

Barnet Combating Drugs Partnership Board (CDPB) Annual Update Report September 2024

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1. Executive Summary

The national drug strategy, ‘From Harm to Hope’, was published in December 2021 setting out the government’s 10-year plan to tackle harm caused by illegal drug use and related crime.

Following the publication of the policy, a cross-government unit responsible for overseeing the delivery of the drug strategy was established. The Joint Combating Drugs Unit (JCDU) and local areas were tasked to come together to address all three strands of the governments drug strategy, by bringing together partners to assess needs, develop an action plan, and deliver locally relevant ambitions in what is now called Combating Drug Partnership Board (CDPB).

The Barnet CDPB launched in November 2022 and has had quarterly meetings since. Governance arrangements were agreed in 2022 with the CDPB reporting both to the Health and Wellbeing Board and the Safer Communities Partnership Board.

The Barnet CDPB has had good partnership attendance and support to date. A range of partners are signed up and have been attending meetings regularly. There has been representation from: Public Health, Change Grow Live, Community Safety Team, Family Services, Probation, Met Police, Barnet Homes, Adult Social Care, NCL Integrated Care Board, JCP, Education, Service user representative and attendance by chair of the SCPB. The meeting is chaired by the chair of the Health and Wellbeing Board and the senior responsible officer is the Director of Public Health.

The Barnet CDPB, with leadership from Public Health, has drafted a “From Harm to Hope” needs assessment ([Barnet Substance Misuse Needs Assessments | Barnet Council](#)) which assesses Barnet’s delivery of the three strategic priorities. There is a supporting delivery plan for oversight from the HWBB and SCPB and to garner support for delivery.

Achievements across three priority areas

Priority One - Breaking Drug Supply Chains

- Partnership work to support Clear, Hold, Build approach resulting in a reduction of drug offences but an increase in people being arrested for drug trafficking
- Close partnership working with police to establish referral routes for people found in possession of Class A substances
- Initiation of Project Adder, an approach to the supply and use of illegal drugs. It provides additional resource for police to pursue Organised Criminal Networks (OCN’s) responsible for the trafficking of controlled drugs whilst also supporting a partnership approach.

Priority Two - Delivering a world-class treatment and recovery system

- A focus on criminal justice treatment pathways resulting in an increase in drug and alcohol treatment orders and better access to treatment from point of arrest
- Close working with prisons to improve the pathway from prison to community
- Establishing better pathways for people with co-occurring mental health and substance misuse issues
- Continuation of the Rough Sleeping Drug and Alcohol project – with an emphasis on improving access to health services.
- Establishment of a dental health pilot for rough sleepers
- Continued efforts to reduce drug and alcohol related deaths – rates for Barnet remain similar to London and England.
- Development of effective harm reduction initiatives including naloxone distribution and nitazine testing strips.
- Significant partnership engagement and training to increase numbers of people accessing treatment. This has resulted in a large increase in the number of under 18-year-olds accessing treatment

Priority Three - Achieving a generational shift in the demand for drugs

- Reviewing the PSHE offer to schools and enhancing in-reach to schools from CGL
- Focusing on support offered to those students who are most at risk of being excluded due to substance misuse issues
- Upscaling and promotion on the boroughs Drinkcoach service – alcohol awareness campaigns have seen spikes in activity in the service during campaign periods

Next steps:

The report showcases the progress made towards the CDP workplan over the last year. Building on progress made, the partnership will continue to tackle other areas within the workplan which includes the following topics.

- The introduction of a new CDP structure, and development of new subgroups to support increased operational focus on specific workstreams within the CDP priority areas.
- The new structure will be complimented by the production of a partnership highlight strategy, outlining the current position and ambition for the CDPB over the coming three years.
- Completion of the Commissioning Quality Standard assessment to support delivery of effective and high-quality drug and alcohol treatment services and commissioning processes.
- Development of a drug related death partnership review process to identify learning and improvement opportunities, as part of Barnet's work to reduce drug related deaths.
- Further development of community involvement opportunities, including consultation with experts by experience to inform the upcoming treatment service retender.

2. Introduction and Background

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The Barnet CDPB launched in November 2022 and has had quarterly meetings since. The CDPB aims to address the following key outcomes:

- Reduce drug related crime
- Reduce harm from drugs and alcohol
- Reduce supply of illicit substances
- Increase substance misuse treatment engagement
- Increase long-term recovery from addictions
- Reduce the number of people developing problematic substance misuse

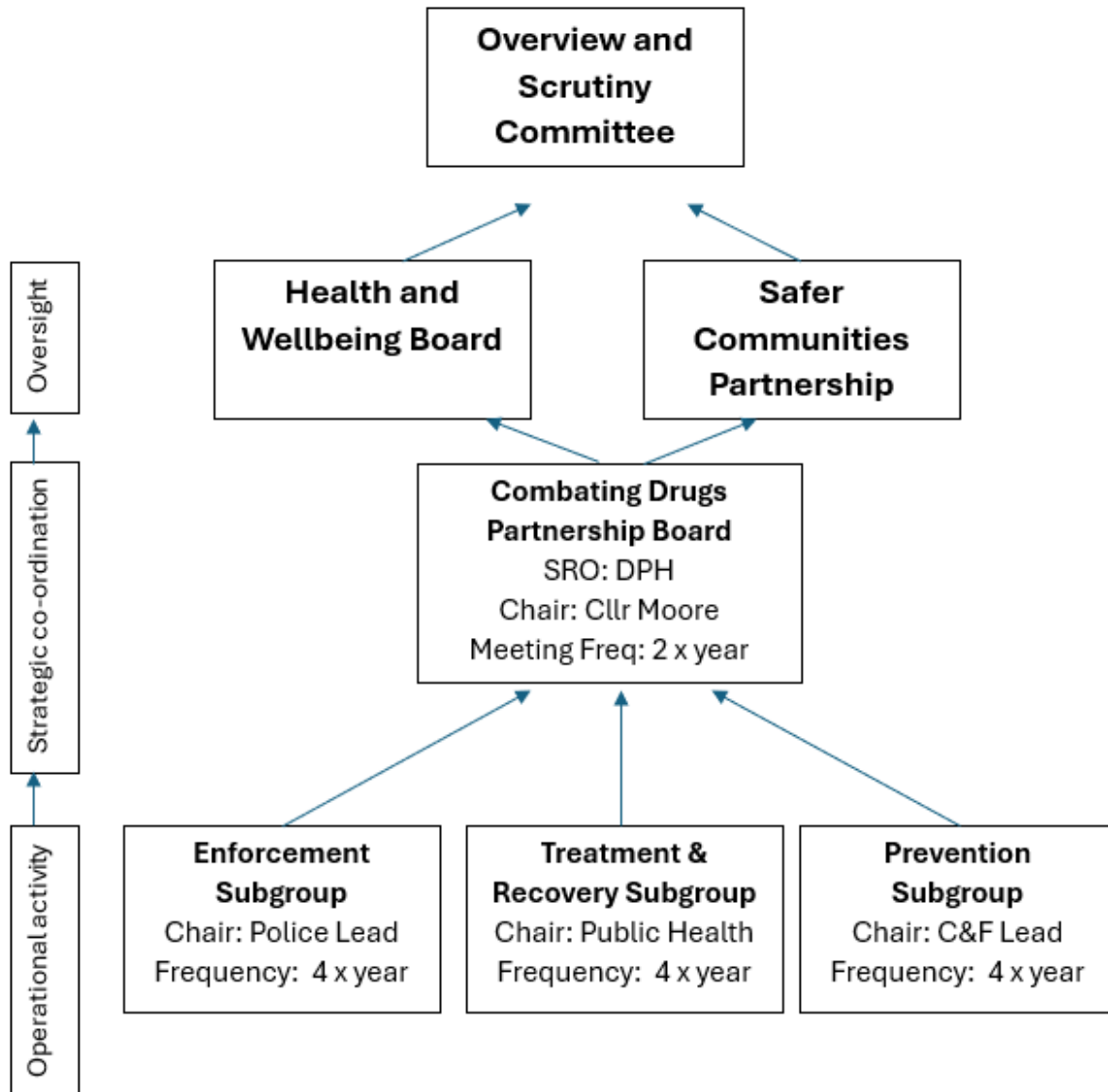
3. Combating Drugs Partnership Board

The Barnet CDPB has had good partnership attendance and support to date. A range of partners are signed up and have been attending meetings regularly. There has been representation from: Public Health, Change Grow Live, Community Safety Team, Family Services, Probation, Met Police, Barnet Homes, Adult Social Care, NCL Integrated Care Board, JCP, Education, Service user representative and attendance by chair of the SCPB. The meeting is chaired by the chair of the Health and Wellbeing Board and the senior responsible officer is the Director of Public Health.

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Since its inception the CDPB has followed the initial governance structure agreed in 2022, overseen by the Health and Wellbeing Board and additionally reporting into the Safer Communities Partnership Board. The CDPB has been held quarterly, with the existing subgroups for Criminal Justice and Substance Misuse and Co-Occurring Conditions meeting monthly.

The governance structures have recently been reviewed and at the July 2024 board meeting it was agreed that a new structure would commence in January 2025. This new structure sees the CDPB meeting twice yearly with a greater number of subgroups which meet quarterly and can report into the CDPB meetings. Additional task and finish groups can operate as needed reporting into the subgroups or board. This revised structure will support a renewed focus on the operational elements of the board’s delivery plan, as well as ensuring workstreams are led by the most appropriate members of the partnership.



4. Key Findings and Recommendations from the CDP Needs Assessment

The CDP needs assessment, completed in 2023, identified a number of challenges and areas to address which has informed the development of the delivery plan.

The full [Barnet Combating Drugs Partnership Needs Assessment 2023](#) can be viewed on the council website, below are a few of the findings and recommendations.

- Rates of drug offences in Barnet are generally lower than London and England however there are some areas which have particularly high rates of drug offences, higher than London and disproportionate to the rest of the borough. Colindale North is of particular note.
- Offences relating to possession are two times as many as offences relating to drug trafficking.

- The report outlines pathways from criminal justice settings, such as police custody and prison, to treatment services and indicates that there is much work to be done to improve these pathways.
- There is substantial unmet treatment need across Barnet, including a number of parents who are not accessing support for their substance misuse needs and a falling number of young people in treatment.
- Mental health concerns in young people and adults who misuse substances are higher than the general population, and many do not have access to suitable mental health support.
- People experiencing severe and multiple deprivation are more likely to experience challenges accessing services, and a partnership approach to addressing multiple and complex needs is required.
- Better partnership working is required with local GPs to improve identification of people misusing alcohol and improve address physical health problems for people misusing substances.
- Women and girls are under-represented in treatment services.
- Good PSHE provision is in place in Barnet however more can be done to broaden the scope.
- Alcohol related harm should be considered when reviewing local licencing applications
- The number of parents in treatment is low compared to identified need.

5. Achievements across three priority areas

Priority One - Breaking Drug Supply Chains

The 10-year UK Government plan to combat illegal drugs sets out the plan to cut off the supply of drugs by criminal gangs and give people with a drug addiction a route to a productive and drug-free life.

The “Clear, Hold, Build” process is a multi-agency partnership approach to help areas affected by crime. This approach has been in place in Barnet for some time and has included Metropolitan Police operations across the borough. This approach and related operations contribute to priority one aims for reducing drug related crime, reducing supply, and disrupting county lines. Led by Barnet Community Safety team, through this approach CDPB partners (Community Safety, Public Health, CGL and Barnet Homes) have worked closely with the Police to address the root causes of drug using and supply. These operations are having a positive impact in Barnet, the police are directing users of illicit substances into treatment and holding to account people who are supplying and trafficking drugs.

The following graphs show offences relating to drugs over a two-year period. The success of the operation is noted by the increase in trafficking offences. This shows the police commitment to targeting organised crime.

Drug trafficking

Measure ● Offences ● Positive Outcomes

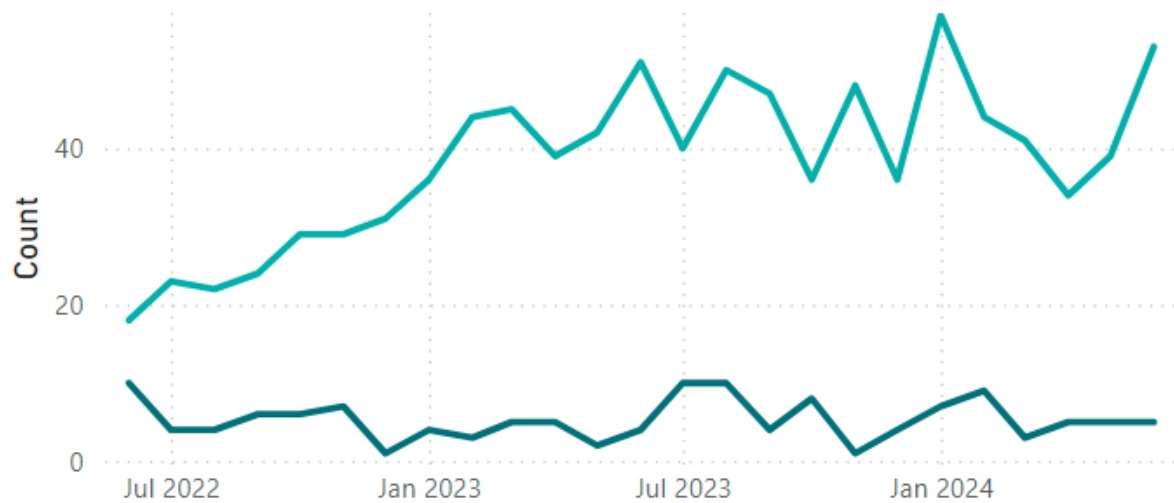


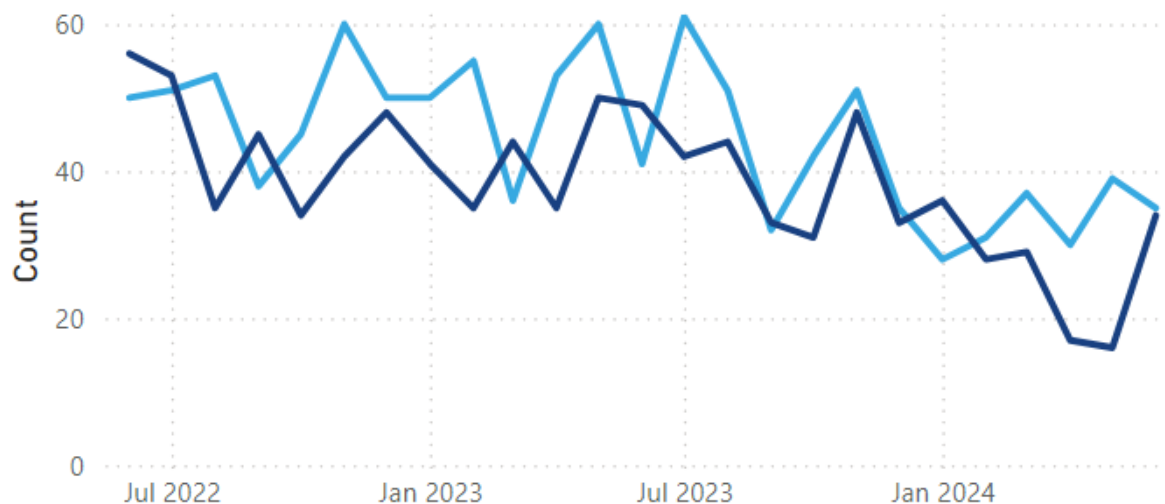
Figure 1: Barnet drug trafficking offences and positive outcomes¹

Data source: [MPS Monthly Crime Dashboard Data - London Datastore](#)

The reduction in possession offences may reflect the impact of the increased focus on trafficking offences, with Police and partners prioritising their efforts around organised crime gangs and local dealers. This leads to less drugs in circulation and fewer offences for possession. The partnership work with CGL encourages diversionary activities and access to treatment is encouraged for individuals with addiction issues.

Possession of drugs

Measure ● Offences ● Positive Outcomes



¹ Positive outcomes are charge/summons, caution, Taken into Consideration (offender admits the crime), not further action as offender died, Penalty Notice for Disorder, cannabis/khat warning, and community resolution (outcomes 1-8 from [Police recorded crime and outcomes open data tables user guide - GOV.UK \(www.gov.uk\)](#)).

Figure 2: Barnet possession of drugs offences and positive outcomes.

Data source: [MPS Monthly Crime Dashboard Data - London Datastore](#)

Further Priority One initiatives include Operation Woodson, a Police-led multi-agency operation in Burnt Oak focusing on anti-social behaviour which has been predominantly identified as linked to substance misuse. The operation, running since May 2024, brings together Police, Community Safety, CGL and Barnet Homes. Referrals into and engagement with CGL is encouraged by Police with the aim of addressing underlying causes of antisocial behaviour. Eight voluntary referrals have been made in the first 3 months to CGL.

Additionally, [Project ADDER](#) (Addiction, Diversion, Disruption, Enforcement and Recovery) has now launched in Barnet. Project Adder is an approach to the supply and use of illegal drugs. It provides additional resource for police to pursue Organised Criminal Networks (OCNs) responsible for the trafficking of controlled drugs whilst also supporting a partnership approach. This includes treatment and recovery plans to cut drug-related crime along with the cycle of misuse and reoffending.

In total 38 referrals were made from the Police to CGL Barnet between July 2023 to June 2024, excluding Required Assessments completed within the Colindale Police Custody suite. Ongoing work continues to increase these numbers including the recent launch of a Met Police wide voluntary referral app which all Police will now have on their phones.

Priority Two - Delivering a world-class treatment and recovery system

The government's drug strategy set out their ambition to significantly increase the capacity and quality of treatment and recovery services as part of the whole-system approach to tackling supply and demand. It is anticipated that this will not only reduce crime, but aims to reverse the upward trend in drug and alcohol related deaths and benefit communities.

A Criminal Justice and Substance Misuse Sub-group was established. Key areas of work for the subgroup have been the establishment of a task and finish group focused on Willesden Magistrates Court to launch face to face drug and alcohol workers in court daily, with the aim of increasing drug and alcohol treatment orders. This involved close working with Brent and Harrow Public Health, treatment, and probation teams to provide a streamlined service for the public and court. Additionally, training was delivered to 40+ magistrates at the magistrates AGM in October.

The graph below demonstrates the gradual increase over time in alcohol and drug treatment orders commenced since the launch of the new ways of working. Numbers referred for assessment have seen an increase since the launch however this data can't be published due to low counts prior to October 2023 (numbers less than 5 must be suppressed to ensure data is anonymized).

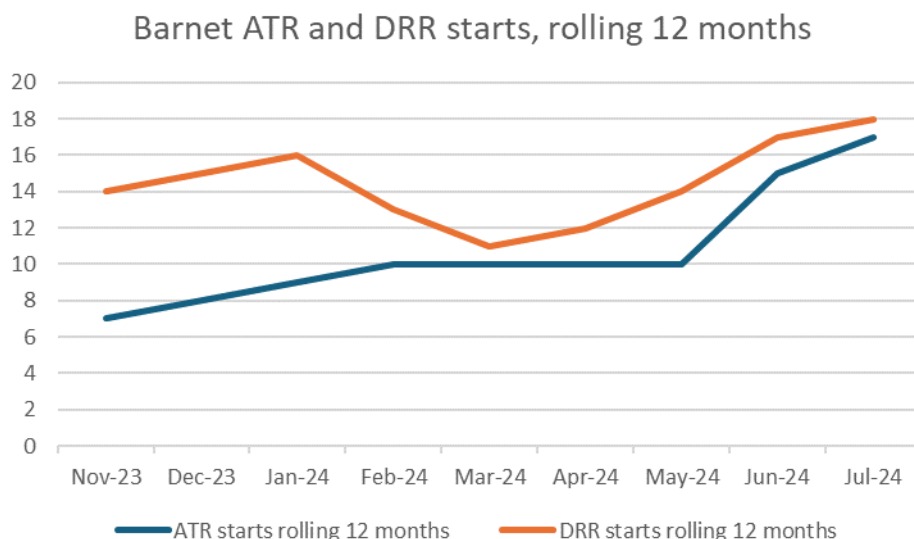


Figure 3: Barnet ATR and DRR starts, rolling 12 months

Data source: Probation

Another key aim of the subgroup was to have a drug and alcohol worker co-located in Colindale Police Station. Co-location commenced in February 2024, with the staff focusing on completing Required Assessments (RAs) and voluntary assessments for individuals in custody with problematic substance use. The Met Police routinely drug test individuals arrested for ‘trigger offences’ (e.g. burglary, theft, robbery) and other offences where there is a clear link to Class A drugs. If an individual tests positive they are issued with a Required Assessment to be assessed by a drug and alcohol professional. Between April 23 – March 24 415 drug tests were completed in Barnet police custody with approximately 50% returning a positive test. Completing required and voluntary assessments whilst individuals are in custody provides an opportunity to engage with individuals who may not otherwise approach treatment services, and gives an opportunity for advice and information to be shared thus increasing the likelihood of later engagement with treatment services.

The group is also working extensively on improving the engagement of substance using offenders when transferring from prison to community. This is currently an Office of Health Inequalities and Disparities (OHID) priority area and a focus for the sub-group. This work continues to be an area of focus as Barnet still has some work to reach the stretching national OHID target of 75%. Performance data from OHID (which cannot be published as they are restricted statistics) are monitored and acted upon by the sub-group.

Additionally, the Co-occurring Conditions Sub-group is focussed on systems, pathways and ways of working relating to people with dual diagnosis (mental health and substance use) and multiple and complex needs.

The group have also undertaken an auditing exercise of the existing mental health provision and pathways within Barnet with the aim of identifying gaps and potential solutions. Partners, including BEH, LBB Public Health, CGL, HAB and Barnet Homes, are jointly developing a

customised assertive outreach model to support rough sleepers with mental health difficulties.

The group has also developed a pilot for a specialised dental service for rough sleepers, launching at the end of August 2024. This pilot was funded through the Council’s Prevention Fund.

The rough sleeping drug and alcohol team continues to deliver interventions to people sleeping rough in Barnet. The team piloted “The Driving for Change initiative” recently. A repurposed double decker bus visited sites in Hendon, Barnet and Finchley offering outreach support with the facilities for dental care, hairdressing, assessment with CGL and advice and information for wider social support. The bus saw 41 guests, giving advice to all and completed 28 haircuts and 16 dental appointments.

Nationally and locally deaths of individuals whilst in treatment have increased since 2009/10 and notably since 2019/20 as can be seen in the graph below which shows the most recent publicly available data. Although deaths in treatment as a percentage of the treatment population show Barnet above the London average and below the England average in 2022/23, the rates are similar.

In 2022/23 19 individuals died whilst in treatment in Barnet while the following year 2023/24 the treatment service locally reported 12 deaths whilst in treatment, indicating an encouraging decrease in deaths in the last year.

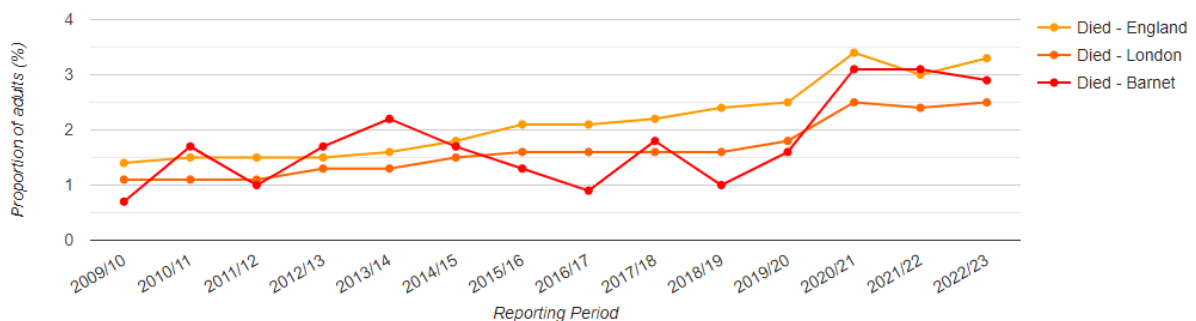


Figure X: Percentage of deaths in treatment as a proportion of total treatment population 2009/10 to 2022/23

Data Source: [NDTMS - ViewIt - Adult](#)

Death by overdose of those in treatment is relatively rare, in Barnet there have been two known potential overdoses between April 2022 – May 2024. Any deaths are too many and we seek to reduce the risks by promoting harm reduction approaches through education and training. Naloxone, a medicine that rapidly reverses opioid overdose, is available to heroin users through needle exchange programmes located in CGL premises and 5 Barnet Pharmacies. Training on how to give naloxone is delivered at the time of issue to ensure effectiveness. In Q1 of 24/25 Barnet CGL have 77% of heroin users in the service trained and in possession of naloxone which is higher than the national average of 61%. Training about Naloxone is also provided to partners and the public in order to educate and raise

awareness in case of emergency, groups trained in the last year include Grahame Park Estate library staff and a number of WellCare Pharmacies.

Nitazenes are a synthetic opioid which can be mixed with street based drugs such as heroin and have been linked to a high number of overdose deaths. In Q4 23/24 Nitazene testing strips became available from CGL and issued to service users with clear guidance and harm reduction advice. Since this initiative was launched CGL have issued 38 test strips, and have had 2 positive results reported back to them.

Additionally, the local substance misuse treatment service has been undertaking significant work to increase the quality, capacity and outcomes of their local services, both for young people and adults. Most notably, this has resulted in a significant increase in the number of young people accessing substance misuse services. Numbers have increased steadily since March 2023 and are now the highest they have been in many years.

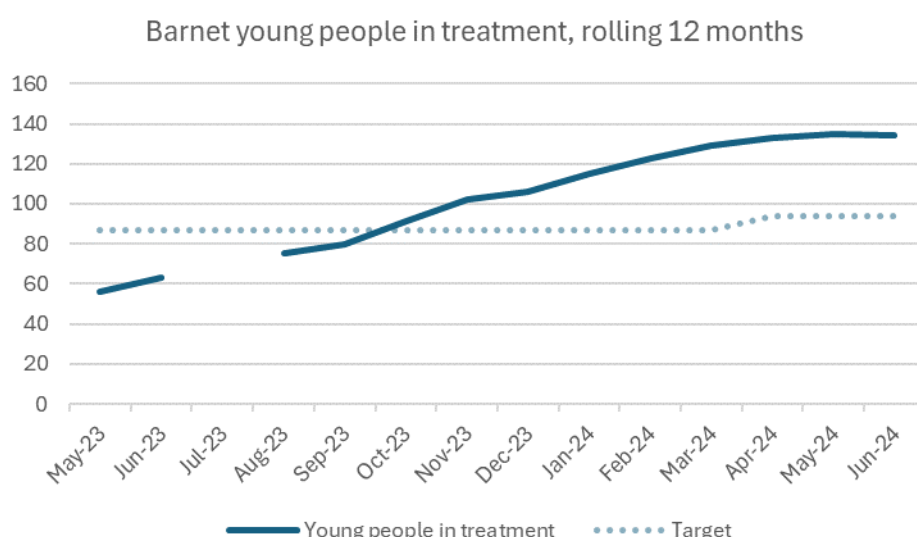


Figure 5: Table to show numbers of young people in treatment Nov 22 – May 2024

Data source: [NDTMS - Monthly - Young people \(new methodology\)](#) (There is no scheduled NDTMS data collection for July each year.)

In 2023/24 the treatment service (CGL) worked with 28 different schools across Barnet, seeing referrals from universal education double on the previous year, and increase by a third for alternative education. CGL deliver targeted group and one to one sessions for children as well as workshops, accessible drop-ins, and education sessions. CGL additionally offer training to parents and teachers.

The number of adults in treatment in Barnet has unfortunately not increased in a similar trajectory to under-eighteens and remains an area of focus for the partnership. Work has taken place to raise the profile of the service through presentations, outreach to the community, leaflets in a variety of languages and through the wider partnership. In Q4 23/24 over 140 organisations were contacted to raise awareness of the services available. The

treatment service has completed a full review of their early engagement processes and initiated improvements. Recently the treatment service has recruited a women’s worker to support engagement of women into treatment (women represent only 29% of adults in treatment in Barnet). A Romanian outreach worker supports the engagement of the Romanian population across Barnet.

A programme of regular drug and alcohol awareness training for professionals, as well as attendance at public facing events helps to support CGL’s public profile in order to encourage higher numbers of referrals. Furthermore, a new initiative was launched this year providing incentives for pharmacies who make referrals into CGL for individuals needing support.

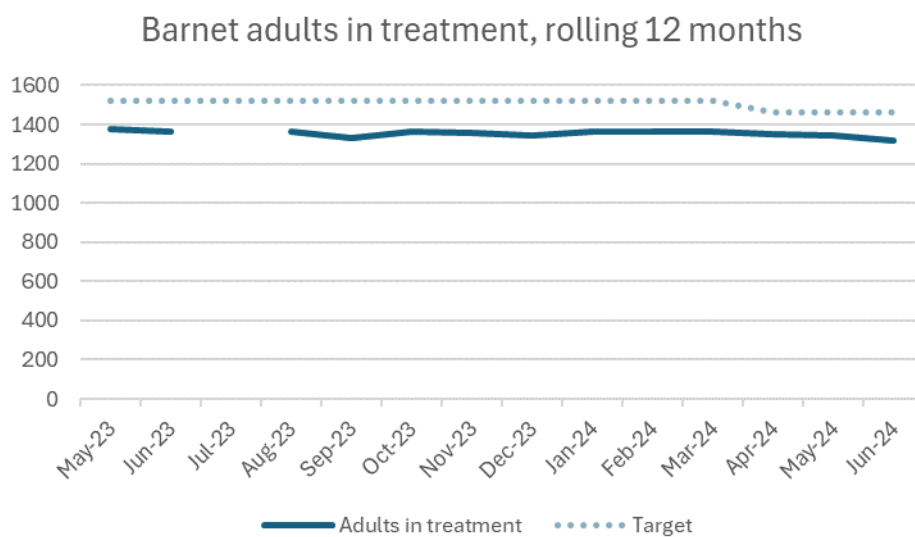


Figure 6: Barnet Adults in treatment, rolling 12 months

Data source: [NDTMS - Monthly - Adults](#) (There is no scheduled NDTMS data collection for July each year.)

Priority Three - Achieving a generational shift in the demand for drugs

The third priority of the national drug strategy is to “achieve a generational shift in the demand for drugs.”

Development has recently commenced on the young people education and prevention workstream, reviewing PSHE provision for substance misuse and other prevention or education work taking place by CGL in schools/PRU/youth centres. CDP aims to support and improve existing work, look for gaps, increase offers of training to teachers and parents and ensure substance misuse education is linked as appropriate to sexual health and mental health support for young people.

Additionally, the partnership has been promoting Drinkcoach, Barnet’s service to support residents to identify whether their alcohol intake is above recommended guidelines and take measures to reduce this.

Latest activity reports from the service show spikes at times of the year where alcohol campaigns are underway. Spikes in January relate to Dry January and the latest spike in relation to the recent alcohol awareness campaign. Further work will be undertaken to see how this can be sustained in a more continual way.

Drinkcoach activity

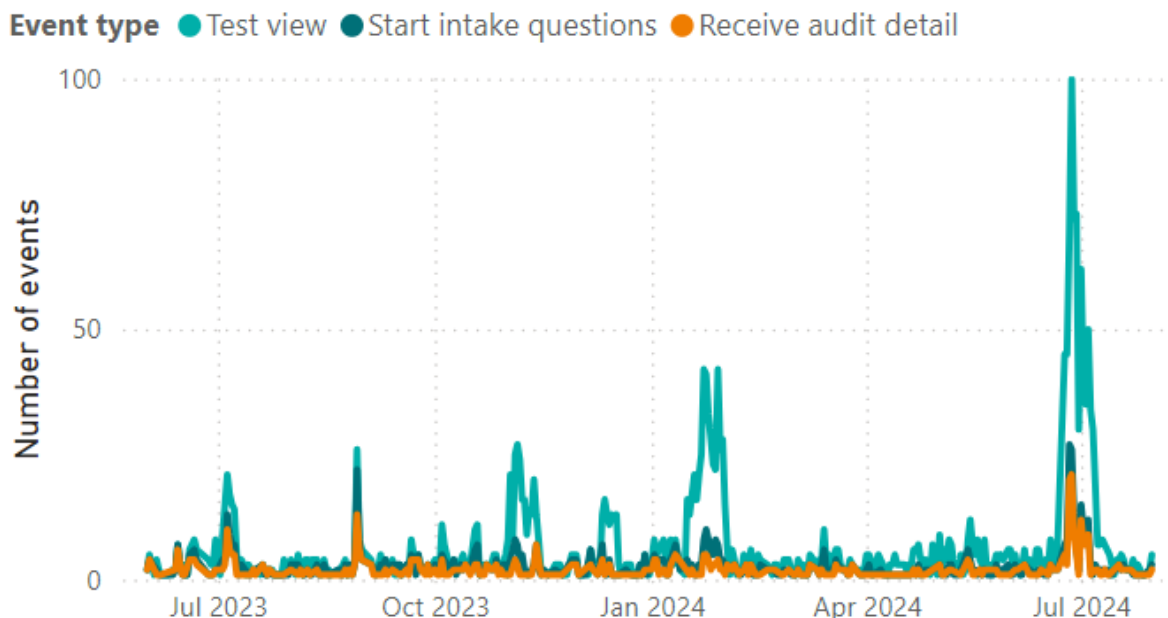


Figure 7: Graph to show Drinkcoach activity
Data source: Drinkcoach performance data

6. Community Involvement in Combatting Drugs Partnership

Public involvement in the Combatting Drugs Partnership is currently attained through a few different avenues, however there is still scope to improve this area of work.

An expert by experience sits on the CDPB and is able to advise and provide insight on all workstreams and discussions within the board. Additionally, service user involvement and feedback are encouraged via the Barnet drug and alcohol treatment service. These individuals may be abstinent or currently using drugs or alcohol.

7. Appendix 1 – Glossary of Terms

Term	Definition
ASB	Anti-social behaviour
ATR	Alcohol Treatment Requirement
AUDIT	Alcohol use disorders identification test
CDP(B)	Combating Drugs Partnership (Board)

CGL	Change Grow Live
CHAIN	A multi-agency database recording information about people sleeping rough in London
Cuckooing	A practice where people take over a person's home and use the property to facilitate exploitation
CYP	Children and Young People
DCMS	Department of Culture, Media and Sport
DfE	Department for Education
DHSC	Department of Health and Social Care
DLUHC	Department for Levelling Up, Housing and Communities
DRR	Drug Rehabilitation Requirement
Dual Diagnosis	Co-occurring substance misuse and mental health problems
DWP	Department for Work and Pension
HAB	Homeless Action in Barnet
HBV	Hepatitis B virus
HCV	Hepatitis C virus
HO	Home Office
IOM	Integrated Offender Management
IPD	Inpatient detoxification
JCDU	Joint Combating Drugs Unit
LAPE	Local Alcohol Profiles England
MAPPA	Multi-agency public protection arrangements
MARAC	Multi-agency risk assessment conference
MoJ	Ministry of Justice
NDTMS	National Drug Treatment Monitoring System
OHID	Office for Health Inequalities and Disparities
PHE	Public Health England
PRU	Pupil Referral Unit
PSHE	Personal, social, health and economic education
PSPO	Public Space Protection Order
RSDATG	Rough sleeping drug and alcohol treatment grant
SSMTRG	Supplemental substance misuse treatment and recovery grant
TA	Temporary Accommodation
VAWG	Violence against women and girls
VCS	Voluntary community organisation
VVE	Violence, Vulnerability and Exploitation