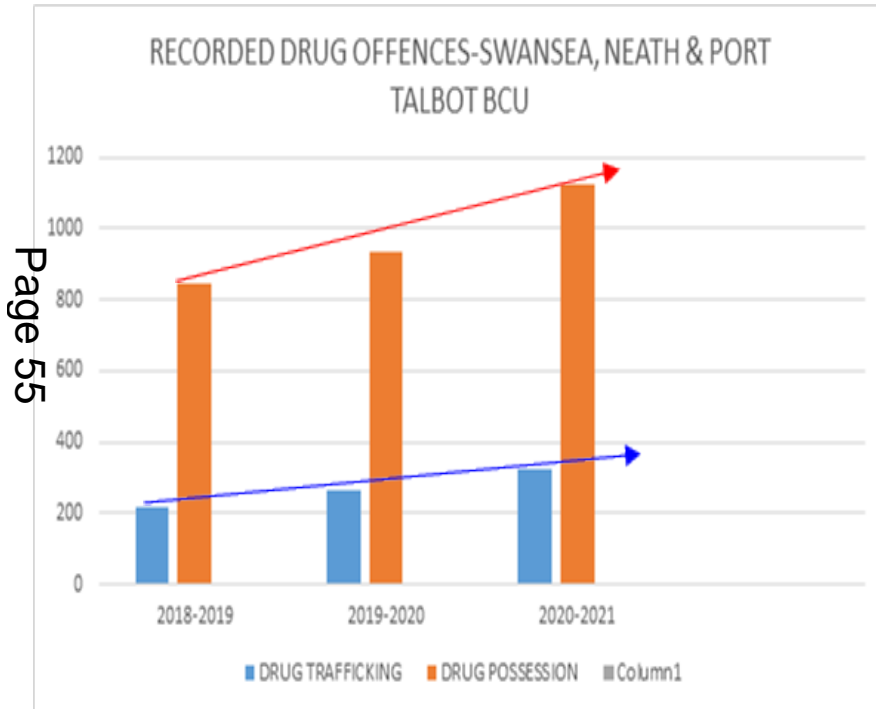
# Swansea Bay Landscape

- ▶ 2017-2019, Swansea had the highest rate of drug deaths per 100,000 in Wales at 17.6. The rate of drug related deaths in Swansea in 1.8 times higher that it was a decade ago.
- ▶ Neath Port Talbot has the third highest rate of drug deaths at 12.7 per 100,000 and has been one of the five highest locations of drug deaths in England and Wales between 2014 and 2017.
- ▶ In 2020 , Swansea and Neath Port Talbot were two of only five local authorities in Wales where deaths had increased in 2020. (Sources for DRD Stats: Office for National Statistics)
- ▶ Increase in deaths involving benzodiazepine, cocaine and non prescribed opiate replacements ( i.e.- methadone, and buprenorphine) (APB data)
- ▶ 67% of the Lower Layer Super Output Areas (LSOAs) in Neath Port Talbot are in the most deprived 50% in Wales.
- ▶ Levels of deprivation in Swansea are lower overall, with 49% of the 148 super output areas in the most deprived 50% in Wales (Source: [HTTPS://statswales.gov.wales](https://statswales.gov.wales))
- ▶ 453 people are on the Criminal Justice treatment caseload ( Swansea Prison and Swansea Community)(Source: Palbase)
- ▶ 1,888 people are in community Treatment Services, 1118 of those are being prescribed Opiate Substitute Therapy (Agency Data Sept 2021)



- Population of approx. 338,000
- 142,000 in Neath Port Talbot
- 246,000 in Swansea (latest census data)

# Policing Picture

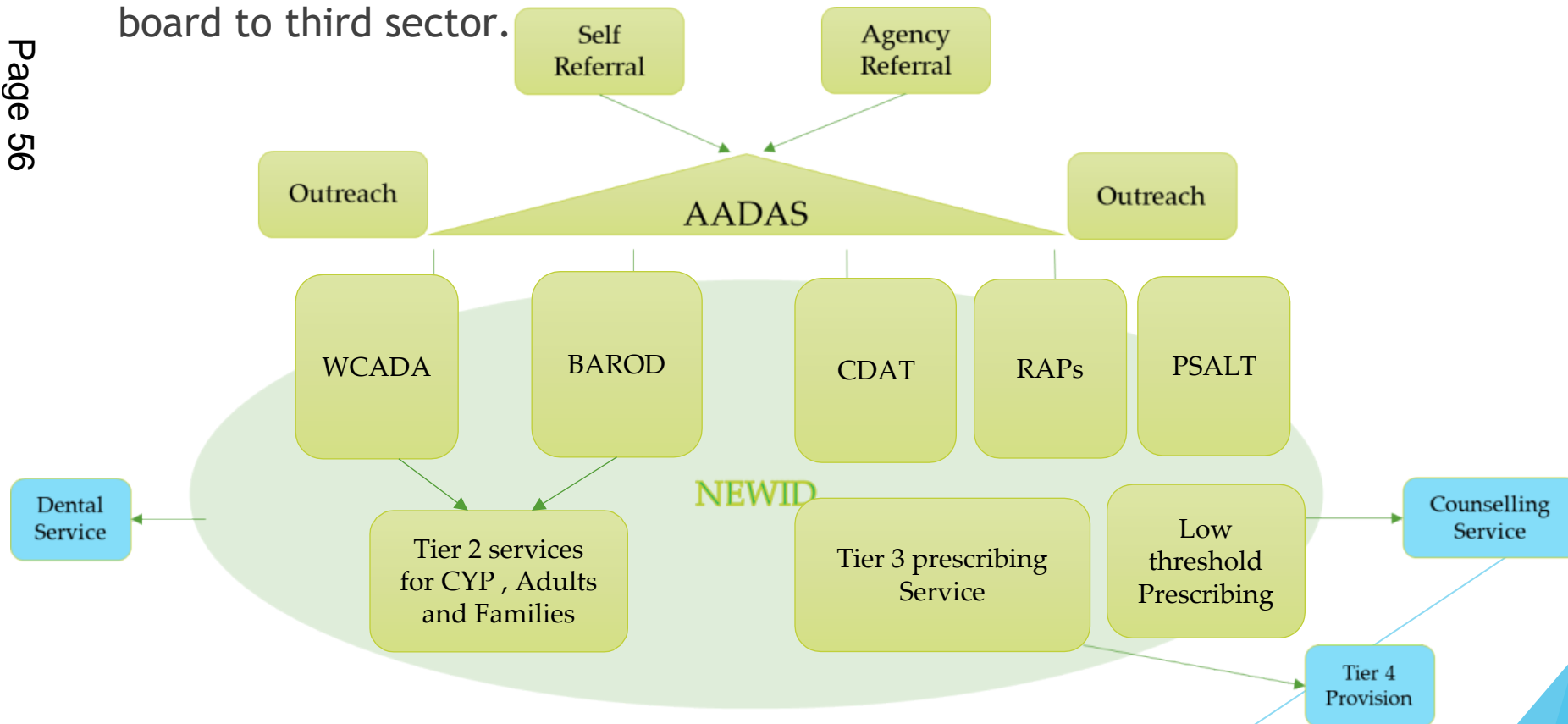


- ▶ The BCU (Basic Command Unit) covering the Swansea Neath Port Talbot Area was ranked 5<sup>th</sup> as an importing force within the UK linked to County Lines in December 2020.
- ▶ Since April 2021, 78% of County Lines within the REGION (South Wales Police, Dyfed Powys Police and Gwent) have been identified within Swansea Neath Port Talbot
- ▶ There has been an increase in availability and purity of heroin, crack cocaine and poly drug use, related to increased harm including Organised Crime Group activity, child and adult exploitation, and violence.
- ▶ Swansea, Neath and Port Talbot (SNPT) BCU have established structures and processes in place and have worked alongside the main exporting forces successfully for county lines for several years.
- ▶ ENFORCEMENT is daily business within the BCU and force area.

# Overview of existing community services

- ▶ Community treatment services are commissioned and overseen by the Area Planning Board
- ▶ Integrated Service - Newid
- ▶ Delivered by several different providers under 1 umbrella ranging from health board to third sector.

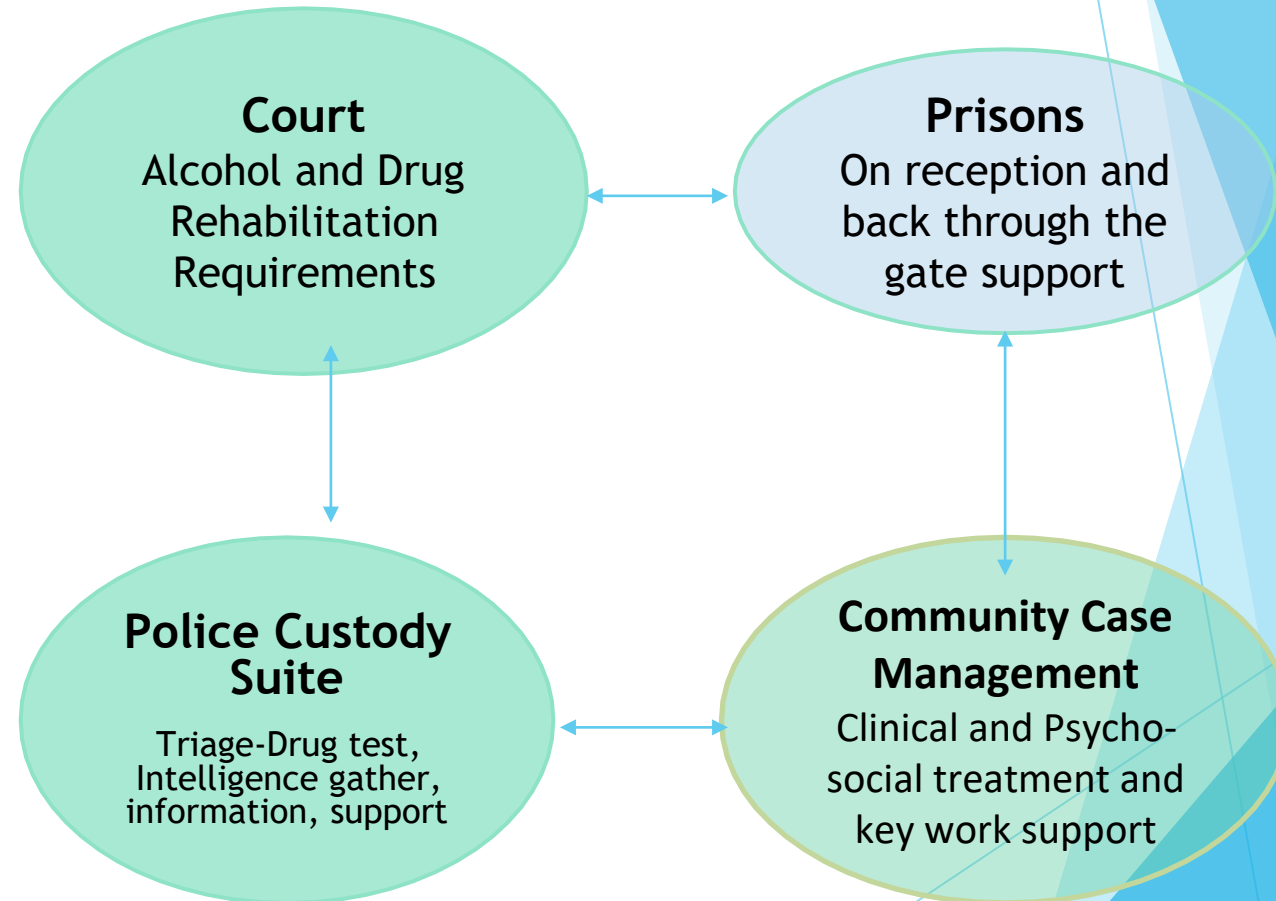
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# Overview of existing Criminal Justice Co Commissioned Offender Intervention Service - Dyfodol

- Services Commissioned jointly by HM Prison and Probation Service in Wales and South Wales Police and Crime Commissioner
- Delivered by a Consortium of providers known as 'Dyfodol'
- Delivery Criminal Justice services whole system approach- from arrest to Prison leaver
- Community Clinical Model developed is responsive to needs
- Alignment with Health Board and Area Planning Board commissioned services
- Embedded service with criminal justice partners- co location with Police, Probation and key partners



# Current Treatment System – What needs to change ?

- ▶ Need to increase focus on prevention and early intervention
- ▶ Need to focus on root causes of substance use - which addresses underlying needs of this cohort e.g. Mental health, Adverse Childhood Experiences (ACEs) emotional dysregulation
- ▶ Supporting people with multiple and complex needs- those who do not fit criteria for secondary care but have experienced underlying trauma and require psychological intervention to address trauma
- ▶ There are gaps in current prescribing pathways for those clients that are not complex but aren't low threshold
- ▶ There are waiting lists for complex prescribing services in Dec 20 this was up to 12 weeks. Time taken to provide a prescription is too long.
- ▶ The pathways and referral routes between services need to be strengthened, redefined and re-established
- ▶ The system is hard for service users to navigate
- ▶ There are a range of assets that already exist that could be extended, strengthened with a focus on co-occurring cohort
- ▶ There is a need to redefine the pathways between the criminal justice system and community drug treatment pathways
- ▶ Reduce the stigma associated with accessing treatment
- ▶ Lack of Service user/ family and community voice in the development of services and interventions

# What will ADDER funding Deliver?

Increased Dyfodol  
Court Caseworker  
capacity

CMHTR -  
Community Mental  
Health Treatment  
Requirement pilot

Increased Dyfodol  
Drug Test on Arrest  
worker

Post Criminal  
Justice Prescribing  
Maintenance  
Programme

Additional  
Enforcement  
capability

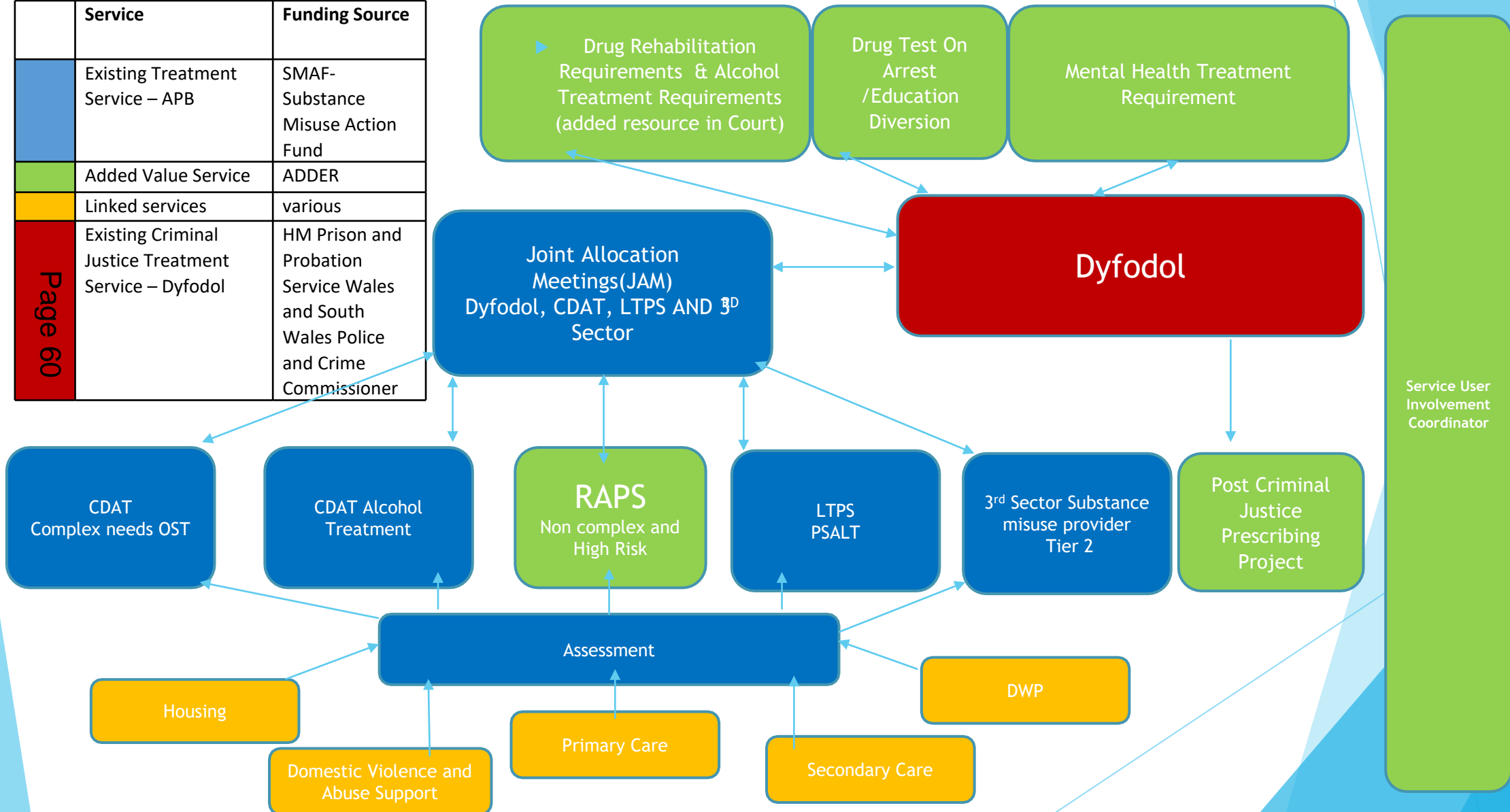
Rapid Access  
Prescribing service

Project ADDER  
Strategic  
Coordinator

Service User  
Involvement Co-  
ordinator

# ADDER Value in the whole system approach

	Service	Funding Source
	Existing Treatment Service – APB	SMAF- Substance Misuse Action Fund
	Added Value Service	ADDER
	Linked services	various
Page 60	Existing Criminal Justice Treatment Service – Dyfodol	HM Prison and Probation Service Wales and South Wales Police and Crime Commissioner



# Working in partnership to reduce harm

Take home naloxone

Needle and syringe programme

South Wales Police naloxone pilot

Local Drug Information Scheme

Drug Poisoning task force

Dual diagnosis strategy refresh

Welsh Government Buprenorphine provision

Links to DWP - provision to support opportunities for employment and links to meaningful daytime activities

Links to Housing Support including housing first model

Links to Violence Prevention Unit programmes(VPU/VRU)

Links to Joint Intelligence Project (HMPPS Wales)

Links to the development of an ISFL Wing in Swansea Prison (HMPPS Wales)

Development of Prison Leavers project to dovetail (HMPPS Wales) (Local Leadership and Integration Grant Fund)

Future4 (women and 18-25 year olds)

Links to the Joint Race Equality Plan (South Wales Police and Crime Commissioner)

Links to existing developments in South Wales Police: Out Of Court Disposal pilots and Drug Education Course

Links to Community Safety Partnerships projects

# Project Progress and Updates

- ▶ All staff employed as part of ADDER are now in post
- ▶ All interventions as part of ADDER are up and running
- ▶ ADDER Year 2 Delivery Plan has been informally approved by the Home Office  
(formal approval expected 15.03.2022)
- ▶ KANTAR the independent evaluators of all ADDER sites have completed the first stage of their evaluation workshops with all Project ADDER sites, 1-1 evaluation interviews are ongoing

# Enforcement

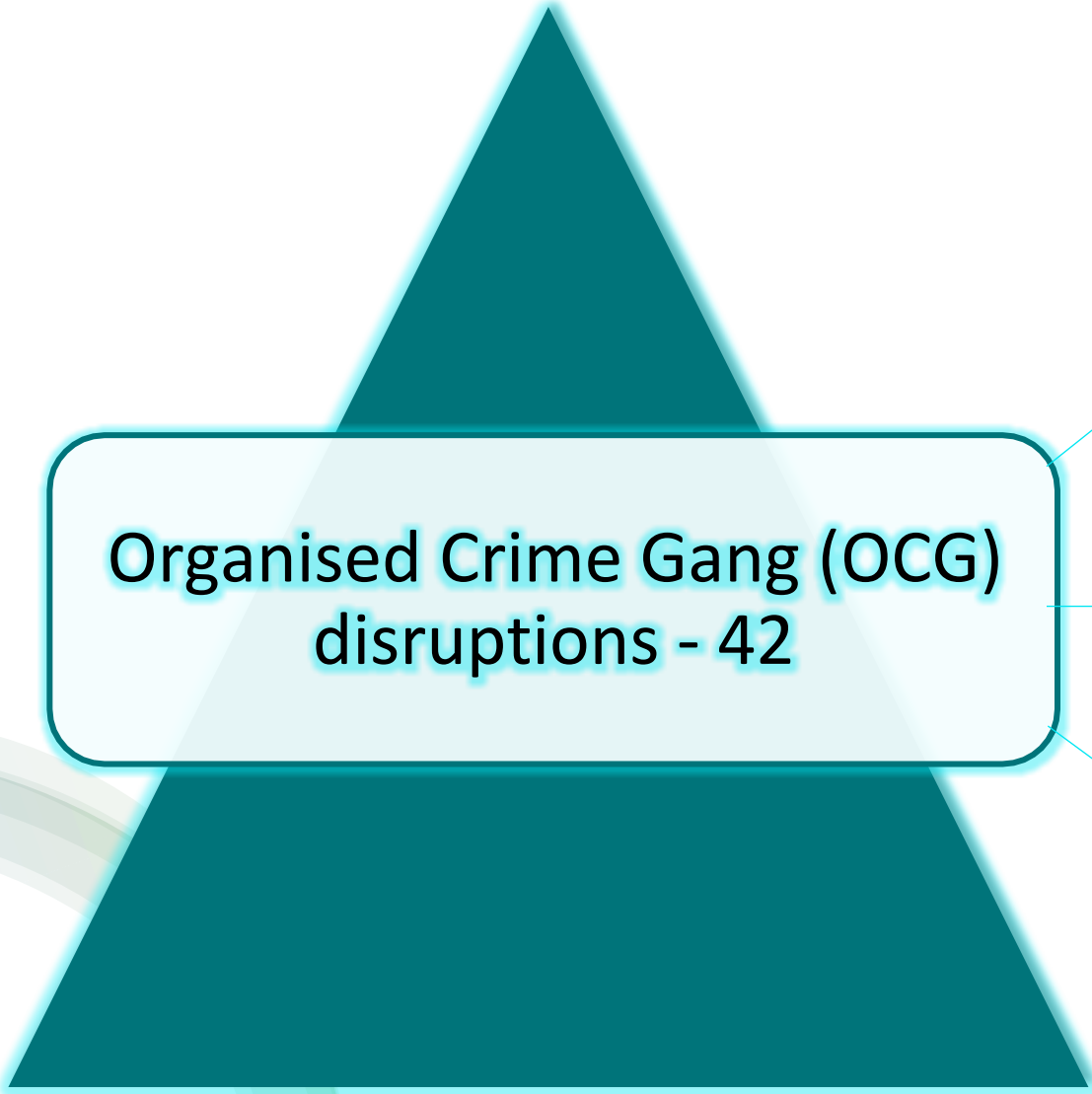
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Organised Crime Gang (OCG) disruptions - 42

Major - 15

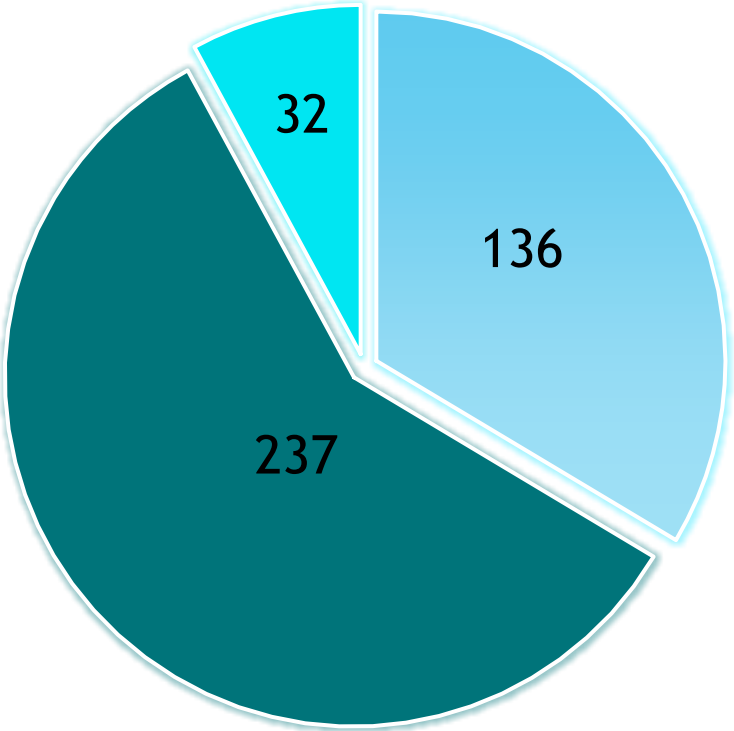
Moderate - 22

Minor - 5



# Enforcement

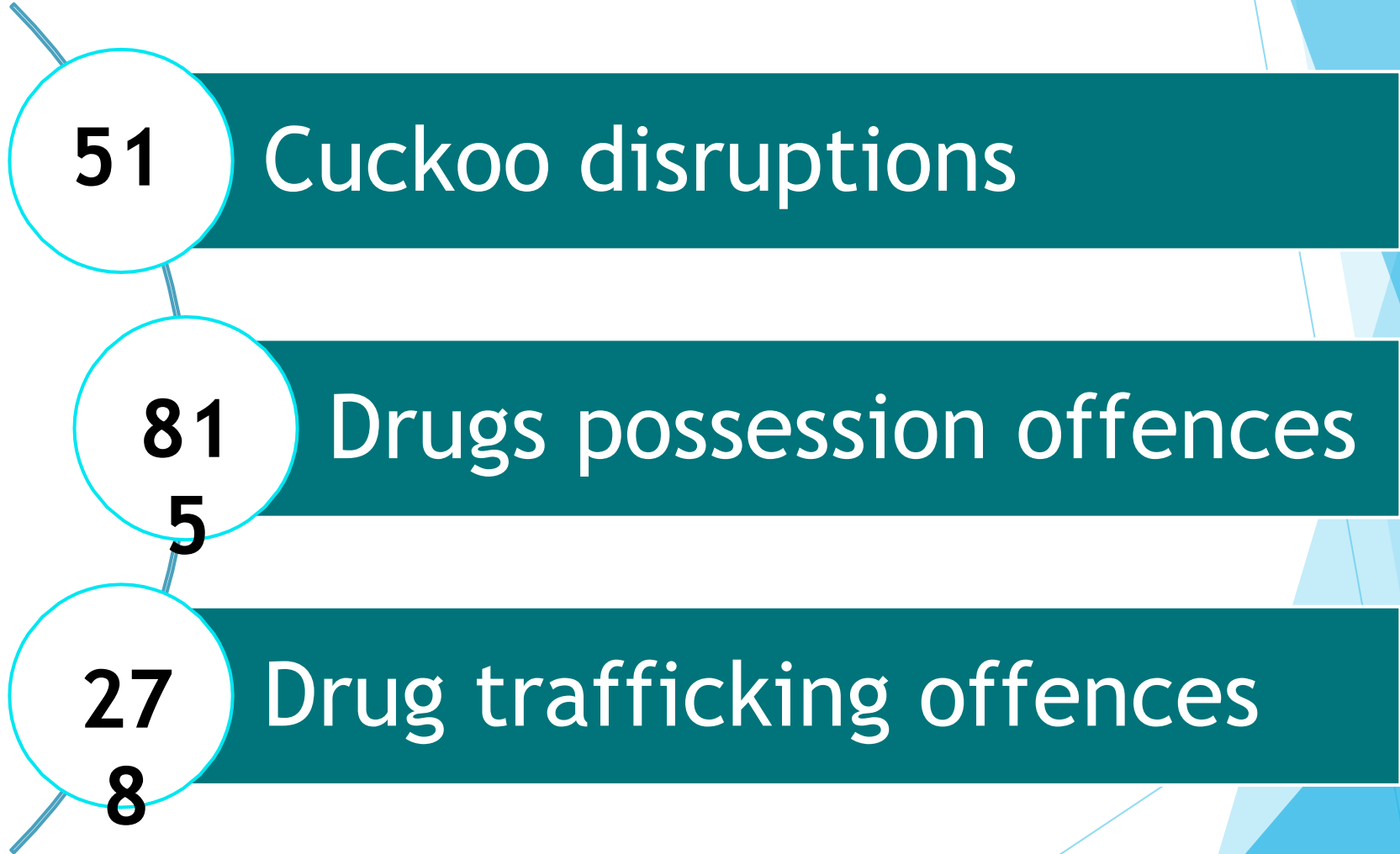
Total number of arrests (specific offences as outlined)  
- 384



- Drugs Possession
- Drug Trafficking
- Weapons Offences



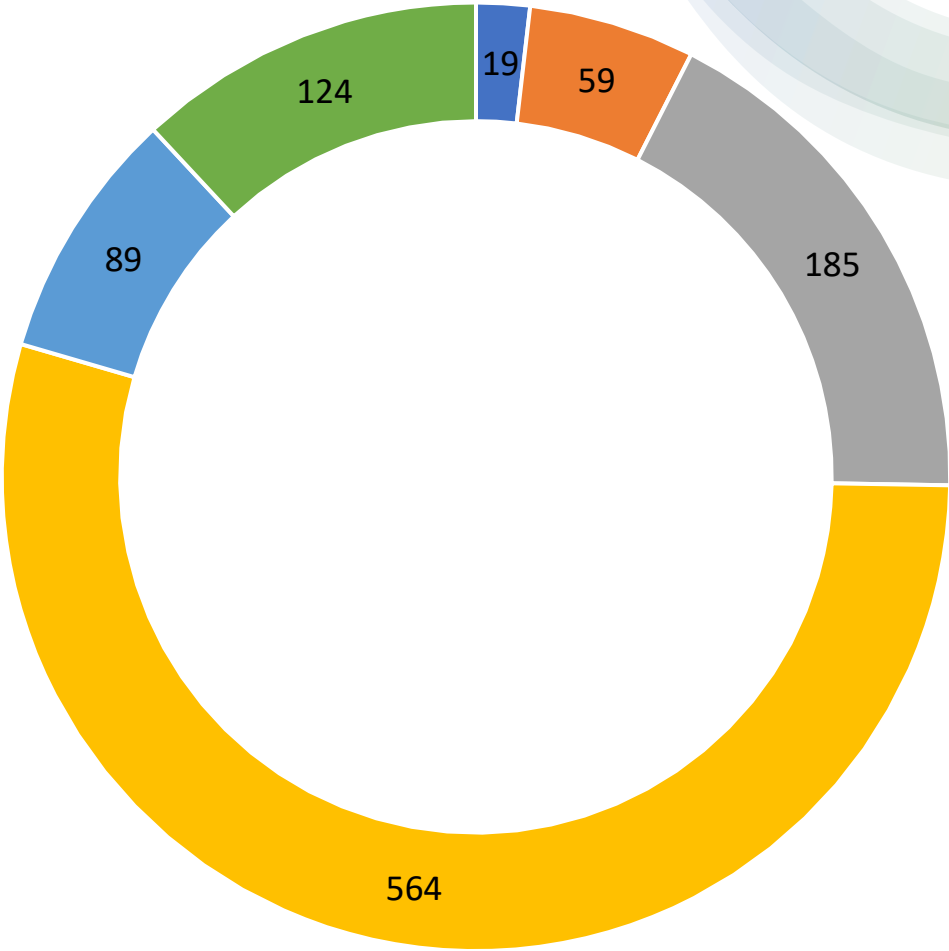
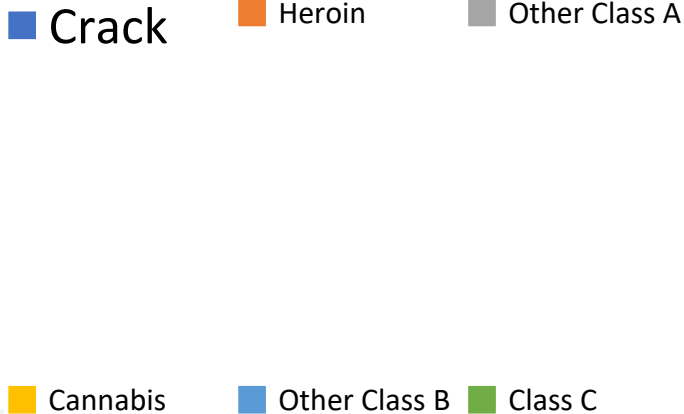
# Enforcement



# Enforcement

Total number of drug seizures - 1040

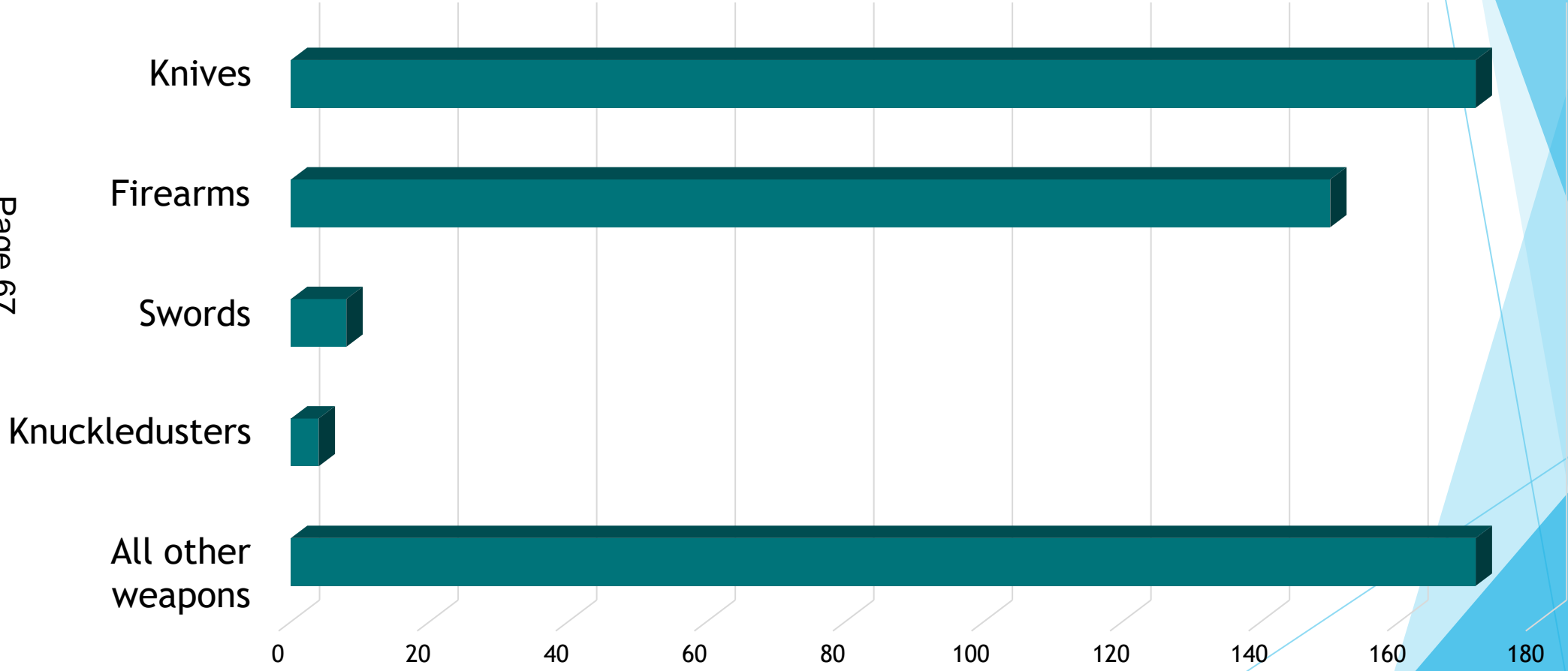
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# Enforcement

Total weapons seized - 507

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# Mental Health Treatment Requirements

Forensic Psychology Consultancy (FPC) are providing this service as part of the Dyfodol contract. They employ a psychology team to provide Pre-Court advice, Psychology Assessments and treatment pathways for people in court with a link between their offences and low to medium level mental health difficulties. Based at our Dyfodol bases the team co-work service users with multiple requirements (DRRs / ATRs plus an MHTR) some stats:

- ▶ 47 MHTR referrals have been received to date.
- ▶ 40 assessments have been completed.
- ▶ 36 MHTR have been recommended with 34 accepted by Court.
- ▶ 2 of these were not accepted in Court due to the imposition of a custodial sentence. 1 other was not assessed, as insufficient time prior to hearing and adjournment was not granted.
- ▶ 4 were not recommended (2 x no MH concerns evident, 1 x needs were too great referral to secondary MH recommended) and 1 client did not fully engage in assessment so unable to identify need)
- ▶ 8 treatments have been completed to date.
- ▶ 21 are currently receiving treatment - 16 single order/ 5 on a dual order.

# Rapid Access Prescribing Service (RAPS)

- ▶ This project currently (Q3 report) has 32 people on caseload in receipt of clinical and psychosocial support.
- ▶ It continues to be recognised as a strong approach to diverting vulnerable people from entering the justice system ( a focus on sex workers and homeless cohort with multiple needs).
- ▶ It has also proven effective in tackling the issues of self-poisoning and drug-related deaths in the region. To date we have not had any fatalities for people who have been referred to the service and taken onto caseload.
- ▶ The RAPS approach, assertive outreach, broadening access, being tolerant of early helplessness, meandering and stumbling but being assertive, persistent and focused on hope for complex individuals.

## Whole system changes

- Build from the success and evidence base from ADDER investment
- Build on the efficacy of the co commissioned Offender Intervention Services contract delivered by Dyfodol
- Develop and jointly commission integrated Health and Justice pathways and provision locally, that serve individuals and the community more effectively
- Build effective pathways and joint working with specialist systems (substance misuse, mental health, housing, social care)