

The English Substance Use Commissioners' Group Annual Report 2024/25

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1. Foreword by the Chair

I am delighted to present this [English Substance Use Commissioners' Group \(ESUCG\)](#) Impact Report.

We are kindly hosted by the [Association of Directors of Public Health \(ADPH\)](#). The Group continue to align our efforts and work closely with the [Department of Health and Social Care](#) (particularly [OHID](#)), the Joint Combating Drugs Unit (JCDU) and Dame Carol Black. Over this past year, we have increased this with a more focussed development of relationships and joint working with [Collective Voice](#), [NHS APA](#) and the [Local Government Association](#). This report highlights the vital work we have undertaken and evidences both the impact and need for the forum as both a quality improvement and peer support function.

Over the last four years of uncertain funding, changing political priorities and leadership, the Executive Board and wider membership have worked on several key policy and delivery areas to support both commissioners and the systems we lead in our localities.

We have:

- Worked with OHID on the development and review of the Commissioning Quality Standards and commissioning practice.
- Supported the workforce development expert group to create a set of role profiles (including for Lead Commissioners) for the substance use sector.
- Supported the [Addiction Healthcare Goals Programme](#) through membership of the Advisory Group.
- Continued to build effective working relationships with the JCDU in Government to support the development of local [Combating Drugs Partnerships](#), as many of our members are Drugs Strategy partnership Leads as well as Commissioners.

- Continued to build effective relationships and joint working with the provider field through work with Collective Voice and NHS APA.
- Explored current and future opportunities and joint working with LGA particularly with a view to the development of Peer Review proposals and opportunities.
- Continued to maintain links to, and work closely with, Dame Carol Black in relation to the ongoing implementation of the recommendations in her report on the sector, and the identified need to develop the quality in commissioning and treatment agendas.

ESUCG Executive Board members have been involved in detailed policy work with national colleagues representing commissioners in key meetings. Additionally, we have developed a 3-year work programme (2025/28) which was consulted on across the wider membership and ratified at Executive Board, and supports learning and development across specific areas of interest and improvement, including:

- Drug and Alcohol Related Deaths
- Harm Reduction
- Tier 4 interventions and processes
- Children and Young People

Together with colleagues in the provider arena, we have co-designed and run several webinars related to priority and emerging areas of practice as need has been identified. Our webinars, working groups and joint working nationally went from strength to strength. Our national ESUCG open meetings have been well received by the sector with over 120 people regularly joining us for sessions that aim to support local commissioners with the latest policy, evidence and best practice. The feedback has been excellent in relation to these meetings and membership continues to grow.

We are now exploring two key workstreams to sustain the Group, given the expanded membership and requirements of roles:

1. The funding and recruitment of a permanent and dedicated lead role to support the Board in sustaining support for commissioners against the developing agenda, achieving more, and building on the successes already highlighted.
2. Organising a face to face national “event” to bring commissioners together to promote even more effective peer support, quality improvement and consistent planning, and development across the sector.

We hope this report demonstrates that ESUCG continues to be an incredibly valued network.

Please [reach out](#) if you have any suggestions for any areas we can focus on in what remains of 2025 and beyond.

2. ADPH and our Commissioners’ Groups

ADPH is the representative body for Directors of Public Health (DsPH) in the UK. It represents the professional views of all DsPH as the local leaders for the nation’s health. Our core aim is to support DsPH to improve and protect the health of the population.

We improve and protect the health of the population by:

- Representing the views of DsPH on public health policy.
- Advising on public health policy and legislation at a local, regional, and national and international level.
- Providing a support network for DsPH to share ideas and good practice.
- Identifying and providing professional development opportunities for DsPH.

The Commissioners’ Groups, hosted by ADPH, are peer networks run by commissioners for commissioners, providing an important space for commissioners to meet, network and work together to improve the commissioning and delivery of integrated services and strategies locally, regionally and nationally.

The groups support our Practice Improvement work by promoting and facilitating approaches to improve and challenge commissioning practice. The groups are supported by funding from local authorities and secretarial support from ADPH.

The three Commissioners’ Groups are:

- [The English HIV and Sexual Health](#)
- [The English Substance Use](#)
- [The English Infants Children and Young People](#)

3. ESUCG

ESUCG is a peer network run by commissioners for commissioners and was established in 2020. ESUCG has over 300 members across 86% of local authorities in England, covering 9 regions.

Our aim is to provide a strategic forum for those with commissioning responsibility for substance use services, for improved population and patient level outcomes relating to the use of alcohol and other drugs in England.

ESUCG provides an important space for commissioners to meet, network and work together to improve the commissioning and delivery of integrated services and strategies locally. As well as this, ESUCG supports a practice improvement approach to commissioning by sharing information, challenges, ideas, models of good practice and supporting problem solving, in order to protect and improve health of local communities, families and individuals, reduce health inequalities and improve the quality and cost effectiveness of commissioned services.

ESUCG offers commissioners:

- A dedicated space for drug and alcohol commissioners to share ideas, learning, best practice and peer support.
- An online, secure forum for members' use.
- Regular national meetings each year.
- The opportunity to influence drug and alcohol policy and strategy development at a national, regional and local level.

ESUCG is steered by an Executive Board, made up of a maximum of 18 commissioners who are elected by their peers to represent their region. The Executive Board members are not remunerated, and their participation is supported by the commissioning organisations which employ them.

4. Introduction to the Executive Board



Kirsty Walton

For the past decade, Kirsty has dedicated her career around public health. She holds a Master's degree in Public Health, which has equipped her with the knowledge and skills necessary to tackle various health challenges; that along with practical knowledge in the area has put her in good stead.

Since 2016, she has been specifically focused on substance use services via contract management, and then as a strategic lead for the past 5 years. This role has allowed her to work closely with individuals and communities, implementing strategies and interventions to address substance use issues. Through this experience, she has gained valuable insights into the complexities of substance use and has developed a strong commitment to improving health outcomes in this area. She works closely with the service lead and together they have brought about positive changes to the residents of Leicestershire.

Sarah Quilty



Sarah is a Senior Public Health and Commissioning Manager for Nottinghamshire County Council, and is a newly appointed vice chair and East Midlands representative for the group. Sarah has worked across a range of public health issues since 2008, but has worked on the drug and alcohol agenda for the last 8 years, which is the longest on any public health agenda in her career. Sarah's drive comes from reducing health inequalities and squashing the stigma associated with people who use drugs and alcohol.



Ben Hughes

Having worked in the criminal justice system and supported the implementation of early prison drug treatment services in the 90s, Ben moved to work as the Drug and Alcohol Action Team Co-ordinator and commissioner of drug and alcohol services in 2000. He has subsequently managed several complex local partnerships through periods of change in the drug and alcohol agenda.

He has worked in Europe with EU pre-accession countries supporting the development of local and national policy, strategy, and delivery frameworks in the substance misuse arena.

Ben is now Head of Wellbeing and Public Health at Essex County Council with responsibility for Drugs and Alcohol, Health and Justice, Housing Related Support and Homelessness prevention, complex needs and elements of Domestic Abuse commissioning.

Most recently he created the [Essex Recovery Foundation](#), a charity comprising lived and living experience that is taking commissioning responsibility for substance misuse services in Essex, seeing a shift to community leadership and true co-production. Ben also chairs ESUCG, working with commissioners across the country and colleagues in Government to support the ongoing development of effective commissioning to ensure effective delivery of the national drug strategy.



Rebecca Lawrence

Rebecca is the Senior Specialist Public Health Practitioner for Thurrock and manages the substance misuse and gambling portfolio. She has a keen interest in health protection and sexual health, and has worked in public health for approximately 15 years. Prior to this, Rebecca worked in Essex, London, Wiltshire and Surrey as a nurse specialist and lecturer.



Lisa Luhman

Lisa is a Strategic Commissioning Manager in the London Borough of Camden and has been with the local authority for 8 years. She has been the Co-Chair of the ESUCG Tier 4 sub-group since 2022, and is involved in a number of region-wide workstreams including:

- Member of London Incident Management Team Group, focussing how we can amend local and regional processes to mitigate against the risks of adulterated drug supply.
- Working in partnership with Hackney, City of London and OHID on developing an IPD Framework for London.
- Commissioner representative of the of OHID-led Probation Task and Finish Group. This group has been established to understand the current picture of, and enhance partnership, alignment and integration between London probation offices and drug and alcohol treatment providers.

Rob Carrick

Rob is a Lead Commissioner for Substance Misuse at Lambeth Council.



Jane Sunter

Jane works as a Public Health Strategic Manager within County Durham. Jane is the partnership manager for the [County Durham and Darlington Combating Drugs Partnership](#), and commissions services for substance use. Her portfolio also includes a remit for housing, homelessness, rough sleeping, domestic abuse, criminal justice, and wellbeing services. Over time, Jane has worked extensively within the NHS, local government, and the voluntary and community sector.

Rachael Hope

Rachael is Public Health Portfolio Lead for Harm Reduction and Social Inclusion at Newcastle City Council. She has over 20 years of experience in local authority strategy, planning, coordination and commissioning of drugs and alcohol. She chairs the regional North East Drug and Alcohol Commissioners network and is passionate about developing systems responses to the broad issues that arise from substances, as well as embedding lived experience.



Lisa Ball

Lisa is a dedicated Public Health Service Manager at Wigan Council, with a strategic portfolio spanning drugs and alcohol, sexual health, inclusion health, and mental wellbeing. Lisa is also the Greater Manchester Inpatient Detoxification Consortia Lead.

Lisa has a strong commitment to equity and innovation and leads transformative public health initiatives that address complex health inequalities and promote holistic wellbeing.

Collaborating closely with local partners, stakeholders, and service users, Lisa drives forward integrated solutions that improve outcomes and foster resilience. Her leadership is marked by compassion, strategic vision, and a relentless focus on creating healthier, more inclusive communities.



Mark Knight

Mark is the Strategic Lead for Substance Misuse at the Greater Manchester Combined Authority. Part of a small team working with commissioners and providers of GM drug and alcohol services, alongside local government, health, police and probation partners. Previously, he was a drug and alcohol commissioner in Salford and started in the field as a researcher working with drug users.

Caz Kearton-Evans

Caz is the Lead Strategic Commissioner Manager at East Sussex County Council.

Karen Wood

Karen is a Commissioning Manager for adults and young people substance misuse in Bournemouth Christchurch Poole (BCP) Council, representing the South West. Karen has worked within substance misuse commissioning since 2002.



Kim Hager

Kim has worked in the drugs field for 40 years, in the UK and abroad, from setting up the Exeter Drugs Project, before needle exchange was legal, operating it out of the back of her car. She went on to establish the South West Clinical Audit Project for Drug Treatment and be the Drugs and Alcohol policy lead in the then South West Health Authority. She was one of the first outside workers to be invited into the prison system in the early 1980s, as well as setting up one of the first young peoples' treatment services. She worked in India on the AIDS and

Drugs programme for 6 years and part of the team designing the early prison drug treatment service. She was subsequently an independent trainer and consultant for 13 years, working in over half the local authorities in England, before wanting to follow through on some of that work by taking up the role of Joint Commissioning Manager in Cornwall & the Isles of Scilly, where she currently works.

Anthony Bullock

Tony is a Lead Commissioner at Staffordshire County Council.



Michelle Marie Smith

Michelle is a Principal Public Health Specialist at City of Wolverhampton Council, with a career in public health spanning since 2009. She leads the commissioning of drug and alcohol treatment and recovery services and is the strategic lead for drugs, alcohol, and gambling. Michelle is passionate about improving outcomes for vulnerable communities and addressing the wider determinants of health through evidence-based, person-centred public health interventions.



Angela Hall

Angela is the substance use lead for North Yorkshire Council and represents the Yorkshire and Humber region on the Executive Board. She has a background in public health, committed to social justice, and has overseen substance use strategy and commissioning arrangements across North Yorkshire for almost two decades. Angela has supported the development of national guidelines and [ACMD](#) reports.



Daniel Burn

Dan is the public health lead for drugs and alcohol in Leeds and represents the Yorkshire and Humber region on the Executive Board. He has worked in the drug and alcohol field, in several sectors (local and central government, NHS, academia, not-for-profit and charity) for over 20 years, including in the national Drug and Alcohol Division at Public Health England, as well as the national Policy and Research Team at the National Treatment Agency for Substance Misuse. He is the current Chair of the Yorkshire and Humber Drug and Alcohol COI, a role he has held for over two years.

5. National Impact

ESUCG has translated national expertise into tangible local change by fostering cross service partnerships, informing pilots and guidance, and accelerating harm reduction practice and collaborative projects across the country:

- **Improved cross sector collaboration:** ESUCG created practical spaces for commissioners and services to meet, enabling sustained links between children and young people (CYP) and adult services and public health partners. This led to the first-ever joint CYP-adult ketamine awareness project in one area.
- **Practical knowledge transfer and workforce development:** The full member ESUCG webinars brought national practice and diverse professional perspectives into local systems, strengthening practitioner knowledge and prompting new local initiatives.
- **Service and pathway development:** Shared documents and group discussions directly supported development of collaborative working and transition plans between CYP and adult services, improving continuity of care.
- **Policy, pilot and guidance influence:** ESUCG members supported/chaired pilots and working groups (eg an NSP monitoring pilot with UKHSA and a multiple disadvantage working group). Findings from the pilot are being shared with the ambition to scale nationally.
- **Local implementation of harm reduction innovations:** The Harm Reduction steering group supplied expert speakers and cross borough learning that informed new local services and materials (eg NSPDirect rollout and [WEDINOS](#) information guides).
- **Peer advocacy and network growth:** Positive member experiences have driven active promotion of ESUCG to regional counterparts, increasing uptake and spreading impact across counties.

6. Workplan 25-28

These priorities were identified following a national meeting of the membership in February 2025 and have been agreed and ratified at the Executive Board Meeting in May 2025.

For each of the priorities a lead will be identified from the Executive Board to lead and support any work required, alongside a co-chair/lead from the wider membership to support involvement and engagement from across the membership and to build an effective approach to succession planning.

Working groups will submit workplans and priorities to the Executive Board for ratification and updates will be provided on a quarterly basis by way of a presentation submitted to the Executive Board at least one week before each meeting.

Working Group leads will ensure that links are developed to work being led nationally through structures and functions at OHID and other appropriate bodies.

The working groups should be structured as subgroups of the Executive Board. These subgroups would focus on specific themes or issues, such as forums on preventing DARDs, and operate on behalf of the Executive Board. They report back to the Exec through their Chairs, covering local, regional, and national matters.

When needed, task-and-finish groups can be created for specific purposes. These would be temporary and set up as required.

System Development and Relationship Building

- Continue to work on the structures and capacity issues in relation to ESUCG Functioning.
- Explore opportunities for ESUCG to be jointly responsible to both ADPH and LGA.
- Build (and further develop) relationships with:
 - JCDU
 - OHID
 - LGA
 - ADPH
 - Collective Voice

Drug and Alcohol Related Deaths (DARDs)

- Develop the existing DARDs Working Group ensuring it is clearly framed by agreed Terms of Reference.
- Ensure that effective links between the above and OHID are developed to ensure guidance and support to the system is timely, appropriate and effectively coordinated.

Commissioning (incl. System Leadership)

- Continue to develop the Commissioning Practice Sub-Group to expand and develop the agenda in relation to improving practice.
- Build on the Commissioner Capability Framework and explore opportunities for training, development and support for commissioners across the country.
- Increase opportunities for peer support, learning and development for commissioners.

Health and Justice

- Create and develop a Health and Justice working group with appropriate lead from the Exec.
- Review and build recommendations and responses to the DCB Review to support work nationally in relation to the future of Prison Drug and Alcohol Treatment.

Alcohol

- Create and develop an Alcohol Working Group with appropriate lead from the Exec.
- Develop a clear response to Government. and others from ESUCG, and recommendations in relation to the future of alcohol treatment (and broader agenda where it is felt appropriate).

Lived Experience

- A theme that should run throughout all of the workstreams.
- Review guidance produced nationally and explore opportunities to expand and reframe to address identified gaps and concerns.

Harm reduction

- Refresh the working group and identify a lead from the Exec to support the existing function.
- Develop a workplan in relation to guidance, support and “publication”.

Children and Young People

- Review current working group arrangements.
- Identify a lead from the Exec to support the work going forward.
- Explore and develop links to national work programmes and align where appropriate.
- Develop a work programme in relation to existing and future guidance, research, best practice and support.

Tier 4

- Refresh the guidance commissioners on commissioning and procuring Tier 4 services (needs to be updated in light of PSR).
- 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 commissioning/procurement within the group.
- Continue arrangements for Collective Voice Tier 4 group to attend our meetings and for our Co-Chairs to attend Collective Voice’s Tier 4 Group meetings.
- Support other commissioners to use the OHID Residential Rehab Self-Assessment Toolkit, and share themes of their findings with the group, and then with national group.

7. Introduction to Working Groups

Tier 4

The Tier 4 Sub-Group aims to provide a space for commissioners to come together and strategically discuss how we commission, procure, monitor and evaluate Tier 4 provision. With the introduction of the 2% RR/IPD ambition these discussions have increased in importance and value. The initial objective of the group was to produce a Residential Rehab commissioning/procurement guidance document, this was achieved in 2022.

The subgroup have continued to meet on a regular basis and have welcomed a number of new members from across the country. The subgroup meetings have been used as an opportunity to discuss national, regional and local Tier 4 issues, challenges and successes and has been a great space for networking and sharing of good practice. The subgroup has achieved the following this year:

- Chair of the group supported OHID with the launch of Residential Rehab Self-Assessment Toolkit.
- Ongoing work with OHID/Drug and Alcohol Improvement Support (DAIST) leads to inform system thinking and change.
- Engaging with the Collective Voice Tier 4 group to develop best mutual understanding of the agenda.

Plans for the future:

- Review and re-launch the existing Commissioning Guidance document, ensuring it reflects Provider Selection Regime legislation, and other sector developments.
- Continue to work in partnership with Collective Voice Tier 4 Provider Group.
- Collate feedback from completed residential rehab self-assessment toolkits, and present a summary to the wider ESUCG membership on common themes, learning and recommendations.

Preventing DARDs

The Preventing Drug and Alcohol Related Deaths (DARDs) subgroup is a forum for sharing information, ideas, challenges and best practice. It is co-chaired by Angela Hall (Public Health Manager, Substance Use, North Yorkshire Council) and Dan Burn (Health Improvement Principal, Drugs and Alcohol, Leeds City Council). They have co-chaired the group since May 2022. In this time, it has grown significantly to 96 members.

In the February 2025 meeting, the group heard from Dr Caroline Copeland (King's College London), who presented information on cocaine deaths from the National Programme on Substance Use Mortality (NP-SUM). Representatives from OHID also updated the group on the new National Early Warning System.

The June 2025 meeting focused on ketamine. Marita Isaac (Norfolk and Norwich University Hospital) presented insights from the ketamine clinic she runs, Mark Whitfield (Liverpool John Moores University) presented findings from research on ketamine deaths across the Northwest of England, and Jo Ekin and Georgia Metcalf (Barnsley Council) talked the group through their recent ketamine campaign.

Having successfully led the group for several years, the main focus of the October 2025 meeting was on its future. The general consensus of members was that the group is useful and something they want to see continue. With this in mind, the Chairs used Padlet to run a session, with members, gathering their views on what has worked well, to date, and what could be done to strengthen the group in the future, inviting views from members on how they would like the group to run in 2026 and what topics they would like to focus on. A high level of participation from members created a rich tapestry of ideas, which will be used to plan the focus of year ahead.

Harm reduction

A space for collaboration, learning and discussion. Since its inception in November 2021, the group has grown from a small circle of five dedicated members to a vibrant network of 59 commissioners representing 8 regions of England. This growth reflects a shared commitment to advancing harm reduction as a distinct and vital part of public health strategy.

This group exists to champion the unique needs of the harm reduction community - needs that often differ from those of the treatment and recovery sectors. Our mission is to ensure that local commissioning policy and practice consistently reflect these differences, keeping the voices and realities of the communities we serve at the forefront.

The working group is a collaborative, supportive space for commissioners who are passionate about harm reduction. The group meets on the second Friday of every month for 90 minutes and is a place to exchange ideas and learn from one another.

Over the years, we've developed practical tools and resources to support commissioners in their work. These include a draft letter of comfort to support the early adoption of safer inhalation equipment, and the promotion of the REACT 'Improving Vein Care & Reducing Pain' toolkit for people who inject drugs.

Each October, our annual member survey helps shape the agenda for the year ahead ensuring our priorities reflect the needs and interests of our members. In 2026/27, we will continue to host guest speakers from a wide range of professional, academic, and lived experience backgrounds - these sessions offer interesting perspectives and always lead to a rich conversation. Alongside these guest sessions we provide a platform for local authority commissioners to showcase their work in harm reduction.

In 2025/26, we featured presentations from:

- Derbyshire County Council
- Liverpool City Council
- Swindon Borough Council
- Haringey Council
- North Yorkshire Council

Topics covered by our guest speakers over the years have included:

- Harm reduction approaches to Hepatitis C and blood-borne viruses (Hep C U Later & UKHSA).
- Lived experience in policy development (Mat Southwell).
- Gender-informed harm reduction strategies (Anna Millington).
- The role of AI in harm reduction (Cranstoun).
- Drug checking and testing (Wedinos).
- Models of opioid substitution therapy (OST) prescribing (University of Bristol).
- Chemsex (Forward Trust).

Whether you're an experienced commissioner or newly engaged in harm reduction, the group offers a space to connect, contribute, and learn. Together we are working towards a future where harm reduction is recognised, resourced, and rooted in evidence and compassion.

Other subgroups

ESUCG also hosts the following working groups:

- Children, Young People, Families and Carers
- Commissioning Practice
- Multiple and Complex Needs

7. Member Feedback

ESUCG is valued as a national learning and networking forum that fills a gap for commissioners, especially those working across CYP adult services and public health.

Members report clear benefits to professional development: webinars, expert speakers and subgroups increase knowledge, share best practice and keep teams up to date.

The forum enables collaboration and influence: it creates a safe space for peer support, collective challenge to policy or practice, and a stronger national voice for local authorities.

Practical impact includes improved service design, joint projects, easier navigation of national guidance, and greater capacity for small teams to engage with peers. Members consistently praise the organisers and steerers of the groups for high quality events, relevant speakers and useful materials.

"The ESUCG has literally been my learning station"

"Such a great opportunity to mix with commissioners in other areas across the country and hear about the various approaches they are taking"

"The group has grown into a thriving, well supported network with strong participation from across the country"

"We now have a meaningful voice at the national level and a real opportunity to influence future direction"

"A culture of high support coupled with high challenge with all members having a passion for reducing inequalities"

"We are speaking on behalf of service users and providers as well as commissioners to help shape the delivery of services for the future"

"The creation of this group has been absolutely invaluable"

"The creation of this national forum was a brilliant move to bring commissioners together in a safe space and catalyse sector led improvement"

"Participating in high level discussions, with those facing similar challenges, and hearing what they are doing in their areas to respond to the ever-changing landscape in this field has been something I've found incredibly valuable"

9. Acknowledgements

Executive Board Members 2024/25

Angela Hall | North Yorkshire
Anthony Bullock | Staffordshire
Ben Hughes | Essex
Caz Kearton-Evans | East Sussex
Daniel Burn | Leeds
Jane Sunter | Durham
Karen Wood | BCP
Kim Hager | Cornwall and Isles of Scilly
Kirsty Walton | Leicestershire
Lisa Ball | Wigan
Lisa Luhman | Camden
Mark Knight | Greater Manchester
Michelle Marie-Smith | Wolverhampton
Rachael Hope | Newcastle
Rebecca Lawrence | Thurrock
Rob Carrick | Lambeth
Sarah Quilty | Nottinghamshire

Secretariat 2024/25

Jennifer Wales | Association of Directors of Public Health

10. Contact

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