

# The English Substance Use Commissioners' Group Annual Report 2021/2022

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## 1. Chair's Foreword

Year two has been another eventful year for us. Following a successful year of initiation and development, the English Substance Use Commissioners' Group (ESUCG) started to create and cement its place in the drug and alcohol sector. Thanks to the hard work and commitment of many colleagues, working outside difficult day jobs, the progress made throughout this last year has been significant.

During our first year, development was overseen by a core group of the willing; moving into year two, a more formal process was initiated, providing a representative group of colleagues from across the country who were able to form a formal Executive Board including elected Chair and Vice Chairs.

The new Executive Board has met regularly throughout the year, including two hybrid meetings which enabled some members to meet face to face, often for the first time. Members of the Board continue to invest significant energy on behalf of the wider membership, seeking ways to improve our mutual support and enhance our collective ability to influence policy makers.

National online meetings have been the mainstay of activity for the majority of members across the country. It is hoped to enable members to come together and meet in person at least once a year going forward, with remaining meetings continuing online to help people engage and reduce burdens of travel and cost.

Membership has continued to rise, with 77% of local authorities now represented in the group.

This year, the Association of Directors of Public Health (ADPH) agreed to support the ESUCG through funding from local authorities embedded in the ADPH membership fees, following the initial seed funding provided by the Local Government Association (LGA).

### This has led to a number of opportunities including:

- A place at the ADPH Policy Advisory Group for Addictions
- Access to support for the Sector-Led Improvement programme
- The start of joint working with the English Sexual Health and HIV Commissioners' Group
- A chance to support the development of a new English Healthy Weight Commissioners' Group

Members have been involved in regular discussions with the Office for Health Improvement and Disparities (OHID) and Joint Combating Drugs Unit (JCUDU) regarding the roll out of the National Drug Strategy (NDS), the development and implementation of the new drug treatment grants and helping to shape thinking around the new local drug partnerships.

Members have also engaged in a wide range of meetings with ADPH, Department of Health and Social care (DHSC), Home Office, International Society of Substance Use Professionals UK (ISSUP UK), JCUDU, LGA, NHS England (NHSE)/UK Health Security Agency (UKHSA), OHID and supported a number of webinars across the year, **including:**

- Developing standardised text for commissioners of the use of Low Dead Space Syringes with NHSE/UKHSA
- Chairing a multi-agency cross sector working group on pharmacy provision of supervised consumption
- Co-chairing the Commissioning Quality Standards Expert Advisory Group
- Agreement to work with OHID to develop guidance and reporting frameworks
- Building stronger relationships with JCUDU

## Chair's Foreword - Continued

The other major area of work this year has been the ongoing development of thematic working groups. With the publication of the NDS and renewed interest by wider partners some work streams were put on hold, for example, Workforce Development, awaiting moves by OHID and Health Education England. Other groups have begun developing useful tools and information to support local commissioners; of note the Harm Reduction Group work around Naloxone and the Tier 4 working group efforts to support a more standardised approach to commissioning inpatient detox and rehabilitation services.

I wish to thank everyone who has turned up to listen, engage or commit to working on programmes throughout the year. The group exists to support the work we do by supporting each other, sharing good practice and influencing policy. Without the commitment shown to date we could not have made the progress we have.

Finally, I have taken the difficult decision to change jobs and stand down as Chair. Thank you to all of you who helped and supported over the last two years, your efforts are appreciated. I would like to welcome the new Chair, Ben Hughes, who took up the role in November 2022. Ben's knowledge, commitment and drive will enable the ESUCG to thrive.

Many thanks,

### Chris Lee

Former Chair of  
English Substance Use  
Commissioners' Group



## 2. Elections

The English Substance Use Commissioners' Group (ESUCG) is governed by an Executive Board, made up of a maximum of 18 members representing each of the nine regions of England (North East, North West, West Midlands, East Midlands, East of England, South West, South East, London and Yorkshire & the Humber). The role of the Executive Board is to enable the ESUCG to deliver its objectives, terms of reference, workplan and deliverables.

In summer 2021, a year after being established, the ESUCG's interim Steering Group initiated an election process and invited interested nominees to come forward to represent their region.

With a total of 15 nominations received, each region had at least one representative on the Board. All 15 nominees were appointed to the Board without the need for regional elections, as no more than two nominees had been received per region (with the exception of Yorkshire and the Humber, where it was decided to co-opt a third member to the Board given that the full total of 18 members had not been reached).

A Chair and two Vice Chairs were then appointed from within the Executive through a process of self-nomination and voting, with Chris Lee elected Chair and Ben Hughes and Niamh Cullen elected Vice Chairs.

The members of the ESUCG Executive Board stand down every three years, so an elections process is next due to take place in 2024. Where gaps in representation exist or when colleagues leave their posts and vacate their Board roles, vacancies are filled mid-term. This took place several times over the course of 2021-2022, with new representatives joining the Board to represent the North East, London, South East and West Midlands.

Working closely with the OHID regional commissioners' networks, the Executive Board is committed to ensuring full regional representation on the Board and that all areas feel they are able to feed into the strategic oversight of the group.

### 3. Executive Board Meetings

The ESUCG Executive Board meets every two months to take forward the group’s workplan (shaped by its members through our annual membership survey) and to discuss and act on issues being faced by the drug and alcohol treatment and recovery sector, and commissioners specifically.

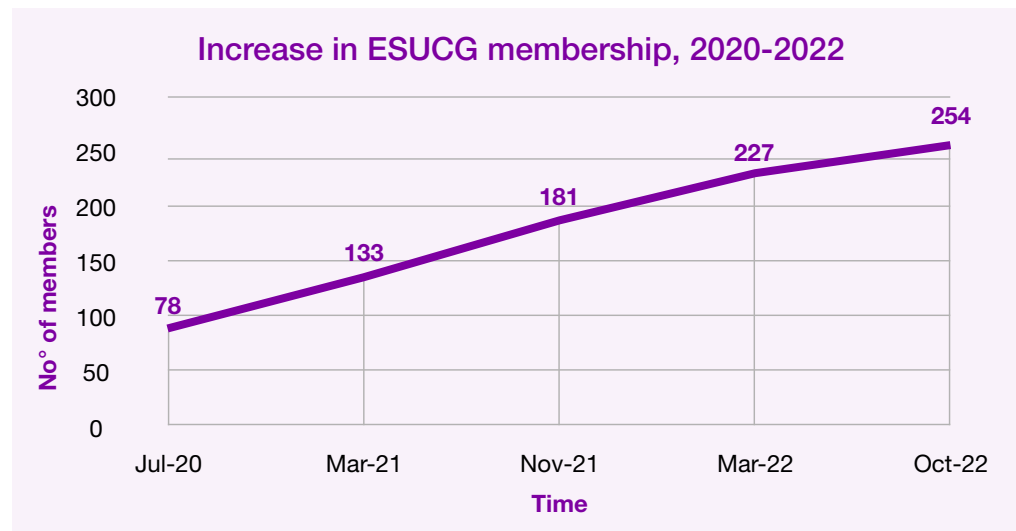
Since being established in summer 2021, the Executive Board has met eight times over 2021-2022. This has included two in-person meetings held at the ADPH offices in central London. Regular virtual meetings and two in-person meetings have allowed the Board to drive forward work alongside busy day jobs while also building relationships and agreeing on shared priorities for the group.

### 4. Group Membership and Coverage

Membership to the ESUCG is open and free to all those with responsibility for commissioning substance use services in local government in England. **The benefits of membership include:**

- Invitations to quarterly national meetings with commissioners from around the country, to discuss the latest opportunities and challenges in the sector
- Access to an online forum on Knowledge Hub for the safe sharing of resources and peer support between commissioners
- Opportunity to feed in views to policy and strategy discussions at a national level via regional representatives on the Executive Board (see section II) or as members of ESUCG working groups (see section VI)

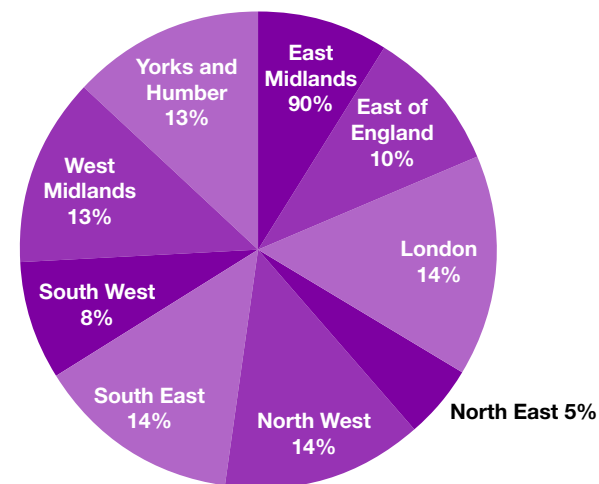
Since first being founded in summer 2020, membership to the ESUCG has grown exponentially, to 254 members (as of October 2022). The growth trend is seen in the following graph:



Ensuring all regions and local authorities in England are aware of the group and given the opportunity to refer their commissioners as members, is a primary objective of the ESUCG. Hence this year a regular process of reporting on the regional and local authority representation on the group was initiated.

As of October 2022, the 254 members of the ESUCG represent 119 local authorities and local governments in England. This amounts to 77% of local authorities. Regional representation on the group is depicted in the following chart:

#### Regional representation of ESUCG membership



## 5. National Events

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The ESUCG holds quarterly national events for its members. The events run for two hours and are intended to provide opportunities for commissioners to hear insights and updates from academic, policy, provider, practitioner and lived experience voices in the drug and alcohol sector.

Given the publication of the Government's ten-year drugs strategy in December 2021 and the resultant new reporting and delivery expectations of commissioners, much of the event programmes for the last year have focused on aspects of the strategy and offered a safe space for commissioners to hear from national colleagues as well as other local areas, to offer and receive peer support on mutual challenges and successes.

### Content and speakers

**Each national event agenda is usually composed of:**

- An update from the ESUCG **Executive Board** on recent projects and representation on national groups, to ensure the wider membership are informed and able to feed into all workstreams the group is involved in
- A round of updates from the chairs of the ESUCG's **working groups** (see section VI) on projects they are seeking to take forward, as well as ways for members to get involved
- Presentations from **guest speakers**

**During the 2021-2022 events programme, the following speakers have delivered presentations to the ESUCG:**

- **Suzie Roscoe (OHID)**, *The PHE Drug and Alcohol Improvement Support Team*
- **Viv Evans (Adfam)**, *Adfam and Family Support*
- **Prof. Jim McManus and Alice Wiseman (ADPH)**, *Joint Priorities and Collaboration: ADPH and ESUCG*
- **Dr. Nat Wright (SLD Training)**, *RCGP Certificates in Drug Misuse*
- **Pete Burkinshaw, Andrew Brown and Steve Taylor (OHID)**, *The National Drugs Strategy*
- **Richard Corbett (DHSC)**, *The Provider Selection Regime*
- **Will Haydock and Richard Chidwick (JCDU)**, *Combating Drugs Partnerships and SROs*

The meetings have also featured 'spotlight' sessions on good or innovative practice taking place locally, such as the Essex Recovery Foundation, as well as extended discussion sessions where members have submitted items in advance, such as on underspends in core contracts, the NHS White Paper or Universal Grant funding formula. The events have also been used as an opportunity to sense check certain issues with commissioners nationally, such as the percentage of independent or joint commissioning arrangements with probation services locally, which then fed into conversations the ESUCG Executive Board were having with colleagues nationally.

### Attendance

The national ESUCG events are consistently well attended by commissioners from across the country. For 2021-2022, event attendance ranged from 77 in August 2021 to a peak of 123 attendees in February 2022. At each event, there were both new members in attendance as well as regular attendees.

Delivering national events remotely has created an accessible forum for commissioners to meet, network and make connections in their field as well as to gain important information relating to their professional practice.

As in-person events begin to resume in earnest, the ESUCG intends to consult with its members on the appetite and feasibility of a face-to-face conference for the full membership. Running one such conference alongside continued regular virtual events would offer those that are able and willing to travel a chance to meet colleagues in person and benefit from the valuable networking and learning opportunities this presents. Balancing this with continued virtual events would ensure accessibility for colleagues not able to travel as easily.

### Feedback

During each event, feedback from attendees is captured through surveys and other ad hoc means. This includes comments on the format and content of the events as well as suggestions for how they could be improved, or the topics attendees would like to see covered in future.

**Highlights from these surveys show that the national events are a valued use of time for both new and existing members:**

*The meeting was really good, just long enough and the chair was friendly and welcoming with a good balance of informal meeting and getting through the agenda. Looking forward to the next meeting.*

*Excellent meeting. Great investment of time.*

*I was really excited to be part of this meeting and found it immensely helpful and supportive to hear that nationally there are similar issues. Working together to form a strong voice and ensure services and commissioners are heard is brilliant, as well as knowing that we may be able to influence future funding, commissioning standards etc.*

*Good range of speakers and presentations on pertinent issues affecting the sector.*

*Attended for the first time. Really valuable to hear others dealing with similar issues and see the enthusiasm and collaboration within the group.*

*Still one of the most useful meetings I attend.*

Constructive feedback from attendees also helps shape the format and content of future sessions. For example, after an extended AOB was included in one meeting, feedback that attendees found this useful led to this becoming a recurring slot.

Attendees at the ESUCG national events are also asked whether their membership of the group has allowed them to identify ways to develop their commissioning practice or do something differently. Many identified concrete actions they wished to take as a result of being part of the wider group, such as:

*Look at my Shared Care Contract.*

*Take into account points raised by members on funding template and workforce development strategies.*

*Nothing specifically, but I will take learning from other commissioners and what is happening in different areas and also consider these things when planning.*

*Weave all of this sage advice into my thinking and practice.*

*I am fairly new to the team in the South East, so it is really helpful to see what other areas are doing and nice to have a national overview.*

## 6. Working Groups

The members of the ESUCG Executive Board, based on learning about members' local priorities, established working groups to explore and take forward work on the following areas:

### Dual Diagnosis & Co-Occurring Conditions

**Chairs:** Kim Hager, Lisa Byrne and Mark Knight

Local area leads highlighted that challenges persist for individuals with co-occurring mental illness and substance use often referred to as “dual diagnosis” and the need for effective pathways for this cohort who perpetually experience difficulties in accessing support. In response a sub-group has been formed to focus upon this area of need.

To date the sub-group has completed a call out to the wider membership for examples of good practice and learning to share and to identify common themes.

The group propose to organise learning workshops led by some of the areas progressing good practice. Consultation has been made with colleagues at OHID to avoid duplicating similar work being developed within the new drug strategy and collaborate where possible. The group is not proposing to produce any new guidance, but to collate, present and promote learning about progressive system leadership and implementation in this area.

A summary of initial themes will be sent out to members and workshops will be delivered in 2023.

### Good Practice in Commissioning

**Chairs:** Kim Hager, Mary Bailey and Sarah Quilty

Dame Carol Black's review of drugs (part 2) recommended that the DHSC should develop a national Commissioning Quality Standard (CQS) for local authorities. The CQS would clarify the commissioning process that local authorities should follow and specify the treatment services that should be available in each local area, based on the UK clinical guidelines on drug treatment.

The CQS was developed by OHID with the help of an expert advisory group of external stakeholders and published on 3rd August 2022.

This is a newly formed working group with the aim to support commissioners in order to complete the CQS self-assessment tool and ensure that the self-assessment tool is utilised to support local planning and delivery.

The group is working with the OHID Drug and Alcohol Improvement Support Team to develop a series of webinars throughout the end of 2022 and early 2023 which will support commissioners in filling in the self-assessment tool and identify how recommendations can be actioned locally.

## Multiple and Complex Needs

**Chairs:** Mark Knight and Niamh Cullen

The breadth of the Multiple and Complex needs or multiple disadvantage agenda combined with the additional demands upon commissioners over the last year has resulted in a temporary suspension of this group. In the interim, key group members agreed to take a sharper focus upon Dual Diagnosis as a current sub-group.

We are currently in discussion with MEAM (Making Every Adult Matter) to develop a joint proposal to the group, that during the year ahead we will work together to co-produce guidance that enables us to better respond to the needs of this group through commissioning processes and system change.

## Preventing Drug and Alcohol-Related Deaths

**Chairs:** Angela Hall and Dan Burn

The aim of the group is to bring together drug and alcohol commissioners, from across the country, to discuss evidence-based action to prevent drug and alcohol-related deaths, share information/ learning/ good practice, and develop resources for the sector.

**Since inception, the group has considered a range of measures, including:**

- Naloxone provision
- Drug and alcohol-related death surveillance systems and review processes
- Drug alert systems
- Drug checking and overdose prevention centres

Having decided to initially prioritise naloxone provision, the group has collated a series of case studies, from all over the UK, on innovative naloxone projects/ initiatives happening in a wide variety of settings – including drug and alcohol services, accommodation providers, the police, hospitals and outreach. The case studies (including contact details, for further information) will be published on the new ESUCG Microsite as a means of sharing learning and good practice.

More recently, the group has focused on drug and alcohol-related deaths surveillance systems and review processes. A baseline audit has been conducted to establish and summarise current practice across member local authorities and their partnerships, and discuss the potential utility of emerging management information systems such as QES and IMS. The group has also heard from Dr. Caroline Copeland, who collects and analyses data from most coroners across England, as part of the National Programme of Substance Abuse Deaths.

With reducing drug and alcohol-related deaths being a central aim of the Drug Strategy, From *harm to hope*, the group has actively influenced Government. The Co-Chairs meet regularly with (and are directly advising) officials from the OHID, on their preventing drug and alcohol-related deaths work programme. In addition, on 4 October 2022, they took part in a national roundtable (hosted by the current Chief Medical Officer, Prof. Sir Chris Witty) on issues relating to the contribution of the health system.

## Tier 4: Inpatient Detox and Residential Rehabilitation

**Chairs:** Lisa Luhman and Steve O'Neill

The Tier 4 sub-group conducted a survey of commissioners to identify trends and themes in commissioning residential rehabilitation services. They have worked through different views and arrangements on Tier 4 across local authorities.

### **The sub-group deliverables and aims include:**

- Developing guidance for new commissioners on commissioning Tier 4 services
- Ongoing work with OHID/ Drug and Alcohol Improvement Support (DAIST) leads to inform system thinking and change
- Continuing to share best practice around Tier 4 frameworks within Commissioning
- Engaging with specialist providers to develop best mutual understanding of the agenda
- Considering funding and the new 2% ambitions for residential rehabilitation in the national drug strategy
- Meetings have been held between the sub-group chairs with Collective Voice and rehab providers. Chairs also met with Rehab Online, which provides an opportunity to share the commissioner perspective on the advertised publicly available information for people who want to go to rehab
- Met with Welsh Tier 4 leads to advise on difference

## 7. Wider Engagement

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### **Joint working with central government**

Over the last year, having worked with OHID on the development of the CQS, ESUCG members have been working closely with the DAIST Team at OHID to ensure that the voice of the commissioner is effectively represented across the multiple national workstreams relating to implementing the recommendations from the Dame Carol Black review.

### **As a group we are now meeting monthly with OHID to:**

- Develop supporting webinars and resources in relation to the CQS
- Further develop and streamline monitoring and reporting around the numerous grants that are being currently allocated
- Develop the support offer to commissioners from OHID ranging from formal support from OHID to the provision of mentoring and peer support from ESUCG
- Align and, where deemed suitable, merge national thematic working groups to ensure a common approach to guidance, support, and advice for commissioners

In addition, we supported the JCDU in relation to the guidance for commissioners concerning the development of Combating Drug Partnerships and the requirements placed on local areas.

We will continue to work closely with OHID and where possible JCDU to ensure we are able to influence and support ongoing work in relation to the local implementation of the National Drug Strategy and in particular the delivery of effective treatment and recovery.

## 8. Acknowledgements

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### Executive Committee members 2021-22

**Alistair Flowers** | Hertfordshire County Council

**Andy Brown** | Brent Council

**Angela Hall** | North Yorkshire County Council

**Anthony Bullock** | Staffordshire County Council

**Behnam Khazaeli** | North Tyneside Council

**Ben Hughes (Vice Chair)** | Essex County Council

**Cavelle Lynch** | Buckinghamshire County Council

**Chris Lee (Chair)** | Lancashire County Council

**Leanne Bobb** | London Borough of Croydon

**Daniel Burn** | Leeds City Council

**Jayne Randall** | Shropshire Council

**John Liddell** | Northumberland County Council

**Karen Wood** | Bournemouth, Christchurch and Poole Council

**Kim Hager** | Cornwall Council

**Lisa Byrne** | Surrey County Council

**Maggie Boreham** | City of London and Hackney Council

**Mark Knight** | Greater Manchester Combined Authority

**Mary Bailey** | Sandwell Metropolitan Borough Council

**Niamh Cullen (Vice Chair)** | Calderdale Metropolitan Borough Council

**Sarah Quilty** | Nottinghamshire County Council

### Secretariat

**Katla Arnarsdottir** | Association of Directors of Public Health

**Katarzyna Arendt** | Association of Directors of Public Health

## 9. Contact

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The English  
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**January 2023**