

Post room please return to The DAAT – First Floor, Central House Annexe

Impact Assessment and Consultation Form to disband the Drug, Alcohol and Tobacco Team (DAAT)

Name (Optional):

Age (Optional):

Gender (Optional):

Male/Female/Trans

Are you completing this form yourself? (Please circle /highlight) Yes/ No

If no, please detail who is completing this form for you?

(for example, Relative, Friend, Carer, Care Manager)

Please could you complete the following information to enable the Council to understand your views on the proposal to disband the Drug, Alcohol and Tobacco Team (DAAT):

- 1) Have you/your organisation/someone you work with had any involvement with the DAAT? If yes, what was the nature of the involvement and was it useful?

The DAAT team have supported residents and Durham Constabulary consistently over many years. Both organisations share the same vision in respect of the importance of changing client's lives thus making a positive impact on the wider residents of Darlington. As a partner, Durham Constabulary has very regular involvement with the DAAT both in formal (meetings) and informal settings. This includes colleagues at an operational level through to strategic. The team provides quality, timely updates on substance misuse activity / dangers which form part of bi-monthly reports to the Community Safety Partnership board. The current team leads on the development and implementation of local, regional and national strategy and policy. The team also commission prevention and recovery treatment services, monitor performance and contracts, lead on related health campaigns, and carry out service reviews.

The DAAT team have also supported the PCC's Offender Management Project since its conception and with the governance of the project. The quality assurance group is chaired by the DAAT manager and they have been a fantastic asset to the role. The HMIC (Her Majesties Inspectors of Constabularies) have described this as an exceptional offender management programme and is the best nationally and the project needs partners like the DAAT to support its continued development.

Without doubt, the DAAT is the driving force behind any activity aimed at reducing the harms caused by substance misuse. This has recently been very evident in the valuable role they have played in the coordination of a NPS group which is seen as national best practice and is pioneering in its activity and foresight.

- 2) What would the impact (effect /consequence) be on you/your organisation/someone you work with if this team no longer existed?

The force is seeking way a of reducing demand in line with partner needs and objectives but understands that it cannot work alone and needs the continued help and support from the DAAT team to deliver this valuable service in Darlington.

67% of all residents thought underage drinking and sale of alcohol is a problem in their area (source Darlington Community Safety Strategy 2015-2020), without the help and support of the DAAT how can the majority of residents go ignored when there is no service to assist and support these vulnerable individuals. Prevention, Treatment and recovery are all key in reducing harm in the community and without the DAAT team it is unlikely that this area of business will take place. This will therefore increase demand in other areas for all partners such as ASB, Domestic Violence and the wider safeguarding of the public.

Input from the team is included in internal constabulary documents / reports such as the strategic assessment, and in public facing documents such as the Community Safety Plan. A personal concern I have is that should the DAAT be disbanded, will there be sufficient resilience within the PHE team to continue the 'must do' that the current team undertake.

3) Please use this section to detail any other comments you have about this Budget proposal, or any of the other Council Budget proposals.

Drug misuse - The Joint Needs Strategic Assessment, 2013 (for County Durham) identifies that in 2011 there were 7 drug misusers in County Durham per 1000 of the population aged 15-64. This is a slight decrease from the previous year's figure of 7.6. In Darlington the figure for 2011 is 11.4 per 1000 population (Darlington Health Profile, 2014). The England figure is 8.4 per 1000 population.

Alcohol misuse - continues to be a problem within both County Durham and Darlington. The England average number of hospital admissions for alcohol related harm (per 100,000 population) was 637, the figure for County Durham stands at 794 and Darlington 778. Alcohol consumption is linked with both physical health issues (liver disease, cancers (liver, oral, oesophageal, gastric, colon, breast), hypertension, stroke, acute intoxication and deaths from injuries) and mental health issues – such as self-harm and depression. The following is an extract from the County Durham Joint Strategic Needs Assessment, 2013).

- The annual cost of alcohol in County Durham is estimated at £220.28 million (Balance, 2010).
- Alcohol is more available than ever. There are over 1,200 outlets selling alcohol across the county, some for 24 hours a day (Durham County Council licensing database).
- Alcohol is very cheap and increasingly affordable. Alcohol is 61% more affordable now than it was in 1980. It is possible to buy a unit of alcohol for as little as 16p in County Durham (Balance, 2013).
- More people drink at home now than ever before. Consumption outside of the home has reduced by 46% while consumption in the home is 38% higher than 20 years ago (North West Public Health Observatory, 2012).
- In the years 2010/11 and 2011/12 men accounted for the majority of alcohol related hospital admissions.
- Between 2008 and 2010 men accounted for 60% of all alcohol-specific deaths and 58% of chronic liver disease.
- The rate of alcohol-specific mortality and chronic liver disease is higher than both the national and regional averages for females.
- The rate of under-18 hospital admissions for alcohol is high in County Durham when compared nationally, but the numbers are relatively low and are falling year on year (North West Public Health Observatory, 2012).

3.17 In respect of Darlington – More people in Darlington 'binge drink' – 29% against the national figure of 20%, of 693 crimes which were alcohol related, 498 were violent in nature (2011 figures). Alcohol related hospital admissions in Darlington reduced for the first time from 2,417 to 2,336, a reduction of 81 (Darlington Joint Strategic Needs Assessment).

Overall, for every £1 spent on health now £23 is estimated to have been recouped in health benefits. Cutting budgets now will only cost more in the future and the savings will be smaller. There is considerable evidence available to support this from Public Health England and alike. It is evident that Darlington has an above average alcohol admissions to hospital nationally and the work of early interventions and demand reductions in all aspect of all partner working is key. The knock on effect with other services will be considerable if these services are cut or lost completely

Substance and alcohol misusers in Darlington need continued help, support and investment; this will save a future generation and improve the quality of lives for all of Darlington residents when this will cost more to repair a damaged generation.

Thank you for your time.