

ORIGINATOR: Vicky Day

DECISION NO. 28 /2022

REASON FOR SUBMISSION: For Decision

SUBMITTED TO: Police and Crime Commissioner

SUBJECT: Pathway Out project – underspend based solely on partner contributions v Contract.

SUMMARY:

The Pathway Out project is new and jointly funded by the Department for Work and Pensions East Anglia, Norfolk Public Health and Norfolk's PCC (in kind contribution), with a view to maximising the training and employment opportunities available to participants on the Pathway Out project.

The Pathway Out project is one such project embedded within the wider ADDER programme.

The Pathway Out project has operated over the last financial year (April 2021-March 2022), with a further year of operation (April 2022 to March 2023).

A total contribution of £95,000 was provided by Norfolk Public Health (£60,000) and the Department for Work and pensions (£35,000), to operate the Support Worker role.

The contract value awarded to St Giles Trust, to operate the Support Worker role was £81,037.59, leaving an underspend based solely on partner contributions £95,000 v Contract of £13,962.41.

This underspend pro-rata equates to:

Department for Work and Pensions - £5,144.05
Norfolk Public Health - £8,818.36

Norfolk Public Health has agreed to their proportion (£8,818.36) being re-invested into the Pathway Out project. St Giles Trust will create a training resource, focussing on two key areas which they have identified as being beneficial to the ADDER client group in helping them take steps towards employment:

- Conflict Resolution
- Emotional Regulation

The remaining proportion (£5,144.05), will be returned to the Department for Work and Pensions.

RECOMMENDATION:

It is recommended that the PCC for Norfolk supports the allocation of Norfolk Public Health's underspend to St Giles Trust to enable the creation of training resource (Conflict Management and Emotional Regulation), which will be of benefit to the ADDER client group in helping them take steps towards employment.

OUTCOME/APPROVAL BY: ~~PCC/CHIEF EXECUTIVE/CHIEF FINANCE OFFICER~~ (Delete as appropriate)

The recommendations as outlined above are approved.



Signature

Date: 19/05/2022

DETAIL OF THE SUBMISSION

1. OBJECTIVE:

- 1.1 To approve the allocation of Norfolk Public Health's underspend to St Giles Trust to enable the creation of training resource (Conflict Management and Emotional Regulation), which will be of benefit to the ADDER client group in helping them take steps towards employment.

2. BACKGROUND:

- 2.1 The Home Office in conjunction with Department of Health and Social Care and Public Health England secured funding from the Her Majesty's Treasury Shared Outcomes Fund to pilot an intensive whole system approach to tackling drug misuse in select locations worst affected by drug misuse, alongside national activity to disrupt the middle market supply of drugs.
- 2.2 The pilot referred to as ADDER, involves co-ordinated law enforcement activity, alongside expanded diversionary activity and treatment/recovery provision across pilot areas.
- 2.3 This is complemented by Home Office and National Crime Agency activity to tackle middle market drugs and firearms supply.
- 2.4 ADDER builds on existing work and looks to expand multi-agency partnership working in the local areas to drive sustained health and crime related outcomes.
- 2.5 Greater Norwich was identified as an ADDER pilot area.
- 2.6 The mortality rate from drug related deaths in Norwich is growing and is above the England average. Between 2016 and 2018 – there were 152 drug related deaths, with a 1/3rd of these being in Norwich.
- 2.7 It is estimated that in the year 2019/20, 45% of the opiate and crack cocaine use/user in treatment, were in treatment in Norwich.
- 2.8 Intelligence indicates that heroin and crack cocaine purities have increased in the last five years.

2.9 Norfolk Constabulary's response to county lines was initiated in December 2016. In Norfolk (as of July 2020) there are 52 known active lines with 32 of these in Norwich.

2.10 Within the 61 cases reviewed in the Norfolk Drug Related Death Audit

(2018), the following was found:

- Aging Heroin users made up half (51%) of the sample
- 2/3rds had more than one drug implicated in their cause of death (poly-use)
- 53, had a noted mental health illness and 44 were prescribed psychoactive drugs
- A notable proportion had some form of social stressor, such as suffering bereavement, adverse childhood experience or family problems
- Majority of people lived in the most deprived neighbourhoods, with only a small number in employment (11) and 8 people were homeless or lived in sheltered accommodation
- 2/3rds had health conditions not directly attributable to drug use

2.11 The wider ADDER programme outcomes are:

- A reduction in reoffending amongst prolific offenders who are motivated by drugs within each project location
- Increase in the number of drug users engaging in treatment and recovery support, deriving benefit from doing so, and also completing treatment
- Reduction in Drugs Supply
- Reduced costs for local health services and police forces due to lower health and crime harms, and lower costs to the criminal justice system (as fewer people are dealt with by the courts)
- Increase in the number of young and vulnerable people safeguarded

2.12 ADDER will run until the end of Financial Year 22/23.

Norfolk's ambition for ADDER:

- To create an all-age integrated and dynamic team targeting people involved with illicit drugs and criminal justice system to be diverted into effective treatment

- Statutory and Voluntary Community Sector Organisations will work collaboratively to engage people to make demonstrable changes through to recovery
 - To further develop the prevention, offer that will support young people, families and adults to build resilience and freedom from drugs and/or criminality
- 2.13 This final component of Norfolk's ambition is being addressed in part through the introduction of the Pathway Out project, which is fully embedded within the wider ADDER programme.
- 2.14 A range of evidence suggests that lack of employment and limited employability increases the likelihood of offending. Men and Women known to the criminal justice system and or involved with illicit drugs face additional barriers to finding and staying in work.
- 2.15 Literature indicates that obtaining and remaining in suitable employment contributes to desistance of offending and reduces the harm caused by illicit drug use to people, their families, and the communities they live in.
- 2.16 The Pathway Out approach is seen to assess participants needs at the point of entry to the Pathway Out project, and to provide holistic support throughout their journey. This concerns using existing resources differently to target support more effectively, avoiding gaps or duplication in service provision, and supporting participants to access provision successfully.
- 2.17 St Giles Trust have identified through the assessment process, two key areas in which clients would benefit from receiving additional help and support in taking steps towards employment.
- 2.18 These two key areas are Conflict Resolution and Emotional Regulation.
- 2.19 St Giles Trust will create a training resource, focussing on these two key areas, working closely with a consultant to develop these assured courses which will then be delivered to ADDER clients.
- 2.20 St Giles Trust will ensure that the training was designed and delivered with the targeted client group in mind.
- 2.21 The vision is that this would create a legacy to continue to offer this resource to targeted clients moving forward.

3. AREAS FOR CONSIDERATION:

- 3.1 The benefits to these training resources:
- Dedicated resources to further support identified ADDER clients in taking steps towards employment

- Effective & timely training, designed and delivered with the targeted client group in mind
- Legacy training offer
- Reduced recidivism and lower costs to the criminal justice system (as fewer people are dealt with by the courts)

4. OTHER OPTIONS CONSIDERED:

- 4.1 Not allocating Norfolk Public Health's proportion of underspend to St Giles Trust – this option has been rejected. Norfolk Public Health has agreed to their proportion (£8,818.36) being re-invested into the Pathway Out project, for the sole purpose of producing these training resources.

5. STRATEGIC AIMS/OBJECTIVE SUPPORTED:

- 5.1 This project supports the PCC's strategic aim of prevention of offending.

6. FINANCIAL AND OTHER RESOURCE IMPLICATIONS:

- 6.1 Norfolk Public Health has provided £60,000 via ADDER. In addition, the OPCCN has received partner funding to the value of £35,000 to support the Pathway Out project activities from the Department of Work and pensions.
- 6.2 The contract value awarded to St Giles Trust, to operate the Support Worker role was £81,037.59, leaving an underspend based solely on partner contributions £95,000 v Contract of £13,962.41.
- 6.3 This underspend pro-rata equates to:
- 6.4 Department for Work and Pensions - £5,144.05
Norfolk Public Health - £8,818.36
- 6.5 Norfolk Public Health has agreed to their proportion (£8,818.36) being re-invested into the Pathway Out project. St Giles Trust will create a training resource, focussing on two key areas which they have identified as being beneficial to the ADDER client group in helping them take steps towards employment:
- Conflict Resolution
 - Emotional Regulation
- 6.6 The remaining proportion (£5,144.05), will be returned to the Department for Work and Pensions.

7. OTHER IMPLICATIONS AND RISKS:

- 7.1 None.

ORIGINATOR CHECKLIST (MUST BE COMPLETED)	PLEASE STATE 'YES' OR 'NO'
Has legal advice been sought on this submission?	N
Has the PCC's Chief Finance Officer been consulted?	Y
Have equality, diversity and human rights implications been considered including equality analysis, as appropriate?	Y
Have human resource implications been considered?	Y
Is the recommendation consistent with the objectives in the Police and Crime Plan?	Y
Has consultation been undertaken with people or agencies likely to be affected by the recommendation?	Y
Has communications advice been sought on areas of likely media interest and how they might be managed?	Y
In relation to the above, have all relevant issues been highlighted in the 'other implications and risks' section of the submission?	Y
<p data-bbox="204 1462 786 1496">Is this report a Confidential Decision?</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <input data-bbox="1066 1473 1187 1547" type="checkbox"/> <input data-bbox="1259 1473 1380 1547" type="checkbox" value="NO"/> </div> <p data-bbox="204 1570 1430 1603">If Yes, please state reasons below having referred to the PCC Decision Making Policy</p>	

APPROVAL TO SUBMIT TO THE DECISION-MAKER (this approval is required only for submissions to the PCC).

Chief Executive

I am satisfied that relevant advice has been taken into account in the preparation of the report, that the recommendations have been reviewed and that this is an appropriate request to be submitted to the PCC.



Signature:

Date: 19/05/2022

Chief Finance Officer (Section 151 Officer)

I certify that:

- a) there are no financial consequences as a result of this decision,
OR
- b) the costs identified in this report can be met from existing revenue or capital budgets,
OR
- c) the costs identified in this report can be financed from reserves
AND
- d) the decision can be taken on the basis of my assurance that Financial Regulations have been complied with.

Signature:



Date: 19/05/2022

PUBLIC ACCESS TO INFORMATION: *Information contained within this submission is subject to the Freedom of Information Act 2000 and wherever possible will be made available on the OPCC website. Submissions should be labelled as 'Not Protectively Marked' unless any of the material is 'restricted' or 'confidential'. Where information contained within the submission is 'restricted' or 'confidential' it should be highlighted, along with the reason why.*